

ANALYSIS OF ALTERNATIVE CARE PLACEMENT CHANGES
AS PROVIDED BY CASE MANAGERS

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by
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DEDICATION

I dedicate this work to Nelson Kenner, my husband and partner in all matters of life. His continuous support and encouragement over the years have been vital to the completion of this work and to the achievement of all my goals.

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ANALYSIS OF ALTERNATIVE CARE PLACEMENT CHANGES
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ABSTRACT

This exploratory study systematically identified and analyzed a comprehensive list of 53 primary reasons children experienced alternative care placement changes in Missouri's child welfare system. Factors such as age, gender, race and geographical region, which have been associated with placement stability and permanency outcomes for children in other studies, were also analyzed for possible association with reasons placement changes occur.

Case managers employed by Missouri's public child welfare agency and by private agencies contracted to provide case management services completed web-based surveys on 844 changes of placements that occurred in May and June of 2007. In addition to identifying primary placement reasons, case managers reported whether each placement move was in the child's written case plan for permanency and if the move was in the child's best interest.

. Utilizing the work of James' (2004) study on placement change reasons, the 53 primary reason codes were individually placed into one of four broad thematic categories. Primary placement changes that occurred for system or policy related

reasons made up 38.7% of all moves. Foster or adoptive family reasons were identified for 21.4% of the total moves. Child related reasons were identified for 35.2% of all moves; and biological family reasons were identified for 4.8% of placement changes. Chi-square tests for association found that the geographical region of case management and the age of the children involved were statistically, significantly related to the categories of reasons placement changes occur. Gender and race of the children involved in the placement changes were not found to be related to placement reasons. Case managers also reported that 38.7% of the total moves were part of the child's written permanency plan. Case managers' perceived the placement changes as being in the children's best interest 89.8% of the time.

Chapter 1: Introduction

According to the United States Administration for Children and Families (ACF), children removed from their parents due to concerns of abuse or neglect has increased from nearly 300,000 children in 1980 to 517,000 in 2004 (ACF, 2006). Children who are removed from their parents' home are generally court ordered into the custody of state child welfare programs and placed in the care of alternative care providers. Alternative care settings may include family homes with relative or non-relative caretakers, group homes or residential treatment homes, hospital or mental health facilities, prospective adoption homes, homes or settings to learn independent living skills, or in specific school or court ordered juvenile centers (Missouri Department of Social Services, 2007).

National concern for the plight of children entering alternative care in the United States has intensified over the last three decades. In response, the United States Congress passed the Adoption Assistance and Child Welfare Act (AACWA) of 1980. This landmark legislation requires states to make reasonable efforts to safely prevent children from being removed from their families of origin and to provide reunification efforts when removal is necessary. Nearly twenty years later, the Adoption and Safe Families Act of 1997 (ASFA) was enacted, which among other requirements, mandates states to also provide reasonable efforts to find permanent and stable homes for children through reunification with their families of origin or through permanent, legal placement with another caretaker.

Statement of Problem

Despite federal legislative efforts, the number of children removed from their families due to concerns of abuse or neglect increased by nearly 60% between 1980 to 2004 (ACF, 2006). For most of these children, removal from their homes means they must cope with separation from their families, friends, and schools, while simultaneously adjusting to the often dramatically different lifestyles of their new caretakers. The cycle of loss and readjustment is often repeated as children experience multiple moves from one alternative caretaker to another while in the states' custody. They may, for example, go to a short term foster home where they stay for a few days while their assigned case manager looks for another place for them to reside. Other children may first go to a group home and then be moved to a relative's home once the relative is approved as a primary caretaker. When children are moved multiple times their placement status is generally considered unstable.

Instability in care has a profound impact on the lives of the children involved. Children who are exposed to numerous changes in primary caregivers are at greater risk of failing to develop attachments with primary caregivers, a fundamental, initial task to future development (Wulczyn, Kogan, & Harden, 2003). Bowlby (1973) posits that a child's ability to attach to adult protectors is an intrinsic process salient to the survival of the human species. Attachment, as defined by Levy and Orlan (1998), is the deep and lasting bond established between a child and a caregiver in the first years of life. It profoundly influences mental, physical, and emotional development. The ability to form a deep and lasting bond with caretakers early in life has a profound impact on one's ability to form relationships with others and to establish values throughout their lifetime. Attachment is created through a dependable, mutual relationship

between a parent figure and child. When a child is denied this relationship, they become vulnerable to an overwhelming number of psycho-social-developmental problems, including Reactive Attachment Disorder.

Reactive Attachment Disorder (RAD) is one of the few disorders described in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TM) that may be applied to infants. The diagnostic features include distinctly disturbed and developmentally inappropriate relatedness in nearly all social contexts that begins before the age of five years. The condition is associated with grossly pathological care by a primary caregiver that prevents formation of stable attachment. Grossly pathological care may include child abuse and neglect, as well as frequent changes in primary caregivers, including institutional care and foster care. Improvement and remission may occur if a stable and supportive environment is provided. If a stable and supportive environment is not provided the disorder will follow a continuous path and impact all areas of functioning in adulthood (American Psychiatric Association, 1994).

Instability in alternative care placements has also been linked with the exacerbation of existing problems at entry into alternative care and to disorders that develop after children are removed from their families of origin. Instability in alternative care placements has been consistently linked to delinquency (Johnson-Reid & Barth, 2000; Runyan & Gould, 1985). Ryan and Testa (2004) found that being placed in alternative care, regardless of placement stability, increased the risk of delinquency for female and male children in care. Placement instability, however, significantly raised the risk of delinquency for male children in care.

Rubin, Alessandrini, Feudtner, Mandell, Localio, and Hadley (2004) conducted a study to investigate whether instability in foster care placements in the first year was associated with

higher mental health care costs. The study sample included 1,635 out of 1,710 children over the age of two years, who entered foster care between July 1993 and June 1995, in Philadelphia, Pennsylvania. Subjects were selected from children who resided in care a minimum of nine months, and who were Medicaid eligible during a one year follow up period. They utilized administrative Medicaid information linked to child welfare data. They found that the top 10% of mental health service users accounted for 83% of the \$2.4 million in costs. Both multiple placements and episodic foster care increased the probability of high mental health service use. The study also revealed that higher physical health care costs were directly related to the number of placements in alternative care and particularly for children who had experienced multiple “episodic” moves in and out of the alternative care system and their home of origin.

In addition to the devastating impact placement instability poses for children, high rates of instability may also result in the loss of vital funding to protect and care for children in alternative care. Federal requirements to hold states more accountable for obtaining the goals set out in legislation eventually led the United States Congress to mandate the United States Department of Health and Human Services (USDHHS) to develop compliance measures required in order for states to continue receiving federal funds to support their child welfare systems. Federal fiscal allocations to states, via Titles IV-B and IV-E of the Social Security Act, are the primary sources for funding state child welfare services, including the cost of foster care and adoption assistance (Social Security Act, 2007). State receipt of federal funding is contingent on compliance with outcome measures that are defined and monitored by the USDHHS, through the Administration for Children and Families (ACF). If states are found noncompliant with one or more outcomes, the state may be denied additional funding. A 1994 amendment to the Social

Security Act mandated the Secretary of USDHHS to promulgate regulations for reviews of state child and family service programs and to make technical assistance available to the states. The amendment also allowed states to create program improvement plans and to be allotted time to make improvements when non-compliance was determined.

A modified set of standards and guidelines was first published in The Federal Register, Final Rule for Title IV-E Foster Care Eligibility Reviews and Child and Family Services State Plan Reviews and became effective on March 27, 2000. In the area of permanency for children, criteria for determining substantial conformity includes that children have permanency and stability in their living situations (USDHHS, 2000). USDHHS applied this criterion to the number of placements experienced by children in alternative care. Conformity is measured according to the percentage of children who have experienced no more than two placements during specific timeframes in care. Time frames include the following (ACF, 2002).

1. Less than 12 months from the time of latest removal from home
2. At least 12 months but less than 24 months
3. At least 24 months but less than 36 months
4. At least 36 months but less than 48 months
5. 48 or more months

Administrative data used by ACF to determine compliance with this outcome are drawn from the federal Adoption and Foster Care Reporting System (AFCARS). The criteria for measurement is based on the date the child was removed from their biological home, the number of placement experiences during their time in alternative care and the date of discharge from alternative care. In other words, compliance is based on state percentages regarding the number

of placements by time in care (Child Welfare Outcomes and Measures Context Data Index, Appendix F: Data Sources and Data Elements, 2002).

Although the numbers vary across the nation, a large proportion of children experience two or more moves while in the state's custody. In 2004, ACF found that the percentage of children in care for less than two years, who had experienced more than two alternative care placements, ranged from 44.7% in Mississippi to less than 2% in Puerto Rico. The percentage of children in care for 48 months, who had experienced more than two moves, ranged from 92.5% in Maine to 1.3% in Puerto Rico. The U.S. median percentage of children in care for 48 months, who had experienced three or more moves, was 72.8%. Stability also varies widely among geographical areas within the same states. In Missouri, for example, ACF found compliance with stability measures at the case review level, to be 58% in one urban region, 87.5% in another urban region and at 100% in a rural region (ACF, 2002).

Need for Study

Instability in alternative care may lead to tragic consequences for the lives of children and their families. Failure to conform to the federal requirements regarding stability in alternative care placements also jeopardizes the federal, financial support needed by state child welfare systems. Effective, strategic planning to decrease the number of moves experienced by children in care requires comprehensive understanding of the reasons for placement changes in care. Unfortunately, little research has been conducted to examine the multitude of reasons children experience placement changes in care. The majority of studies that have been conducted on instability in alternative care placements have focused on the relationship between number of placement moves and number of months or years in alternative care. The research focus on

number of moves by time spent in care is reflected in the federal legislation and guidelines used to determine state compliance. These studies are discussed at length in the following chapter.

The body of research that examines the reasons for placement changes has focused on foster and adoptive family home disruptions and child and caretaker characteristics. In Pardeck's (1984) study, he concluded that the biggest factors associated with multiple moves were related to the child's behaviors and length of time in care. Webster, Barth & Needell (2000) found that children placed with relatives or close family friends had fewer placement changes than children in other types of placements, including regular foster care, group care and institutional care. In their study, 93% of children from birth to five years of age in kinship care remained in their first or second placement 12 months after entering care. Landsverk and Slymen, (2004) found that children with problematic, externalizing behaviors had a much higher likelihood of experiencing delayed stability, late disruptions and multiple short stays in various settings. Leathers (2006) found a significant association occurred between lower levels of foster home integration and placement disruption. Specifically, one unit of foster home integration was associated with a 56% decrease in the probability of disruption. In turn, behavior problems were significantly associated with integration.

Age, gender and race of children in care have also been associated with instability. The research to date however, has resulted in conflicting findings. Pardeck (1983) found that children, three years and under, who experienced caseworker turnover, were more likely to experience instability than children over three years of age. Wulczyn, Kogan and Harden (2003) found that older children experienced slightly higher numbers of moves than younger children. They did not find a correlation between gender, race and ethnicity and the rate of placement

changes. Leathers (2006) found that African American youth were two and a half times more likely to experience placement disruption than youth of other races. Other studies, however, found that African American race predicted greater stability (James et al., 2004; Webster, Barth, & Needell, 2000). Webster, Barth, & Needell (2000) found that increased age and Caucasian ethnicity increased the probability of instability for children in long-term alternative care.

The current body of research has provided salient support for the focus on recruitment, training and sustaining services for foster care providers. Inadequate recruitment services, training and support services for foster, kinship and adoptive families are now well known, prominent factors in instability. The question still remains, however, as to the needs for changes associated with other possible reasons for placement changes. More recently, a few research studies have taken a more comprehensive approach to examining reasons placement changes occur; with some surprising findings.

James' (2004) study to systematically identify reasons for placement changes, found that 70% of placement changes were due to system or policy related reasons as opposed to child behavior or foster parent related reasons. System or policy related moves, as categorized by James, included moves that were conducted to implement procedural, policy and system mandates. System or policy related moves, for example, may include moves to place children with relative caretakers or in a home with their siblings, which are considered preferred placement types in policy. Moves in this category may also include moves designed to place children in less restrictive environments, such as a move from an institutional setting to a family foster home, as mandated in law or policy. Following their research of instability in Illinois family foster homes, Zinn, DeCoursey, George, and Courtney (2006) found that caseworkers

attributed 38.1% of placement moves from foster homes to efforts to place siblings together or place children with other relatives. Workers also reported that 27% of moves were made in order to have children placed in pre-adoptive or pre-guardian homes, as required by the ASFA mandate to secure permanent homes for children.

Despite ACF's (2005) findings that stability performance varies greatly from state to state and within states, scholarly research which examines the association between geographical area and reasons for placement changes were not found. Smith (2003) studied children in seven states to analyze factors associated with when children exit care after their biological parents' rights have been terminated. Smith found that the likelihood of exiting care within one year after becoming eligible for adoption ranged from 22% in one state to 53% in another state. Becker, Jordan and Larsen (2007) conducted a study to examine the role of race, diagnosis and place of residence as factors in predicting successful permanency planning and length of stay in foster care. They found that the child's geographic district of residence was the most important predictor of outcomes for children in care.

These findings suggest that a considerable percentage of placement moves are not associated with provider characteristics or child behaviors. Thus, additional knowledge about placement reasons may prove instrumental in developing more comprehensive strategies to decrease instability in care.

Purpose of the Study

This study seeks to build on recent research aimed at identifying a comprehensive understanding of all the reasons children experience placement changes. Specifically, one goal is to explore whether the reasons for placement changes discovered in James (2004) study,

involving a cohort of placement moves in San Diego County, are similar or different than those reasons for placement changes identified in Missouri's alternative care program. In James' study (2004) case record reviews were conducted to elicit the reasons for placement changes that occurred during an 18 month period. In this statewide study, case managers assigned to coordinate placement changes for children in their caseloads were asked to complete a survey to identify the primary reason placement changes occurred.

The numerous primary reasons given by case managers were then grouped into broad categories, based initially on James' (2004) study, for purposes of comparison. These categories include placement changes that occurred primarily as a result of foster parent related issues, biological family related issues, child related issues or system and policy related issues. Any identified changes to James' (2004) subcategories or primary reasons that were identified in Missouri were examined and discussed.

The broad categories of reasons for placement changes, which contain primary reasons identified in this study, were then used as the dependent variable for further statistical analysis.

Although children may experience placement changes for various reasons, little is known as to whether the placement changes were in the child's best interest and whether the move promoted the child's opportunity to be placed in a permanent family environment. For this reasons, case managers were also asked to provide information about whether they believed the move was in the child's best interest and if the move was part of the child's written plan to be reunified with their parents or to obtain another permanent home. This was an initial attempt to identify whether placement moves occur randomly or are part of a larger plan.

