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Jazzlynne Allensworth
California State University, Monterey Bay

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Checking In: Adoption and Safe Families Act, Permanency, and Child Well-Being

Jazzlynne Allensworth
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Intro

In 1999, the National Council of Juvenile and Family Court Judges formally articulated that child welfare policies would focus on the philosophy that every child has the right to a safe and stable, nurturing environment, which highlighted efforts that would require permanency planning goals and testable measures to monitor progress (Freundlich, Avery, Munson, & Gerstenzang, 2005). For the estimated half million foster youth across the United States (AFCARS report, 2006), policy guides placement-planning goals and performance measures, serving as a widespread attempt to infuse stability and consistency into the lives of children in out-of-home care, who might otherwise never reap the benefits of a family-based living environment (Holland & Gorey, 2004).

Tilbury and Osmond (2006) point out that permanency policy is designed to include identity formation, child development, and attachment theories. Individual assessment must drive permanency-planning goals to encompass a wide range of outcomes (Tilbury & Osmond, 2006; Chapman & Christ, 2008; Freundlich et al., 2005). These options include family reunification, adoption, kinship care, legal guardianship, and a variety of other long-term family-based living arrangements.

Specific decisions must be made in consideration of several specific, measurable outcomes associated with permanency and current knowledge of child development. By reducing the amount of time a child remains in foster care (without increasing re-entry rates), child welfare agencies hope to encourage stability and long-term emotional and

social well-being of the child. Objectives also include increasing placement stability

through reducing the amount of placements in general, as well as reducing the amount of

young children placed in group homes or institutions (Pabustan-Claar, 2007). The many

considerations required in promoting safe and healthy lives for children contain complex

individual circumstances.

This literature review is a modest attempt to interpret current strengths regarding

popular permanency policies and methods, as they relate to child well-being and

permanency goals, while highlighting potential opportunities for reform. The next section

discusses an important piece of permanency legislation, the Adoption and Safe Families

Act. Following, will be a discussion of a child's best interests and placement types. In an

attempt to gain the most unbiased picture of child well-being, this review will call upon

individuals directly affected by out-of-home care: children and families.

Adoption and Safe Families Act

Permanency-promoting measures include the Adoption and Safe Families Act of

1997 (ASFA), which restricts permanency options to no longer include long-term foster

care. This law attempts to fill a gaping void in foster care legislation surrounding

reunification and "reasonable efforts," a term left undefined by the forerunning Adoption

Assistance and Child Welfare Act of 1980 (AACWA) (Berrick, Choi, D'Andrade, &

Frame, 2008; Shaw, 2006). Without the guidance of ASFA, some jurisdictions in the past

have reunified children with biological parents who ended up abusing, or, in severe cases,

even killing them (Berrick et al., 2008). Under ASFA, reunification efforts could be

formally bypassed if a parent:

> (1) Committed murder of another child of the parent;
>
> (2) Committed voluntary manslaughter of another child of the parent;
>
> (3) Aided or abetted, attempted, conspired, or solicited to commit murder or voluntary
>
> manslaughter of another child of the parent;
>
> (4) Has his or her parental rights terminated involuntarily with respect to a sibling; or
>
> (5) Committed a felony assault resulting in serious bodily injury to the child or another child of
>
> the parent (Berrick et al., 2008).

In response, states across the U.S., who did not already have state laws consistent with

federal ASFA outcomes, began to clarify additional intolerable circumstances that might bar

a parent from reunification options. This important feature underlines the principal goals of

ASFA, which are founded on the notion of child safety throughout the process of child

welfare intake and assessment (Fox, Berrick, & Frasch., 2008).

Best Interests of the Child

Outcomes drawn up by the Adoption and Safe Families Act of 1997 include

measures to monitor children in care, involving three basic fields: well-being, permanency,

and safety (Shaw, 2006). The U.S. Department of Health and Human Services

(USDHHS, 2000) defined permanency as any stable family-based living situation for

children, which acts to encourage the persistence of family bonds, culture, and other

relational connections. According to another study, the terms "safety", "permanency", and

"child well-being" act as complementary, and often dependent, features of development,

which should follow known life course development perspectives (Wulczyn, 2008).

