The Study of Long Term Foster Care
in St. Louis County, Minnesota

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Introduction

Approximately three million children are referred to the child welfare system each year due to abuse and neglect. Many of these children return home; however, some remain in care for an extended period of time and or remain in out of home care for the duration of their childhood (Lee & Lynch, 1998). In Minnesota over nine thousand children remain in out of home care from year to year (MN DHS, 2002). They reside in settings such as family foster homes, kinship foster homes, residential and group homes.

Research frequently discusses the concern of children lingering in placements outside of their homes without a plan for permanency (Barth & Berry, 1987, Goerge, 1990, Lee & Lynch, 1998, Waldfogel, 2000). In response to concerns regarding the large number of children in out of home placement, federal and state policies such as the 1997 Adoption and Safe Families Act address child welfare practices regarding these children and their families. The utmost concerns these policies attempted to address are the safety, permanency and well-being of children in out of home care.

Placement’s stability is one measure of child well being that will be examined in this study. St. Louis County Social Services Child Welfare workers expressed a desire for child welfare research in general and for “studies that provide better documentation on what is happening in the field of provision of alternative parental care…” (Rutter, 2000 pg ). In order to better understand components of permanency for children placed into long-term foster care by St. Louis County Social Services (SLCSS), this research uses a cross sectional design to describe placement histories for children in alternative
care for more than 720 days. The purpose of our study is to describe characteristics such as age, ethnicity, placement location, etc., and to delineate the placement history of children in St. Louis County who were in placement as of July 1, 2002 and who were in alternate care for at least 720 days.

It is important to study factors associated with permanency because the findings may give direction to workers who are attempting to help children achieve placement stability. An increased knowledge of placement patterns can inform social service professionals about how children are faring in long-term placement. Experienced child welfare workers often have an intuitive gut sense about their practice which research can either confirm or contradict. Research can give a higher scientific standard to child welfare practice and support or refute intuitive knowledge.

In addition, research could also indicate areas of practice and policy that need more attention. Current agency policy in St. Louis County identifies three legitimate outcomes for children who remain in alternate care. First, it emphasizes that children are to be raised in a family with their parents or relatives. Second, workers are to follow concurrent permanency planning guidelines regardless of the child’s age. Third, legal changes of custody such as guardianship, transfer of custody to a relative, or adoption are preferable to long term foster care.

Child welfare worker’s face internal pressures to limit costs by finding ways other than foster care to meet the children’s needs. According to Mr. Critchley (Personal communication, November, 2002), “financial incentives and best practices are the same. If you use best practices it saves money.”
Literature Review

Child maltreatment

In relation to the “skyrocketing” reports of child maltreatment, more children than ever before are living in out of home care (Waldfogel, 2000, Lindsey, 2001). Nation-wide there are approximately three million reports of child maltreatment each year. In St. Louis County during the year 2000, there were 225 determinations of child maltreatment (Children Services, 2002). Child maltreatment includes emotional, mental, physical and sexual abuse, and neglect and is defined in Minnesota state statute 206.007. Some children who have been abused must be removed from the care of their parents in order to assure their safety and well-being. Nine-hundred and two children from St. Louis County resided in out-of-home placements during the year 2000 (Children’s Services, 2002).

Along with the rising tide of child maltreatment, there are federal mandates requiring the use of the least restrictive settings when ever possible instead of therapeutic residential and institutional settings. In addition to being more restrictive, the cost of residential care exceeds the cost of family foster care. Residential care is a resource to be used only when less intensive and restrictive placements are not appropriate (Courtney, 2000).

Although there is growing demand for foster care, the number of such homes is dwindling (O mang & Bonk, 1999, Tatara, 1998 as cited in Testa & Rolock, 1999). In contrast to the declining number of foster homes, kinship care is be utilized more frequently to meet the need of dependent children who are unable to return to the care of
their parents. Kinship care is the placement of a child in the care of a relative as defined by the Indian Child Welfare Act.

**Pertinent legislation**

There are several legislative acts that impact out of home placements. Research shows that since the 1970’s there has been increasing attention given to the concern of children lingering in out of home care and the frequency of placement breakdowns. PL 96-272 The Adoption Assistance and Child Welfare Act of 1980 called for collecting better data on children in care as did the Adoption and Safe Families Act of 1997 (Waldfogel, 2000).

Lindsey (2001, pg.16) describes The Adoption and Safe Families Act (ASFA) of 1997 as legislation that “shortens the time for making a decision about whether a child will return home or go on to another ‘permanent’ placement.” Essentially it mandates that child welfare workers provided “timely permanence” through the use of permanency timelines that are intended to shorten time child is in out of home care and increase the number of adoptions (Altshuler & Gleeson, 1999).

ASFA also outlines certain conditions in which the state is not obligated to make reasonable efforts to reunify because of a threat to child safety (McGowan & Walsh, 2000). The law mandates a permanency hearing within 12 months after a child is in care and annually thereafter. These timelines expedite termination of parental rights (tpr) for children in care for 15 of past 22 months regardless of child’s age or special needs except when the child is in kinship care, when case plan documents a compelling reason why termination is not in child’s best interest, and when the state has not made reasonable
efforts to safely reunify the family. Concurrent planning, while working toward reunification, simultaneously plans for termination of parental rights (tpr) and adoption if reunification efforts do not work. When a youth cannot go home, the child welfare worker must make reasonable efforts to create an alternate permanency plan which is generally adoption (McGowan & Walsh, 2000).

The Adoption Assistance and Child Welfare Act of 1980 (P.L.96-272) is the foundational legislative basis for child welfare policy. The primary goal of the law is the provision of a permanent placement plan for children in foster care, or at risk for out of home placement, through either reunification with their own parents or placement with another family (Lewis, Giovannonie & Leake, 1997). The law requires the implementation of a permanent placement plan for all children within 18 months after entry into care.

