

The Crisis in Foster Care: New Directions for the 1990s

The Policy Institute for Family Impact Seminars



Family
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Seminar

The Crisis In Foster Care: New Directions For The 1990s

January 19, 1990 Mansfield Room (S.207), the U.S. Capitol

Panelists: **Charles Gershenson, Ph.D.**, senior policy analyst, Center for the Study of Social Policy
 Ann Rosewater, staff director, House Select Committee for Children, Youth, and Families
 Ruth Massinga, chief executive, Casey Family Program, Seattle, WA and president, American Public Welfare Association

Moderator: **Theodora Ooms**, director, Family Impact Seminar

MEETING HIGHLIGHTS.....	pages i to vi
BACKGROUND BRIEFING REPORT	pages 1 to 26
CHARTS.....	I to VI

The Crisis In Foster Care: New Directions For The 1990s

Background Briefing Report and Meeting Highlights

Theodora Ooms

This was one in a series of family policy seminars conducted by the Family Impact Seminar, an independent, nonpartisan public policy institute, 1730 Rhode Island Avenue, NW, Suite 209, Washington, DC 20036, (202) 496-1964 — voice, (202) 496-1975 — fax.

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COFO Members:

**American Association for Marriage and Family Therapy (AAMFT)
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TABLE OF CONTENTS

	Page
Highlights of Seminar	i-vi
Introduction	1
Foster Care: An Overview	3
Trends and Indicators	5
Federal Foster Care Programs	9
Problems and Challenges	12
New Strategies	20
Organizational Resources	21
Selected References	24
Charts	I-VI

The Crisis in Foster Care: New Directions for the 1990s

Highlights of the seminar meeting held on January 19, 1990, Mansfield Room (S.207), U.S. Capitol (a supplement to the Background Briefing Report).

After more than a decade of attempts at reform, the foster care system is in a new crisis. The moderator **Theodora Ooms** asked **Charles Gershenson Ph.D.**, the first panelist, to help us understand the nature of this evolving crisis by presenting the numbers story. Gershenson joined the Children's Bureau/ DHHS in the early 60s where he directed the research and evaluation activities for many years, and is presently senior policy analyst at the Center for the Study of Social Policy.

Gershenson began by noting that the numerous media reports, and calls for "bringing back the orphanages", clearly show that there is a strong perception that the foster care system is in crisis. However is this a valid perception? Is the crisis new or is the system always in crisis? What are some of the underlying causes?

Extent of the Crisis. Before too much reliance is placed upon the statistics presented in elaborate tables and charts, such as in the charts he handed out, Gershenson cautioned that these numbers are only as reliable as the person who collects them, usually the harassed, overburdened, caseworker. Moreover our child welfare data collection systems, which were quite good in the sixties, were basically destroyed by government reorganization and thus we now have fragments of somewhat unreliable information from which we have to make estimates and projections. Currently, for example, only 33 states report information that is accurate to within 5%. And there is a four year lag in publication of the data collected by the major national system (V.C.I.S.). Thus the best information we presently have is from 1985. (See page 5 for a description of the VCIS system.)

Gershenson said that there is no disagreement about the fact that between 1977 and the mid-eighties, the numbers of children in out of home care, declined substantially, but since then they have been rising again, although they are still not back to their previous highs (as illustrated in Chart I). The only disagreement is how steep the rise is and, thus, about projections.

The newly issued report of the House Select Committee includes data from the Committee's 1989 survey of ten states, estimated over 340,000 currently in care. Based on Gershenson's analyses of these data the report projects the numbers would be back up to 500,000 within five years. The Committee's minority members challenged these estimates and projections as being too high. Gershenson said that he feels both views are correct as they are based on different assumptions and all projections have built in error rates.

However Gershenson's view is that all current estimates and projections are too low based on telephone calls he made recently to all fifty states. Moreover it appears that many state reports are undercounts: for example, Oregon does not report any children in out-of-home care for less than a week and Kentucky does not report children in care for less than 30 days. And several states,

specifically New York and Michigan, have thousands of children placed in relative foster care, which have only recently become counted as part of the system.

What are the causes of this steep rise in the numbers of children in care? One view is that external factors are driving the numbers up. Another view, his own, is that factors within the structure of the present system are largely responsible: the system itself creates the demand for its own services.

- Increased reports of child abuse and neglect are a partial answer. Clearly the phenomenal rise in the numbers of child abuse reports plays a large role in the increased numbers of children in out-of-home care. Clearly the increased rates of drug abuse and family violence are also important factors accounting for the rise in child abuse reports. The rise since 1976, when reporting began to be mandated, has been steady and dramatic, and in 1987 reached 2.2 million reports (see Chart II). Approximately 35% of these reports are substantiated (or "indicated"). Of these, approximately 20% of the children move on into the foster care system.
- Child protective services are "driving" the system, according to a new study by Kamerman and Kahn, as they always have. In 1985 the single most important reason (61%) for children coming into care was for their protection (Chart III). But Gershenson said this is nothing new. In 1961, with a much more restricted definition of abuse and neglect, 43% of children were in care for their protection.
- Increased re-entry rates are an important, less well acknowledged, factor. Census counts of the numbers of children in care at any one time, are not as revealing as statistics documenting the flow of children in and out of care. Studies in Illinois and New York reveal that between 1 in 3 and 1 in 5 of children in foster care are re-entrants. In 1987, 72% of the increase in foster care placements in New York was due to children re-entering the system. It appears then that the emphasis on reunification in P.L. 96-272 has led to only short term gains for some children.
- Another problem is the fragmentation of the child welfare system, which is really not a "system" in any state. In Gershenson's view, this situation is exacerbated by setting up the the National Center on Child Abuse and Neglect as a separate unit, this was made worse recently by pulling it out of the Children's Bureau. This action sends the completely wrong signal to the states.
- The child welfare system has been de-professionalized, less than 1 in 4 child welfare workers are professionally trained. It is now "not a system that any professional really should work in," said Gershenson. "How would you like to spend two years getting a Master's Degree (in social work) when all the decisions are made by judges, the lawyers at your side, citizen review panels, GAL's, CASA's, the news media and you are subject to arrest every time you make a mistake."

Gershenson concluded by saying that he did not believe the remedy was to increase funding for Title IV-E foster care. In his view there was no longer any justification for the federal government funding the maintenance payments and administrative costs of AFDC children in foster care. Doing so only establishes incentives for more placements. Over the past decade our philosophy has changed. We need to put the federal dollars into helping states help families. In his estimate, if \$480 million of Title IV-E monies were spent on family based services, it would reduce the numbers of children entering care by about 60,000 children per year.

The rest of the federal funds should go into staff training and development. The Children's Bureau needs to "get out of the business of being policemen on compliance reviews, and go back to being a partner, providing the technical assistance and national leadership that is currently missing."