Recent research findings of a relationship between permanent placements and geographical residence, as well as ACF's (2005) findings that showed tremendous geographical variance placement stability, led to a desire to test for a relationship between reasons for placement changes and geographical location in this study. Given the prior, conflicting findings regarding the association between age, race and gender on instability in alternative care, another goal of this study was to determine if there is a relationship between reasons for placement changes that occurred during a period of time and the age, race and gender of the children involved. With these purposes in mind, the following research questions and hypotheses were formulated:

1. What are the primary reasons for placement changes involving children in the custody of Missouri's state child welfare system due to prior concerns of child abuse and neglect?
2. What is the frequency and percentage of placement changes attributed to policy and system related changes of placement (COP), foster parent related COP, biological related COP, child related COP and any other identified category of COP?
3. What primary reasons and categories of placement reasons do case managers find to be in the child's best interest?
4. What primary reasons and categories of placement reasons do case managers identify as part of the child's written plan to obtain a permanent home?
5. Do the reasons for placement changes differ significantly between geographical regions within Missouri, which operate under the same state and federal child welfare policies and practice guidelines?

6. Are the categories of placement changes associated with age, race and gender of the children involved in the placement changes?

Hypotheses

Hypothesis 1: There is a statistically significant relationship between the reasons for placement change categories and the geographical regions of case management services for children involved in placement changes.

Hypothesis 2: There is a statistically significant relationship between the reasons for placement change categories and the age of children involved in placement changes.

Hypothesis 3: There is a statistically significant relationship between the reasons for placement change categories and the race of the children involved in placement changes.

Hypothesis 4: There is a statistically significant relationship between the four categories of reasons for placement change categories and gender of the children involved in placement changes.

Significance of this Study

The results of this study will provide policymakers, administrators, practitioners, researchers and other child welfare stakeholders with insight into the associations between reasons for placement changes, geographical regions and the age, race and gender of the children impacted by placement changes. Policymakers and administrators may be able to use the findings of this study to develop more effective legislative and regulatory mandates and services to promote stability in alternative care.

Practitioners and other child welfare stakeholders may be able to use the findings of this study to develop more comprehensive recruitment, training and support services that are based

on the most salient reasons for placement changes and meet the needs of all persons involved in deciding when a placement change should occur. Researchers may be able to use the findings of this study to conduct related research studies aimed at building on the knowledge needed to ensure that children in alternative care develop stable relationships with primary caretakers; an essential requirement for healthy human development.

Chapter 2: Review and Discussion of Relevant Literature

Since the seminal works of Fanshel and Shinn (1978) and Pardeck (1983), a body of empirical research on children's behaviors and their relationship to foster family home disruption has been conducted. There has, however, been little research conducted on other possible reasons that may result in multiple placement changes for children in alternative care. The purpose of this chronological examination of the research related to stability in foster care is to provide a context for understanding the past direction for research and the possible future direction needed to aid in improving placement stability for children in alternative care.

Until the passage of the Adoption and Safe Families Act of 1997 and the federal implementation of stability outcomes in 2000, instability in alternative care placements was a noted concern, but little was done to hold state child welfare systems accountable. The lack of attention to alternative care stability is generally reflected in the scarce, overall research conducted on the multitude of reasons for placement changes. Unrau (2007) analyzed over 100 unduplicated, professional publications to determine if placement moves were the sole focus or a key part of the conceptualization of the research studies that had been conducted. Only research studies and articles published in articles and books, from 1959 to 2005, were included. The search terms used included "foster care" or foster child* and disrupt* or stability or move* groupings. The study sample was then created by systematically excluding studies that mentioned placement moves but did not directly study the topic. Many clinical studies designed to examine child trauma of separation, initial removals from the child's family of origin and foster placement characteristics were also excluded.

The final sample included 43 books and articles. Unrau (2007) maintains that the sample makes up the substantial portion of the literature on placement moves. The sample included research conducted in nine countries. Twenty-five of these studies were conducted in the United States. Studies varied in their use of national, regional or local samples. Twenty-three, or 53% used the case record as a primary data source to conduct the study. Only four of the 23 also used other data sources, such as caseworker, foster parent or child surveys or interviews. Eighteen of the 25 studies conducted in the United States used data in the case record to conduct their study. Unrau placed two additional studies conducted in the United States under the source group *other*, which may mean they used secondary research data sets and or community members, and teachers.

A few studies used in Unrau's (2007) sample employed secondary data sources; however these studies were included in the *other* category and can not be distinguished from data collected from community members and teachers. Unrau did not specify what data sources were utilized from the case records or whether the specific data sources were described in the studies included in the sample. This is problematic because records generally contain multiple sources of data, including coded forms, such as those completed for federal and state database systems (AFCARS), court documents, various service provider reports, investigative reports, psychosocial assessments, progress reports and worker to family contact notes. These various forms of data yield varying degrees of detail and are produced by different professionals and other stakeholders involved in the child's life.

Conceptual Framework for the Review of Literature

This review of the related literature will attempt to build on Unrau's (2007) work with modifications pertinent to the purposes of this study. Selection criteria for this literature review included analysis of over 120 unduplicated publications, including research studies in Unrau's sample and studies conducted since 2005. Governmental reports and related research was also included. An analysis of the studies was conducted to see if a sole focus or major part of the study examined reasons for placement moves during children's time in alternative care. Only research studies and articles published in scholarly journals, books, or by governmental institutions were selected.

The Adoption Assistance and Child Welfare Act of 1980 (AACWA) made significant changes to state child welfare practices and reporting requirements. Although seminal works conducted prior to 1980 will be discussed, the focus of the review will be on studies published from 1980 to present. Though, it should be noted that following the seminal works of Fanshel, and Shinn, other studies that met the focus of this review were not discovered until Pardeck's 1983 study. The search terms used include foster care* or foster child* and disrupt* or foster care* and stability* or instability* or move* or placement groupings and geographical location*, geographical area* or location of residence. The study sample was then created by systematically excluding studies that did not mention reasons for placement moves or geographical location as a variable in the abstract and/or that did not relate to the topic of this study.

The laws, agency policies, and practices that govern child welfare programs vary greatly at the international, national, state and local levels. The governing structure often determines which placements are approved and when moves in care should occur. Given the wide variance

in policies, and the policy orientation of this study, the research studies selected for this review were limited to those conducted on samples in the United States.

Research on Number of Moves by Length of Time in Care

According to Pardeck (1983), Fanshel and Shinn (1978) conducted the first longitudinal study of foster children. Although the study did not focus on reasons for placement changes, it was the first large scale study to find that the number of moves experienced by children in alternative care was positively related to the amount of time they remained in care. Their study received governmental funding and was utilized to spur changes in child welfare policies and practices at the federal, state, and local levels. Their 1978 study is reflected in the passage of the federal Adoption Assistance and Child Welfare Act of 1980 (AACWA). This legislation aimed to decrease the number of placement changes by increasing services to prevent removal from biological families or to encourage reunification with biological families for children in care.

Fanshel and Shinn's study (1978) utilized a cohort sample of 642 randomly selected children entering foster care in New York City during 1966. The children ranged in age from birth to 12 years. None of the children had been in alternative care prior to selection for the study. Sample selection was restricted to children in care for 90 days or more. Children placed in pre-adoptive homes, state hospitals, training schools, and institutions for the mentally retarded were selected out of the sample population. Quota samples were established to ensure relative sex and age representation. Ethnicity and religion of the child subjects were reported as 21.2 % white-catholic or protestant, 5% Jewish and 73.8% as black or Puerto Rican.

Measurement over the five-year study included multiple instruments and informants. They utilized age-appropriate measures that permitted coverage of the children's behaviors that

changed over time. Interviews were conducted with children in the study and examining psychologists who had conducted tests with the children. Surveys were administered to teachers, if the children were in school. The caseworkers most frequently in contact with children, who were still in care, were also asked to complete surveys. If children returned home, mothers were interviewed. Social workers, pediatric nurses and mothers were also utilized to complete the overall child behavior characteristics data collection.

Fanshel and Shinn (1978) found that only 56.1% of the sample had exited care in the span of the five-year study. They noted that numerous changes in the United States during the span of the study prompted child welfare agencies to not only find a place for children to reside, but to also seek permanency and continuity of relationships. Over a five-year period, they found that 41.8% of the children in their study experienced one placement while in alternative care. Children who experienced two placements while in care represented 29.8% of the sample. Three or more moves were experienced by 28.4% of the children. There was a significant, positive correlation between time spent in alternative care and the number of moves experienced.

Fanshel and Shin (1978) stated it was paramount that child welfare systems focus on moving children to permanent family placements. They acknowledged that their motive for encouraging permanent family placements was not based on their actual findings. In fact, they found that children left in care performed better on intelligence scores than the children who returned home. They also found that length of stay in care was not a significant predictor of change in school performance or in measure of emotional development. Their call for a greater emphasis on ensuring permanent homes for children in alternative care was, therefore, admittedly based on their personal beliefs. Fanshel and Shin (1978) stated, “We fear that in the

inner recesses of his heart, a child who is not living with his own family or who is not adopted may come to think of himself as being less than first rate, as an unwanted human being” (p. 479).

Pardeck (1983) described his research as the second major study to explore factors associated with instability in foster care. Pardeck’s study was specifically focused on the stability of care, as defined by the number of placements a child experienced. He stated that his work made the assumption that the best environment for children is with their natural family. He maintained that if reunification or adoption were not possible, every effort should be made to provide the child with stable placement while in alternative care. His words were clearly in accord with the goals of the Adoption Assistance and Child Welfare Act of 1980.

Pardeck’s (1983) study utilized secondary analysis techniques. The database contained observations of data variables conducted in a national study by the Westat Research Corporation for the United States Children’s Bureau. The national study was conducted in 1978, five years before Pardeck’s use of the data and two years before the passage of AACWA. Pardeck recognizes the threat to validity inherent in the use of five-year old, cross-sectional data. At the time he conducted the study, however, research funding was not available for the project and more timely, comprehensive databases were nonexistent.

The sample in Pardeck’s (1983) study included twelve thousand children selected through a stratified sampling technique. The sample was first organized by agencies and then by the agencies requisite geographical areas. Geographical location was not, however, a focus in the study. The second stage involved selecting from the 12,000 children in the sample frame. Of these children, 9,597 children’s caseworkers completed and returned detailed questionnaires about the children and families. Inclusion in the study required that the child’s file be available,

and the child was either the direct recipient or a child in a family of another child that was the direct recipient of services. Children receiving only health, educational, or financial assistance were excluded.

Pardeck (1983) defined instability in alternative care as more than two placement moves. He explained that children most frequently come into care under emergency conditions. The first placement is often a home or center that cares for the child while a more long-term residence is found. Based on this finding, he reasoned that two moves were an acceptable goal. Pardeck's claim that the first placement move was necessary if not acceptable has remained relatively constant in the instability research that followed and in the 2000 federal outcome measures for stability in alternative care (Administration for Children and Families, 2002).

Like Fanshel and Shinn (1978), Pardeck also placed instability on an axis with length of time in care. Although Fanshel and Shinn found a correlation between time in care and number of moves, Pardeck did not offer these findings or others as a foundation for his decision. He simply states, "Obviously, the longer foster children remain in care, the greater the probability of movement" (p. 25).

Research on Instability as a Consequence of Child and Family Characteristics

Results of Pardeck's (1983) study revealed that 75% of the children experienced stable foster placements, defined as two or less moves. Children in care for a minimum of three years had a much greater chance of experiencing more than two placements compared to children in care less than three years. Age was related to the number of placements after children were in care for at least three years. Pardeck found that children who had been diagnosed with behavioral or emotional problems or children described as juvenile offenders were significantly more likely

to experience instability. Children, three years and under, who experienced caseworker turnover, were more likely to experience instability than children over three years of age. Pardeck concluded that the foster care system, viewed at the macro level, is relatively stable in terms of placement. He maintained that the characteristics of the child were the greatest source for knowledge building about foster placement instability.

In 1984 Pardeck conducted a second published study using 1977 data from a national study of families and children receiving social services. It should be noted that the data was collected three years before the passage of the AACWA in 1980. AACWA was implemented in most states for nearly three years at the time Pardeck published his study in 1984.

The purpose of Pardeck's (1984) study was to build on the small body of research conducted on the impact of children's age, ethnicity and emotional status in relationship to number of moves experienced in alternative care. In addition, Pardeck analyzed characteristics of the birth family and of the child's caseworker for any relationship to the number of moves experienced by the child. Time in care was used as a dichotomous, control variable with a split at 3 years in care.

The 1977 data set used in Pardeck's (1984) study was collected on 4,288 children in foster care in 319 public, social service agencies, in 38 states. The data were statistically weighted to represent the national distribution of 395,000 children in foster family care. Geographical location was not studied as a potential factor in instability. Stability in foster care was again defined as two or less moves. Using chi square tests, statistical significance was considered at the .05 level. The reported measures of association were gamma and Yule's Q.

Pardeck (1984) found that white children had a greater chance of experiencing multiple placement changes compared to black children. Older age and membership in a minority ethnic group had a positive association with number of moves. When time in care was controlled for, the relationship for ethnicity remained, however age and number of moves did not appear related during the first three years in care. Older children were found to be more likely to move from home to home than younger children, but only when the older children had been in care for a minimum of three years. Children who had behavioral and emotional problems at the time of entry into alternative care were at much greater risk of experiencing multiple placements in alternative care.

Pardeck (1984) also found a positive and statistically significant relationship between children whose biological mother and father were alcoholics and the number of placement changes. Alcoholism of the father alone was not found to have a relationship with number of placements, however, the mother's alcoholism remained significant even when time was controlled for. A relationship was not found between other biological, familial characteristics, such as intactness and visiting patterns, and the number of moves experienced by the child in alternative care.

Pardeck (1984) also found that turnover of the caseworker was statistically significant in relationship to multiple placements during the first three years. Pardeck did not find a relationship between the caseworker's educational and experience levels and number of placements. Again, Pardeck concluded that the biggest factors associated with multiple moves were related to the child's behaviors and length of time in care.

Webster, Barth and Needell (2000) conducted the first longitudinal study focused solely on placement stability. This study looked at the number of placement moves experienced by a cohort of children over an eight-year period. The goal of the study was to analyze whether the number of placements in the first year of a child's time in alternative care was related to an increased probability that the child would remain in care or would experience unstable placement history. The study did not analyze the reasons children experienced multiple placements.

Webster, Barth and Needell (2000) utilized a cohort sample that included 5,557 children under the age of six years who entered care for the first time between January 1, 1988 and December 31, 1989, in California. The children selected for the study included only those who were still in care eight years later. This group represented 28% of all the children under age six that entered care during the stated time period. The number of placements experienced by each child at the end of the first, second, fourth and eighth calendar years were tracked. The cohort was then stratified by children placed in kinship or non-kinship care.

