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Foster care offers children who cannot safely remain in their own homes an alternative family placement. With a trajectory of increasing numbers of children requiring foster placement, and challenges in the recruitment and retention of quality foster homes, the current system is unable to adequately address this need.

Background

Foster care has its roots in the establishment of free homes to care for children by Charles Loring Brace, director of New York Children's Aid Society, in 1853. Massachusetts was the first U.S. state to provide board payments to foster parents, and Pennsylvania passed the first licensing law in 1885. Social service agencies began supervision of foster parents in the early 1990's (National Foster Parent Association, 2017).

Foster care is designed to be temporary, with a plan of reunification after biological parents successfully achieve goals established for the safe return of their children, upon endorsement by the applicable legal authority. If parents are unable to resume care, foster care professionals implement alternative permanency planning.

The administration of foster care programs varies

from state to state. The Child Welfare League of America authored and adopted *Standards of Excellence for Family Foster Care Services* (1995), and national accreditation bodies establish stringent standards of practice for foster care agencies that seek accreditation. States promulgate criteria for licensure or approval for agencies to provide foster care services to children within their jurisdiction.

Children enter foster care after local jurisdictional authorities conduct a child abuse investigation and determine that the child or children are unable to remain safely in their own homes. After removal, children are placed with trained and certified/licensed foster parents who are tasked with caring for them while the child welfare system aims to assist the biological family in mitigating the problems that led to their removal (Child Welfare Information Gateway, 2013).

Foster care serves children from birth until age 18, with 46 states currently allowing children to remain in placement until their 21st birthday (Child Welfare Information Gateway, 2017a; Fostering Connections to Success and Increasing Adoptions Act, 2008). The Adoption and Safe Families Act was enacted in 1997 to prevent children from languishing in foster care, setting specific limits on time in care, while mandating a permanency goal of reunification, adoption, permanent legal custodianship, or another planned permanent living arrangement (APPLA). The use of

APPLA was limited by the Preventing Sex Trafficking and Strengthening Families Act in 2014 to children over 16, and is a permanency option only when other options have been ruled out.

Current Practice

Foster or resource parents are individuals who are licensed or certified to provide care for children (National Foster Parent Association, 2017). They receive a daily stipend, varied by state and payment category, to cover the costs of caring for foster children, who also receive Medicaid to provide for medical, dental, and behavioral health needs. Foster parent requirements and guidelines vary by state and licensing agency.

Nearly half of children in out-of-home placement are in non-relative foster family homes, or general foster care, while approximately 30% reside in a kinship home (Child Welfare Information Gateway, 2017b). A relative, non-related extended family member, or anyone else with a family-like relationship can provide kinship care (Child Welfare League of America, 2013).

Attachment and evolutionary theory posit that children are likely to be treated better by kin than nonrelative caregivers, and that the existing child-caregiver relationship and implied positive attachment makes kinship placements more stable (Dubowitz, Feigelman, & Zuravin, 1993; Herring, Shook, Goodkind, & Kim, 2009; Koh, 2010). Although children in traditional foster care are more likely than those placed with kin to achieve legal permanence and receive services and financial support, children in kinship care have more stable placements and fewer behavioral problems, mental health diagnoses, and lower rates of re-abuse while in care (Winokur, Holtan, & Batchelder, 2015). Kinship care has been formally recognized as the firstline placement option for children removed from the home under Title IV-E of the Social Security Act.

Treatment, or therapeutic, foster care is out-of-home care provided by foster parents with specialized training to meet the needs of children who have more severe behavioral, psychological, or medical needs, offering more intensive services and supports, enhanced caseworker contact, and psychotherapy if needed. Treatment foster parents are provided with rigorous training and paid higher stipends than general foster care parents (Boyd, 2013). This arrangement can be more cost-effective than residential treatment for children who need a more structured and therapeutic setting. Treatment foster care has been used effectively with medically fragile children and complex, trauma-impacted youth (Child Welfare Information Gateway, 2017c).