Ann Rosewater, staff director of the House Select Committee on Children, Youth and Families, said that in her remarks she would draw upon the findings and recommended solutions of the major report on foster care, *No Place to Call Home: Discarded Children in America*, recently issued by the Select Committee (see references).

Background of the 1980 federal child welfare legislation. The impetus for foster care reform in the late seventies grew out of the realization, documented in several congressional hearings and reports, that we knew very little about the numbers and status of children in out-of-home placement. But we did know that children were too often inappropriately placed, too often placed far from home, frequently for excessively long periods and in more restrictive settings than necessary and were moved too often. Moreover, while payments were available for long term placement, little monies were put into preventive or reunification services.

The basic concepts of P.L. 96-272, the Child Welfare and Adoption Assistance Act of 1980, are still valid---preventive services to avoid placement, reunification efforts, and permanency planning ---but there is general agreement that much still needs to be done to put these goals into practice. The 1980 legislation has several interrelated components: Title IV-E the foster care maintenance program, an entitlement program; Title IV-B the services portion which is an authorized program; required increases in Title XX and the Adoption Assistance subsidy program. (For details see p. 9.) However, it did not address child protective services which contributes to the federal effort being weak and fragmented.

Moreover, over the past decade we have learned a great deal about the need to think more broadly about the problems of foster care. The Select Committee report emphasizes the need to consider the relationships of the juvenile justice and mental health system to the child welfare system since many of the children who enter any one of these systems look very similar and may cross over.

The clear intent of the federal 1980 reforms was to redirect the fiscal incentives towards preventive services. This has not worked for several reasons, primary among them is lack of federal leadership and guidance. First, the Reagan Administration clearly did not believe in the goals of P.L. 96-272 and early on proposed to repeal the 1980 law. Further, no definitive regulations were promulgated to help states interpret the "reasonable efforts" provision, and there were no consistent standards set up for the states review and compliance process. Second, and in addition, Congress did not fulfill its part of the bargain, and never provided enough funding for Title IVB to trigger the fiscal incentives towards preventive services.

Problems with the current system. Rosewater then highlighted some of the main points in the Committee report.

- There is considerable evidence that the system is being swamped, overwhelmed, and jammed up. There are not enough caseworkers, the size of their case loads is untenable, and the severity and complexity of the problems experienced by children and families today are much more difficult to deal with. Clearly the service base has been weakened by loss of public resources (for example, cuts in public housing and Title XX) just at the time when new crisis needs are emerging.
- The most troubling of these new trends is the rise in drug-exposed, especially "crack", babies who need child welfare services. The Committee's own survey found a three-to-fourfold increase in the numbers of babies born drug-exposed over a 3 year period in 18 metropolitan hospitals in 15 cities.

It is not sufficient to suggest the "orphanage" solution for these babies because there is no evidence they will succeed any better than they did decades ago. The best child development research demonstrates that young children need a home environment for healthy development. Many other alternatives are available, for example specialized foster care and small group homes. Some of the most promising treatment programs keep the addicted mothers with their babies.

- Although the new emphasis on family preservation is vitally important, there will always be a need to place some children in foster care, at least temporarily. No one is talking about eliminating the foster care system.

In conclusion, Rosewater noted that a lot of excellent work is being done in some communities. They point the way to the challenge ahead: we must find ways of redirecting resources so that "we keep children out of care who don't need to be there and make foster care a positive experience for those children who need it."

Ruth Massinga, based on her experience administering the Maryland child welfare system and as President of the American Public Welfare Association, spoke from the perspective of the states. She identified and then discussed four major headlines that capture the major reasons underlying the current crisis in foster care.

Too Little Money. States have experienced mounting financial pressures with the rising numbers of children in foster care and have not received the federal share neither in a timely fashion nor in the amounts anticipated when the law was enacted. The fact that over \$350 million in federal back payments to states were outstanding for several years is clear evidence of federal abdication of its promises. States have struggled to redirect general funds towards prevention as best they could. But necessarily they have found themselves having to give priority to those children in crisis who need immediate attention and placement.

Too Much Unfocused, Undirected, Bureaucratic Snarl. As already mentioned, there are too many wrangles between mental health, child protective services, special education, juvenile justice, and foster care workers about who is responsible for what pieces of the treatment that the child and family will get. Far too frequently children deteriorate while they are supposedly getting help.

Too Much Focus on Process, not Enough on Outcomes. Unfortunately good concepts in the law have been perverted into legalistic and binding systems that constrain people, especially caseworkers, from doing what needs to be done. Thus they avoid creative solutions, fearing the repercussions. There is virtual obsession with process; too little attention paid to outcomes.

Too Little Focus on Changing Technology Needed to Do the Job. The progressive concepts of P.L. 96-272 are being implemented through family-based and home-based programs, albeit slowly, in pockets throughout the country. There is a definite trend in this direction, but states cannot do as much as they want to because of economic realities of caseload growth, need to attend to costly treatments of children in foster care as well as preventative efforts. Part of the needed technology is the creation of new coordinating structures---multi-disciplinary, across agencies and cross-levels. The Annie E. Casey Foundation is funding state wide efforts to develop these new structures and innovative financing strategies in three states (Maryland, N. Dakota and Connecticut). (Note: these will be presented in the second seminar on June 8th.) But there is still a great deal to be learned.

Massinga added that the Children's Bureau used to play a leadership role in trying to find out what approaches work best. Too much emphasis is currently placed on collecting statistics. What is

really needed are the kinds of data that lend themselves to sophisticated analyses of the outcomes of interventions. This is not being done at the national level.

The critical question, Massinga said is "how can we help encourage these preventive and family-centered efforts to spread and avoid having them strangle under the burden of the new pressure of numbers?"

State child welfare administrators' beliefs in the urgent need for a reexamination of the current system led to the APWA establishing the National Commission on Child Welfare and Family Preservation (see page 21). A number of problems mentioned today and other issues have been voiced at the series of three field hearings the Commission has held over the past year. Issues raised include: the need to focus on families most at risk--specifically young single parents and substance abusing parents; findings ways to encourage family responsibility; increased resources needed for effective recruitment and support for foster parents.

Massinga concluded by saying it was "inconceivable to me that a nation that has the capacity to mobilize in the physical sciences in both basic and applied research to bring to bear on the development of changing technology to solve new medical problems cannot, with the will, mobilize the same capacity to develop the technology needed to solve human services problems such as those involved in foster care."

Points raised during discussion

- A participant wondered why the Congress persists in enacting new demonstration programs targeted on specific child welfare needs--such as the Abandoned Infants Assistance Act---for a few million dollars, when the money would be much better spent in expanding Title IV-B? Rosewater replied that this is a chronic problem. There is great political appeal in enacting a small targeted authorization responding to a high visibility problem. It is generally difficult to develop the necessary support for what has been discussed today namely, a call for complex and comprehensive reform.