A second analysis incorporated predominant placement setting along with other variables into a multivariate model to examine the probability that children in care would experience placement stability. Placement instability for this study was determined if the child had experienced three or more moves after their first year in care. The researchers maintain that it is reasonable to expect three moves in the first year, but that a more long term stable home should be established in the first year. Instability was defined as four or more placements after the first year in care. Cases with missing data for the second analysis were excluded from the sample, which left a final sample of 700 children who experienced placement instability and 4,437 children who did not.

The study found that children in kinship care had fewer placement changes than children in other types of placements. Ninety three percent of children from birth to five years of age in kinship care remained in their first or second placement 12 months after entering care. Eighty two percent of children in other placement types remained in their first or second placement one year later. After two years 87% of those in kinship and 71% of those in other placement types were still in their first or second placement. After eight years, 71% in kinship placement were still in their first or second placement compared to only 48% of children not in kinship care. The study also found that instability in placement during the first year was highly correlated with placement instability in subsequent years. They also found that increased age and Caucasian ethnicity increased the probability of instability for children in long term alternative care.

Research Focused On Instability and Placement Type

Wulczyn, Kogan and Harden (2003) applied event count and movement trajectory models to examine placement stability and movement patterns for a sample of children in New York City. Their goal was to determine if distinct movement patterns were present in the placement histories of children placed in foster care. The first part of the study used an event count regression model to discern whether child attributes were related to the number of placement changes. The second part of the study looked at placement trajectory, which is defined as the timing of placement changes relative to when they occurred. A multiple regression model was utilized to identify the developmental trajectories.

Wulczyn, Kogan and Harden (2003) used data drawn from the New York City database of children whose first entry into alternative care began in 1997 or 1998. The time spent in foster homes supervised by a particular contract provider was observed through December 31, 2000.

Placement changes did not include moves to adoptive homes, moves to unite siblings or when the child was placed in an emergency relative home. Children experiencing ten or more moves were considered outliers and were removed from the sample. The study focused on moves within the same type of care (family or group), within the initial time the child was placed in the agency's care.

The results of Wulczyn, Kogan and Harden's (2003) study showed that older children experienced slightly higher numbers of moves than younger children. Children in the 11 to 13 age group, for example, averaged .697 moves per child as compared to infants who averaged .521 moves per child. Older children who were first placed in group care also experienced higher placement rates than younger children first placed in group care. The study also found that age had the most profound impact on movement. Gender, race and ethnicity were not related to the rate of placement changes. Children who were older at the time of admission into a family foster home moved more frequently than younger children initially placed in family foster homes. The study also found that children placed in relatives' homes experienced fewer placements than children placed in regular foster family homes or other types of placement settings. Children who did not have a sibling in care or who had never had a sibling in care moved less frequently. Wulczyn, Kogan and Harden (2003) also found that the majority of moves occurred during the first six months of entry into care.

James, Landsverk, and Slymen (2004) conducted a study to investigate movement patterns and predictors during out of home care across different placement settings. Their primary objective was to expand the conceptualization of placement movement from the simplistic number of moves to one that recognized moves in the context of placement settings.

The goal of the study was to determine placement sequences and to examine if placement patterns could be identified for children who spent an equal amount of time in care. The study also looked at clinical and non-clinical child characteristics that may predict patterns of placement changes.

James, Landsverk, and Slymen (2004) used retrospective, administrative data collected by the Child and Adolescent Services Research Center for another study that was conducted in San Diego County in the early 1990s. The researchers recognized the age of the data, but noted that these concerns were offset by the reliability and completeness of the database. Inter-rater reliability of the original case record data that was utilized was high (.88). The cohort was selected from a larger cohort of 1,084 children. All children in the cohort were in alternative care in San Diego County between May 1990 and October 1991. The study included a cohort of 430 children, between one and sixteen years of age, who had spent 18 months in alternative care. Children who were adopted within the 18-month period were excluded from the sample. Children who experienced a reentry into alternative care were also excluded. Children under the age of two at the time behavioral data was collected were also excluded. Inductive methodology was used to classify placement changes in care by duration of the longest placements and the degree of restrictiveness associated with each move. The case record data contained the Achenback's (1991) Child Behavior Checklist completed by foster caregivers on average of 8 months after the child entered care. Classification of the idiosyncratic data required the use of constant comparative method of analysis. Once the data was graphed, three child welfare experts analyzed the graphs and identified four general patterns of movement. These patterns were then named and cutoff points were chosen to create mutually exclusive and exhaustive categories.

Bivariate and multivariate methods were used to analyze the child characteristics. The early stability category represented children who achieved placement stability the fastest. Most of these children were initially placed in a shelter before being placed in a non-relative foster home. The foster home was often short term, up to 45 days at cut-off, before the child was placed in a long-term stable environment. Early stability described the placement of 35.6% of the children in the cohort. Of this group, 54.2% achieved stability with a relative. The rest, 45.8%, were placed in non-relative foster homes.

James, Landsverk, and Slymen (2004) found that children in the later stability category obtained a stable placement between their 46th day and their 9th month in care. Children in this category represented 28.6% of the cohort. They averaged 4.3 placements before reaching their final placement. Of this group, 63.4% were in stable placements with non-relative foster care homes and 30.9% were in kinship care homes. Seven of these children found stability in institutional care.

The variable pattern category included 16% of the children in the cohort. Some of these children would have fit into the early or later stability categories, but for unknown reasons, their stable placements disrupted a short time before the cut-off period. The unstable pattern category included 19.8% of the placements. Children in this category experienced multiple, brief stays in various settings with no placement lasting longer than 9 months. The mean number of placements was 7.2, with more than one-third of the children residing in 8 to 15 different settings.

In the early stability group James, Landsverk, and Slymen (2004) found that race was the only significant difference between children who were in stable kinship or non-relative foster

home. About 40.3% of African American children achieved stability in 45 days compared to 35.8% of Anglo and 23.4% Hispanic children. Older children in the unstable category were more likely to have episodic placements in residential care compared to younger children who tended to move from family home to family home ($\chi^2=27.4;df=3;p=0.0002$). Counter to common thought, children with problematic internalizing behavior scores were more likely to experience placements in residential care than children with problematic externalizing behavior scores. Externalizing behaviors were found to greatly increase the odds that a child would experience delayed stability, late disruptions and multiple short stays in various settings.

Based on the studies findings, James, Landsverk and Slymen (2004) concluded that interventions to improve stability focused on posttraumatic stress and attachment disorders, but placed little focus on disruptive disorders. They maintained that more services to alleviate disruptive disorders may be helpful; however, this could be difficult given that disruptive behaviors may not be considered as part of a mental health diagnosis, and therefore treatment would not be service provider reimbursable.

Research on Comprehensive Identification of Reasons for Multiple Moves

James (2004) conducted a study to systematically collect and present descriptive data on reasons for placement change. This was the only study found that specifically focused on identifying the breadth of reasons children experience moves. The study also focused on behavior-related placement change as related to other types of moves that occurred over an 18-month period. James' study resulted in the identification of 46 placement reasons which were subsequently organized under four, mutually exclusive categories to describe reasons for

placement change. The four categories included system or policy related reasons, foster family related changes, biological family related reasons and child related reasons.

James (2004) used secondary data involving children enrolled in a National Institute of Mental Health (NIMH) funded, longitudinal study of children in foster care. The study involved children residing in alternative care in San Diego County between May 1990 and October 1991. James recognized problems associated with the age of the data, but maintained that it was a desired source because it was complete and reliable in regards to placement history. It should be noted that the data was collected years before Congress passed the 1997 Adoption and Safe Families Act, which made significant changes to child welfare policies, including decreasing the timeframes for states to complete permanency plans for children and to hold states accountable for the number of placements children experience in care (Adoption and Safe Families Act, 1997).

The sample of 1,084 children involved in the NIMH study was then reduced to 771 for testing to examine relationships between child's behaviors and placement reasons. Before conducting this analysis, James' study included analysis of all the placement changes that occurred involving the children. There were 1,663 placement moves that occurred over the 18 month time period. Children who had not resided in care for five or more months were excluded as a result of restrictions imposed by the juvenile court. Children less than two years of age or over 16 years of age were also excluded. This was primarily due to James' use of the secondary database and the studies design to use a specific child behavior checklist to measure behavior problems for children ages two and older. The exclusion of these children was recognized as a limitation to the study and as factors that may have biased the findings. Females made up 55.3%

of the sample and 53.8% of the children were members of a racial minorities. James' (2004) study also excluded analysis of placement moves for the purpose of reunification with parents (N=236), running away incidents (N=47), three abductions and one transfer to another county's jurisdiction. No reason is given for the deletion of these movement types.

In order to collect data on primary reasons for placement moves, assistants were used to review files and abstract the needed information. James (2004) states that the data collected on primary reasons was, for the most part, representative of the case workers perceptions of reasons for moves, however notes that those who reviewed the records had to elicit data from various data sources maintained in the files. Sources considered as more "objective" were accessed first. Some of these records included computer records of placements and financial information on placements. If the needed information could not be obtained through these records, court reports and progress notes were utilized. James maintains that these data sources were more "subjective" and varied in quality. Information on each placement change described in the files was obtained and then, if available, researchers confirmed the placement information by corroboration with other information sources in the file.

The primary reasons identified by the case reviewers were then coded and labeled using a constant comparative method of analysis. In 43 cases it was not possible to identify a primary reason. The coding and classification process was also guided by the multiple reasons identified in prior literature, such as child's behavioral and emotional functioning, events effecting the placement environment, and policy guided placements. The Cohen's kappa for nominal polychotomous data with two raters and generalized kappa for nominal polychotomous data with more than two raters found inter-rater reliability coefficients between .91 and .95.

James' (2004) found that placement changes related primarily to the biological family included such events as children being moved to a confidential placement for safety reasons, moved following re-abuse by the parent or failure to comply with the plan during a trial home placement, or the foster parent requested the placement move due to conflict with the biological family. Based on the categorization of reasons, James found that 70.2% of all placement changes were due to system or policy related practices. System and policy related moves involved moves for the purpose of placing siblings together or with relative or family friends. Sibling cohabitation and placement with relatives were desired over other alternative care placement in San Diego County's policies. Other system related moves included such reasons as group home closings or funding problems and moves to less restrictive environments. The study found that most system or policy related moves were also routine and planned. Foster family related reasons accounted for 8.1% of the changes. Identification of primary initiators of moves was not a focus of James' study; however the initiator was noted when the reason for the placement change was due to the child's behavior. Initiators of moves could not be identified in 111 of the 328 moves attributed to child behavior. Of the remaining 217 moves, foster parents were identified as the initiators in 54.8% of the moves.

The child's behavior problems were identified as the primary reasons for placement changes in 19.7% of the sample. James (2004) also found that older age, externalizing behaviors, and emotional abuse as the primary reason for entering care increased the hazard of behavior related changes. James' also found that numerous system and policy related placement changes were not related to increased risk of behavior related changes.

James' (2004) study was conducted on children residing in San Diego County only and geographical areas within the county were not a focus of the study. James recognized the limits of the study's generalizability given the idiosyncratic differences in geographical locations, particularly as it related to San Diego County's heavy use of short-term facilities while conducting searches for longer term placements for children in care.

Research on Reasons for Instability in Foster Family Home Settings

Zinn, DeCoursey, Goerge, and Courtney (2006) conducted a descriptive and multivariate study to explore various factors that may contribute to instability. They employed existing data maintained in Chapin Hall's Integrated Database on Child and Family Programs in Illinois. The study included longitudinal placement histories of children in care between 1990 and 2004. Data was also collected via a web-based survey administered to caseworkers assigned to children who had experienced placement changes. A secure website was designed specifically for the study. The caseworker survey was specifically customized to each respondent, based on the characteristics of the children and foster homes and the worker's responses to previous questions. The survey was reviewed and pre-tested. The survey data specifically addressed the causes or reasons for instability in family foster homes only, as reported by the caseworkers. Children in group homes, residential setting, hospitals, independent living settings and all other settings were excluded.

Zinn, DeCoursey, Goerge, and Courtney (2006) analyzes of the administrative data revealed that the median time to a move from the first placement was 17 days. The likelihood of moving was greatest during the first month in care. Fifty seven percent of the children experience one or more moves during the first month. The moves in family foster care settings were

analyzed using a cross-sectional sample, as opposed to a sample of all moves occurring during the time period. This resulted in an overrepresentation of longer placements and an under representation of shorter placements. The researchers attempted to compensate for this weakness by re-weighting the analyses of children's latest moves to reflect the true distribution of durations for completed moves over the last two years.

Zinn, DeCoursey, Goerge, and Courtney's (2006) study sample was drawn from all relative and non-relative foster home placements open as of March 1, 2005 (N=12,826). Sampling conditions were limited to children 16 years of age or younger (N=11,662). Only families where caseworkers and foster homes had six weeks or more cumulative, cooperative working experience were selected for the study (N=9,826). Only cases assigned to public sector case managers and point of service contracted agencies with Internet access were included. The final frame consisted of 9,703 children placed in 6,389 foster homes and assigned to 1,312 caseworkers. One case from each worker's case load, and one child from each case were selected at random, resulting in a final sample of 1,312 caseworkers to survey. Survey questions were designed to elicit worker perceptions regarding placement availability, quality of care in foster homes, causes of most recent moves, services needed to aid stability in foster homes and characteristics specific to the children and foster parents.

Following their research of instability in Illinois, Zinn, DeCoursey, Goerge, and Courtney (2006) found that caseworkers attributed 38.1% of placement moves to efforts to place siblings together or place children with other relatives. Workers also reported that 27% of moves were made in order to have children placed in pre-adoptive or pre-guardian homes. The workers attributed 75.9% of children's most recent moves, at least in part, to the foster parents' inability

or unwillingness to continue fostering the child. Of these, workers stated that 27.6% of the moves were due to the foster parents' inability to tolerate the child's emotional and behavioral issues.

Leathers (2006) study involved 179 randomly selected 12 and 13 year old adolescents in non-relative foster family care for at least one year, in Cook County, Illinois. Telephone interviews were conducted in 1997 and 1998 with the foster parents and the caseworkers of each child selected for inclusion in the study. Prospective design, standardized behavioral measures and multivariate analyses were used to test the associations between externalizing behavior problems, as reported by the caseworkers and foster parents, and placement changes and negative outcomes. Leathers also analyzed the risk process through which behavior problems lead to placement changes and hypothesized that foster home integration would mediate the association between behavior problems and disruption.

Leathers (2006) tracked placements for 5 years to determine if the youth experienced placement changes and negative placement outcomes defined as imprisonment, being on runaway status and institutionalization. Over the five year follow up period, 53.3% of the youth experienced disruption. Of these youth, 15.6% experienced negative placement outcomes at the end of the follow up period when the youth were 17 and 18 years old. Males were significantly more likely to experience negative placement outcomes than females.

