

# Research-to-Results <sup>Brief</sup>

Child **TRENDS**<sup>®</sup>

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## **IMPLEMENTING A POST-CARE SERVICE SYSTEM IN CHILD WELFARE: THE CATAWBA COUNTY CHILD WELLBEING PROJECT**

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### **OVERVIEW**

This is the first brief in a series, *Building a Post-Care Service System in Child Welfare: Lessons Learned from the Frontlines of Implementation Science in Catawba County*. This brief sets the stage for a three-part series on the Catawba County Child Wellbeing Project by describing the Project's origins and historical context. Topics include: 1) the purpose of building a post-care service system; 2) the needs of post-care children and families; and 3) the guiding theory of change for the development, implementation, and evaluation of the Project. Additionally, the brief discusses the roles of various organizations involved with the Project – The Duke Endowment, the Catawba County (North Carolina) Department of Social Services (usually called Catawba County Social Services), the National Implementation Research Network and Independent Living Resources, Inc.

### **BACKGROUND**

Although the nation's child welfare system was founded to protect children from abuse and neglect, the system's focus on permanency gained traction with the passage of the Adoption Assistance and Child Welfare Act of 1980. The Adoption and Safe Families Act of 1997 (ASFA) articulated three goals for child welfare—safety, permanency, and wellbeing—and focused particular attention on expediting permanency for children in foster care. The Fostering Connections to Success and Increasing Adoptions Act of 2008 reinforced the importance of achieving permanency for children in foster care and created options for states to provide federally subsidized assistance to children leaving foster care for relative guardianship arrangements (Child Welfare Information Gateway, 2009).

Although reaching permanency for children in foster care has been a focus of legislation, policies, and practices, the system continues to struggle with the supplemental goal of ensuring the wellbeing of children who exit foster care without a permanent family. Many children in foster care demonstrate remarkable resilience and leave the system to become healthy, functioning adults (Bass et al., 2004). However, most studies of former foster youth, in particular those who age out of the system, present discouraging findings (Courtney, 2009). Studies indicate that youth who leave foster care face high rates



of unemployment, often suffer from mental health conditions, experience poverty and housing instability, and become involved in the criminal justice system (Courtney, 2009). The creation of the federally funded John Chafee Foster Care Independence Program in 1999 provided states with more funding and greater flexibility to assist youth with the transition to independent living, and the Fostering Connections Act of 2008 provided match funding to states to expand foster care, adoption, and subsidized guardianship support until youth reach the age of 21. Unfortunately, research has found that the effectiveness of independent living programs is limited (Courtney et al., 2011a) and that the benefits of remaining in care through age 21 are short-term (Courtney et al, 2011b).

Current child welfare policies place a priority on reuniting children with their birth families as a way of achieving permanency, but a significant minority of those children re-enter foster care. Over the past several years re-entry rates have ranged from 13 to 15 percent (U.S. Department of Health and Human Services, 2002). Outcomes for youth who spend a relatively short time in foster care before returning to their families are not well documented, and little is known about post-reunification services that could stem this re-entry into the system (Freundlich, forthcoming).<sup>1</sup>

When reunification cannot occur, many children find permanence with relatives. And, while most states provide basic services to kinship caregivers, studies have shown that many kinship families do not access the services for which they are eligible, often because they are not aware of the services or because they find it stigmatizing to be involved with public agencies (U.S. Department of Health and Human Services, 2002).

Children adopted out of the foster care system also face challenges. Findings from the National Survey of Adoptive Parents indicate that most children adopted from foster care are doing well, but that there are some reasons for concern, suggesting that for a significant portion of families adopting children from foster care, post-adoption supports and services may provide important assistance (Malm et al., 2011).

The last decade has seen a growing recognition of the need for post-permanency services as a means of achieving the wellbeing of children and youth who were in foster care. Ensuring the availability and sustainability of an array of post-permanency services to support former foster children and their permanent families—whether birth, kinship, or adoptive—can be viewed as the next challenge for child welfare agencies (Freundlich, forthcoming). The development of the Child Wellbeing Project in Catawba County is an example of a local community rising to meet this important new challenge.