Rosewater continued that one reason it has been difficult to get congressional support for substantially increased foster care services funds is that they have very little evidence of how Title IV-B is being spent.

- Another system problem that hadn't yet been mentioned is the chaotic administration and management of child welfare bureaucracies. A participant cited a study showing very high rates of bureaucratic reorganization and staff turnover (75% in a 3 year period). Massinga commented that some kinds of reorganization were inevitable and did not do much harm. They simply reflected the fact that newly elected officials brought in new managers who had different management styles. She believed that the most important issue was to stabilize and improve the quality of the data information systems, which would then provide the necessary continuity and comparability across states and administrations.

Gershenson added that he felt the kind of drastic reorganization that has taken place at the federal level over the years has been very destructive. For example, recently, the entire evaluation branch of ACYF has been abolished, with the five evaluation specialists being re-assigned as special assistants to the Bureaus, two of them responsible for the entire evaluation of billion dollar programs (Head Start and Foster Care). Most amazingly, the position of foster care specialist has apparently just been abolished also.

- A question was asked about the contribution of homelessness to the current foster care crisis. Gershenson agreed that it was a significant problem. A recent study in N.J. found that 40% of the children coming into care had problems relating to homelessness. This is a

tragedy and a step backwards. Child welfare profession standards have long maintained that no child should come into care for economic reasons such as family poverty or homelessness.

- One participant pointed out that middle class people seldom considered being foster parents. Perhaps part of the shortage of foster parents could be alleviated if all the people who wanted to adopt considered fostering. Massinga responded that the motivations for fostering and adoption are very different, though sometimes fostering may lead to adoption.
- There is more disagreement on goals and approaches than the presenters today are suggesting, commented one participant. Not all would agree with Gershenson's wanting to do away with Title IV-E maintenance payments. And family preservation is being very highly promoted as the comprehensive solution. This may be premature. Not everyone is on that bandwagon. Caseloads are changing in ways we do not really understand. In N.Y. 11% of all new entrants to foster care are under one month of age, surely there is no question of family preservation in this context?

Gershenson explained his critique of Title IV-E further: He believed there was no rational basis for dividing the children receiving foster care into those who received federal subsidy (38%) and those who didn't (62%). There are not two separate systems out there. The caseworker doesn't know which child is federally subsidized, and it doesn't make any difference if she did. It doesn't make sense that the training for caseworkers who work with IV-E children is reimbursed 75% but there is no subsidy for training to work with the non-IV-E children.

- A question was raised about the accountability issue---what role should the federal government play? How tightly should it monitor the states? Massinga made the point that the federal compliance reviews would be more acceptable if they focussed on outcomes and not process. But basically the states want consistency and clarity. Currently there are ten different regions and ten different answers to every question. There should be a single, clear federal view.
- The moderator closed the session with the comment that the central question underlying some of these questions was: "How can we develop systems of care that both protect the children and make the system more family focussed?" The next seminar on foster care, to be held on June 8th will focus in more depth on this issue.

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THE CRISIS IN FOSTER CARE: NEW DIRECTIONS FOR THE 1990s

Background Briefing Report

INTRODUCTION

(Sources: Evans & Evans, 1989; Hubbell, 1981; Jenkins, 1981; Knitzer, Allen and McGowan, 1978)

(Note: The terms "foster care", "out-of-home care" and "substitute care" are used interchangeably in this report to refer to the publicly funded system of services organized to provide 24 hour care to children whose parents are, for a variety of reasons, not caring for them at home. These services include foster family care provided by foster parents, and care provided in residential group homes and institutions.)

The foster care system is clearly in a new phase of crisis. After a decade of attempts at foster care reform, policymakers and advocates are engaged once again in a wide ranging assessment of the current problems in the child welfare system and how it can be improved. A critical step in this process is an examination of the effects of the recent reforms set in motion by the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272). This new law was welcomed by Democrats and Republicans alike as providing the remedies needed to address serious problems in the child welfare system and reorient services in the right direction. To what extent did this landmark reform achieve its objectives? Are the present problems due to inadequate implementation of the law or are they a result of new and unanticipated trends and pressures?

Definitive answers to these questions are not yet available. But before entering the discussion in this report, we believe it is important to focus first on the core nature of the human dramas and dilemmas involved in foster care.

When children's lives and well-being are placed in jeopardy by their own parents, society's strong protective instincts are aroused. Yet the foster care solution is a drastic intrusion into families' lives. Removing infants and children from the familiarity of their own homes and the people they know best, even when they have had bad experiences with them, is usually traumatic. Children in foster care feel very sad, anxious and guilty. They are confused about their identity, torn in their loyalties and exhibit many symptoms of their distress ranging from night terrors, school failure and violent, acting out behavior. Parents who have gone through the experience of having their children in substitute care describe being torn apart, feeling intense sadness, guilt, anger, worry, humiliation and despair. They know they have failed as parents. And they are essentially powerless: most decisions about their children are now being made by a host of strangers.

Experts and non-experts alike agree that, except in emergency situations, foster care should be considered only as a last resort, not a first response to troubled family situations. When placement cannot be avoided, the length of time the child and parents are separated should be minimized. Termination of parental rights, the necessary step prior to adoption, is acknowledged to be an even more drastic, though at times quite necessary, intervention and should only be done after

exhaustive exploration of the alternatives. The recent federal reform enshrines these guiding principles into law.

The driving force of the foster care system consists of the series of judgements and decisions about placement, reunification, termination of parental rights, and needed services made by caseworkers, judges, court related personnel and advocates. These decisions have grave, monumental consequences for the child, parents, other relatives and substitute caregivers.

In many ways, the 1980 reforms seem to be having their desired effect of reducing long term foster care and promoting permanency for children. For many thousands of the estimated 450,000-540,000 children and their parents currently involved in foster care over the course of the year, the system works reasonably well. A small, but growing, number of families at risk of child placement receive the services they need to stay together. The majority of children who come into substitute care are well cared for by concerned foster parents until they return home, often within a few weeks or months, to their parent(s) who are somewhat better able to care for them. Many other children, for whom return home is found to be infeasible, are placed in adoptive or other permanent homes. Since the reforms, fewer children have been placed in out-of-home care, and when they are, their stays are shorter. Foster care has done a poor job of public relations. These positive stories are seldom told in the media.

But for an unacceptably large number of children and their families the system does not work well enough, and too often does irreparable harm. In recent years the numbers of children in care are rising again dramatically. Foster family homes are crowded and in very short supply. Some children are moved repeatedly. In some cities, foster family homes are in such short supply that children have to sleep on makeshift beds in agency offices. The media produce graphic accounts of the systems worst mistakes and failures. The system is accused of not removing children soon enough from their homes as, for example, in recent horrific reports of the injuries, neglect and deaths suffered by "crack" babies. On the other hand, there are accusations that caseworkers are too quick to remove children from their homes as, for example, in the anguished reports of parents who were investigated and harassed based on anonymous reports of parental sexual abuse that were then later found to be totally unsubstantiated. And many of the problems that were identified as common to the system a decade ago, still continue. Children are separated from siblings and moved from foster home to foster home. Families are given little information, are not involved in planning, and have difficulty visiting their children. And some children are abused in the foster homes that were designed to protect them from their own parents abuse.