The Pearson's correlation between the caseworker's and the foster parents perceptions of child behavior problems on the Child Symptom Inventory was .42 ($p < .01$), indicating moderate correlation. Counter to Leather's expectations, the foster parent's report of externalized child behaviors was not associated with disruption. The caseworker's report of externalized behaviors

was significantly associated with disruption in both the bivariate analysis ($t=-2.25$, $p<.05$) and the logistic regression model. An increase of one standard deviation of the caseworker's report was related to a 46% increase in the odds of disruption. Leathers did not analyze primary initiators of placement changes or reasons for placement changes, but states in the discussion section that this finding may be linked to caseworkers who actually initiate placement changes because the caseworker does not perceive the foster home as a good fit or that the foster parents are adequately meeting the child's needs.

Leathers (2006) found that fewer years in a specific foster placement was the only other statistically significant predictor of disruption. Placement with siblings was marginally significant as a predictor of stability. African American youth were two and a half times more likely to experience disruption than children of other races. This is inconsistent with James et al.'s (2004) and Webster, Barth and Needell's (2000) studies conducted in California that found African American race was related to greater stability.

Foster parents' reports of externalizing behaviors were significantly related to negative placement outcomes at the end of the follow up period. An increase of one standard deviation in the foster parent's report of behavior problems was associated with two times the odds of negative placement outcomes. This was only marginally significant for the caseworkers' reports. Male sex was highly, significantly associated with negative placement outcomes at the end of the follow up period. Males were four times more likely than females to experience negative placement outcomes.

Leathers (2006) found that significant associations occurred between lower levels of foster home integration and placement disruption. One unit of foster home integration was

associated with a 56% decrease in the probability of disruption. In turn, behavior problems were significantly associated with integration. The caseworker's report of externalizing behavior problems was a strong predictor of disruption before controlling for foster home integration. Foster home integration was not significantly linked to negative placement outcome at the end of the follow-up period.

Research Involving Alternative Care and Geographical Location

The review of literature did not render a single scholarly journal article that analyzed geographical location as a possible factor related to stability, instability, rates of placement change or reasons for placement changes. Yet, the Administration for Children and Families' (ACF) 2005 review of states found that only 15 states were in compliance with federal benchmarks for ensuring that children have safe and stable placements while in alternative care, and that state to state performance varied greatly (CRS Report for Congress, 2005). There were, however, two articles that found associations between geographical location and permanency outcomes for children in alternative care. These are discussed in the following paragraphs.

Smith (2003) conducted a study including 1,995 children in alternative care, in seven states, to analyze factors associated with when children exit alternative care after their parents' parental rights have been terminated. The primary permanency goal for children whose biological parents' rights have been terminated is adoption. Smith found that such children exit care at a slower rate if they are older, African American, placed in kinship care and have more alternative care placements while in care. Smith also found that the rate of exiting care for children whose parents' rights have been terminated varied greatly by state.

The 1,995 children involved in Smith's (2003) study all became eligible for adoption in October 1997. The federally mandated Foster Care Analysis and Reporting System (AFCARS) was used to elicit data for the cohort sample. Results of testing, utilizing the Cox Regression model, revealed that the number of previous placement settings and the length of time in placement before the parent's rights were terminated were related. Children who exited care within one year after becoming eligible for adoption had an average of 2.97 moves compared to an average of 3.46 moves for children who had not exited care. Each additional placement setting decreased the chance of exiting care within one year of becoming eligible for adoption by 13%. The average age of children who exited care within one year of becoming eligible for adoption was 5.9 years. The average age of children who did not exit care in one year was 7.1 years. When length of placement and other variables were controlled for, each additional year of age decreased the hazard of exiting by 5%. African American children were 23% less likely than children of other races to exit care within one year after becoming eligible for adoption.

Due to missing data in the AFCARS system, Smith's study (2003) involving state to state comparisons involved only 985 out of the 1,995 children in the seven state sample. Data used included seven states that are representative of relatively populous areas, including states in the Western, Southern, Central, North Eastern, North Western and North Central and Midwestern regions. The likelihood of exiting care within one year after becoming eligible for adoption ranged from 22% in one state to 53% in another state. Children from the Western and Northeastern states exited care more quickly than children in the Midwestern state. Children in the Southern state had less timely exits than children in the Midwestern state. The rate of exit time was similar in the Midwestern, Central, Northwestern and North Central states. Smith

(2003) maintains that the state to state differences in rates of exiting care after children become eligible for adoption remained even after controlling for demographic and caseload differences. Smith suggest that these differences may be due to different ways in which states define and view permanency, differences in state practices and policies, and different court processes.

Becker, Jordan and Larsen (2007) conducted a study to examine the role of race, diagnosis, and place of residence as factors in predicting successful permanency planning and length of stay in foster care. The study found that the child's geographic district of residence, within the state of Florida, was the most important predictor of outcomes for children in care. The study population included children who were placed in foster care and exited from foster care, between July 1, 1998 and December 1, 1999. Children in care for less than 30 days were excluded from the study. Other criteria for inclusion in the study included a social security number that matched with Medicaid enrollment records during the study time period. The final sample included 7,807 children, which constituted 79% of the 9,826 children in the population in care for at least 30 days.

Becker, Jordan and Larsen (2007) examined records to determine successful or unsuccessful completion of the plan to find the child a permanent placement and to exit the alternative care system. If a child did not exit care within one year of entering care, the completion of the permanency plan was considered unsuccessful. Independent chi-square tests were employed to test for the associations between successful permanency planning and demographic variables, including race, gender, age, geographical region, and diagnosis as recorded in the child's Medicaid records. Logistic regression analysis was also conducted to test the effect of the variables on successful permanency planning.

Becker, Jordan and Larsen (2007) found that only 24% of the children in the study exited care in the one year time frame. White children were more likely to exit care successfully than non-white children. As children became older, they were less likely to successfully exit care. The odds of reunification were not significantly different for children under age 6 than for children between 6-12 years of age. Children enrolled in Medicaid before entering alternative care placement were less likely to successfully exit. Substance abuse diagnosis, mental disorders, and diagnosed development disabilities were all negatively related to successful exits. Children who had a therapeutic foster care placement or an involuntary psychiatric examination, were also less likely to have a successful exit. Gender and type of abuse at time of entry into alternative care were not associated with unsuccessful or successful exits.

Becker, Jordan and Larsen's (2007) study found that even after controlling for other potential predictors, district of residence was the strongest predictor of successful exits. The overall state success rate of successful exits was 24%. In one district, however, the success rate was 46% as compared to the two most urban areas that had 8% and 9% success rates. Children residing in one district were 7 times more likely than children in one urban district to exit care successfully.

Discussion and Conclusion

This review of the literature shows that research on instability in alternative care placements has historically focused on increasing knowledge regarding the relationship between the length of time children remain in alternative care systems and the number of times they are moved. More recent studies have begun to focus on other factors involved in placement instability, including identification of the vast number of reasons children experience placement

change. To date, however, most current research in this area has focused on placement instability as a result of children's behavioral needs and foster parents' willingness and ability to deal with those needs. Consequently, legislative efforts across the nation have honed in on improving stability by holding states accountable for ensuring that a certain percentage of children experience no more than two moves depending on specific time frames spent in alternative care. Many states programming efforts have therefore focused on recruiting, training and support programs for foster and adoptive parents.

Recent research has begun to identify and focus on a more comprehensive understanding of the numerous reasons children experience multiple placements in alternative care. The common factors found to be related to instability, despite various findings, include age, race and gender of children. This prompted questions about whether these same factors would also be related to the reasons children move from placement to placement. James' (2004) comprehensive identification of all reasons for placement changes and categorization of those reasons yielded some surprising findings. James found that 70.2% of all placement moves in a San Diego County cohort were due to policy and system related reasons. This finding may indicate a need to broaden the research focus from the current concentration on child behaviors and foster family home disruptions. More knowledge, however, is needed to determine if the findings involving the San Diego County cohort are similar to those in other geographical areas. In other words, if one study found that 70% of placement moves were directly related to policy, would similar findings be recognized in other counties, regions and states?

During the review of the literature, it became apparent that studies on placement instability in alternative care were limited in terms of national representation. The studies

specific to instability in alternative care, that have been conducted in the last 20 years and discussed in this review, includes one state wide study drawn from the child welfare population in California, one state wide study in New York, two county level studies in San Diego, which utilized the same secondary data base, and two studies conducted in Illinois. Yet, the majority of states are failing to meet the federal definition of stable placement in alternative care and performance varies greatly from one geographical area to another.

In Smith's (2003) study involving seven states' performance on timely permanency for children available for adoption, success varied greatly from state to state. Becker, Jordan and Larsen's (2007) study involving Florida's child welfare system found that geographical residence, within districts in the same state, was the most significant predictor of whether a child's plan for a permanent home was successful within one year after the child entered care.

Although every state receiving federal funding is bound to the same federal laws and regulations, there are salient differences in state governance and state funded resources. For these reasons and perhaps many others, differences in child welfare outcomes from state to state may be more easily understood. The same reasoning, however, may be more difficult to apply to counties and regions bound by the same state policies and practices. ACF (2005), federal level review outcomes as well as the scholarly research to date certainly shows some differences at the regional levels in terms of the number of placement moves and the relationship between number of moves, length of time in alternative care, age, race and gender. If analyzed, would these differences also be found in why placement changes occur? If, for example, policy and system related placement changes make up 70% of all moves at the state level, will they also make up 70% of all placement reasons on a regional basis? Will the most prevalent reasons given for why

children are moved be similar or very different from one side of the state to the other? More research is needed to examine the possible associations between geographical differences and reasons for placement changes.

As previously noted, a few studies have found that age, race and gender are associated with the number of times children experience moves. The findings, particularly those regarding the relationship between number of placement changes and race/ethnicity and gender have been inconsistent. None of the studies cited have focused on whether race, gender and age are related to the reasons why children are moved. Additional research is needed to identify the multitude of reasons children experience instability in alternative care and the relationship between reasons for placement changes, geographical location, race, gender and age.

It should also be noted that with the exception of Zinn, Decoursey, George, and Courtney's (2006) study, which utilized a web-based survey as part of the studies data sources, every study included in this review of the literature utilized databases containing information about children in care several years prior to the study; secondary data sources that were created for different studies several years prior to use in the cited study; and/or case records of children in care several years before the cited study was conducted.

All but two studies cited utilized data and case record information on children in care prior to the passage of major federal legislation that mandated states to follow policies with potentially significant impact on stability in alternative care. The Adoption and Safe Families Act was passed into law in 1997, and mandated numerous state actions to insure permanent and stable homes for children in alternative care. With the exception of Becker, Jordan and Larsen's (2007) and Smith's (2003) studies based on timely permanency, all the research studies

discussed in this review of literature that have been published since 1997, utilized case information collected between 1988 and 1991. The only partial exception is Zinn, Decoursey, George and Courtney's (2006) study, which utilized cases from 1990 to 2004. This study focused solely on reasons for placement changes for children placed in foster family (related and unrelated) homes only. Reasons for placement moves involving children in any other placement type (i.e., residential care, group care, or shelter care) were excluded.

More research is needed to identify all the reasons children experience placement changes, utilizing recent child welfare activity. Such information will assist stakeholders at all levels of involvement in child welfare to develop more comprehensive policies, programs, and resources to improve stability for children growing up with no where to call home.

Chapter 3: Method of Study

This study surveyed case managers employed by the Missouri Children's Division and other private agencies contracted to provide services for the Division, throughout the state of Missouri. Case managers are required to be involved in all decisions and actions regarding placement changes involving children in their caseloads.

An on-line survey was created and utilized to collect data on the case managers' perceptions about the primary reason for each placement change; whether the placement change was in the child's best interest; and whether the placement change was included in the child's written plan to obtain a permanent home. The data was analyzed via descriptive statistical frequencies and chi-square measures of association. This chapter provides a description of the study's sample, instruments, and procedures.

Sample

A cohort model involving all moves from one alternative care placement to another alternative care placement during a two month time period was utilized for this study. Case managers responsible for coordinating placement moves that involve children in their caseloads were solicited for participation in this study. Case managers are also responsible for coordinating services to ensure the development and completion of family assessments, treatment and permanency planning, maintaining case records, reporting to the juvenile courts and working with all involved stakeholders.

Before the specific time period for data collection was determined, representatives of the Missouri Children's Division, the Department of Social Services, Information, Technology and

Support Division (ITSD), and the researcher worked to develop a technological approach that would enable web-based surveys to be linked with the specific data needed in the Missouri Adoption and Foster Care Reporting System (AFCARS). Staff members of ITSD and the researcher also worked together to develop the web-based version of the survey and to complete necessary procedures to ensure the researcher's access to the state's secure electronic mailing system. This work began in December of 2006 and was completed in April 2007.

According to the Missouri Children's Division Fiscal Year 2006 Report (Missouri Department of Social Services, 2007) 12,610 (76%) of the 16,487 children in alternative care during the year experienced two or more moves since their most recent placement into alternative care. Many of these children (exact number unavailable), were placed into alternative care before the beginning of fiscal year 2006. For this reason, the number of placement changes that occur over any given period of time is not available through routine reports. By special request, ITSD preformed analysis on all the placement changes that occurred in one month. The analysis revealed that there were 975 placement moves in December 2006. Based on this number, it was estimated that the frequency of moves in any given two month period would be between 1,500 and 2,000: roughly 10% of the entire alternative care population in fiscal year 2006. Given the resources available, the decision was made to include all alternative care placement changes that occurred in May and June 2007, the first full two months following completion of the technological plan for data collection.

Given the complex and unknown characteristics of all placement moves that occur over a long period of time, it was difficult to determine the true representation of the placement moves analyzed in the study compared to the overall number of placement moves in the population. For

this reason, a sample involving placement moves over a longer period of time was certainly desirable. Due to time constraints, limited funds and other resources available for this study, however, data collection was limited to two consecutive months.

Concerns regarding response rate and accuracy of case manager recall lead to a decision to include only those moves that occurred within 60 days of the case manager receiving the survey. Threats to the response rate included case reassignments, termination of employment, and inability to recall the needed information that occurred several months before receiving the survey. Participants in the pilot test acknowledged that case managers have many demands on their time and that they would be unlikely to complete a survey on a placement that occurred several months before receiving the survey. In other words, if they could not recall the information requested, they would be less likely to access and read through files in order to complete the survey.

The number of staff members allotted to each geographical location, and the local distribution of workload, does impact the number of placement moves that any one case manager may be involved in during a two month time period. In some small counties, for example, there may only be one case manager who is responsible for services to all children in alternative care in the county. They would then be involved in all placement moves. For this reason, the majority of case managers solicited for participation in this study received more than one survey to complete. Of the 1,700 moves that occurred in May and June, 2007, 1,081 (64%) involved case managers who experienced between 2 and 14 placement changes in their caseloads. Case managers who experienced only one placement change in their workload made up 619 (36%) of the 1,700 total moves.