Fenster (1997) described permanency planning as a mandate for agencies to “make it a priority to find each child a permanent living situation. The intention was to decrease the number of children lingering in foster care for long and indefinite period, elevate their legal status through permanent arrangements, and give them the opportunity to attach to a committed caregiver, be it the natural parent or a substitute” Fenster (1997 pg.119). Fenster went on to say that “PL 96-272 also mandated that agencies offer a range of services, so that foster care would be only one, and hopefully, the last resort for dependent children. Thus, for children whose parents retained custody, family support services were created or expanded, in the form of Family Preservation programs (intended to prevent the removal of the child form the home) and Family Reunification programs (intended to expedite and ease the return of the placed child back into the
For children whose parents had either died, abandoned them, or had their rights terminated, adoption would be more aggressively pursued by the agency than it had been in the past” (p.120). Placements were to be made in the least restrictive setting, near the parents and in the best interest of the child. The law emphasizes the goal of returning children to birth or extended families as a first step. If placement with the child’s family is not possible then adoption would be considered as a means of providing a permanent home. The least favorable option is long term foster care. The Family Preservation and Support Services (FPSS) Act [P.L. 103-66] was to insure reasonable effort to preserve and reunify families. It created a funding stream for family preservation services such as home based treatment programs to support families in crisis and families at high risk.

Reasons for Removal

Although this study does not address the specific reasons for the removal of children from the care of their parents, it can be helpful to understand the literature that identifies the primary reasons why youth enter the child welfare system. Across the nation, research has consistently identified neglect as the primary reason for out-of-home placements (Grogan-Kaylor, 2000). Similarly, in Minnesota during the year of 2001 the majority of children entered out of home care due to neglect. Other reasons for removal of children from their homes range from physical abuse, parental drug and/or alcohol abuse, abandonment, parental incarceration, child’s behavior, parental inability to cope, sexual abuse, inadequate housing and a variety of other less common reasons (Children’s Services, 2002). Physical abuse and parental drug or alcohol abuse were the most
common reasons for removing children from their families. Sexual abuse and inadequate housing were less common reasons for removal of children.

Additional studies specific to long term foster care identify neglect, parental substance abuse/dependency, the child’s behavior, homelessness, and parental mental illness as major contributing factors to child placements in out of home care (Bishop et. al, 2000; Johnson Bonecutter, F. & Gleeson, J. P., 1997; Goerge, 1990, Drapearu, S., Sikmard, M., Beaudry, M. & Charbonnearu, C., 2000; Ruff Johnson, P., Yoken, C., & Voss, R., 1995; personal communication with Ray Crichley, 2002). AIDS, violence and poverty have also been cited as contributing factors to the increase in out of home placements (Scannapieco & Hegar, 1995, Anderson, 1990 as cited in Danzy & Jackson, 1997). Children and families are experiencing more and more complex needs due to drug use and abuse. Mother’s use of drugs during pregnancy can have lasting effect on their children’s behavioral, mental and physical well-being (Omang & Bonk, 1999). The removal of children from their homes result from a combination of two or more of the above factors. In some cases the issues are chronic and prevent reunification with the child’s primary caregiver.

**Various Placement options**

Some findings of child maltreatment lead to the removal of children from the parent’s care to assure the child’s safety and well-being. Nine hundred-two children were in out of home care in St. Louis county during the year 2000 (Children Services, 2002). When removal is necessary, there are several care options, including emergency shelters, foster homes (with relatives or non kin), residential treatment centers, group homes and
correctional facilities. Emergency shelter placements and psychiatric hospitalizations are short term crisis placements and thus are not included in this study. Foster home placements with relatives are often considered the least restrictive setting next to residing in the child’s original home. Foster homes offer a family-like setting and may be licensed by governmental organizations such as counties, tribes, reservations or nongovernmental private agencies.

Group homes provide more structure for children who enter them through court ordered “Child in Need of Protection Services” (CHIPS) or delinquency court orders. Group homes offer more structure than foster homes but less structure that residential treatment centers. Residential treatment centers provide children with a structured and intensive treatment setting where they can receive services for serious emotional disturbances or chemical dependency. Local examples of these treatment centers include St. Cloud Children’s home, Gillfilin, and Northwoods Children’s Home. Correctional facilities are licensed by the Department of Corrections and they do not include detention centers where children are in state custody. Thistledew, Woodland Hills, the Messabi Academy, and the Leo Hoffman Center are examples of correctional settings in Duluth Minnesota.

The majority of children who enter out of home care are reunited with their birth parents or relatives and experience very little if any placement disruption prior to returning to family (DHS, 2002). In Minnesota, most children go home within the first several months, and eventually as many as two-thirds of children in foster care return to their families (Pecora, 1992). The remaining children’s permanency plans involve long term foster care. Long term foster care is seldom an acceptable permanency option in
most child welfare agencies. There are exceptions where it is sanctioned for children with special needs (Fenster, 1997).

The review of literature provided no universal definition of long term foster care, rather it revealed “widespread confusion” about its meaning (Triseliotis 2002). For purposes of this study long term foster care will be defined as an out of home placement made by social services or delinquency court lasting for at least 3 years (1080 days) of continuous care. Long term foster care is an option only when reunification or adoption are not possible and it is intended as one placement for the duration of the child’s youth (Barth & Beery, 1987). Three years in care was used as a time line because it is a turning point. After three years in care it becomes more likely that children will experience more placement changes. After the three year point, the probability of placement change remains constant at an elevated level (Pardeck, 1984).

Foster care research identifies numerous detrimental effects from a lack of placement stability. Children who must leave their homes indicate that the most troublesome factors include missing their families, the disruption of friendships and difficulties created by changing schools and neighborhoods (Ruff Johnson, Yoken, & Voss). These losses can be compounded by multiple placements. Granted, there are times when it is in the child’s best interest that a placement be altered (Fenster, 1997). Research done by the federal Children’s Bureau of Health and Human Services (HHS) (Waldfogel, 2000) and Pardeck (1984), both define placement stability as no more than two different placements settings for the duration of their time children are in out of home care.
Movements

Once a child is placed in one of the various care options, they can experience changes in care providers. Point-in-time cross sectional studies are common in foster care research. The limitations of such studies are outlined in a variety of research journals. The main function of event history studies is to delineate the historical sequence of events through the child’s foster care journey so that conclusions can be drawn about the characteristics and experiences of the group. Such studies “provide a useful way to conceptualize and measure the typical experience of children admitted to foster care placement duration, for example, is measured as the time between moving into and then out of placement. The mean number of events can be used to characterize the average number of movements or status changes…” (Wulczyn, 1996 p.321). Outcomes of event history studies generally refer to child safety, placement stability and child well being. Trauma caused by abuse and neglect can be compounded by subsequent losses due to placement instability; thus, placement stability enhances child well-being (George, 1990).