Family Finding is the practice of engaging in intensive child-specific recruitment efforts, including work to reestablish relationships and explore ways to find a permanent family placement for children in care. (Fostering Connections to Success and Increasing Adoptions Act, 2008). Developed in 2000 by Kevin Campbell, the practice includes six components: urgency, expanded definition of permanency, effective relative search, family-driven process, development of multiple plans, and well-defined/tactical procedures (National Institute for Permanent Family Connectedness, 2017). Family Finding is considered instrumental in helping foster children reconnect with family members, and shows promise in increasing kinship placements, achieving permanency, and establishing life-long connections (Children's Defense Fund, 2010; Garwood & Williams, 2015).

Challenges in Foster Care

As of September 30, 2016, there were 437,645 children residing in foster care in the United States. These numbers have been increasing steadily over the past 5 years (U.S. Department of Health and Human Services, 2017b). Historically, there has been a shortage of foster families to meet the needs of the number of children in the system (Bass, Shields, & Behrman, 2004).

Recruitment of foster parents is an ongoing challenge for a variety of reasons. Foster parents must navigate complex systems of care and develop relationships with birth parents and professionals, often with little support (Geiger, Piel, and Julien-Chinn, 2016). Many do not remain as foster parents long-term (Gibbs & Wildfire, 2007). The longer a child is in foster care, the

less likely they are to experience placement stability, defined as two or fewer placement settings. For example, although in 2015, 85.6% of children had two or fewer placements in their first year in foster care, only 35.7% of children who had been in foster care more than two years experienced placement stability (U.S. Department of Health and Human Services, 2017a).

Placement instability and disruption increases the likelihood of behavioral and educational concerns (Geiger et al., 2016). Disruption may also negatively impact the ability to form healthy attachments, compounding the trauma already experienced as a result of previous abuse or neglect (Ramsay-Irving, 2015; Rubin et al., 2004).

Improving the Foster Care System

A multi-pronged approach for recruiting and retaining foster parents is critical to address systemic needs for a robust pool of foster homes. An effective recruitment system requires a conscious effort to promote positive messaging/branding about the role of foster parenting. Targeted recruitment toward specific professions, ethnic groups, faith-based institutions, and geographies is a promising recruitment approach. Other effective strategies include engaging children in their own permanency planning and utilizing existing foster parents as recruiters (Casey Family Programs, 2014). Examples of evidence-based and promising programs are highlighted in Casey Family Programs' 2014 report, *Effective Practices in Foster Parent Recruitment, Infrastructure, and Retention*.

Successful retention of foster parents requires the implementation of three key strategies found in many promising programs and approaches (Piescher, Schmidt, & LaLiberte, 2008):

Clarifying the Role of Foster Parents

Clearly defining the role and expectations of foster parents and providing an opportunity to reflect on their role promotes higher satisfaction with the demands of foster parenting and increases retention rates (Piescher et al., 2008). There are also positive correlations between clear expectations about fostering and positive parenting practices (Linares, Montalo, Li, & Oza, 2006).

Developing Foster Parent Skills

Providing ongoing training on living skills, conflict resolution, interpersonal interactions, and therapeutic parenting techniques promotes positive parentchild relationships. Foster parents enrolled in parenting programs display higher levels of positive communication and conflict resolution techniques, allowing them to better manage difficult behavior and ultimately increasing their retention probability (Piescher et al., 2008).

Promoting Self-Efficacy

Building social support through connections with other foster parents and support from agency workers promotes a sense of community and belief in individual capacity and increases satisfaction (Rodger, Cummings, & Leschied, 2006; Piescher et al., 2008). Group-based trainings that build behavior management skills and parenting strategies show promise in increasing foster parent retention rates (Macdonald & Turner, 2005; Pacifici, Delaney, White, Cummings, & Nelson, 2005; Turner, Macdonald, & Dennis, 2007; Piescher et al., 2008).

Moving Forward

The foster care system fails to address the current and emerging needs of children who cannot remain safely at home. Data trends point to a systemic crisis. To better provide a safe, sufficient, and appropriate environment for children in its care, the child welfare system must employ three simultaneous strategies: focusing on preventing foster placement, developing new and innovative recruiting strategies to increase the number of trained and qualified foster parents, and dedicating efforts to retain effective foster homes.

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