Of the 1,700 placement changes, 1,047 (61.6%) included children who experienced one placement change during the two month time period. The remaining 653 (38.4%) placement changes involved children who moved more than one time during May and June 2007. Of these 653 moves, 283 (16.6%) involved a child who had experienced two moves during the two month period. Another 283 (16.6%) placement changes involved children who experienced three moves during May and June. Sixty six (3.9%) of the moves involved children who experienced three or more placement changes. Eighteen (1.1%) placement changes involved children who experienced four or more moves; and three placement changes (0.2%) involved children who experienced five moves during the two month period. Since 76% of all children in care during 2006 experienced between two and sixteen placement moves and the average number of moves for children in custody during fiscal year 2006 was 3.58 per child, it was assumed that during any other two month time period, placement moves would include children who moved multiple times.

As discussed in the review of literature, previous research has shown that placement moves are often due to specific behavioral or other characteristics of the child. Recent research, however, such as James' (2004) study of all placement move reasons involving a San Diego cohort, has found that placement moves occur for policy and system related reasons, foster parent related reasons and biological family related reasons. Therefore, elimination of moves from the study that included the same children or the same case manager, or even the same foster parents, biological parents, other placement providers or case managers, would likely under-represent the frequency of some primary reasons for placement moves. In fact, the very nature of some policies, such as those that requires moves from emergency foster homes within 60 days or

allows for a maximum of 30 days inpatient mental health treatment; ensure that there will be placement changes, involving the same child, during a 60 day period.

Given the goals of this study, the fact that most children in alternative care experience multiple placement changes, and that multiple moves are experienced on a regular basis for numerous reasons beyond child and case manager characteristics, the inclusion of all moves, regardless of whether they included the same child or case manager or other factors such as same placement providers or regions, was determined to be more representative of the true nature of placement changes and more likely to ensure accurate representation of all placement reasons. Each reason was also counted one time for each move, so if a child was moved three times primarily due to the child's behavior, the moves will be counted three times. If however, the child was moved three times due to a provider going on vacation, then for hospitalization, then to a relative's home as preferred by policy, each of these three reasons was also represented independently in the sample. Therefore, the decision was made to include all placement moves.

Survey Administration

Missouri consists of 115 counties, including two major metropolitan areas. The counties are further categorized into six regions for administrative and planning purposes. Case managers from each county and region were invited to participate in the study. The case manager's electronic mail address had to be accessible through the state database or through address information provided by the private contracted agencies in order to be included in the study. Participation also required that the case manager have the ability to open the web-based survey and to send the survey through the state's database system. All publicly employed respondents had access to all needed technology via their county Children's Division office. It is unknown if

all case managers employed by every private agency had the necessary technology to open and return the survey.

Administration and collection of survey data was a collaborative process between the researcher and the state agency's Information, Technology and Support Division (ISTD). The researcher was initially provided with specific information on each of 1,700 alternative care placement changes that occurred during May and June 2007 for planning purposes. This data included the names of case managers involved in each placement change, a case number, the county and the geographical region the case was managed from at the time of the placement change. The sex, race/ethnicity and date of birth of the child involved in the placement change were also given. ITSD then connected the data fields containing the case managers' electronic mailing address and each placement move.

If the case manager had an electronic mailing address listed in the appropriate data field, they were sent a survey. Each survey was accompanied by a memorandum from the Director of the Missouri Children's Division (see Appendix B for memorandum). The memorandum discussed the purpose of the study, the voluntary and confidential nature of participation, and how the study results would be used. Each case manager surveyed also received the specific child's name, and move information for which data was requested.

The geographical regions utilized for the study are those used by the state for administrative functioning. During fiscal year 2006, Missouri had 16,487 children placed in the Children's Division's custody for reasons related to child abuse and neglect. The Southeast Region includes 28 rural counties. In fiscal year 2006, 16% of the total number of children in the Children's Division's custody, were provided case management services from counties in this

region. The average number of placements experienced by children case managed in the Southeast was 3.12. The Southwest Region has 28 rural counties, and also includes a suburban county which encompasses the Springfield and Branson areas. In fiscal year 2006, 25% of the total number of children in the state's custody, were provided case management services from counties in this region. The average number of placements experienced by children case managed in the Southwest was 3.4. The Northeast region includes 22 rural counties and 2 suburban counties. In fiscal year 2006, 13% of the total number of children in the state's custody, were provided case management services from this region and the average number of placement changes was 3.49. The Northwest Region is made up of 27 rural counties. The total number of children case managed in this region made up 6% of the state's total population in 2006. The average number of placements experienced in the Northwest was 3.29 (Missouri Department of Social Services, 2007).

Missouri has two major urban areas. The West Urban region includes the Greater Kansas City area and two rural counties. The number of children case managed in this region during fiscal year 2006 made up 13% of the total number of children in the state's custody. The average number of placements experienced by children in the Urban West Region was 3.52. The East Urban region includes St. Louis County, St. Charles and St. Louis City and one rural county. The number of children case managed in this region in 2006 made up 27% of the total population of children in state custody. The average number of placements experienced by these children was 4.14. Table 1 below depicts the frequency of placement changes and the percentage of placement changes for all moves that occurred during May and June 2007, by geographical regions (Missouri Department of Social Services, 2007).

Table 1. Placement Changes by Geographical Areas

Geographical Regions	Number of placement changes in May and June 2007(N=1700)	Percentage of placement changes in May and June 2007
Southeast (rural)	238	14.0%
Southwest (rural and suburban)	460	27.1%
Northeast (rural and suburban)	190	11.2%
Northwest (rural)	91	5.4%
East Urban (includes surrounding suburban towns)	488	28.7%
West Urban (includes Surrounding suburban towns)	233	13.7%

Electronic mail addresses for case managers involved in 1,668 of the 1,700 placement changes were available. Of these, 1,372 (82%) were case managers employed with the Missouri Children’s Division and 296 (18%) were employed with private sector agencies contracted with the Division. Linking the state database systems was a highly complex process and required very specific knowledge and expertise. Direct access to the databases needed to complete certain tasks would also have exposed the researcher to confidential data well beyond the scope of this study. For these reasons, all surveys were electronically mailed by the Information, Technology and Support Division. Of the 1,668 placement moves with an available case manager electronic mailing address, 102 surveys were returned marked “undeliverable”. The most likely explanation for the “undeliverable” status is termination of employment by case managers who were involved in the placement changes and possible errors when the electronic mailing addresses were entered in the data fields at the county office level. The elimination of 102 undeliverable surveys resulted in a final survey sample of 1,566 out of 1,700 placement changes that occurred

in May and June of 2007. Surveys were completed and returned on 844 placement moves. This represents 53.8% of the 1,566 surveys administered.

Survey Instrument

A ten item survey was developed as a mechanism to collect information about geographical location of case management, worker perceptions regarding the reasons for placement changes, and demographic information about the child involved in each move. The ten survey items included nine quantitative questions and one qualitative question. The qualitative question was used to clarify the respondents' quantitative response regarding primary reasons for placement changes when the respondent selected "other" or when data was missing. Case managers were also asked if they believed the placement move was in the child's best interest and if the move was included in the child's written case plan for finding a permanent home. The independent variables included (a) geographical region of case management; (b) child's age; (c) child's gender; and (d) race/ethnicity of the child. The dependent variable was the reason for placement change category (see Appendix A).

During development of the survey, improvements were made based on the input of 15 case managers who participated in a pilot administration of the survey. Improvements were also made based on the recommendations of a state agency committee, made up of policy and program staff members, responsible for reviewing and approving research request involving the state's child welfare agency. These improvements included the addition of an item to request the father and mother's primary racial description when the respondent stated that the child was multiracial or "other". Input also included the addition of an item that requested the respondent to indicate the specific type of placement home the child moved from and to. In some situations,

the answers to these questions proved useful, such as when pertinent data regarding the reason for the move was unclear or missing. If, for example, the respondent did not select a primary reason for the placement change, but stated that the child was moved to a pre-adoptive home, therefore indicating that the reason for the move was to place the child in a potentially permanent home.

The researcher then collaborated with ITSD to format the survey into a portable document file (PDF), accessible to case managers across the state through a secure, electronic mail system. The PDF features included the use of drop down boxes that prevented respondents from selecting more than one answer on quantitative items.

Prior to conducting the study, approval was obtained from the University of Missouri's Internal Review Board. The study proposal was also reviewed by a state child welfare agency committee and approved by the state agency director. A cover memorandum, signed by the Director of the Children's Division accompanied each survey. The memorandum described the purpose of the study, the manner in which the study findings would be utilized, and the confidential nature of the information the case managers provided (see Appendix B). The unique placement change information and the name of the child involved also accompanied every survey that was electronically mailed. This confidential information was required in order for the respondent to know what information to enter on the survey. This information was deleted from the survey files when the respondent electronically sent the survey back to the researcher. In other words, the researcher did not know the identity of the respondent or the child involved when the completed survey was received.

Surveys were administered to case managers employed by the public child welfare agency based on when the full month of data became complete and available as opposed to waiting for both months of data to become accessible. This ensured that case managers were asked to complete surveys on actions that occurred within the shortest span of time possible. Surveys on placement moves that occurred from May 1 to May 31, 2007, that were case managed by public sector case managers, were mailed the second week of June 2007. There were 924 moves in May and 427 surveys (46%) were returned as a result of the first mailing. Surveys on placement moves from June 1 to June 30, 2007, that were case managed by public sector case managers, were mailed during the first week of July. There were 642 moves in June and 326 surveys (50%) were returned as a result of the second mailing. At the request of the researcher, the Children's Division requested electronic mail address from each private agency contracted to do case management services. Once each hard copy list was provided, the researcher identified available addresses that could be matched with the relevant change of placement and manually entered into an excel worksheet. The completed worksheet was then combined with the state's database by ISTD and sent to each agency. This process took several weeks, thus, surveys that required electronic mailing addresses to be obtained from contracted agencies (addresses not maintained in the state's database) were mailed the first week of August, 2007. Surveys mailed to private agency respondents contained 296 moves that occurred in May and June, 2007, of which 91 (30%) were returned. The most likely reason for the lower response rate involving the various private agencies is lack of or incompatible computer software needed to open, complete and return the surveys.

Each time surveys were mailed, case managers were given two weeks to complete and electronically mail the surveys to a unique address assigned to the researcher. The case manager's name, the specific placement move information and the involved child's name that was provided to the case manager was expunged during the mailing process. In other words, when a survey was returned to the researcher, it was not possible for the researcher to determine which worker, specific placement or child was involved.

Given the limited resources of the researcher and ISTD, and concerns regarding the possibility of receiving duplicate surveys completed on the same placement change, with no means of detection, case managers only received one survey for each placement change involved in their case load. There was not a follow up mailing if the case manager did not respond to the first survey. The survey e-mail and the memorandum from the Children's Division's Director, however, remain in the case manager's electronic mail inbox until they deleted the e-mail or moved it to another file. If the case manager e-mailed the researcher with questions about how to open and send the survey, every effort was made to help them complete the tasks successfully.

As surveys were received, they were downloaded into an electronic database, utilizing Adobe Acrobat 8 Professional Software. Once the two week timeframe passed for each of the three administering rounds, the database was exported to a Microsoft Excel Spreadsheet and then to an SPSS database. The three databases were subsequently combined into one SPSS document. Nineteen surveys were returned to the designated address but any information the respondents recorded on the surveys was lost during the electronic transmission. Twelve other case managers responded by stating they were unable to open the survey. This was most likely to occur with case managers employed by contracted, private agencies and most likely due to software

compatibility issues and data entry error. The survey information sent to each worker required confidential information about the child involved in the placement move. For this reason, as well as time and financial constraints, paper copies of surveys were not sent to case managers under any circumstances.

Coding Variables

Once the three databases for the three separate survey periods were combined, the researcher added two variables and manually entered data for each placement move. These variables were region of case management and change of placement reason category. The coding strategies for all variables are described in the following section. Chi-square analyses were conducted. This nonparametric test was used because the dependent variable in each hypothesis to be tested is at the nominal data level. With the exception of age, all independent variables are also at the nominal data level. Proper use of the chi square test required the following assumptions to be met (Abu-Bader, 2006).

1. The sample should be representative of the population from which it is selected and to which generalizations will be made.
2. The dependent and independent variables must be measured at the nominal level. Each variable must have at least two mutually exclusive and exhaustive levels, or categories.
3. The two variables must be independent of each other, so that the response to one variable is not related to the other.
4. Data analyzed by chi-square test must be frequencies as opposed to scores.

5. As a general rule, no more than 20% of cells should have expected frequencies of less than 5 cases per cell.

The *age* variable was transformed from a continuous to a categorical variable to meet the chi-square assumption that dependent and independent variables be measured at the nominal level. The researcher utilized the chronological age recorded by the respondent to determine the age category of the child involved in the placement move. If the case manager recorded that the child involved in the placement move was under the age of one, the researcher assigned a code of zero. This reduced the variable from 19 factors (0 to 18 years of age) to six combined age factors. The age categories included children 0-2 years, 3-5 years, 6-8 years, 9-11 years, 12-14 years, and 15-18 years. These categories are representative of the age categories utilized by the state agency to conduct research and for purposes of regular reporting. The age categories are also roughly aligned with Jean Piaget's theories of child development. In *The Psychology of the Child* (Piaget & Inhelder, 1969), Piaget's seminal work and subsequent theories of cognitive development in children found that children's cognitive development generally develops in stages that correlate with chronological age. Piaget's four stages of cognitive development includes the sensory motor period, which occurs between birth and about 24 months, the preoperational period which occurs approximately between 2 and 7 years, the period of concrete operations between 7 and 12 and the period of formal operations which occurs approximately between 11 to 15 years of age.

As children develop, the demands and skills required by caretakers (including alternative caretakers) also change. In terms of caretaker responsibilities, one may also reason that the age categories signify changes in caretaker responsibilities. At approximately 2 years of age, for example, children grow to be mobile through crawling and walking. Around this time, toileting

training may begin. Providing supervision and training at this stage may require more time and resources than the caretaker has available. Societal norms also play a role. In the United States, for example, the majority of children begin attending formal school settings at the age of five. School attendance may require an adjustment in caretaker work hours, day care hours and additional transportation resources. These requirements may also be beyond the caretaker's willingness or ability to provide care. The age categories also roughly represent the ages in which there are changing needs and demands due to onset of adolescents, and socially normalized times children enter junior high and high school. All of these factors were considered in determining the age categories for this study.