Mass and Engler’s (1959) classic study on children in foster care identified concerns of fluctuating placements by describing changes in placements, number of placements, and shifts in placements. Wulczyn (1996) defines the movements as “status changes” which include entry into foster care and changes between foster homes and the child’s exit from foster care. These changes may be in response to the child and/or family needs, administrative mandates, and policy standards (Wulczyn, 1996). Research shows that “More than 87% of children in out of home care in Minnesota during 2001 had been in only one setting” DHS Newsroom, (2002, pg.). One-fifth of children in care
remained in the same placement through out the nearly three year period of time examined by the Testa and Rolock (1999) study. Twenty-six to thirty percent of children placed in various foster care settings changed homes at least once during the study “raising the question of how truly stable even HMR [relative care] and PFC [professional foster care] homes are” (p.118) Staff and Fein (1995) stated that “Various reports document placement change rates from 40 to 60%” (p. 380).

In Minnesota during the year 2000, over half of the children in placement experienced only one placement setting while in out of home care during that year. Eighteen percent experienced two or more moves while in care that year (Children’s Services, 2002). These percentages represent 21,610 placements involving 18,451 children who were in care for at least one day in 2000. In St. Louis county, there were 902 different children who were in 1,094 out of home care placements with a combined total of 1,381 moves in the year 2000 (Children Services, 2002).

Adoption seems to be the most stable of all placement settings (Barth & Berry, 1987). A study using data from 1977 found that 22 % of foster children experienced three or more placements during a median length of 2.5 years in foster care (Pardeck, 1984). A more recent article by Newton, Litrewnnik, and Landsverk (2000) cites studies where 48 to 56% of children had three or more placements while in care for two to four years respectively. Several other studies cited in the Newton, Litrewnnik, and Landsverk (2000) article identified 14% to 18% of children having five or more moves. Pardeck (1984) identified several factors associated with frequent placement changes. He found that Caucasian children had less placement stability than did Afro-American foster children. Older children in care for at least three years tend to move to different
placements more frequently than do younger children. Although it is beyond the scope of this research study, there is research about other factors related to placement instability.

A number of studies, including the research by Pardeck (1984) and studies cited in Newton, Linthrownik, and Landsverk (2000), identified behavioral and emotional problems (externalized behavior symptomology such as disruptive behavior, aggressive and dangerous behaviors) as positively associated with multiple placements. Children who exhibit disruptive, aggressive and dangerous behaviors are likely to experience multiple placement disruptions (Newton, P., 2000). Certainly there are other less powerful predictors of other factors both related and unrelated to the child that contribute to placement disruption. An example would be “When a child has behavioral problems before a foster placement, the child is more subject to moves and will have more emotional problems when he or she reaches adulthood” (Tremblay, 1999 p.86).

**Sibling placements**

Placement and the movements between placements impact the child, his/her parents and siblings as well as other relatives so it is important to track outcomes for more than the child in placement. Accordingly, Waldfogel (2000) suggest that outcomes should be viewed in light of a family context. More specifically Waldfogel states “In this regard, it would be helpful to track some outcomes for siblings and sibling groups, as well as individual children” (p.727). According to Ward, best practice states that when children must be removed from parents, family integrity should be upheld by placing
sibling groups together with few exceptions (Ward, 1984 as cited in Testa and Rolock, 1999).

Research concerning outcomes for siblings being placed together or separate is very limited. Grogan-Kaylor (2000) wrote that “While there is general agreement on the importance of placing siblings together into foster care, there is relatively little empirical literature within the child welfare research literature on the degree to which siblings are actually placed together. The lack of attention devoted to this issue within the empirical child welfare research literature is surprising” (p.112). He goes on to comment that “even less attention has been devoted to a consideration of how placement with siblings might affect children’s pathways through foster care once a foster child has been placed” (p.113). His research found that children with siblings in foster care “are much less likely to be reunified than children who do not have siblings in foster care” (p.125).

The results are difficult to compare as the various studies view sibling groups differently. Testa and Rolock (1999) found that less than one-fourth (24%) of sibling groups of three were placed together in regular foster care, whereas over half (56%) stayed together when placed with a relative. The highest rates of intactness for sibling groups of 3-5 children were achieved by programs specifically designed for sibling care followed by relative care. Staff and Fein’s (1995) study found that 71-83% of children were placed together with siblings in comparison to Zimmerman’s finding of 77% and Hegar’s finding that 67% of siblings were placed together. Grogan-Kaylor’s (2000) research found a much smaller percentage (35%) of siblings being in placement together. There are similar results concerning intact family placements where all the siblings remained together throughout placement. Such was the case for 25% of families in Staff
and Fein’s (1992) study and 21% of the families in the study by Aldridge and Cautley (Staff & Fein, 1992).

Staff and Fein (1992) found that white sibling pairs shared placements far less often than siblings of other races. Generally younger children are more frequently placed together than older children (Staff & Fein, 1992). The various studies yield mixed results concerning the frequency of pairs of boys and pairs of girl siblings being placed together.

Several studies found that “siblings who are placed together have more stability than children who are placed separately (Aldridge & Cautely, 1976; Staff & Fein, 1992; Thorpe & Stewart, 1992. p. 268). Split siblings experience greater instability than do siblings who remain together (Drapeau, Simard, Beadry & Charbonneau, 2002). The majority of sibling groups living together reside with a foster family in contrast to those who are separated and live in other placement settings (Drapeau, et. al., 2002). For sibling groups of three, 24% were placed together in regular foster care cases and as high as 56% of sibling groups of three remained together in the care of a relative (Testa & Rolock, 1999).

According to Fenster (1997), a child’s average length of time in foster care is beginning to exceed two years. Mass and Engler’s 1959 cross-sectional study found that children were likely to remain in care an average of three years and that after 18 months in care, his/her chances of returning home were greatly diminished (Wladfogel, 2000). Children who were removed due to neglect and those placed into kinship foster care tend to remain in care longer than children removed for other forms of abuse and placed into other settings (Grogan-Kayor, 2000).
Demographics

St. Louis County is located in the northeastern region of Minnesota along Lake Superior. Part of the Fond du Lac Indian Reservation is located in the county. Although the county ranks close to average for many indicators of child well-being, it ranks higher than average for abuse/neglect and far higher than average for the number of out-of-home placements. Thirteen percent of the almost 45,000 children in Minnesota live in poverty. Within the state, 90% are Caucasian, 3.3% American Indian, 3% two or more races, 1.5% Latino/Hispanic, 1% are African American or Asian and less than one percent were of another race (Minnesota, 2002).