Shaw (2006) defined "well-being" as a family's ability to meet the needs of the child in their care, providing adequate educational opportunities when available, as well as serving mental and physical health needs. Wulczyn (2008) pointed out that, unlike permanency, child well-being has legally remained undefined by child welfare services. His study pointed out that theoretically, permanency encompasses the notion of human capital, which includes natural talents, educational opportunities and attainment, and acquired life skills. Similar to the notion shared by the general consensus about the components of child well-being, Wulczyn asserts that human capital is described as a single idea comprised of three layers: educational, physical, and behavioral health.

The delicate nature of developmental stages, including age and role dynamics, makes it essential to remember that human capital skills accumulate over time (Wulczyn, 2008). This ideology suggests that a cycle of investments can be applied to foster children. Because each skill builds on the skill sets of prior experiences, this investment cycle is considered self-reinforcing, as children are expected to have reached specific skill levels congruent with their age. If developmental tasks are met, a child will continue to build on prior skills, but if milestones of development consistently return negative results, a child might suffer severe social, emotional, and psychological setbacks beyond the developmental scope of his/her coping skills. This creates urgency for awareness of "timing, sequence, and duration" of life course events involving the foster care population

and placement disturbances (Wulczyn, 2008). By providing resources to foster children that will help with the successful mastery of important developmental milestones, child welfare services can drastically improve long-term outcomes for children (Wulczyn, 2008; Pabustan-Claar, 2007).

For example, a study involving children between the ages of three and eleven highlighted the need for successful completion of the critical developmental tasks, "initiative" and "industry," framed in Erikson's well-known Developmental Stages (Pabustan-Claar, 2007). Pabustan-Claar noted that this age is marked by an increase in social and academic branching for children and is thought to serve as a significant factor in lifelong achievement, self-concept, and personal identity processing. Because this is the most common age for children to enter foster care (Pabustan-Claar, 2007; Shaw, 2006), measures to assess these developmental tasks should be considered when responding both locally and nationally.

This evidence shows that due to the incredibly delicate developmental stages during childhood, each case must be evaluated in consideration to individual child circumstances, while remaining aware of the child's age and developmental needs.

ASFA and Family Reunification

ASFA impacted family reunification efforts across the United States, primarily by shortening time limits to allowing reunification and including bypass measures that allowed agencies to disallow parents the right to their children.

Many drug rehabilitation specialists suggest that twelve months is not long enough for many addicts to fully recover and that the time limit of ASFA guarantees a permanent separation between child and biological family (Karoll & Poertner, 2003). These specialists assert that because a majority of parents lose their children due to their addictive behaviors, this could have an unmeasured effect in the future.

Berrick et al., 2008 warns that child welfare agencies should be required to record the number of reunification bypass cases for federal review. If these cases are left unmonitored, local agencies that foster biases against reunification could potentially tilt the theoretical permanency scale heavily toward adoption, guardianship, kinship, and other permanency placements.

On a local level, it may be feasible for reunification efforts to be unnecessarily bypassed. According to McConnell and Llewellyn (2005), biological parents who lose their rights to care for their children tend to place blame on external stress created by their environment, while child welfare workers claim the "parenting behavior and function" is the most outstanding reason parents lose their children. Accountability opinions for childcare are often very different for child welfare professionals and biological parents, which could suggest a bias, leading reunification efforts to be bypassed too readily. Without including the proper recording and reporting measures for reunification bypass, the debate remains open.

Karoll and Poertner (2003), however, looked at a population of juvenile court

judges, private agency child welfare case-workers, and substance abuse counselors to identify how each professional would handle reunification decisions. Professionals identified six improvement areas that most often indicated safe reunification, including: motivation, recovery, competency and reliability, social support, parenting and legal. Significantly, judges and child welfare case-workers agreed when "reasonable progress" measures should be taken, especially in combating substance abuse issues. By viewing the efforts of parents, judges and case-workers appeared to address the individualized concern in circumstances that required specific discretion.

Counselors and case-workers tended to disagree on the amount of communication about birth parent well-being. Counselors tended to see a readiness of responsibility if birth parents took initiative to ask for advice or completed a healthy goal-oriented task successfully, while case-workers remained skeptical. It is important to note that 15 out of 19 total functioning areas were agreed upon by all types of professionals, indicating that many professionals in the child welfare system do agree about a child's best interests and generally support family reunification.