## **BUILDING THE PARTNERSHIP**

In 2006, The Duke Endowment and Catawba County Social Services began discussing a partnership to improve the long-term well-being of children exiting foster care. Since 1924, the Endowment has funded private children's homes across North Carolina and South Carolina, but neither grantees nor the Endowment focused much on the outcomes for children after they were reunited with their families, adopted, or otherwise exited the custody of the social services system. The Child Care Division of the Endowment began to look at ways to reform the public and private child welfare system continuum by further integrating child wellbeing outcomes and child development indicators with existing child welfare goals. They hoped to accomplish lasting change by supporting early intervention, collaborative approaches, and projects that help organizations serve children and their families more effectively.

North Carolina’s Catawba County Social Services is a county-administered public social service agency serving a population of approximately 157,000 county residents with a long history of innovation, community collaboration, and an ability to implement a full continuum of child welfare services. In addition to the traditional mandated child welfare services (child protection, foster care, and adoption services) these services include therapeutic foster care and residential services. Catawba County Social Services has also expanded the continuum to include voluntary prevention, family preservation, and child mental health services. In addition, Catawba County Social Services embraces the use of best practices in the child welfare field and collaborates effectively with community partners and stakeholders to meet the needs of families served. It was this history and demonstrated capacity to implement innovative services effectively that provided the foundation for the new partnership to improve child wellbeing by developing and implementing an array of post-care services.

### **BUILDING THE PROJECT**

The Child Wellbeing Project was developed to test two hypotheses: First, even after a “permanent” placement is established, children for whom the social services system has legal custody require significant and long-term support in order to reach their developmental potential and become successful adults. Second, an investment in this support will result in financial savings to society over time. The Endowment and Catawba County agreed that the success of children who enter and exit the legal custody of the social services system should be defined by measurable child well-being indicators. Indicators can help to determine whether as these children transition to adulthood, they:

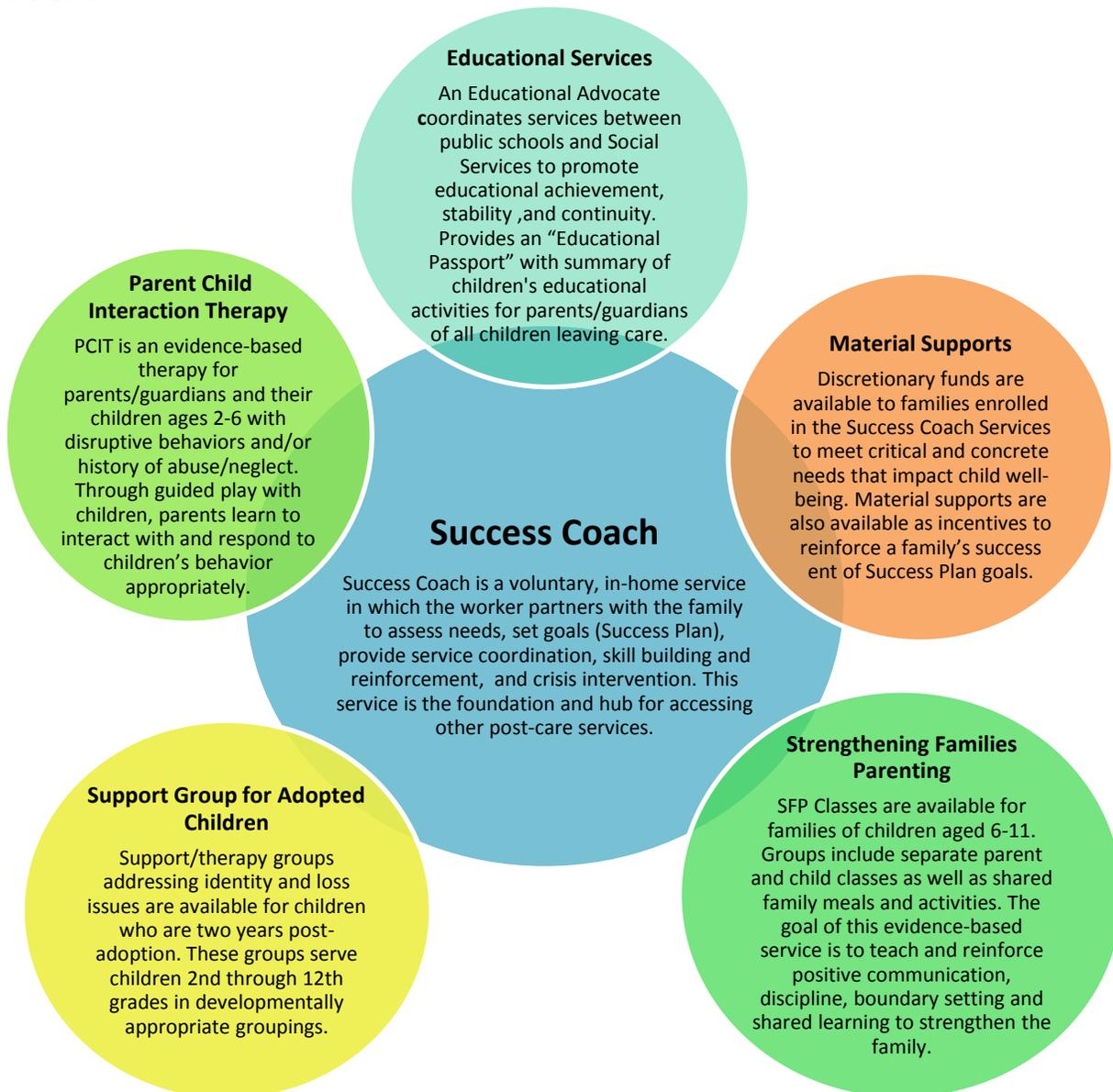
- Are employable;
- Are educated;
- Are connected (civically, spiritually, and to family);
- Have stable housing;
- Have a medical home; and
- Make appropriate and wise decisions (e.g. avoiding substance abuse, criminal activity, and unwanted pregnancies).