Number of children in out of home care

The most current data available shows that nearly 18,500 (Children’s Services, 2002) of the 556,000 children nation wide living in out of home care reside in Minnesota (AFCARS, 2002). More than 7,000 Minnesota children remain in out of home care from year to year (Children’s Services, 2002). Just over half of these children in care at that time were in out of home placement for less than two years. More than one fourth of the children living in the state were in care for three or more years.

Nationally, the majority 47% of children were residing in non-relative foster homes followed by 25% living with relatives, 10% living in institutions, and 8% living in group homes. Just fewer than ten percent of these children had a case goal of remaining in long term foster care.
Gender and race

Nationally there were slightly more males (52%) than females (48%) in foster care (AFCARS, 2002). Similarly, in Minnesota, there are slightly more boys (56%) than girls (44%) in out of home care (DHS, 2002). Most children in Foster Care were between the ages of 11-15 years old (29%) followed by 25% ages 1-5 and 6-10 year olds (AFCARS, 2002). Across the nation and in this state, children of color are over-represented in out of home care as compared to the number of children of color in the general population (Omang & Bonk, 1999, DHS, 2002, George et al., 1995 as cited in Courtney, 2000). This is especially true for African American (19%) and American Indian (11%) children (Children’s Services, 2002).

Children in out of home care are distinct from their peers in several ways. To begin with, children in out of home care predominately come from families living below the poverty line (Berrick et al. 1998 as cited in Katz, 2001). This is not surprising when considering the strong empirical relationship between poverty and child neglect with neglect being the most common reason for out of home placement. Of these children residing in Minnesota, 13-18 year olds are over-represented in the number of placements compared to the general population of children in this age group.

Age of child at entry into foster care

Children across the nation who entered foster care for the year 2000 had a median age of 8.6 years with a mean of 8.7 years (AFCARS, 2002). According to the Minnesota Department of Human Services (2002), 58% of youth entering care were 13
and older, whereas 19% were between the ages of 8 and 12 years old. The remaining 23% of the children entered care before their eighth birthday.

It is difficult to compare studies concerning age at entry because the age groups of children across various studies are not uniform in their categorization. One study by Grogan-Kaylor used similar age categories as the Minnesota DHS. The age of entry to foster care was similar for only the 8-12 year olds; 17.4% and 19% respectively. In Minnesota the greatest number of children enter foster care at age 13 or older in comparison to the smallest percent (8.7) of children in the same age category who enter care in Gorgan-Kaylor’s study. Likewise there is an inverse relationship for the age eight and under age category. In Minnesota children who enter care in this age group represent 23% of children as opposed to 74% of children in the California study.

**Place of residence**

Seventy-two percent of children in Minnesota reside in a family setting such as (preadoptive homes and foster family homes with relatives and non-relatives (Children’s Services, 2002). Nearly 18% lived in residential treatment or institutional settings, just under 10% live in group homes and less than one half of one percent resided in other places such as supervised living and unknown settings (Children’s Services, 2002). These state percentages are very similar to the national statistics in the AFCARS Report.

**Kinship care**

Kinship care can be defined as “formal official placement of children with relatives” (Rutter, 2000 p. 695). For the purpose of this study a relative is defined as a person who meets the Minnesota Family Investment Program (MFIP) definition pertaining to those related by blood or mirage regardless of the degree. The practice
definition of a relative in St. Louis County is a person identified by the family as a relative. (Personal Communication with Ray Critchley, 2002). The definition differs when the child is American Indian. A relative of an American Indian child is anyone who has or had a relationship with the child, child’s family, tribe or reservation (Crichtley, 2002).

There are different policies concerning the use of kinship foster care. Some agencies place the child in care of relatives without establishing court jurisdiction, or they can be placed through a court order into kinship foster care (Courtney, 2000). Research by Courtney & Needell (1997 as cited in Grogan-Kaylor, 2000) found that kinship care is associated with fewer placements for children in kinship than those not cared for by relatives. There is evidence that the” The home of a relative is a placement of great stability…” (Goerge, 1990, p. 440). In addition to his own research, Grogan-Kaylor cited four studies with event history methodologies that found a decreased rate of reunification for children placed into kinship foster care. In Testa & Rolock’s (1999) study, kinship foster care provided the best permanency rate with subsidized guardianships that boost the permanency ranking of kinship care over regular foster care.

Significance of Topic to the Social Work Profession

This study will add to the very limited body of research concerning placement patterns of siblings. The research findings will serve as a barometer to measure how things are going for children in placement in regards to stability, placement with siblings, where children are located, and age they entered care. There is a Federal mandate to collect outcome data on children within the system. The 1997 Adoption and Safe
Families Act required outcome measures concerning safety, permanency and child well being for children in the child welfare system.

This study focuses on the issue of permanency. Data gathered will help to better understand the factors associated with permanency for children placed in long term foster care by St. Louis County Social Services (SLCSS). The research uses a cross sectional design to describe placement histories for children in alternative care for more than 720 days. The study also describes characteristics such as age, gender, ethnicity and placement location. An increased knowledge of placement patterns can also inform social service professionals about the benefits or discrepancies involved in long term placements. In addition, the research could also indicate areas of practice and policy that need more attention. Regardless of statistical significance confirming or contradicting the practice hunches, this research will provide information about the status of children in long-term foster care and is more likely to influence agency policies and procedures.

**Research Questions**

1. What are the placement patterns of children placed in long-term foster care in St. Louis County prior to July 1, 2002? (e.g., Average length of time in care, siblings being placed together/apart, and average number of placement disruptions)

2. What are the demographic characteristics of children in long-term placements? (e.g., Gender, age, race, and placement type)
3. What factors are related to placement stability? (e.g., Age, race, kinship care, siblings, number of placements)

Methods

Population and Sample
The Population of this research was children in long-term foster care. Our sample included all children in St. Louis County who were in placement prior to July 1, 2002 and for at least 720 days. This included 161 children residing in foster care (including kinship care settings), group homes, residential and correctional facilities. It excludes mental health institutions and time in shelter placements.