In fact, one study reported a 94% reunification rate for children who reunified in less than one year (Pabustan-Claar, 2007). As months and years unfolded, however, the probability of reunification decreased. This, and similar studies, indicates that less time in care is strongly associated with family reunification. Shaw (2007) found that five years after ASFA enactment, overall percentages of children reunifying within one year have

increased and the percent of children reentering care within a year of reunification has decreased.

Unfortunately, not all children who are successfully reunified with their biological parents remain in reunified care permanently. Several factors appear to be associated with re-entry into the foster care system, including: age (primarily babies and children between the ages of 12-14), race (African and Native American children had higher re-entry rates than White and other non-Hispanic children, while Hispanics had the lowest re-entry rates), children placed in group homes, and children who had more than one placement while in foster care (Shaw, 2006).

Permanency Obstacle: A Growing Need for Services in Permanent Placements

The trend toward permanent placements for foster youth who might otherwise face a multitude of possible unstable living situations proves to be a heavy burden for foster families (Ornelas et al., 2007). In fact, as more families began to keep their homes open to permanent situations for children, primarily beginning in the 1990s, they also began to request help in several service fields (especially mental health services for children under their care), but these requests have yet to be formally addressed (Ornelas et al., 2007; Pabustan-Claar, 2007). Meanwhile, accurate assessments of psychological permanency have yet to be developed (Fox et al., 2008).

A need for further financial assistance is also a popular theme in the service requests of many permanent home placement providers, but particularly with relative

caregivers. Relative or "kinship" care is still a new concept that is largely individualized, containing many research limitations, including an apparent lack of comparison groups, representative samples, and standardized measures (Pabustan-Claar, 2007). Relatives who choose to foster children tend to be preferred for their altruistic connection, which can have many possible motivators (Pabustan-Claar, 2007). Unfortunately, the increased reliance on kinship families can produce other childhood risk factors. Kinship providers statistically have "higher rates of poverty and lower educational levels," despite the fact that they receive fewer resources than any other type of out-of-home placement (Ornelas et al., 2007).

It is clear that adoptive families, and relative care providers especially, require more funding for services designed to promote life-long permanency (Ornelas et al., 2007). Pabustan-Claar (2007) also found that the number of months families received services significantly increased the probability of successful permanency outcomes. A lack of effective measures for assessment of services leave articles that require attention at the bottom of the legislative "to do" list. If permanency objectives are to be improved in the future, more comprehensive service assessments must be implemented.

Perspectives of Permanency and Permanent Care: Children and Families

Freundlich et al. (2005) underlined significant communication deficits involved in permanency discussion with youth in New York City, as well as foster and birth parents in the area. This study found, through extensive interviews with former foster youth, foster

parents, and biological parents that the term "permanency" was most confusing to individuals directly affected by its implications and was often left unexplained.

Although many child welfare professionals stated in this study that "permanency" is clearly defined legally, they admit that it sometimes confuses children and families who may not be familiar with legal terminology. To many youth, permanency represented a barrier, preventing them from returning home. Many referred to permanency as a temporary stability that would end when they "age-out," meaning emancipation by age. Most children in this particular study defined a "disillusionment" about past instability and a hopelessness surrounding their experiences. Important to note, youth in this study stressed a need for consistent, everlasting emotional connections to family.

Many biological parents held contrasting points of view or appeared completely confused when asked the meaning of the term "permanency." The majority thought that permanency meant their children would return to them. Some biological parents thought the foster care system had a different idea of permanency than they held, stating that to them it meant reuniting with their children, but to agencies, it meant keeping them away. Other parents viewed permanency as a direct threat that their children would no longer live with them. Freundlich et al. (2005) suggests that this may be due to a communication deficit between child welfare professionals and biological parents.

Adoptive parents also reported few, if any, conversations about permanency specifically. Some adoptive parents placed time limits on permanency, while others

mentioned that permanency could mean the system would remove essential support services. Findings suggested that even though a majority of foster parents mentioned a long-term connection, very few mentioned a life-long commitment.