The *geographical region* variable was assigned to each placement move by the researcher after the survey data was collected. The researcher used the county code recorded by the respondent to determine which of the six geographical regions the placement change occurred. Although case managers would obviously know the county office they work in, they may not necessarily know the regional divisions. Regional code entry by the researcher ensured greater accuracy of the data. As described earlier there were 116 possible county codes that were categorized into six geographical regions.

The *race/ethnicity variable* included White, Black/African American, Hispanic/Latino, Asian, Native American/Hawaiian/Pacific Islander and Multiracial categories. The federal government requires all states to routinely collect data on race and ethnicity utilizing these categories. Respondents were also given the option of selecting other and typing in the race/ethnicity of the child involved in the placement change.

Gender was conceived as a binominal variable, male and female. There were 12 cases with missing data. For this reason, statistical analyses involving gender was completed using 98.6% of the cases (N=832).

The *primary reason for placement change*, which served as the dependent variable in this study, was defined via a list of 34 possible reasons children may be moved, including an “other” reason. The lists of primary reason options the respondents could select from were based on a conceptual understanding of reasons describe in the current research, particularly the 46 primary reasons identified in James’ (2004) study. Case managers were only able to select one primary reason from the list.

Twelve primary reasons discovered in James’ study were not utilized in this study because they did not apply to Missouri’s child welfare practice. Missouri does not, for example, place children in emergency shelters/facilities. Missouri does, however, use emergency foster family homes. Other primary reasons for placement changes identified in James’ (2004) study, included shelter to short term foster home, step-down to short term foster home, short-term foster home to another short term facility, and short term foster home after abduction, move to long-term foster home, and step-down to long-term foster home. These options are considered placement types in Missouri. Discussions with case managers and policy staff members within Missouri’s Children’s Division elicited concerns that case managers in Missouri would interpret these codes as placement types as opposed to describing the primary reason a child was moved from one placement type to another. Other codes used in James’ study that were not applicable in this study included moves due to placement coordination error and unspecified allegations involving the foster family. Discussions with case managers and program and policy staff

members revealed that these two codes are not generally applicable to Missouri's practice and would likely not be understood by case managers who received the surveys. The list of 34 primary reasons given on the Case Manager Survey (see Appendix A) is covered in more detail in following sections.

The respondents were also given the option of choosing "other" and providing a brief narrative about the primary reason for the placement change. The coding of the abstracted narrative data was guided by the question: What was the primary reason cited for the placement change? If the case manager selected other and provided a brief narrative, the information was thematically coded and labeled for descriptive ease, using a constant comparative method of analysis (Glaser & Strauss, 1965). If the narrative reason was clearly the same as a reason given in the list of options, it was coded as such. If the narrative reason was different than the other options available, it was identified as an additional reason. This process was continued until it was assumed that a mutually exhaustive list of options could be applied to all cases. This resulted in an increase from 34 to 53 primary reasons placement changes occur.

James' (2004) identification of four *primary reasons for placement change categories* provided the foundation for the creation of this variable. These four categories included placement changes due to 1) system or policy-related reasons, 2) foster family-related reasons, 3) biological family reasons, and 4) child related reasons. Case managers were not asked to determine which of the four, broad, thematic categories described the placement change. The researcher added the category variable after all the data was received. If the case managers identified a primary reason that did not clearly fit within one of the four categories, additional categories would have been added. The categorization of the case managers' 53 primary codes

was guided by the question: Is the primary reason for the placement change given by the case manager similar to one of the primary reasons listed within one of James' four categories? The reasons were thematically coded and labeled for descriptive ease, using a constant comparative method of analysis (Glaser & Strauss, 1965). This process was continued until it was assumed that a mutually exhaustive list of options could be applied to all cases.

The Social Security Act, Title IV, Part E, (P.L.109-432) requires states to license all alternative care providers regardless of their related or non-related status (Administration for Children and Families, 2006). For this reason, the category, Foster and Adoptive Family Related Reasons, encompasses foster parents unknown to the child, relatives of the child, kinship caretakers (know the child but non-blood relation) and prospective adoptive and guardianship seeking caretakers. Table 2 below provides a listing of how the 53 primary reasons selected and identified by the respondents were grouped into four categories.

Table 2: Missouri Reasons for Replacements in Alternative Care by Category

System or Policy Related Reasons	Foster Family Related Reasons	Biological Family Related Reasons	Child Related Reasons
Moved because maintenance funds were too low for caretaker	Foster family moved	Foster parents requested move because of problems with the biological family	Foster parent does not want child around other children in the home
Moved to be closer to biological parent or school	Foster family went on vacation	Biological parents posed harm to the child or foster parents and the child was moved to a confidential or safer location	Foster parent is unable to deal with the child's behavior or other child specific issues
Child was moved to be with their siblings	Foster parent died	Child was home on trial basis and was moved due to concerns	Child committed a status or other criminal offense and court order to specific facility and/or released from the facility
Moved with sibling because of sibling(s) problems in the placement	Foster parent stopped being a foster parent	Conflict between relative placement and biological parents	Child refused to stay in the home or requested to be moved
Group home or residential home closed or their contract was terminated	Foster parent becomes seriously ill	Biological parent absconded with the child	Child discharged from hospital (medical, mental health, drug/alcohol treatment)
Moved as part of a step-down plan to a less restrictive environment	Foster parent has a family member who becomes seriously ill		Youth began independent living plan or transitional living plan
Child's case was transferred to a Children's Division case manager	Foster parent request move because of life crisis		Child ran away

System or Policy Related Reasons	Foster Family Related Reasons	Biological Family Related Reasons	Child Related Reasons
Child's case was transferred to a contracted case management agency	Foster parent did not want to deal with the child's behavioral or other issues		Treatment Center, residential or group home said child needed higher or lower level of care
Moved to an adoptive or guardianship seeking home	Foster home placed on hold due to licensing problems		Child moved to residential treatment or hospital setting, drug and alcohol rehabilitation
Child was placed with relative/kin	Foster parent was in disagreement with the case plan for the child		Child's behaviors posed safety concerns for self, residents of the home/community
Moved from emergency placement to regular placement	Foster parent was not meeting the child's treatment needs		Child participated in inappropriate behavior (ie sexual contact with foster parent's child)
Return to placement for summer/college	Concerns for the child's safety or well-being but not actual evidence of abuse or neglect (no hotline report made)		
Child placed in emergency placement from an emergency placement	Foster parent behavior is deemed generally inappropriate		
Child left mental health facility after 90 days do to families ineligibility for benefits (1003issue)	Foster parent named in sexual abuse allegations/ sexually inappropriate behaviors		
Overcrowding in foster home	Foster parent named in physical abuse allegations		
Moved to 30 day YES Program for transitional living evaluation	Foster parent named in neglect allegations		
Moved from Job Corp to foster home due to medical need	Foster parent changed mind about adopting		
	Foster/Adoptive parent uncooperative with the case plan		

Each child in the states' custody has a written case plan designed to ensure that their treatment needs are met and that there is a plan to find a permanent home for the child, either through reunification with their parents, adoption, guardianship, or some other legally permanent status (Administration for Children and Families, 2000). Case managers were asked to answer yes or no to two questions on the survey to further describe the primary reason for the placement change they identified. These questions included whether the case manager thought the placement move was in the child's best interest and if the move was included in the child's written case plan before the move occurred.

Procedures and Analysis

Given the nominal nature of the dependent variable in this study, chi square was used to test for relationships between the frequencies of answers contained in the four, non-directional, exploratory hypotheses. Chi-square is a nonparametric test and thus, does not require data to be continuous or approach the shape of a normal curve. Chi-square does however, require that the dependent and independent variables be measured at the nominal level (Abu-Bader, 2006). For purposes of conducting chi-square, age, a continuous variable, was transformed to a categorical variable. Chi-square analysis revealed a significant relationship between categorical reasons for placement changes and the nominal variable, geographical regions. Chi-square also found a significant relationship between categorical reasons for placement moves and the categorical age variable. Chi-square testing did not find a significant relationship between the four categories of placement reasons and race/ethnicity or gender.

Limitation of the Study

Several limitations must be considered when reviewing the results of this study. The study was geographically restricted to one Midwestern state's public child welfare system. In addition, a cohort sample of two months data in 2007 was utilized. Therefore, the results may not be generally applied to other geographical areas. Furthermore, testing was conducted utilizing six geographical regions within Missouri. Some regions include a mix of rural, urban and suburban counties and cities. Geographical areas partitioned differently may result in different findings, even within the same state.

This study was also limited to placement changes that occurred during May and June 2007. Although this allowed for data to be collected from respondents with recent recall of the placement changes, it is unknown if placement changes that occurred over a longer period of observation would result in different findings. May and June 2007 are significant months in terms of children's daily schedules and caretaker's responsibilities. During these months, children in alternative care are generally ending a school year and beginning summer break. It is unknown if placement change reasons vary at different time periods throughout the calendar year. Are decisions about when moves occur, for example, based on the completion of a school year or during holiday breaks?

Although there is no evidence that the complex factors involved in multiple placement moves in May and June 2007 are significantly different than those in the larger population, there is also no available evidence to support that they are the same. Based on the review of literature there are a multitude of primary reasons that include child specific characteristics, caretaker, case manager, and biological family characteristics, policy requirements and even county or region of

case management. Although each move is counted independently in this study, there is a great deal of overlap in the children, case managers, placement providers, geographical regions, biological families, and policies applied to the moves. This study includes all placement moves, regardless of the complex and overlapping factors involved. Therefore, it is important to consider that the number of multiple moves experienced in May and June of 2007 may not be typical of multiple moves experienced in other time periods.

The scope of this study was to explore primary reasons for placement changes in alternative care. Placement decisions are complex, as are human events that lead to placement changes. There may be multiple reasons to describe a placement change, however respondents were asked to limit their comments to one primary reason. It should also be noted that while case managers are the only professionals required to be involved and aware of all decisions regarding placements, they are not the only stakeholders involved in decision making. This study only solicited the perceptions of assigned case managers. The primary reasons for placement changes may vary if the perceptions of other involved persons were sought.

Chapter 4: Findings

Chapter One of this dissertation established the need to systematically identify the primary reasons children in alternative care experience multiple placement changes. Chapter One also discussed the need to begin examining the relationships between reasons for placement changes and such variables as regional differences, age, race and gender. Chapter Two focused on the literature related to placement changes in alternative care and created a context for what we know and do not know regarding placement instability in the United States. Chapter Three described the method and procedures used to identify a comprehensive list of reasons for placement changes and to determine if there was a statistically significant association between reasons for placement changes and geographical assignment of case management, and race, age and gender of the children involved. This chapter describes the sample of placement changes utilized, identifies the reasons for the placement changes and presents the results of the chi square analysis.

Demographic Characteristics of Children Involved in Placement Moves

According to the fiscal year 2006 data, 16,487 children were placed in alternative care at some point in time during the year (Missouri Department of Social Services, 2007). Of the 16,487 children in care 76% of them experienced one or more moves from an alternative care placement to another alternative care placement. The remaining 3,880 (24%) children never experienced a placement change. In other words, they remained in the first alternative care placement following entry into alternative care. Data regarding the age, gender, race/ethnicity and total number of moves that occurred in any given time period was not available. For this

reason, the entire population of children in care, regardless of placement histories, was used for a rudimentary comparison with all moves that occurred in May and June 2007 and the survey respondents' data characteristics groups. This is somewhat problematic because the study does not include analysis of the first placements after children are placed removed from their biological families. The May and June data includes only moves from one alternative care to another alternative care placement. Table 3 below gives the number and percentages of the demographic characteristics of the entire fiscal year 2006 population in alternative care compared to those of the May and June 2007 placement moves and survey data.

Table 3: Demographic Characteristics of FY 2006 Children in Alternative Care, and Children in the 2007 Cohort and Survey Respondent Population

Demographic Characteristic	2006 Total Alternative Care Population(%) (N=16,487)	Cohort of All Moves in May and June 2007 (%) (N=1,700)	Survey Respondents for May and June 2007 (%) (N=844)
<i>Gender</i>			
Male	8266 (50.1)	838 (49.3)	438 (51.9)
Female	8221 (49.9)	862 (50.7)	406 (48.1)
<i>Race/Ethnicity</i>			
Caucasian	11012 (66.7)	1118 (65.8)	553 (66.5)
African/Black	4717 (28.6)	553 (32.5)	224 (26.5)
Asian	29 (0.2)	1 (0.05)	1 (0.1)
Hispanic	457 (2.8)	Not available.	6 (0.7)
Multiracial	Not available	16 (0.94)	51 (6.0)
<i>Age</i>			
0-2	2662 (16.1)	221 (13.0)	109 (12.9)
3-5	2525 (15.3)	182 (10.7)	84 (10.0)
6-8	2086 (12.6)	205 (12.0)	94 (11.1)
9-11	1860 (11.2)	198 (11.6)	87 (10.3)
12-14	2506 (15.1)	349 (20.5)	168 (19.9)
15-older	4848 (29.4)	541 (31.8)	302 (35.8)
<i>Region</i>			
East Urban	4500 (27.3)	488 (28.7)	186 (22.0)
Southeast	2583 (15.6)	238 (14.0)	151 (17.9)
Southwest	4067 (24.6)	460 (27.1)	241 (28.6)
West Urban	2118 (12.8)	233 (13.7)	103 (12.2)
Northwest	1050 (6.4)	91 (5.4)	48 (5.7)
Northeast	2165 (13.1)	190 (11.2)	114 (13.5)

Identification and Categorization of Primary Reasons for Placement Changes

As stated in previous chapters, a primary goal of this research was to systematically identify a comprehensive list of primary reasons children are moved from one alternative placement to another. A second goal was to compare and contrast the findings of the primary reasons and categories of primary reasons with those identified in James' (2004) study. This study found fifty three primary reasons for placement changes as compared to 46 primary reason codes in James' study. Respondents did not record a primary reason on ten of the returned surveys, therefore testing involving the dependent variable was based on 833 placement moves. The 53 codes identified in this study were then grouped into four categories, including policy/system related, foster parent related, biological family related, and child related reasons.

Two of four categories identified in this study varied from those identified in James's (2004) study in subtle but important ways. James's study included two categories coded as "COP related to problems with biological family" and "COP related to child's behavior problems." This study found the categories of biological family related and child related changes to adequately fit the data, but evidence that some of the primary codes listed in the two categories indicated "problems" with the biological family or child's behaviors was not found. In the biological family related category, for example, data did not indicate that moves due to problems between the foster family and biological family were attributed to problems with the biological family as opposed to the foster parents. Other examples are seen in the child related moves category, including primary reason codes such as "child refused to stay and requested move", "youth began independent living plan (ILP) or transitional living plan (TLP), and "child moved from Job Corp due to medical needs". These reasons could not be qualified as problematic child

behavior based on the data provided in the survey. In fact, transition to an ILP or TLP program may indicate positive youth behaviors. The categories proved to be very broad and thematic; and certainly numerous arguments could be made for placing primary reasons in one category over another.

