

Introduction to the Issue: Children and Adolescents in the Foster Care System

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Despite concerted efforts in the early- to mid-2000s to successfully reduce the number of children placed into foster care, there has been an unsettling national trend in our child welfare system, with increasing numbers of children placed into foster or kinship care. FY16 estimates (as of 10/20/17) identify 437,465 children in the U.S. foster care system, a nine percent increase over the past 5 years (U.S. Department on Health and Human Services, Administration for Children and Families, Administration on Children Youth, and Families, Children's Bureau, 2017).

Substance use by a parent had the largest percentage increase of any circumstance reported as the reason for foster care placement. This well-recognized national epidemic of opioid use is of concern, and we are experiencing the tip of the proverbial iceberg in terms of the impact of increasing numbers of children needing placement due to multifactorial familial challenges.

Efforts to improve outcomes for children and adolescents in foster care should not be solely a child welfare system responsibility. Innovative, integrated approaches to the multiple domains of care are needed now more than ever. This includes improving our efforts in child welfare, healthcare, and the court systems, and truly developing a collaborative, inter-professional response for our clients-patients-victims who require placement into foster care.

In this special issue of the APSAC Advisor, our goal is to provide a comprehensive, inter-professional lens on the unique issues faced when a child is placed into foster care. This includes recognition of:

- The special healthcare needs and health system response in providing physical, behavioral, developmental, and dental health services;
- The need to enhance medical education training to support frontline clinicians in their efforts to provide

competent, trauma-informed care;

- The need for child welfare and legal systems to ensure best practices are utilized for optimal child protection and advocacy decision-making.

Finally, we highlight the critical need to anticipate aging out of foster care to ensure a successful transition to adulthood and independent living, given the high risk of unemployment, homelessness, and ongoing chronic medical conditions for graduates of our U.S. foster care system. We have identified multiple, known barriers to high-quality care, but we have also provided best practice solutions within the various inter-professional domains.

We encourage readers to pursue knowledge and understanding across the multi-disciplinary systems, regardless of one's own primary discipline, to be as effective as possible in supporting optimal care to these children and adolescents. It is in this context that these articles have been written, with the hope that when a child is placed into foster care, they are provided with the necessary support and interventions to foster well-being, safety, permanency, and the ability to live healthy and productive lives.

U.S. Department on Health and Human Services, Administration for Children and Families, Administration on Children Youth, and Families, Children's Bureau. (2017, October 20). *The AFCARS Report*. Retrieved from <https://www.acf.hhs.gov/sites/default/files/cb/afcarsreport24.pdf>

About the Guest Editor

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