Public ire is aroused by such stories and pressure mounts to **do something**. But there are no easy solutions. The public and its elected representatives are little aware of the multi-layered complexity of the systems involved in foster care, and the difficult policy and practice dilemmas that arise when representatives of the state intervene in families' lives. Nor is there much understanding of, or support for, the resources required on the foster care front lines where the important decisions are made: namely people with the specialized training, knowledge, skills, experience, motivation and time needed to ensure that the wisest possible decisions are made and that children are provided with good substitute care.

Conflicting Values and Goals. Although there is a remarkable consensus on the several goals of the foster care system, it is less often acknowledged that there is inherent tension and conflict between them. The public foster care system has three primary goals: maximum child protection and permanency and preservation of families. How can the system balance these different interests? By consensus, children's welfare is generally best achieved if their families are given the support and help they need to keep their children in their homes. But this approach is not always appropriate or possible. *Can a system be designed which both protects children, safeguards the rights of parents and strengthens and supports family functioning?*

As Hubbell, and others have pointed out, one of the difficulties in achieving an appropriate balance between these goals is that those working in the child welfare and juvenile justice systems have, for the most part, been trained to operate under the "best interests of the child" standard. This standard, though enormously appealing on its face, "is vague, susceptible to individual bias and personal values, and its application is usually based on insufficient information," (Hubbell, 1981, p. 40). Social class and racial biases, for example, are endemic in the decisions made in the foster care system. Moreover the "best interests" standard focuses solely on the child in isolation, when in real life, the child's interests and well-being are often difficult to disentangle from the well-being of his or her immediate family.

This report begins with a brief description of the foster care system, the characteristics of children in substitute care and recent social trends bringing pressure on the system. We then review the current policy framework and discuss the major problems and challenges the system faces now and in the years ahead.

FOSTER CARE : An overview

(Sources: Besharov, 1988; Child Welfare Research Notes 1983-87; Committee on Ways and Means, 1989; Ensign, 1989; Hardin, 1983; House Select Committee, 1989; Hubbell, 1981; Knitzer, Allen and McGowan, 1978)

Before examining the problems currently facing the present child welfare system, it is helpful to review some of its key principles and components as they are designed to function, as follows.

Prevention of Placement: Recent reforms have emphasized that services should be provided to troubled families to prevent the need for children to be placed in out-of-home care. Thus the foster care system described below includes referral to, or actual provision of, a range of practical and psychologically oriented services that parents may need to improve their functioning and their children's welfare. These can include assistance with housing, food, clothing and cash; jobs referral and training; in-home respite care and training in housekeeping skills and home management; parenting education and parent support groups; mental health counselling and family therapy; referral to alcoholism and drug treatment programs etc. Similar services such as these are needed to rehabilitate families whose child has been placed in out-of-home care, in order for them to regain their child.

Placement in foster care: The public foster care system is designed to provide substitute out-of-home care to children whose parents' condition (e.g. illness, death, disability, incarceration) or behavior (sexual/ physical abuse, neglect, lack of supervision) means they are not discharging their basic parental responsibilities. Approximately 3% of the children who enter foster care are placed by their parents on the basis of a voluntary written agreement with the agency, without court proceedings. Most children enter foster care through a juvenile or family court's neglect or dependency proceeding which results from a child protective services worker's investigation of a complaint or from referral from another agency, for example in the juvenile justice system or the mental health system. The court then normally awards custody to the child welfare agency who then arranges for the child's placement.

Permanency Principle: reunification or adoption. Foster care is guided by the overarching principle of permanency, namely that children need to be placed in a stable, permanent family setting. Foster care itself is designed to be only temporary. When the parent's condition changes, or behavior improves sufficiently the first presumption is that the child should be returned home. If, after the child has been in care for a year or more and it becomes clear that sufficient change in the family is not going to happen, the public agency is supposed to actively pursue an

adoption plan, which necessitates both finding an adoptive home and petitioning the court to terminate parental rights. Ideally, once the child has returned home, or been placed in an adoptive home, after-care services are provided to the child and family to sustain and reinforce the gains made and avoid another placement or adoptive breakdown.

Alternative routes to permanency. However if it seems neither possible nor wise (for example in the case of older children) to terminate parental rights or find an adoptive home there are several less well known alternatives to assure the child a high degree of permanency, including long term foster care (either by agreement with the agency or ratified by the court), foster parents or relatives being assigned legal custodianship or guardianship, or adoption with some court ordered visits by the biological parents built into the adoption decree (see Hardin, 1983 p.128).

Control and decision making. When a parent places a child voluntarily in foster care she/he generally delegates the decision making responsibilities involved in day to day care to the agency but retains all the basic parental rights to make major decisions in the child's life, and to withdraw the child from care at any time. However if the child is placed through the courts the parent usually loses both custodial rights and many guardianship rights, namely the rights to make major decisions about where and with whom the child lives. The parents do not retain any rights to receive regular information about the child's progress in school. Residual parental rights and responsibilities generally include the rights to limited visitation, the right to consent to major medical operations, special education placements and to consent to adoption as well as the obligation to provide financial support (which in practice is often waived). Parents are given the opportunity to participate in case reviews, but often have no substantive role in case planning or decisionmaking about the child's future.

Foster parents act as the caregivers for the children placed in their care and are assigned sufficient authority to carry out these day to day responsibilities. However, foster parents remain under the supervision of the agency which retains the basic legal parental powers e.g. decisions about education, medical care, discipline, visitations, travel etc. The agency caseworkers and the child's and parents' attorneys will make recommendations to the court about major placement changes, petition for parental rights termination and so forth, but it is the judges who acquire the ultimate control over the children's lives when they enter care.

Multiple Decisionmakers: In addition to caseworkers and judges, in the past decade, as a result of the federal legislative reforms, numerous other individuals have come to play an influential role in the child's passage through the foster care system. These persons include the court appointed members of administrative and citizen review boards and their staff who are required by law to conduct periodic external reviews of agency case plans and hold dispositional hearings. In many jurisdictions there are also the Court Appointed Special Advocates (CASA), or guardian *ad litem*s (GAL) whose role is, in part, to assist the attorneys in conducting investigations.

Increasingly, medical and mental health personnel are involved in providing reports as part of the child protective services investigations of physical, sexual or emotional abuse or neglect and parental fitness. They may also be brought in later in the process when questions are raised about the child's return home. All these different personnel may at one time or another seek to get information from the child's family in a series of multiple, overlapping investigations and continuing assessments.