It is necessary to note that many of these perspectives were retrospective and limited to the New York City area due to study limitations involving sampling restrictions. Perhaps the next step for policy reform will address the growing need for a more effective method of research that might include communications between counties. Policymakers would do well to invest in collecting accurate and cohesive statistics via better assessment measures of child perceptions in the future.

The useful conclusion provided by this New York City study still stands—the conversation of foster care should be opened to include children and families, rather than providing only the legal jargon of the judicial system. Because the nature of permanency is so dependent on individual circumstances, permanency goals must be communicated as decisions affecting "relational, physical, and legal relationships" that foster and kinship care children require. (Freundlich et al., 2005).

The need for more individualized and effective communication cannot be stressed enough. Chapman and Christ (2008) also performed a study involving youth perceptions. Researchers analyzed the evolution of foster youth attitudes toward care and placement over a span of eighteen months. It is important to note that children included in this study lived in consistent out-of-home placements.

Results indicated that even though the children in this study lived in reportedly stable environments, youth expectations often do not match real-world outcomes. In fact, despite the most probable outcome of remaining in care until aging-out, two-thirds of participating youth believed they would be reunified with their families of origin. The decreasing probability of reunification after several months or years of foster care placement was never explained to these children, which will make it difficult to adjust expectations concerning permanency in the future.

A similar result was found in another study of older youth just before aging-out of the foster care system. This study found that although adolescents expressed positive ideation about the future, they were "significantly lacking" the planning or achievement skills required to meet upcoming milestones. After being re-sampled 18 months later, testing outcomes reaffirmed that children in care often do not have realistic perceptions of long-term outcomes (Courtney, Piliavin, Grogan-Kaylow, & Nesmith, 2001; Fox et al., 2008). Further research is needed to address the impact of false hopes on long-term expectations of the foster youth population and how communication can improve long-term outcomes for children coping with such a developmentally difficult concept.

Chapman and Christ (2008) also found that youth experienced high amounts of uncertainty about future placements, which may provide a threat to the psychological permanency of these individuals.

This study also found, however, that although many attitudes did not change very

significantly, especially in circumstances where children expressed extreme views about placement, most children gradually develop more positive attitudes about remaining in care and less positive views about going home. Often, conversations with youth reflected the complexity of emotional ambivalence, as many children respect and appreciate their foster caregivers, but long for the deep emotional bond with their families of origin.

When considering child-well-being and permanency options, it is necessary to allow for flexibility in legal resolutions involving child placement. A child's best interests do not always reflect his/her wishes, but this study emphasizes a youth's real emotional need to communicate and address concerns regarding permanency outcomes (Chapman & Christ, 2008).

Conclusion

Establishing a more resolved legal situation for these youth and extending concepts of family responsibility to include lifelong commitments denote two popular permanency goals, bringing child well-being to the focus of child welfare services (Freundlich et al., 2005; Wulczyn, 2008).

It is very difficult to create accountability measures for child welfare agencies that will remain flexible enough to reflect the accommodating nature child welfare services must have if they seriously consider promoting child well-being and permanency outcomes, primarily because this population is so diverse. However, several improvements have been recorded since the adoption of ASFA. For instance, in concordance with federal standards

established by ASFA, one study found that many children did not experience more than one or two moves while reunification efforts exist (Pabustan-Claar, 2007).

Although the last two decades have seen stabilizing efforts toward child welfare practice, several suggestions must be made for the future. First, considerations regarding a formal definition of "child well-being" must be put into words. Then, psychological well-being of children should be addressed much more carefully than the current system allows. Psychological permanency should encompass the idea of children as whole individuals and specifically discuss lifelong permanency outcomes (Chapman & Christ, 2008; Freundlich et al., 2005).

Direct communication with children about psychological permanency, life-long stability, and emotional well-being should be infused in more child welfare practices (Fox et al., 2008). Critical developmental analyses should also be performed in every case, with indications of specific strategies for working with children from different age groups. Considering developmental milestones should become a focus within the child welfare system. Also, it might be helpful to implement a child risk analysis measure, highlighting developmental stages, where each child demonstrates a recorded level of competency.

By encouraging child welfare to include known developmental models, measures for psychological permanency, discussions about permanency, and promoting life-long connections, the child welfare system can help increase positive permanency outcomes and achieve better achievement goals for youth in out-of-home care.

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