Research Design
This descriptive research study used secondary data acquired from St. Louis County’s computerized social service files. It is a truncated sample, meaning that it does not reflect the complete case histories for each individual child as some remain in placement beyond the research period ending after July 1, 2002.

Operational Definitions
Concepts that will be measured include the following:

*Long Term Foster Care*, which will be defined as children in (continuous) placement for at least 720 days.

*Receiving date* is the date the child entered out of home care.
**Continuous placement** is defined as placement lasting more than two days and excludes hospitalizations, and home visits.

**Permanency** is referred to a placement that is intended but not guaranteed to last forever.

**Reunification** is when a child returns to their home with the intention of remaining in the care of immediate family or parents.

**Age of child** is the child’s age at the time of entry into foster care.

**Five age categories**: less than one year old; between one and three years old; between four and seven; between 8 and 12 years old and over twelve years of age.

**Siblings** are a group of two or more children who are related by blood or marriage. This includes stepchildren and adopted children.

**Sibling placement** is when two or more siblings are in care together at the same residence. It is possible to have more than one sibling placement per family (for example two children residing in one home and the remaining siblings placed together in a second home).

**Intact sibling placement** is defined as all children from the same family residing in out of home care are living together in one setting.

**Placement stability** is defined as two or fewer placements for the duration of time in out of home care.

**A year** will be defined as 360 days.

**Spell** is defined as the number the number of times a child returns home to their parents between other placements.

**Race**, social service records indicate a number of client’s self-identified racial and ethnic categories including Caucasian, Native American, Afro-American, Asian and Unknown.

**Vendor** is the type of licensed facility where a child is placed. (Placements were coded as:

**Foster home**: A household, which offers a family, like setting where a neglected or delinquent child is placed for care. It may be licensed by government organizations such as counties, tribes, reservations, or non-governmental private agencies.

**Group home**: Homes that provide more structure for children who enter them through court orders, for children in need of protection services.
Shelter: Short term crisis placements.

Corrections facility: Facility that is licensed by the Department of Corrections and they do not include detention centers where children are in state custody.

Residential treatment center: Center, which provides children with a structured and intensive treatment setting where children can receive services for serious emotional disturbances or chemical dependency.


Data Collection Plan

Secondary data from St. Louis County Social Services files was used after being extracted by Ray Critchley (Supervisor for Services to Families and Children). The data was compiled in a spreadsheet, including information on all variables defined above related to the three research questions (placement patterns, demographics and factors related to stability). Under placement patterns, data fields will include: vendor name, vendor type, family identification number, client identification number. Under demographics, data fields will include: race, gender, date of birth. Factors related to stability, data fields will include: relative placement, date in, date out and days of care. Data includes 161 records for children in the care of St. Louis County as of July 1, 2002, which were in care for at least 720 days.

Data Analysis

Data was entered into SPSS and was coded as necessary. Descriptive statistics were used to calculate simple frequency distribution, percentages and measures of central tendency of the quantitative data. Chi square procedures and t-tests were used to analyze data concerning factors related to stability.
RESULTS

Placement Patterns

The first question asked in this study was about the nature and placement patterns of children placed in long-term foster care in St. Louis County prior to July 1, 2002. Factors related to this question include the average length of time children are in out of home care, the number of sibling, and information about the frequency of sibling being placed together or apart while residing in out of home care. It also addresses the average number of placements and spells.

The average number of days that a child in this study resided in out of home care was 2738 days or 7.6 years. Each of the 161 children resided in a foster care type setting for periods of time ranging from just under two years (670 days) to nearly his/her entire childhood (6327 days or almost 18 years).

<table>
<thead>
<tr>
<th>Type of Placement (least restrictive to most restrictive)</th>
<th>Number of unique children placed in each setting</th>
<th>Percent of children placed in setting type</th>
<th>Average number days of care in setting</th>
<th>Range of days in placement setting</th>
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<td>Foster Care</td>
<td>161</td>
<td>100%</td>
<td>2655</td>
<td>670-6327</td>
</tr>
<tr>
<td>Group Home</td>
<td>9</td>
<td>6%</td>
<td>301</td>
<td>5-743</td>
</tr>
<tr>
<td>Residential</td>
<td>25</td>
<td>16%</td>
<td>326</td>
<td>6-1084</td>
</tr>
<tr>
<td>Corrections</td>
<td>6</td>
<td>4%</td>
<td>119</td>
<td>14-341</td>
</tr>
</tbody>
</table>
Table one above shows that by far, the greatest mean number of days (2655 days or 7.4 years) that children resided in any setting was in foster care. The total days of care were less for children residing in other types of settings. Nine youth (6%) spent anywhere from 5-743 days of care in a group home setting. A greater number (25) and percentage (16%) of children in out of home care resided in a residential setting for a range of 6-1084 days. The mean number of days of care in residential (326 days) and group home (301 days) settings were approximately the same. Placements in correctional facilities were the least common involving only 6 (4%) of the 161 children in the study. These children resided in correctional facilities for the fewest mean number of days (119) ranging from 14 to 341 days. See table 1 above.

Eighty-nine of the children (55%) of the children who lived in long term care did not have any siblings in placement. The remaining 72 children (45%) had one to four siblings in placement. Of these 72 sibling cases, sibling pairs were the most common as indicated in table 2 shown below.

<table>
<thead>
<tr>
<th>Number of siblings</th>
<th>Number of sibling groups</th>
<th>Frequency Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>89</td>
<td>55%</td>
</tr>
<tr>
<td>1</td>
<td>28</td>
<td>39%</td>
</tr>
<tr>
<td>2</td>
<td>21</td>
<td>29%</td>
</tr>
<tr>
<td>3</td>
<td>8</td>
<td>11%</td>
</tr>
<tr>
<td>4</td>
<td>15</td>
<td>21%</td>
</tr>
</tbody>
</table>

Sibling pairs were most frequently of Caucasian ethnicity. Native American families tended to have larger sibling groups in long term placements when compared with other
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ethnic groups. In this study, there were no African American or Asian siblings placed in long term foster care.

Table 3 shows that 66 (92%) of siblings in this study were placed together with one or more siblings for at least a portion of their time in out of home care. Forty-one youth (57%) were placed apart from one or more sibling(s) for some or all of the days that they were in out of home care. The mean number of days (1196) that children were placed apart was about half as many days (2397) as children were placed together with siblings. See table 3 below.