TRENDS AND INDICATORS

(Sources: ACYF, 1987; Besharov, 1988 ; Gershenson et al., 1983-87; Maximus, 1985; Select Committee, 1989; Ways and Means Committee, 1989).

Sources of data.

There is no nationally mandated foster care and adoption data information system in place and states are not required to report their foster care and adoption data to federal agencies. Although since 1980 most states have gradually been putting in place improved data collection systems as required by P.L. 96-272. Most states have cooperated in the new data collection system established in 1982, known as the Voluntary Cooperative Information System (VCIS), which is financed in part by the Department of Health and Human Services. These data are collected by the American Public Welfare Association and analyzed, under contract, by MAXIMUS Inc. a private consulting firm which publishes an annual report (Child Welfare Statistics Fact Book). The most recent complete published report is on 1985 data, although preliminary data on 1988 are available from APWA and the Center for the Study of Social Policy.

This data has certain limitations: not all states report regularly, or report each item in the same way so comparisons between states are difficult. Also the states use different definitions of foster care. Nevertheless these data, supplemented by other sources such as the ten state survey conducted by the House Select Committee on Children, Youth and Families in 1988 permits reporting on certain key national trends and indicators.

Scope of the problem.

Recent estimates by the House Select Committee of Children, Youth and Families, based on a ten state survey, suggest that in 1988 nearly 500,000 children were placed in out-of-home care on a single day. Of these an estimated 340,300 were placed in foster care administered by child welfare agencies. The remainder were placed in a variety of public and private juvenile facilities administered by the juvenile justice system or in psychiatric inpatient hospitals or residential treatment settings administered by the mental health system.

Census of the substitute care population: The number of children in foster care at any one time has clearly fallen since the late seventies, although the numbers do not really become reliable until the mid-eighties. From a peak in 1977 of apparently over 500,000 children in care, the numbers dropped to a low count in 1983 of 269,000 (See Chart I). Since then the numbers steadily but gradually rose, with 276,000 reported in 1985. The next three years experienced a steeper rise. The Select Committee report estimates a 23% increase to 340,300 in care at the end of 1988. In certain heavily populated states---notably California, New York, Illinois and Michigan---the recent rise in the foster care caseload had been quite dramatic with increases since 1985 ranging from 19% (Illinois) to 44% (California).

This raises the question, in terms of projections, about the degree to which these states are indeed "bell wether" states and therefore whether the dramatic rise in the foster care population they have experienced can be expected to be repeated in many other urbanized states in the near future.

Characteristics of children in substitute care.

The foster care system is essentially a service for the poor and the powerless. Although we know that about 40% of the families of children in foster care are very poor because they meet eligibility requirements for the AFDC program, there is no recent national data available on the family

incomes of the other 60% receiving foster care services, for which there are no income eligibility requirements. However it is clear the vast majority of families involved with foster care are poor or near poor. When middle class families experience some of the same problems in caring adequately for their children, they are much less likely to be reported to the authorities, and their problems are addressed, if at all, through private voluntary facilities, usually without removal of parental rights.

Nor does national data report on the family background of children in care in terms of family structure, education, number of siblings etc. But there is data available on foster children's age and racial background. In 1985, 25% of the children in substitute care were under 6 years old, 3% less than a year old; just over one quarter (29%) were between 6 and 12 years, 45% were 13 through 18 years old.

Blacks are disproportionately represented in the foster care population. In 1985, non-Hispanic black children accounted for about 33% of the children in care, 52% were non-Hispanic white and 9 % were Hispanic. The 41% minority children in care is more than twice their proportion in the population (19%). This over-representation of minority children in out-of-home care is even more striking in facilities operated under the juvenile justice system. Approximately 4,000 Native American children are in state provided out-of-home care, with another 4,000 in care under the administration of the Bureau of Indian Affairs. Minority children stay longer in care and wait longer for permanent homes. Data from the Select Committee's recent survey suggest that the proportion of minority children in care has risen slightly since 1985.

A large proportion of children in care have emotional and behavior problems, often as a result of their experiences. In addition a number suffer developmental disabilities/mental retardation and physical handicaps, although precise numbers are not known. In 1980, a census reported that about 20% of all children in substitute care were mentally retarded, emotionally disturbed, learning disabled or physically handicapped.

Types of substitute care.

Foster family homes are the predominant type of substitute care (see Chart V). In 1985 about 69% of children were residing in foster family homes (including adoptive foster homes or non-finalized adoptive homes). Of these an increasing number, especially in some states, are placed with relatives who receive foster care payments. However about 21% of foster care children were living in group homes, emergency shelters or other types of child care facilities and 8% were living in their own homes under supervision.

Dynamics of the foster care system.

Counts of the number of children in out-of-home care at any one time do not provide information about the flow of children through the system in any given year. (For the flow in 1985 see Chart IV.) Important indicators of the dynamics of the system are the reasons for entry and exit, the duration of stay, re-entry rates, and the changing composition of the caseload.

Reasons for entry. In 1985, 59% of the children entering care were placed as a result of parental neglect or physical and sexual abuse (approximately two-thirds of these were for neglect). Parental conditions (such as mental illness, homelessness, or substance abuse) or absence accounted for 16% of new entrants, status offenses or delinquent behavior for 10%, disability for 2% and 13% were classified as for "other" reasons, such as parent-child relationship problems,

deinstitutionalization, unwed motherhood etc. Only 1.9% entered due to parents relinquishing their rights.

Reasons for exit: In 1985, 65% of the children leaving substitute care were reunited with their parents or placed with another relative or caretaker. 9% were adopted or placed for adoption. Another 9% were emancipated or reached the age of majority. 14% left for a miscellany of reasons (marriage, pregnancy, runaways, discharged to another agency, etc.)

Duration in care: One of the major problems identified in the late seventies was the length of stay in foster care, which was said to average nearly three years. Studies indicated there had been some reduction in the median length of stay by the mid-eighties to around 18 months.

However, it has recently been pointed out that the measure of duration in stay used some years ago exaggerated the median length of stay as it did not take into account many of the short stays (Gershenson, Oct, 1989). Data analyses using a more accurate measure (cohort data), revealed that in 1985 the median duration of care for those leaving care was 8 months (see Chart VI). In that year, 20% of the children were in care for less than a month, 26% of the children left the system after 24 months. It now seems clear that the foster care system provides short term care to the majority of children who are generally returned home.

Reentry rates: National data on rates of re-entry, based on 14 states, showed a significant increase between 1983, when only 16% of children in care had previously received care, to 1985 when 30% were re-entrants. Longitudinal studies in Illinois and New York found that 33% and 20%, respectively, of the children re-entered foster care.