The COP sub-categories in James' study were also relatively adequate for this study. The exact wording used in the categories did vary from the wording utilized in James' study to more adequately represent the 53 primary reasons given by Missouri's case managers. Under System/Policy Related COP, James' found that the 1990-1991 sample of children in San Diego's alternative care system experienced placement moves due to the use of short term shelters 24.1% of the time. Missouri does not utilize emergency shelter care, but does utilize emergency foster homes; therefore the word *facility* was not used in this study. Another difference in this sub-category is the wording *long term facility*. Missouri does not utilize long-term facilities, at least not by design, but does move children to placements designed to provide the child with caretakers planning to become the legal custodians of the child. A side by side comparison of the findings of both studies is given in Table 4 below.

Table 4. Side by Side Comparison of Missouri and San Diego County Reasons For Moves

Reasons For Changes of Placement (COP) in Missouri Study			Reason For Change of Placement (COP) in James' (2004) San Diego County Study		
(N=833)	<u>N (%) in Category</u>	<u>(%) of total</u>	(N=1663)	<u>N(%) in category</u>	<u>(%) of total</u>
System/Policy Related COP			System/Policy Related COP		
<i>COP due to short term care policy</i>			<i>COP to short term facility</i>		
Moved from emergency home to regular placement	71 (22.0)	8.5	Moved from shelter to short-term foster home	400(34.3)	24.1
Moved to emergency home from emergency home	31 (9.6)	3.7	Step down to short term foster home	13 (1.1)	0.8
N/A			Short term foster home to another short term facility	72 (6.2)	4.3
N/A			To short term foster home after abduction	2 (0.2)	0.1
<i>COP due to prospective permanent home or step-down plan:</i>			<i>COP to long-term facility</i>		
Moved as plan to seek least restrictive environment	54 (16.8)	6.5	To long term foster home	374 (32.0)	22.5
Moved to guardianship or adoption seeking home	29 (9.0)	3.5	Step-down to long-term foster home	12 (1.0)	0.72
Moved to program site for transitional living evaluation	1 (0.3)	.12	Moved to family friend	8 (0.7)	0.5
<i>COP due to policy</i>			<i>COP to relative</i>		

<i>to place with relative:</i>					
Moved to be with relative or kinship provider	59 (18.3)	7.1	Moved to relative home	245 (20.9)	14.7
N/A			Moved to be permanently placed with relatives	10 (0.9)	0.6
<i>COP due to policy to place with sibling(s):</i>			<i>COP with siblings:</i>		
Moved to be placed with sibling	31 (9.6)	3.7	Moved to be with siblings	17 (1.5)	1.0
Moved with sibling due to sibling problems	7 (2.2)	0.8	Moves with sibling because of sibling's problems	5 (0.4)	0.3
<i>COP for Other system or policy reason:</i>			<i>COP for Other system or policy-reasons:</i>		
Moved to be closer to parent or school	12 (3.7)	1.4	Moves to be closer to biological parent or school	4 (0.3)	0.2
Case transfer back to public from private	10 (3.1)	1.2	N/A		
Group, treatment, residential home terminated contract	5 (1.6)	0.6	Group home closes	3 (0.3)	0.18
System related but unspecified policy/practice	4 (1.2)	0.5	Placement coordination error	1 (0.1)	0.06
Maintenance payment to caretaker too low	3 (0.9)	0.4	Moves because of lack of funds	1 (0.1)	0.06
Foster home was overcrowded	2 (0.6)	0.2	N/A		
Return to placement due to summer break/college	2 (0.6)	0.2	N/A		
Moved family ineligible for mental health hospitalization	1 (.03)	0.1	N/A		
Total for	322 (100)	38.65	Total for System or	1,167 (100)	70.2

System/Policy Related COP			policy-related COPs		
Foster/Adoptive Family Related COP					
<i>COP because of stressors or events in foster family's life:</i>			<i>COP because of stressors or events in foster family's life:</i>		
Foster parent not want to deal with child's issues	45 (25.3)	5.4	N/A		
Foster family went on vacation	11 (6.2)	1.3	Foster family goes on vacation	14 (10.4)	0.8
Foster family moved	6 (3.4)	0.7	Foster family moved	9 (6.7)	0.5
Foster parent became seriously ill	6 (3.4)	0.7	Foster parent dies	2 (1.5)	0.12
Foster parent requested move due to life crisis	7 (3.9)	0.8	Foster parent request COP: events or emergencies in life	30 (22.3)	1.8
Foster parent changed decision to adopt	5 (2.8)	0.6	N/A		
Foster parents in disagreement with case plan	3 (1.7)	0.4	Foster parent wants COP due to disagreement with court	1 (0.7)	0.06
Foster parent not feel supported by worker/services	1 (0.6)	0.12	N/A		
Foster parent stopped foster parenting	17 (9.6)	2.0	Foster parent leaves foster care	3 (2.2)	0.18
<i>COP following complaints or abuse allegations:</i>			<i>COP following complaints or abuse allegations:</i>		
Foster home placed on hold for licensing problem	12 (6.7)	1.4	Foster home is on hold: licensing problems	8 (6.0)	0.5
Concerns for child's safety/well being-no	23 (12.9)	2.8	N/A		

hotline					
Foster parents named in physical abuse allegations	17 (9.6)	2.0	Physical abuse allegations or physically punitive behaviors	15 (11.2)	0.9
Foster parent not meeting child's treatment needs	8 (4.5)	1.0	Fails to meet child's treatment needs	10 (7.5)	0.6
Foster parents behavior deemed inappropriate	6 (3.4)	0.7	Generally inappropriate behavior	3 (2.2)	0.2
Foster parent involved in criminal activity	1 (0.6)	0.1	N/A		
Foster parent alleged in sexual abuse or inappropriate	1 (0.6)	0.1	Sexual abuse allegations or sexually inappropriate behaviors	9 (6.7)	0.54
Foster parent involved in criminal activity	1 (0.6)	0.1	Foster parents involved in criminal activities	8 (6.0)	0.48
N/A			Unspecified allegations	4 (3.0)	0.24
Foster parent named in neglect allegations	1 (0.6)	0.1	Neglect of foster kids	10 (7.5)	0.6
N/A			Protective issues: past abuse of children	4 (3.0)	0.24
N/A			Allegations of general violence in foster family (not a sub-category)	1 (0.7)	0.06
<i>COP for other foster parent related reasons:</i>					
Unspecified foster parent related	5 (2.8)	0.6	N/A		
Moved to a foster home able to transport to school	1 (0.6)	0.1	N/A		
Total for Foster/Adoptive Family Related COP	178 (100)	21.4	Total for Foster Family Related COP	134 (100)	8.1
Biological Family Related COP			Problems with Biological Family Related COP		
Moved from trial	29 (72.5)	3.5	Reentry following	18 (53.0)	1.1

home visit due to concerns			reabuse or failure to comply		
Biological family posed threat to child or foster family	5 (12.5)	0.6	Moved to confidential placement	9 (26.5)	0.5
Relationship issues between foster and bio. Family	5 (12.5)	0.6	Foster parent requests COP: conflict with biological parent	7 (0.6)	0.4
Biological family absconded with the child	1 (2.5)	0.12	N/A		
Total of Biological Family Related COP	40 (100)	4.8	Total of COP Due problems with Biological Family:	34 (100)	2.0
Child Related COP			COP Related to Child's Behavior Problems		
<i>COP related to child's behavior:</i>			<i>COP related to child's behavior:</i>		
Child participated in inappropriate acts in home	3 (1.0)	0.4	N/A		
N/A			Mismatching of foster parent and foster child with documentation of behavior problems	5 (1.5)	0.3
Foster parent unable to deal with child's behavioral issues	59 (7.1)		Foster parent requests: too much stress due to child's behaviors	5 (1.5)	0.3
Child discharged from hospital/drug treatment program	40 (13.7)	4.8	N/A		
Child moved to residential, hospital or drug treatment	37 (12.6)	4.4	N/A		
Child's behavior posed safety concerns	35 (11.9)	4.2	N/A		
Child ran away	33 (11.3)	4.0	N/A		

Group/trmnt/res.state child needs different care	21 (7.2)	2.5	N/A		
Foster parent -not want child around other children	16 (5.5)	1.9	N/A		
Child committed/arrested status/criminal offense	15 (5.1)	1.8	N/A		
<i>COP due to other child related reasons:</i>			<i>(Not a sub-category)</i>		
Child refused to stay in placement/requested move	17 (5.8)	2.0	Child request move: documentation of behavior problems in home	9 (2.7)	0.5
Youth began independent or transitional living plan	14 (4.8)	1.7	N/A		
Moved to foster home from job corp. due to medical need	1 (0.3)	0.1	N/A		
N/A			Foster parent requests due to child's behaviors but worker also concerned about foster parents	14 (4.3)	0.8
Other child related COP, unspecified	1 (0.3)	0.1	N/A		
Total Child Related COP:	293 (100)	35.2	Total COP Related to Child's Behavior Problems	328 (100)	28.0
Note: COP=change of placement: N/A=not applicable: % are rounded up					

Primary reasons for placement changes related to child welfare policy and systemic structure made up the largest percentage of moves, at 38.6% of the total. James' (2004) study conducted in San Diego County found that 70.2% of placement moves were due to policy and system related COP. Placement changes related primarily to the child constituted 35.2% in this study compared to James' study which found that 19.7% of moves were due to child's behavior problems. Foster family related COP made up 21.4% as compared to 8.1% in James' study. Biological family related moves represented 4.8%, of the total moves compared to 2% in James' study. Some notable findings and policy related factors are discussed in more detail in Chapter Five.

Child's Written Case Plan and the Child's Best Interest

When asked if placement moves were included in the child's written plan, case managers stated that moves due to policy and systemic related reasons were planned 60.2% of the time. Case managers also reported that system/policy related moves were in the child's best interest 95.3% of the time. Foster/adoptive parent related moves that were not included in the child's written plan made up 80.8% of the category. Case managers reported that 81% of the foster/adoptive parent moves were in the child's best interest. Biological family related moves were recorded as being in the child's best interest 92.5% of the time. Biological family moves were not, however, part of the child's case plan 92.5% of the time. Child related moves were not included in the child's written case plan 70.1% of the time. When asked if case managers' believed the child related placement moves were in the child's best interest, 88.4% answered yes.

Race and Reasons for Placement Change

Another goal of this study was to test the relationship between the four reasons for placement categories and the race of the children involved. The chi-square test of association was utilized to examine the relationship between the child’s race and the categorical reasons for change of placement. Initial testing revealed that low frequencies in race categories other than White and Black/African American resulted in 17 cells (60.7%) that contained less than 5 cases and a minimum expected value of .05. In order to meet the chi-square assumption that no cells have frequencies of 0 and no more than 20% of cells have frequencies less than 5, Asian, Native American/Hawaiian/Pacific Islanders, Multiracial, Hispanic and other, were combined to form one category, labeled “other”. There were 11 cases of missing data in the categorical reasons for change of placement variable and three cases of missing data from the race variable. The missing data was deleted from the chi-square analysis, resulting in a total sample size of 830. The results showed a significant association between race and categorical reasons for replacement (X^2 (df=6)=9.93, $p<.13$). The two variables are not related in the population. Table 5 presents the results of the chi-square for race and category of reasons for placement change.

Table 5: Results of Chi-Square: Placement Change by Race of Involved Child

Race	Category										X ²	p
	System/Policy		Foster/Adoptive		Biological		Child		Total			
	N	%	N	%	N	%	N	%	N	%		
White	212	66.0	108	60.7	26	4.8	201	69.1	547	65.9	9.93	0.13
Black	88	27.4	49	27.5	9	22.5	75	25.8	221	26.6		
Other	21	6.5	21	11.8	5	12.5	15	5.2	62	7.5		
Total	321	100.0	178	100.0	40	100.0	291	100.0	830	100.0		

Gender and Reasons for Change of Placement

Another goal of this study was to determine if there was a statistically significant association between the child’s gender and the four categories of placement change reasons. The chi-square test of association was utilized to examine the relationship between the two variables. There were 11 missing cases in the categorical reasons for placement changes variable. The missing data was expunged from the chi-square test and the final sample size was 833. The results show that there is no significant association between gender and categorical reasons for replacement ($X^2 (df=3)=.99, p<..80$). The two variables are not related in the population. The results are given in table 6 below.

Table 6. Results of Chi-Square-Categories of Placement Change Reasons by Involved Child’s Gender

Variable	System Policy		Foster /Adoptive Family		Biological Family		Child		Total		X2	p
	N	%	N	%	N	%	N	%	N	%		
Gender												
Male	170	52.8	97	54.5	19	47.5	149	50.9	435	52.2	.99	.80
Female	152	47.2	81	45.5	21	52.5	144	49.1	398	47.8		
Total	322	100.0	178	100.0	40	4.8	293	100.0	833	100.0		

Geographical Region of Case Management and Reasons for Placement Change

Another goal of this study was to determine if there are statistically significant differences between the frequencies of moves in the four categories of reasons for change of placement in different geographical regions. Table 7 presents the results of the chi-square for regions and primary reason categories. There were 11 cases missing in the categorical reasons for placement changes variable and one missing case for regions. This resulted in a sample size of 832. The results show a significant association between the four categories of reasons for

change of placement and the geographical regions (X^2 (df=15)=46.9, $p<.01$). The two variables are related in the population. Although the variables are related, the Cramer's V coefficient indicates that geographical regions explain only 1.9% of the variance in categorical reasons for placement changes; thus, more than 98% of the variance in reasons for placement changes is unaccounted for.

Table 7: Categorical Reasons for Placement Change by Geographical Location

Variable	System Policy		Foster & Adoptive		Biological Family		Child Related		Total		X2	p
	N	%	N	%	N	%	N	%	N	%		
Region												
Urban East	72	22.4	42	23.6	3	7.5	68	23.2	185	22.2	46.9	.01
Southeast	47	14.6	31	17.4	12	30.0	58	19.8	148	17.8		
Southwest	116	36.1	42	23.6	8	20.0	70	23.9	236	28.4		
Urban West	36	11.2	30	16.9	0	0.0	37	12.6	103	12.4		
Northwest	13	4.0	7	3.9	5	12.5	23	7.8	48	5.8		
Northeast	37	11.5	26	14.6	12	30.0	37	12.6	112	13.5		
Total	321	100.0	178	100.0	40	100.0	293	100.0	832	100.0		

Placement changes due to system and policy related reasons varied from 49.2% of all placement changes (N=832) in the Southwest Region to 27.1% in the Northeast Region. Foster and adoptive family related reasons for change of placements described 29.1% of the total number of all placement changes (N=832) in the West Urban Region (Kansas City) to 14.6% in the Northwest Region. Biological family related reasons ranged from 10.4% in the Northeast Region to 1.6% in East Urban Region (St. Louis). Child related reasons described 47.9% of moves in the Northwest region, but only 29.7% in the Southwest Region.