<table>
<thead>
<tr>
<th>Location</th>
<th>Frequency</th>
<th>Percentage of children with siblings</th>
<th>Percentage of all children</th>
<th>Mean Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Placed together</td>
<td>66</td>
<td>92%</td>
<td>41%</td>
<td>2397</td>
</tr>
<tr>
<td>Placed apart</td>
<td>41</td>
<td>57%</td>
<td>25%</td>
<td>1196</td>
</tr>
</tbody>
</table>

Children in this study experienced anywhere from 1 to 20 different placements while living in out of home care. The mean number of placements was about 5 (4.76). Twenty-two (14%) of the children in care for two years or more had only one placement. Fifty-one (32%) of the children experienced one or two placements, whereas 88 (55%) of the children had up to four placements. One hundred twenty-three children (66%) experienced six or fewer placements in the study. The remaining 38 children (24%) had a range of 7 to 20 different placements. The majority (95%) of the children (153) in long term care had 12 or fewer placements. Eight of the 161 youth (5%) experienced the greatest number of placements ranging from 12 to 20 different placements.
Some of the children in this study returned home and then reentered long term care at a later time. There were also youth who progressed through this cycle several times. The average number of spells was 2.35 and the range was from 1 to 10. Seventy children (44%) experienced only one spell, whereas 43 of the youth (70%) had one or two spells. The vast majority (95%) of the youth (153) had five or fewer spells, whereas the remaining eight children (5%) experienced anywhere from 6 to 10 different spells. Table 4 shows the various numbers of placements and spells for children in each quartile.

<table>
<thead>
<tr>
<th>Percentile</th>
<th>Number of placements</th>
<th>Number of spells</th>
</tr>
</thead>
<tbody>
<tr>
<td>25%</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>50%</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>75%</td>
<td>6</td>
<td>3</td>
</tr>
</tbody>
</table>

**Characteristics of Children in This Study**

The second research question two asked about the demographic characteristics of children living in long-term placements. It addresses the children’s gender, age, ethnic background and placement setting for St. Louis County children in out of home care for more than two years as of July 1, 2002. The sample of children in this study who resided in long term foster care for two or more years included 161 children. There were 92 males (57%) and 69 females (43%) in long term foster care.
The children in this study entered long term care anytime from birth to 17.5 years of age. The mean age at the time of placement was 5.8 years old. Forty-two children under the age of two entered care with the greatest frequency (26%). Eighty children (50%) entered long-term care by his/her fifth birthday. One hundred twenty (75%) of the children had entered care either before or during their eighth year. Sixteen children (10%) were between 8 and 12 years of age when they were first placed into long-term care. The twelve children placed at the age of 13 and older accounted for only 7% of the children, meaning the majority of children are younger rather than older when entering care. See table 5 below.

<table>
<thead>
<tr>
<th>Age at entry</th>
<th>Frequency</th>
<th>Percent of total</th>
<th>Cumulative Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 1.9</td>
<td>42</td>
<td>26%</td>
<td>26%</td>
</tr>
<tr>
<td>2.0 to 4.9</td>
<td>37</td>
<td>23%</td>
<td>49.7%</td>
</tr>
<tr>
<td>5.0 to 8.9</td>
<td>41</td>
<td>25%</td>
<td>74.5%</td>
</tr>
<tr>
<td>9.0 to 12.9</td>
<td>29</td>
<td>18%</td>
<td>92.5%</td>
</tr>
<tr>
<td>13.0 to 17.5</td>
<td>12</td>
<td>7%</td>
<td>100%</td>
</tr>
</tbody>
</table>
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Table 6 shows the breakdown of the ethnic background of children placed in long-term foster care as of July 1, 2002. Ninety-five children (59%) in the study were Caucasian, 61 (38%) American Indian, 3 (2%) African American, and one (0.6%) each was Asian and an unknown ethnicity.

<table>
<thead>
<tr>
<th>Ethnic background of Children in long-term placement</th>
<th>Number of children</th>
<th>Percentage of total population placed in long-term care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasian</td>
<td>95</td>
<td>59%</td>
</tr>
<tr>
<td>Native American</td>
<td>61</td>
<td>38%</td>
</tr>
<tr>
<td>African American</td>
<td>3</td>
<td>2%</td>
</tr>
<tr>
<td>Asian</td>
<td>1</td>
<td>0.6%</td>
</tr>
<tr>
<td>Unknown</td>
<td>1</td>
<td>0.6%</td>
</tr>
</tbody>
</table>

The demographic data in table 6 shows that Caucasian children make up the largest percentage of long term care placements. This is not surprising as they are also the largest population of children in St. Louis County. There is a significantly higher percentage of Native American Children in placement for more than two years considering their low percentage of the child population in St. Louis County. African Americans and Asians are the smallest populations in St. Louis County, and they represent the smallest percentages of long-term placements.
Forty-three children (27%) lived with relatives at some time during their stay in out of home care. Of the children who lived with relatives, 41 were Native American and the remaining two were Caucasian. They lived with relatives for a range of 111 to 4110 days with a mean of 1505 days. The youth lived with 1 to 5 different relatives throughout their stay in out of home care. On average they lived in two (1.93) different relative care settings. See table 7 below.

<table>
<thead>
<tr>
<th>Number of placements</th>
<th>Frequency</th>
<th>Percentage</th>
<th>Cumulative percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>18</td>
<td>42%</td>
<td>42%</td>
</tr>
<tr>
<td>2</td>
<td>15</td>
<td>35%</td>
<td>77%</td>
</tr>
<tr>
<td>3</td>
<td>6</td>
<td>14%</td>
<td>91%</td>
</tr>
<tr>
<td>4</td>
<td>3</td>
<td>7%</td>
<td>98%</td>
</tr>
<tr>
<td>5</td>
<td>1</td>
<td>2%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Children spent differing amounts of time in out of home care across the various setting types as indicated in table 1. All of children in the study spent some or all of their days of care in a foster home. Twenty-five children (16%) resided in a residential setting, nine children (6%) were in a group home, and six children (4%) were in a correctional setting (see Figure 2 below).