Demographic changes: Over the decade there have been changes in the age composition of the substitute care population. An increasing proportion of children receiving substitute care were teenagers. Some of this may have been a result of de-institutionalization and diversion from the juvenile justice system and the fact that efforts to reunify children with their families or place them for adoption were more successful among the younger ages. More recently however, there are signs that growing numbers of very young children are coming into care partly as a result of the drug epidemic and partly the rising numbers of births, a result of the demographic echo of the baby boom. In 1985 only 35% of children entering substitute care were under age 6, in 1988 42% were.

New Pressures on the Foster Care System.

(Sources: House Select Committee, 1989; NCCAN, 1988;)

Several new social trends are, by common agreement, fuelling the recent rise in the foster care population and putting intense pressures on the already overburdened system of services. Among the most important are the increased numbers of reports of child abuse and neglect, the rise in illegal drug use especially among young mothers in inner city areas, the AIDS epidemic, and the increased numbers of homeless families. In addition some analysts and advocates suggest that the rising number of single parent families, and their concomitant poverty, places increased stress on families' ability to care adequately for their children. (Since national data does not track the changes in family structure or income of the entrants to the foster care system it is difficult to substantiate this probably valid point with hard data.)

Rise in child abuse and neglect reports. The decade has seen a dramatic and sustained escalation in reports of suspected child maltreatment (abuse and neglect). (See Chart II.) The absolute numbers are very large---1.2 million reports in 1981 to 2.2 million in 1988. Approximately 35% of these suspected cases are found to be "indicated" (i.e. verified),

nevertheless the result has been a substantial rise in the number of children found by the courts, upon investigation to be abused or neglected. A federally funded national study to determine the changes in incidence and prevalence of child maltreatment between 1980-86, found a 74% increase in children found to be abused. However, the report points out that this rise undoubtedly reflects a growing community awareness and professional willingness to report child maltreatment as required by the new federal child abuse law, in 1984, and related state laws. Reporting increased from 33-40% between 1980 and 1986. However the NCCAN study revealed that 60% of known maltreatment cases were not reported to the protective services by concerned professional who knew of them. The increases in reports of suspected abuse and neglect thus cannot be taken as evidence of an actual increase in parental abuse and neglect, which is a figure that is very difficult to measure.

In any case since each report needs to be investigated by law within a day or two (depending on state law) this escalation in reports has clearly put a tremendous burden on the child abuse protective system, which in many jurisdictions has been heavily overloaded, and not able to respond effectively or efficiently. Much time is taken up in the investigation of the 65 % of reports that are unfounded, time taken away from needed work and supervision of families where the child is genuinely at risk. And in spite of all the reported cases, many are missed. Still, large numbers of children die, (in 1986, about 1200) as a result of parental abuse who were never reported to the authorities or who were already under child welfare supervision. Small studies and field reports also suggest that much of the increase in reporting results from a new awareness of the problem of sexual abuse.

Since the child abuse national data collection system is quite separate from the foster care data system it is not possible to document what proportion of substantiated cases are then referred for foster care. The 1986 NCCAN study indicated that 10% of the "indicated" cases are associated with out of home placement. The numbers of children entering foster care due to parental abuse and neglect however have clearly increased.

One analyst suggests that, contrary to the popular assumption it is not the children in most physical danger who are most likely to be placed in foster care. Besharov (1988) cites several small studies that document that caseworkers are more likely to refer children to out-of-home care who suffer from "social deprivation" and neglect rather than physical abuse and injury. By this term is meant families who do not appear to meet their child's physical, emotional and developmental needs.

Drug abuse and AIDS. Several states and localities have reported that rising numbers of referrals of children to foster care are related to their parents' substance abuse, or, if teenagers, to adolescents' substance abuse. Newer types of illegal drugs being used especially in the inner cities, primarily crack-cocaine, are involving young women for the first time in significant numbers. Thus increasing numbers of infants are being born to addicted mothers. These babies, sometimes damaged themselves in utero, often have multiple needs. Their addicted mothers are seldom able to care for them adequately and out-of-home care is needed for them. A related problem is the estimated 1000 infants and children who are identified as having tested positive for HIV virus who were in the foster care system. (See study in progress funded by ASPE/HHS, page 22.) Because of the shortage of foster homes or adequate treatment services, in some communities these babies remain longer than necessary in hospital wards, labelled "boarder babies".

Homelessness. Increasing homelessness is one more tragic factor placing new pressures on the child welfare system. Families with young children constitute about a third of the growing numbers of homelessness in our society. Although there are few shelters for mothers and children, public authorities usually do find some kinds of accommodation, however inadequate, for these families.

Homelessness by itself should not be a reason for a child entering foster care, although undoubtedly it sometimes is. In New Jersey, for example, a witness testified at hearings in 1988 that homelessness was a factor in over 40% of the placements into foster care, and the sole precipitating cause in 18%. But the disintegrating experience of being homeless and its association with other problems, clearly places children at risk of foster care. In addition, some homeless mothers will go to great lengths to hide from the authorities, for fear that their children will be taken away and placed into care. Finally, the mother's lack of adequate housing is frequently a major barrier preventing reunification with her children once they are in foster care.

FEDERAL FOSTER CARE PROGRAMS---AN OVERVIEW

(Sources: Allen, Gobulock and Olson, 1983; Ensign, 1989; Hardin, 1983; Select Committee, 1989; Ways and Means Committee, 1989;)

Foster care services are embedded in a broad set of child welfare services which are provided by a range of private, non-profit and government agencies. However the primary responsibility for providing these services rests with state government and the operations of the foster care system are essentially governed by the requirements of state family law. However the several federal programs providing funding for foster care maintenance and other related services, create an overlay of federal requirements on the disparate state child welfare systems to which state laws have had to conform. The federal role, since the Social Security Act of 1935, implemented largely through the Children's Bureau, has been to help improve child welfare, especially with respect to specific topics of concern, through providing federal support under a number of different programs spread among several different federal agencies and offices.

"Child welfare services encompass a broad range of activities, including child protection, care of the homeless and neglected, child social and nutritional development and children in out-of-home care. The services provided may be supportive (e.g., to help the family cope with problems or provide protection for the children while the family learns to perform appropriate parenting roles); supplementary (e.g., provide financial assistance); or substitutive (e.g., foster care), (Ways and Means Committee, 1989, p.732). The underlying philosophy of these programs is to provide **supportive and supplementary** services as the first option, and only use **substitutive** services as a last resort.

The five basic sources of federal support for foster care and child welfare are contained within Title IV and Title XX of the Social Security Act of 1935, as amended. These programs are thus under the oversight of the House Ways and Means Committee and the Senate Finance Committee and administered by the Children's Bureau, Administration for Children, Youth and Families (ACYF), within the Office of Human Development (OHDS), DHHS. Four of these programs are authorized entitlements providing federal matching funds to states, and one is an non-entitlement program, requiring regular appropriations (Title IV-B). These programs, and their funding environments are briefly described below.