From the project’s inception, the Endowment and Catawba County agreed that post-care services would be composed of *evidence-based* and *evidence-informed* services. Evidence-based services are services that have been evaluated and shown to be effective; evidence-informed services are services that have been developed using research and knowledge from the field. These services will help support children and families in ways that reduce risk factors that threaten wellbeing and that conversely enhance protective factors that promote and strengthen wellbeing.

In 2007, Catawba County and the Endowment established a Child Wellbeing Project Design Team comprising representatives from project partner organizations to plan the Project design and provide critical input on service selection, implementation issues, and the evaluation approach. Child Trends assisted with the initial development of the Project concept and provided literature reviews on key areas of need for children and families post-care. In 2008, the National Implementation Research Network at the University of North Carolina’s Frank Porter Graham Child Development Institute began providing intensive technical assistance focused on developing and implementing the project. After extensive discussions, literature reviews, and focus groups with staff, birth, and adoptive parents, and guardians, six areas of need were identified for families post-care:

- Ongoing emotional support and case management for families;
- Mental health services for children to address children’s attachment and externalizing behaviors;
- Educational services, supports, and advocacy to improve children’s educational achievement;
- Material supports to provide financial assistance and child care;
- Parent education; and
- Emotional supports to help adopted children normalize their adoption experiences.

In 2009, six Implementation Teams of Catawba County staff were established to further research and recommend specific services and interventions to meet the identified needs of families. As shown in the graphic below, these recommendations led to the establishment of a post-care array of six voluntary services:



Guiding principles for the Project were also developed to stipulate the way in which services would be delivered to families and implemented within the agency:

### Guiding Principles for Staff in the Child Wellbeing Project

**Services should be:**

**Individualized:** Staff tailors services to meet the needs and goals of the family, working within the family’s cultural framework. The family’s Success Plan will evolve as the family evolves.

**Unconditional:** Staff avoids assumptions and suspends judgment about the families served. Staff has realistic expectations and does not give up on families.