**Figure 2**

Number of Children in Each Setting
Twenty-five Native American children (41%) lived with a relative for the majority of the time they resided in placement, where as only two (2%) Caucasian children lived with relatives for the majority of time in care. These numbers represent a statistically significant difference ($x^2 = 39.23; \text{df} = 1, \ p < .001$) confirming that American Indian children spent more time in the care of relatives than did Caucasian youth who were more likely to be placed in non-relative foster homes.

**Factors Related to Stability**

Placement stability is defined as two or fewer placements for the duration of time in out of home care. There were a total of 47 children (29%) who obtained placement stability while residing in out of home care. Two factors were statistically significant in their relationship to stability. First, it was found that the age of a child when he/she entered care had a statistically significant relationship with stability ($t = 17.47, \text{df} = 1; \ p < .001$). The age of the child at placement and placement stability were inversely related; meaning that the younger a child was when entering care, the more total placements he/she experienced while living in out of home care. Secondly, this study showed that stability and placement with relatives or non-kin was statistically significant ($x^2 = 4.262; \text{df} = 1, \ p = .039$). Forty-seven children (35%) who spent the majority of the days in care with non-kin achieved placement stability. Eighty-seven (65%) who lived with providers other than family had unstable placements. Four children (15%) living with relatives for the majority of time in out of home care obtained placement stability, where as 23 (85%) children who lived with family most of the time lacked stability. See table 8 below.
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Table 8
Placement Stability/instability for Children Placed with Relatives/non-relatives for the Majority of Days in Out-of-home Care

<table>
<thead>
<tr>
<th>Placement setting</th>
<th>Frequency of stable placement</th>
<th>Percentage of total</th>
<th>Frequency of unstable placements</th>
<th>Percentage of total</th>
</tr>
</thead>
<tbody>
<tr>
<td>With non-relative for the majority of days</td>
<td>47</td>
<td>35%</td>
<td>87</td>
<td>65%</td>
</tr>
<tr>
<td>With relative for the majority of days</td>
<td>4</td>
<td>15%</td>
<td>23</td>
<td>85%</td>
</tr>
</tbody>
</table>

Factors statistically unrelated to placement stability for the children in this study include gender, ethnicity, and placement with/without siblings. Twenty-four females (35%) achieved placement stability. Similarly, twenty-seven males (30%) had placement stability. Although ethnicity was not related to stability, thirteen Native American children (41%) and 34 of the Caucasian children (37%) in the study were in stable placements. See table 9 below.

Table 9
Placement Stability/instability for Children based on Ethnicity

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Frequency of stability</th>
<th>Percentage of all children</th>
<th>Frequency of instability</th>
<th>Percentage of all children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasian</td>
<td>34</td>
<td>36%</td>
<td>61</td>
<td>64%</td>
</tr>
<tr>
<td>Native American</td>
<td>13</td>
<td>21%</td>
<td>48</td>
<td>79%</td>
</tr>
</tbody>
</table>

Thirty-three children (35%) who were placed apart from siblings during some or all of the time in out of home care reached stability. Sixty-two children (65%) placed apart did not achieve placement stability. There was not a statistically significant difference in stability for siblings placed together for some or all of the days in out of
home care. There were 18 children (27%) who were placed with siblings for some or all of the time out of their parent’s home who obtained placement stability. Forty-eight youth (73%) who were placed together resided in three or more placements. Factors such as placement with or without siblings, the child’s gender or ethnic background did not significantly affect stability.

Table 10
Placement Stability/instability for Children Based on Ethnicity and Majority of Days in Care in Relative/non-relative Setting

<table>
<thead>
<tr>
<th>Ethnicity and placement setting</th>
<th>Frequency of Stable placements</th>
<th>Percentage of total within ethnic group</th>
<th>Frequency of unstable placements</th>
<th>Percentage of total within ethnic group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasians with relatives</td>
<td>0</td>
<td>0%</td>
<td>2</td>
<td>100%</td>
</tr>
<tr>
<td>Caucasians with non-relatives</td>
<td>34</td>
<td>37%</td>
<td>59</td>
<td>63%</td>
</tr>
<tr>
<td>Native Americans with relatives</td>
<td>4</td>
<td>16%</td>
<td>21</td>
<td>84%</td>
</tr>
<tr>
<td>Native Americans with non-relatives</td>
<td>9</td>
<td>25%</td>
<td>27</td>
<td>75%</td>
</tr>
</tbody>
</table>

Table 10 shows that thirty-four Caucasian children (37%) and 9 Native American children (25%) who were placed with non-relatives for the majority of the time reached placement stability. Four Native American children (16%) who were placed with kin the majority of time obtained stability.
Discussion

Interpretation of Results/Implications for Practice

There were several interesting findings concerning question one which addressed placement patterns. Youth generally entered care before the age of nine and spent about eight years in long term care. When looking at these numbers, one can see that some children spend almost all of their childhood in out of home care. Nearly half of the children in placement also had one or more siblings in out of home care. Surprisingly this study found there were many siblings who were placed together. Also, sibling groups of more than two children in out of home care were predominantly from Native American families.

The results from this study indicated that 92% of children with siblings in out of home placement were together with one or more siblings at some point during their time in out of home care. The frequency of sibling placements in this study resulted in more than Zimmerman’s (1982 as cited in Staff & Fein, 1999) findings of 77% sibling placements and Staff and Fein’s findings (1992) ranged between 71-83%. Our results indicated much more frequent sibling placements as compared to Grogan-Kaylor’s (2000) results of 35% sibling placements.

Question two examined demographics such as gender, age, race and placement type. Gender findings were very similar to state and national statistics. In this study and those mentioned in the literature review, there were slightly more males, although not statistically significant, than females residing in long term foster care.

This study found that the mean age of children entering long term care was 5.8 years of age. This number is less than the national average of 8.7 years of age (AFCARS,
It is possible that one reason for the difference is that this study looked specifically at children in continuous care for three or more years as opposed to national statistics that included all children in out of home care for various amounts of time. The largest age group (26%) with the most frequent entries into out of home care in this study occurred for children under the age of two, with most children entering care before the age of nine. This contrasts strongly with Minnesota statistics which found that 58% of children in out of home care were thirteen years or older (MN DHS, 2002). Personal communication with Mr. Ray Crichley confirmed that there is a similar trend of frequent placements for youth 13 and older in St. Louis County for short term placements.