Adoption Assistance and Child Welfare Act 1980 (P.L. 96-272).

The primary legislative vehicle establishing the current goals and administrative framework of these services is the Adoption Assistance and Child Welfare Act of 1980, (P.L. 96-272), enacted by the 96th Congress and later amended by the 99th Congress under the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA, P.L. 99-272).

P.L. 96-272 modified both the existing federal Child Welfare Services and Foster Care programs, transferring the Foster Care program from Title IV-A, where it was linked with the financial assistance provided under AFDC, to title IV-E and established a new Adoption Assistance program under Title IV-E. The main thrust of the Act was to

1) help reduce long term foster care and redirect funds and services into preventive and rehabilitative services for troubled families by creating a series of fiscal incentives to States (an elaborate system of carrots and sticks) and,

2) assist children in substitute care when return to their families was not feasible to move into permanent adoptive homes.

(See above sources for detailed descriptions of the various provisions of the Act, and, specifically, the important fiscal incentives and procedural protections and requirements.)

Title IV-B, the Child Welfare Services Program.

The Child Welfare Services Program, funded under Title IV-B, permanently authorizes Federal matching grants to States for three types of services relating to child welfare: direct services (75% federal match), training and research and demonstration grants (100% federal match). In practice states themselves spend more than the 25% state match on child welfare services. Since the 1980 Act a certain proportion of these funds cannot be used to fund out-of-home care. Funds are distributed to states on a formula basis. There are no federal income eligibility requirements for the receipt of these services. Since there are minimal reporting requirements under this program there is very little information available nationally on how these monies are spent by the states.

Section 427 of Title IV-B details the procedural requirements states have to meet to receive additional IV-B funds. These include: an inventory of all children in care; establishment of a state wide information system; a written detailed case plan for each child; case reviews conducted by an independent panel and open to the parents, to be held no less than once every six months; a formal dispositional hearing on each child to be held no later than 18 months after the initial placement and periodically thereafter and including a number of other procedural safeguards and protections. Title IV-B has been authorized at a level of \$266 million each year, but never received full funding in the appropriations process, although there have been gradual increases in funds most years. The FY 1990 supplemental appropriations however substantially increased the funding levels of this program.

Title IV-E, the AFDC Foster Care Program

The AFDC Foster Care Program, funded under Title IV-E, is a permanently authorized, open-ended, entitlement program which provides payments to the states to reimburse a substantial portion of the maintenance costs of licensed or approved out-of-home care provided to children eligible to receive AFDC. State funds are matched by federal funds at the State's Medicaid rate which ranges from 50% to 83%. Children in this program are also eligible for Medicaid coverage of health care costs, which must be provided to them. Federal reimbursement is available, at state option, on a limited basis for voluntary placements for up to six months.

Additional fiscal incentives are included in this program to encourage States to emphasize child welfare services and protections. Certain ceilings are placed on the use of funds for foster care, and States are encouraged to transfer the "unused" foster care funds to their child welfare Title IV-B program.

States may also claim open-ended federal matching (50%) of their administrative costs (other than counseling) for this program and (75%) of their expenditures for training state agency staff.

Federal expenditures on this program have increased substantially over the decade: while the average estimated monthly number of children in AFDC Foster Care increased by 26% between 1982 and 1988, federal expenditures are expected to have increased by more than 92% in constant dollars over the same period. Much of this increase was due to an escalation (312% in real terms) in state administrative expenditures (HWMC, 1989).

Title IV-E, the Adoption Assistance Program

The Adoption Assistance Program, funded under Title IV-E, is an open-ended entitlement program requiring states to develop adoption assistance agreements with adoptive parents of AFDC-or SSI-eligible children with "special needs" to provide the parents assistance based on the particular child's need and family's circumstances. The states may claim federal reimbursement for this program, based on the states' Medicaid matching rate. In addition, since 1987, states may claim reimbursement up to \$2000 to cover payments to parents for one-time adoption expenses.

States have considerable latitude in defining the "special needs" child. The term broadly means any condition or characteristic of the child which prevents adoption placement without special assistance. For example if the child's ethnic background, membership of a sibling group, older age, mental or physical handicap means that an approved adoptive family willing to adopt this child, or sibling group, would need additional monies to do so due to their own insufficient income. However the payments may not exceed the AFDC family foster care payment rate. AFDC and SSI-eligible "special needs" children are also eligible to receive Medicaid, as are other "special needs" children deemed "medically needy" under the States Medicaid program.

Title IV-E, the Independent Living Program

The Independent Living Program, funded under Title IV-E, was enacted as part of the Omnibus Budget Reconciliation Act of 1985 which established a new entitlement program to help States provide services to facilitate the transition of children in foster care to independent living. (In most states foster care payments end at age 18.) This program was initially authorized only for fiscal years 1987, and 1988 but was then extended through FY'92 and the program was expanded to include assistance to non Title IV-E teenagers.

These funds can be used for education, career planning, training in daily living skills, locating housing and for training agency staff and foster parents in how to help teenage foster children learn to take charge of their lives and live as independent adults.

Appropriations in each of the three years 1987,'88,'89 funded the program at the authorized level of \$45 million with the monies allocated to the states in proportion to the size of their AFDC caseload.

Title XX, the Social Services Block Grant Program

The Social Services Block Grant was created in 1981, under the Omnibus Budget Reconciliation Act (OBRA) through amendments to Title XX of the Social Security Act (P.L.92-672) 1974. The block grant program consolidated spending for social services, child day care and training. States may use these monies to fund child welfare services of various types, including protective services. These funds are allocated to the states on the basis of the population, and are available without a state matching requirement.

States are given wide discretion as to how to spend these funds, and who may be eligible, but usually they are targeted on low income individuals. States were required only to submit plans (pre-expenditure reports) about how they intended to spend these monies, not how they actually spent it.

Over the past six years a declining number of states appear to be using these monies as a source of support for child welfare services. In 1988, 27 states reported plans to use these funds for child foster care (compared with 36 in 1982) and 38 states planned to fund child protective services (compared with 52 states in 1982). (States include D.C. and the territories.)

The 1988 Family Support Act however requires states to submit annual reports containing detailed information on how their title XX funds were spent and who received services under the program. The program is currently funded at a level of \$2.8 billion for FY'90.

Related Federal Programs.

In addition to these programs, funded under the Social Security Act, child protective services, and some adoption services are federally funded in part under a separately authorized program, the Child Abuse Prevention and Treatment Act, 1984 as amended in 1988, which is under the oversight of the Senate Labor and Human Resources Committee and House Education and Labor Committee and were administered by the Administration for Children, Youth and Families, OHDS/HHS. The National Center for Child Abuse and Neglect, (NCCAN) which has been part of ACYF, is planned by the present Administration to be established as a separate office within the Office of Human Development Services. This office also administers some family violence programs in conjunction with the Office of Justice Programs, DOJ, authorized under the Victims of Crime Act 1984, as amended. (Federal child abuse laws and programs will be reviewed at a future seminar). In addition, The Indian Child Welfare Act of 1978, addresses foster care, guardianship and adoption of Indian children and recognizes the right of Indian tribes to have jurisdiction over such children. This program is administered under the Bureau of Indian Affairs.