**Collaborative:** Staff operates under the assumption that no one brings everything to the table; professionals (who bring training and experience) and families (who bring knowledge of their family’s strengths, culture, and dynamics) collaborate to identify and meet the family’s needs. Collaboration also occurs between professionals who are working with the family.

**Voluntary:** Staff informs families that they can choose whether or not they want to participate in the Project and which services they want to participate in. Policies and practices about participation in services will not be punitive, fear-based, or coercive.

**Strengths-Based:** Staff helps families identify their capabilities, knowledge, skills, and assets and helps them enhance and build upon these strengths. Staff acknowledges families’ histories and honors the strengths that supported them.

**Empowerment-Driven:** Staff believes that families have the ability to make positive change. Staff supports families to develop healthy relationships with their extended family, friends, and community and encourages the use of these natural supports.

**Sustainable:** Staff balances costs and benefits of the Project; costs include both the *emotional* costs (e.g., burnout) and *monetary* costs that could be incurred by either *professionals* or *families*. *Staff takes* program replicability into consideration.

**Outcome-Based:** Staff ties intervention activities to the wellbeing goals of the Project. Staff tracks observable and measurable indicators of short-term and long-term success, monitors progress, and revises plans and services accordingly.

## THEORETICAL FRAMEWORK

Evaluators from Independent Living Resources, Inc. joined the Project in December 2009 and strengthened the existing Project design by articulating a theory of change for the Project and using resiliency theory as the conceptual framework for the entire initiative. An underlying assumption of resiliency theory is that resilient individuals adapt to extraordinary circumstances, achieving positive outcomes in the face of adversity. Resiliency theory then provides the framework for specifying the risk factors that threaten successful adaption, the criteria for determining successful adaptation, and the individual and environmental factors that may promote positive outcomes (Fraser and Richman, 1999). Thus, mapping out risk and protective factors at the individual, family, and community levels for children and their families after children leave foster care informed the selection and development of the interventions to be used in the Project as well as choices about data collection and measurement. Therefore, the Project aims to reduce risk factors and increase protective factors for individuals and families, which will in turn improve the well-being of children after they leave foster care.

## IMPLEMENTATION

Implementation of the array of post-care services began in 2010, with a pilot phase scheduled to last through December 2012. As shown in the graphic above, the Success Coach served as the foundation or hub for other post-care services. To be eligible for Success Coach services, children must have been adjudicated neglected, abused, or dependent and placed in the legal custody of Catawba County Social Services. Since August, 2010, Success Coach services have been offered to all families of children birth to 15 years of age who exit foster care to a permanent placement. The Educational Advocate tracks the educational achievement and school moves for all children while they are in foster care and while they are served by the Success Coach after they leave care. Families served by Success Coach are also eligible to receive material supports and if they meet service criteria, may be referred to Parent-Child Interaction Therapy, Strengthening Families, and Adoption Support Groups.

An important feature of the Project is that it uses a set of best practices to help ensure the quality of implementation of each of its services. This work has included the use of Implementation Teams to explore appropriate evidence-based practices and oversee the implementation of services. To assure the competency of the staff providing services, the work has also included the development and use of guides for interviewing candidates for staff positions, skill-based training that allows staff to practice the skills they need on the job, and coaching plans. Program Review Protocols also assure that data are used in decision-making and assessment, and that staff engages in problem solving that reduces or eliminates barriers to implementation. This use of Program Review Protocols is especially important to assure quality service delivery for evidence-informed and newly developed services both through the pilot phase and once services are fully implemented. The Project will be in the pilot phase of implementation through December, 2012.

## CONCLUSION

The Duke Endowment and Catawba County Social Services are committed to long term wellbeing of children. They are also committed to the use of evidence-based and evidence-informed practices and the use of best practices to assure that projects have model fidelity and that they deliver effective, high-quality services. The Project Team believes that the distinctive efforts of the Child Wellbeing Project to enhance child welfare services may have significant implications for the provision of prevention and child welfare services statewide, and if evaluation results warrant it, the Team is committed to the replication of this project.

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