Children in this study who lived outside the care of their parents tended to predominantly reside in foster care settings. All of the children in this study lived in foster care for at least a portion of their time in out of home care. Foster care is also the most common long-term out of home placement vendor according to national and state statistics. Similarly, residential, group home and other settings statistics are relatively similar when comparing this study to state and national numbers (Children’s Services, 2002, US. Department, 2002).

The most striking finding concerning this question was the disproportionate number of Native American Children residing in out of home care. Across the nation and in Minnesota, children of ethnicities other than Euro American heritage are over represented in out of home care as compared to the number of children of these ethnicities in the general population (Omang & Bonk, 1999, DHS, 2002, George et al., 1995 as cited in Courtney, 2000). Minnesota placement statistics found that 11% of the
children in out of home care were Native American (Minnesota DHS, 2002). The total population of Native American children in the county is 3.3% (Minnesota Kids, 2002).

In this study of St. Louis County, there were far more Native American Children (38%) in out of home placement. The results of this study were similar to national data concerning the percentage of children living with relatives. National numbers in The AFCARS Report, (2002) show that approximately 27-30% of children live with relatives (Wilson & Chipungu, 1996 as cited in Grogan-Kaylor, 2001) as compared to 27% in this study. Also, there were similarities with the percentage of children living in group homes. Nationally 8% of children in out of home care lived in a group home setting (The AFCARS Report, 2002), whereas 6% of the children in St. Louis County in long term care resided in a group home (MN DHS, 2002).

The average age when children in this study entered care was 5.8 years as opposed to the national mean age of 8.7 years old. A similarity was found between our results showing that 7% of children were 13 to 18 years of age and Grogan-Kaylor’s (2000) results of 8.7% for the same age group. Seventy-five percent of children in our study entered care before turning nine years of age, similar to the findings of research done on children living in California (Grogan-Kaylor, 2000).

The final research question addressed factors related to placement stability (two or fewer placements for the duration of time in out of home care). The age of the child at placement had a statistically significant relationship with placement stability. It seems reasonable that the younger the child at the age of entry to care, the more placements as there are greater opportunities for changes as opposed to children enter care at an older age. Relative placements were also more stable than non-relative placements in this
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study. This result is consistent with research findings of George (1990) and Courtney & Needell (1997 as cited in Grogan-Kaylor, 2000) who found that kinship care resulted in greater stability than children placed with non-relatives.

Limitations of the Study

There are several limitations in using a cross section design. It can distort placement patterns. Children with the most placements tend to be over represented because there is a positive correlation between the number of placements and the length of time in care (Charles L. Usher, Karen A. Randolph, Harlene C. Gogan, 1999). Also, there is a selection bias because the study describes the experiences of groups of children in care at a specific point in time. In cross sectional samples “the probability of being selected to participate in the study… is directly proportional to the length of time the child has been in foster care” (Charles L. Usher, Karen A. Randolph, Harlene C. Gogan, pg. 24).

Cross section studies are length biased because it uses a truncated sample, which ignores short-term placements. Due to the fact that this is not a longitudinal study, it does not reflect the complete case histories for each individual child as some remain in placement beyond the research period ending after July 1, 2002. Another limitation is the fact that the researchers were not involved in the collection of the secondary data so they cannot know the validity and reliability of the data.

It is difficult to compare the results of this study to previous studies for several reasons. First the studies have different methodologies. Secondly, the data in this study excludes placement information for children in continuous out of home care for less than
two years. Third, this study does not include shelter and mental health hospitalization days of care. Finally, it does not reflect the children’s complete out of home experience as some may have continued in care beyond the ending date of the time period examined. Excluding such data decreased the total number of days in care as well as the number of placements and spells. Thus, this study does not show the complete placement history for each of the children.

The demographics of children in this study are specific to St. Louis County, Minnesota at a given point in time. It is likely that children in other counties across the state and nation have their own unique demographics different from the children in this study. Because of these differences, one can not make generalizations about children in other counties based on the finding of this study.

**Implications for Practice**

The majority of children in this study are in the least restrictive type of out of home placement. The study found that the longer a child remains in his/her family of origin, the greater his/her placement stability. Considering this, there needs to be continued emphasis on preventative programming that ameliorates the concerns that would otherwise if left unaddressed lead to removal. Preventative programming efforts should especially support families with children under the age of ten. The fact that there is an inverse relationship between the age of placement and number of placements (the younger at the age of placement, the more placements experienced) testifies to the instability of long term foster care.
It is vital to use a systems focus when providing prevention, removing children and reunifying them with family. The results of the study showed that nearly half of the children in out of home care also have siblings in placement. There needs to be ongoing efforts to maintain sibling placements and to actively foster contact between siblings when they are separated. Accordingly maximum effort should be made to recruit foster homes that can accommodate sibling groups. In addition, increased efforts should also be made to place children with relatives regardless of their ethnicity.

Practice Recommendations

Based on the literature review and research it is possible to suggest the following practice recommendations:

› Continue with preference for placing children in the least restrictive setting, which is foster care

› Continue attention to placement with siblings to maintain family system and sibling connections

› Consider broadening the categories of self-reported ethnicity options to reflect multicultural backgrounds (the new system allows for this)

› Ongoing funding and program development with the aim of preventing removal and facilitating successful reunification (committed family based program to do placement prevention and reunification)

› Continued attention to ICWA standards with an emphasis on more frequent placements with relatives (only 41% were placed with relatives)
Recruit foster homes that can take large sibling groups, especially Native American foster homes

**Recommendations for Further Research**

The methodology used for this study was effective and could be replicated for future research. Excluding the days of care children spent in shelter and hospital placements resulted in more meaning information (for the purpose of this study) by removing the potential for factors that would have otherwise skewed the results.

- Further research should be conducted to identify factors related to placement stability and instability with the goal of reducing placement disruptions
- Further research about why there is such a high percentage of Native American children in long term foster care
- Further study looking at why so few Caucasian children were placed with relatives and how this can be corrected as well as ways to increase frequency of Native children being placed with relatives
- Further research on how living in kinship homes affects placement stability
- Further research examining family systems rather than looking at individual children (i.e.: research sibling groups; how many sibling groups remained intact through out long term placement and how it impact stability, which type of placement settings were siblings most likely to be together/apart, how many siblings left long term care at the same time coming out of the same placement setting, how consistently is state legislation being followed concerning sibling placement factors, the impact of Family Group Conferencing on relative placements, etc.)