PROBLEMS AND CHALLENGES

While there is general agreement that the new social and demographic trends and problems that are responsible for much of the new pressure and crisis in the foster care system, many problems have been identified with the design and implementation of the present policy and program framework. A number of special commissions, ad hoc working groups and researchers are studying these issues in considerable depth in order to propose incremental and major reforms designed to address these systemic problems and meet the new challenges. (See Organizational Resources, page 20-23.) The major problems and challenges under study and discussion are sketched below.

Improving the data collection system and research.

(Sources: ACYF, 1987; APWA, November, 1989; Ensign, 1989; Lerman, 1989;)

An immediate challenge facing the Bush administration is to implement several new laws requiring a mandated national data collection system for foster care and adoption information, coordination of state child abuse and neglect data, and new expenditure data and utilization rates for programs funded by the Social Services Block Grant.

Since the late seventies, policymakers and advocates have been frustrated in their attempts to improve the child welfare system by the lack of uniform national data on the incidence, prevalence, and characteristics of children in foster care and their experience moving through the system. There has also been a dearth of information on adoption. Reports and hearings have repeatedly documented these information problems, for example: critical basic data is not collected or reported by some states; child welfare agencies in different states use different definitions and categories; juvenile justice, mental health systems also collect information about children in out-of-home care leading to some overlapping reporting and double counting.

Beginning with the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978, Congress has pursued several legislative initiatives to require states to improve their foster care and adoption information and in 1980, P.L. 96-272, section 427, provided fiscal incentives to states to do so. As a result many states have made significant strides in developing improved, computerized management information systems but progress is uneven. The Reagan administration however chose to interpret the law as assigning a minimal federal role in these efforts, when many had assumed strong federal leadership was required to implement the legislation. With funding from DHHS, in 1982, the American Public Welfare Association established a voluntary reporting system for the state child welfare agencies, the Voluntary Cooperative Information System (VCIS). While most agree that the VCIS has been a very useful source of information, it left many gaps and problems unsolved.

In 1986, as a result of a provision in OBRA, a National Advisory Committee on Adoption and Foster Care Information was set up and submitted a report in October 1987 to HHS. The report included both substantive recommendations regarding the nature and content of new data collection systems and process recommendations regarding how these new systems should be established. A principal recommendation of this report was that a mandatory adoption and foster care data collection system should be implemented as soon as possible and no later than October 1, 1991.

The Administration for Children Youth and Families/HHS should begin to work with the states to develop common definitions and data elements. Another key recommendation was that the federal government should provide 100% of all developmental expenses incurred by states in transition to the new system (see ACYF, 1987). As required, HHS submitted its own plan to the Congress, a year later than it was due in May 1989, which followed many of the recommendations of the Advisory Committee, with one critical difference. It did not propose new federal funding for costs of implementation of the new system but proposed allowing states to use existing child welfare dollars for this purpose. As of this date, the administration proposal has stalled. Although there is broad agreement that improved information is urgently needed, State administrators, as represented by the American Public Welfare Association, researchers and others have voiced a number of concerns and questions, about these proposals:

- Multiple new data collection systems place considerable burdens on the child welfare caseworkers and administrators and take time away from needed services.

- There is a danger in collecting data for its own sake. Efforts and financial resources devoted to collecting masses of data will be wasted unless there are funds devoted to supporting the analytical resources and the technical capacity at the federal levels to conduct meaningful analysis of these data---and the government's proposal does not address this issue.

- Some researchers believe that it would be more cost efficient to place the emphasis on conducting in depth studies of sample cohorts rather than attempt to get comprehensive, complete information from every state.

-- There is concern that the federal government will not be able to provide sufficient technical assistance to the states to implement these systems nor to coordinate the new foster care and adoption data collection efforts with other, related efforts.

Assessment of the Implementation of P.L. 96-272.

(Sources: American Public Welfare Association, Aug. 1989 & General Accounting Office, 1989; House Select Committee, 1989;)

A major question overarching the current concern about the foster care crisis is to determine the impact of the federal foster care and adoption reform of 1980. By common agreement, P.L. 96-272, was a comprehensive, well crafted law carefully designed to correct many of the failures in the foster care system that were known in the late seventies. Most would agree that the law has had some positive impact on achieving its goals of reducing long term foster care and promoting permanency and that its general directions are sound. The current reassessment however has raised some questions both about the inherent design of the law and how adequately it has been implemented by federal and state government.

There have been very few detailed analyses of the implementation of the 1980 reforms at the national level, and only a few in individual states. For this reason, perhaps, the new Select Committee on Children, Youth and Families Report, *No Place to Call Home: Discarded Children in America*, does not attempt to provide an overall assessment of the implementation of the Act although it does report on specific aspects, such as the adequacy of federal compliance reviews. This report draws on the testimony of over a dozen Select Committee hearings, including three hearings held jointly with the House Ways and Means Committee, held over the last eight years, and the findings of a ten state survey the Committee conducted in 1989 of state child welfare agencies. The Select Committee report focuses primarily on the nature of the present crisis within foster care, identifies a wide range of the problems and describes a number of promising programs and strategies to avoid placement in out-of-home care.

In 1987-88 the Republican members of the Select Committee ordered four separate studies on foster care to be done by the General Accounting Office. The reports of these studies, all published in 1989, examine a broad range of issues. Together, and especially the summary report of the examination of the implementation of the reforms, they provide the most comprehensive review of implementation of P.L. 96-272 to date. However the GAO studies are based on a review and synthesis of a very limited amount of existing information and research, no new data was collected or analyzed. (The Children's Bureau has funded a number of studies of aspects of implementation but their findings are largely inaccessible at the present time.) The overall conclusions of the summary GAO report were :

1) There was insufficient information to determine whether the 1980 reforms had reduced the number of unnecessary and inappropriate foster care placements. "Although length of stay in foster care and caseload size have reportedly declined substantially since 1977, the decreases began prior to the enactment of the law and cannot be confidently attributed to the reforms." (GAO August, 1989.) Nevertheless, it seems important to say that the major reforms enacted in the law in part built on reform policies and practices that were already underway in several states which may well have accounted for the initial decreases.

2) Evidence indicates that the requirements of the 1980 law have not been completely carried out by the states and the compliance reviews have not been conducted by the federal government in a timely fashion. Although the procedural protections have, according to federal "paper" audits, generally been implemented, there is considerable question about quality, namely whether they have been implemented in substance as well.