An analysis of the 53 specific, primary reasons reveals that the top reason for placement changes in the East Urban, Southwest and Northwest Regions was to move a child from an emergency to a regular placement (11.3% to 9.5%). It was the second most frequent reason given

in the Northeast (7.9%) and the third most frequent reason in the Southeast (6%). Placement moves due to emergency home use in the West Urban region was much lower (3.9%). It should also be noted that placement changes from emergency homes to other emergency homes ranged from 6.3% in the Northwest Region to less than one percent (0.7%) in the Southeast Region. In the Southeast (8.6%), West Urban (9.7%) and Northwest (10.4%), moves due to children being discharged from the hospital or from drug treatment programs was either one of the first or second most frequent reason used to describe why placement changes occurred. In the Northwest Region, 8.3% of the move reasons were described as placement into a residential/hospital or drug treatment center. This was true for 7% of the placement changes in the Northeast Region and 4.3% in the East Urban region (see Appendix D for a complete Regional Comparison and Reasons Table).

Reasons for Placement Changes and the Age of the Involved Child

The chi-square test of association was completed to examine the relationship between categorical reasons for placement changes and the age category of the children involved in the move. The results show a significant association between the two variables ($\chi^2(df=15)=83.539; p<.05$). In other words, these results indicate that categorical reasons for change of placement and age of the children who were involved in those placement changes are related in the population. Table 8 shows the results of the observed and expected frequencies for each age category and categorical reason for placement change.

Table 8: Categorical Reasons for Change of Placement by Age

Variable	System/Policy		Foster/Adoptive Family		Biological Family		Child Related		Total		X ²	p
	N	%	N	%	N	%	N	%	N	%		
Age/yrs.												
0-2	53	16.5	27	15.2	4	10.0	24	8.2	108	13.0	77.	.01
3-5	42	13.0	22	12.4	10	25.0	10	3.4	84	10.1		
6-8	37	11.5	32	18.0	3	7.5	22	7.5	94	11.3		
9-11	36	11.2	21	11.8	6	15.0	23	7.8	86	10.3		
12-14	53	16.5	32	18.0	6	15.0	74	25.3	165	19.8		
15-18	101	31.4	44	24.7	11	27.5	140	47.8	296	35.5		
Total	322	100	178	100	40	100	293	100	833	100		

The Cramer's V coefficient, however, indicates that age explains only 3.57% of the variance in categorical reasons for replacement. Therefore, more than 96% of the variance in categorical reasons for replacement is unaccounted for.

Results of the chi-square testing revealed an association between the categorical reasons for change of placement and two independent variables, geographical region of case management and age category.

Chapter 5: Discussion and Conclusion

The intention of this exploratory study was two-fold. One goal was to identify a comprehensive list of reasons and categories of reasons children experience placement changes in alternative care in Missouri and to compare and contrast the reasons and categories with James' (2004) findings involving a cohort of children in San Diego County, California. A second goal was to determine if factors such as age, gender, race and geographical region, which have been associated with studies focused on child behavior, caretaker characteristics, foster home disruption, time in care, placement numbers, and permanency outcomes for children, were also related to a wide range of reasons children experience moves while in care.

Recent studies have begun to take a more comprehensive approach to identify and analyze a multitude of reasons placement instability occurs. In a 2006 study in Illinois, Zinn, DeCoursey, Goerge, and Courtney found that caseworkers attributed 38.1% of moves from family foster homes to be a result of efforts to place siblings together or place children with other relatives. Workers also reported that 27% of moves from family foster homes were made in order to have children placed in pre-adoptive or pre-guardian homes. James' (2004) study found that an astonishing 70.2% of all placement changes experienced by children in a cohort sample were due to system or policy related reasons, only 8.1% of the moves were due primarily to foster family related reasons and 19.7% due to child behavior problems.

Although the direction of research involving placement change and instability has received recent attention, a problematic limitation of even the most recent work is timeliness of the data. The Adoption and Safe Families Act was passed into law in 1997, and included

numerous mandates for states to insure permanent and stable homes for children in alternative care. The majority of research to date, however, includes studies that utilized case information collected between 1988 and 1991. The vast majority of studies completed also utilized secondary data collected for other study purposes. This study attempts to further recent efforts by systematically identifying and analyzing a comprehensive list of reasons children experience placement changes in Missouri's child welfare system. This study used changes of placement activity that occurred in May and June of 2007 and is based on data obtained directly from case managers via survey.

This chapter presents a discussion of study findings in detail and then turns to implications for public child welfare practice, policy, program development and social work education. Finally the chapter ends with a discussion and recommendations for future studies.

Comprehensive, Systematic Identification of Reasons for Change of Placements

Based on the information provided by case managers throughout the state of Missouri, 53 primary reasons for placement changes were identified. This varies from the 46 reasons identified in James' (2004) study. Overall, the reasons given in both studies were very similar, however, there were some specific primary reasons identified in one or the other that did not apply to both studies. In order to understand these differences, it is important to be aware of the differences in the cohort samples utilized in the two studies. This study used a cohort of placement changes from one alternative care placement to another alternative care placement that occurred in May and June 2007. This means that all placement reasons were applicable unless the state was removed as the custodian of the child. If a child returned home to the biological parent(s) on a trial basis, for example, the move was included because the parent did not yet have

legal custody. In contrast, James's (2004) study utilized a secondary data base and excluded placement events due to reunification with parents, running away, abductions, transfer to another county for case management services, and a child death in alternative care. James's study was also conducted utilizing a sample of children up to the age of 16.

Several reasons given in Missouri are related specifically to youth 16 or older, such as the child returned to their previous placement while on college breaks or moved due to transitional living or independent living related reasons. Other reasons given in Missouri only, which may also be partially explained by the age of children involved in the studies, includes reasons such as moves to and from hospital, drug treatment and residential settings, running away and moves due to the child's arrest or conviction of status or criminal offense. Another explanation may be that reasons given or rather the specific language used varies from state to state. For example, in the San Diego cohort, the language used to describe placement moves may be step-down to short term foster home or moved from home to short term facility, whereas in Missouri, the case managers specified that the move was to or from a hospital, drug treatment center or residential center. All of these moves would be considered step-up or step-down from more or less restrictive environments.

Other differences between the studies findings can be attributed to changes in legislation and practice that have occurred since the subjects of James' (2004) study were in care. James' utilized data involving placement moves involving children in care during May 1990 through October 1991. The Adoption and Safe Families Act of 1997 (ASFA) requires states to seek legally, permanent family homes for children in care. Permanency options include reunification with legal parents, legal adoption, legal guardianship and legal transfer of custody. ASFA also

encourages states to engage in concurrent permanency planning. Concurrent planning includes placing children with caretakers most likely to provide a permanent home for the child if reunification with the biological parents is not possible. Placement changes to place children in prospective permanent homes other than moves attributed to be with a relative or sibling, made up 3.5% of the total placements in this study. James' study indicated that .6% of the moves were to place children permanently with relatives. James' list of identified reasons for placement did include placement moves to place children in long term foster care (23.2% of the total moves). Today, permanency requires the legal transfer of responsibility for the child from the state to the caretaker. All foster care is, therefore, considered temporary and language such as long term foster care is not commonly used.

Other differences are reflective of state differences in use of specific service options. In Missouri, for example, case managers reported that 10 moves (3% of all moves) occurred because case management services transferred from a private agency back to a public agency manager. There is no mention of contracted private agency case management in James' study. If the sample did not contain children served via contracted agencies, then obviously there would be no related reasons given for placement change. Two of these reasons were related to moves from or to emergency facilities in San Diego County. Missouri does not use emergency facilities so these specific reasons were not found. Missouri does, however, utilize emergency foster family homes. Other notable reasons given in James' study that were not identified in this study included moves due to protective issues involving concerns about past abuse of children by the foster parents and allegations of general violence in the foster family. These reasons represented less than 1% of the total number of moves in the San Diego cohort. Missouri case managers did

not use the same, specific wording, but did report similar reasons such as the foster parents were generally inappropriate or that they were concerned for the child's safety even though an official concern was not reported for investigation.

There were some notable differences and similarities between the two studies in terms of the overall makeup of the placement change reason categories. In this study and James' (2004) study, system and policy related changes of placement represented the largest percentage of all moves. The San Diego County cohort moves that were attributed to system and policy related reasons, made up 70.2% of all moves in the study, compared to 38.6% of all moves included in this study. This wide variance is mostly attributable to San Diego County's more prevalent use of emergency placement facilities than Missouri's use of emergency foster homes. Use of emergency foster homes in Missouri did, however make up 12.2% of all moves.

In both studies, biological parent related moves were relatively rare: only 4.8% of the total moves in Missouri and 2% in San Diego County. In this study, 29 of the 40 moves in this category were attributed to moves from trial home placements with biological parents that disrupted due to concerns in the home. This represented 3.5% of the total moves in the study. During trial home placements, the child remains a ward of the court and is still under the supervision of the state agency. This may indicate a need for further exploration regarding trial home placements and the services available to aid in successful trial home placements. As stated earlier, James' study did not include trial home placements in the sample.

Placement moves related to the biological families threat to safety for the child or family, including absconding with the child, was less than 1% of the total moves in the study. James' (2004) study did not include children placed in trial home situations, but did include children

who reentered care following reunification with biological parents, which made up 1.1% of the total moves.

Placement changes related to the child represented 35.2% in Missouri, as opposed to 19.7% in San Diego County. This is due to the addition of reason codes in Missouri that are reflective of older youth in the study, who are in transitional or independent living placements or college.

Another key difference is in the foster family related placement changes, which were 21.4% of all moves compared to 8.1% of all moves in James' (2004) study. Within this category, some significant differences include 23 (12.9% of all moves in the category) due to concerns for the child's safety or well being even though there was not enough evidence to make a child abuse or neglect report in Missouri. This was not a reason given in the San Diego County cohort. This may be reflective of the difference methods used to gather data in the two studies. In Missouri, case managers answered survey questions. In James' (2004) study, data was collected through case record reviews. It may be that concerns regarding foster parents outside the context of a child abuse and neglect report, are more obscurely documented and therefore, more difficult to abstract from a case record. Also, within this category, Missouri case managers reported that 17(9.6% of all moves in the category) were due to foster parents decision to terminate their contracts to be foster parents compared to only 3 (2.2 % of all moves in the category) in the 1990-1991 San Diego County cohort. This certainly warrants a closer look at what is occurring in foster homes and within foster families that may explain these differences. Have the pressures and rewards of foster parenting changed from 1990 to 2007? Are there differences in support

services and maintenance payment rates that may discourage more foster parents in one state from terminating their services than in other states?

Policy and System Moves Due to Use of Emergency Foster Care Contracts

According to Missouri's Child Welfare Manual (2006) placement options include foster parents who provide emergency care. These homes are licensed and have contracts to provide foster parent services for 60 consecutive days. Missouri pays a higher daily rate for emergency foster care contracts. After a child has been in an emergency foster care home for 60 consecutive days, the rate of pay is reduced to the regular maintenance payment (Department of Social Services, 2006). Out of 833 placement moves statewide, the most prevalent reason given for placement moves was to move a child from an emergency placement to a regular foster home placement at 8.5%. Another 3.7% of moves were due to moving a child from an emergency to another emergency placement. Together these two system/policy related reasons for placement change account for 12.2% of all moves. In James' study, moves due to placement in short-term facilities or foster homes accounted for 28.4% of all moves. The relatively high number of moves attributed to state policies that allow for emergency foster care, leads to some important questions. Why do foster parents choose emergency care over regular foster parenting? Do foster parents choose to become very short term care providers for many children over more stable care providers for a few children because the maintenance payment for emergency care is higher? Would the same foster parents prefer to be regular foster parents if the maintenance rate for regular foster care equaled that of emergency care? Are there other states or geographic locations in the United States that do not use emergency placements? If so, do they have more success in meeting stability performance expectations?

Placements in Residential, Hospital and Institutional Care

The Social Security Act, section 475, requires all states receiving federal funding to place children in the least restrictive environments. The least restrictive environment available in alternative care is a family foster home. Institutional, residential and group care facilities are considered more restrictive or less family-like options (Department of Health and Human Services Child Welfare Outcomes, 2000). Placement changes due to moves made to seek the least restrictive environment for the child made up 6.5% of the total moves. Placement moves to residential, hospital or drug treatment program made up 4.4% of the total placement moves. Placement moves from residential, hospital or drug treatment programs made up 4.8% of the total moves. Combined, moves to and from residential, hospital and drug treatment programs and moves to seek least restrictive environments accounted for 15.7% of all placement moves. James' study found that only 7.2% of all moves were to step down children from more restrictive placements. As noted earlier, James' study did not include children over the age of 16. The results of this study showed that children over the age 16 experience frequent moves related to being placed in residential treatment, institutional or group care. Although these studies did not focus on the patterns of placement moves, these findings may well indicate a need to study the efficacy of time limited placement moves for the purpose of residential or inpatient care? Is 30 days or less meeting the needs of children? Are children leaving 30 day programs only to return to other 30 day programs in a relatively short period of time?

Policies Promoting Relative Cohabitation

Missouri's Child Welfare Policy Manual (Department of Social Services, 2006) states that the placement of siblings together preserves the child's connection to his family of origin

and that sibling cohabitation should be considered a priority in case planning. Missouri's Child Welfare Policy Manual also states that placement of children in alternative care with relatives and kinship (not blood relation but significant relationship with the child) should also be given priority consideration due to the ability of these caretakers to maintain connections with the child's culture and family of origin. Relative and kinship caretakers are also more likely to provide permanent, stable placement if reunification with the biological parents is not possible (Department of Social Services, 2006). Moves made to place children with relatives or kinship care providers (7.1%), to be placed with sibling(s) (3.7%) and to be with sibling(s) due to sibling(s) problems (0.8%) combined made up 11.6% of the total number of moves. James' study found that moves to be placed with relatives (15.8%) and moves to be with siblings (1.3%) combined made up 17.1% of the primary reasons in the total number of moves.

Foster Parents Mismatched with Child Behaviors

Change of Placement (COP) due to the foster families or adoptive families' unwillingness to deal with the children's issues made up 5.4% of the total moves. Foster parents who were willing but unable to deal with the children's behavioral issues were 7.1% of the total. Moves due to the foster parents' fears that the children would have a negative impact on other children in the home (unwilling or unable to ensure safety) were 1.9%. These three primary reasons combined made up 14.4% of the primary placement reasons.

James' study (2004) found that 1.4% of the moves in the cohort sample were due to child's behaviors. It should be noted that the primary reasons given by case managers in Missouri included primary codes not utilized in James' study. It was not possible to know if

other primary reasons in James' study under the category of child behavior related COP were moves from foster homes or other placement types.

Written Permanency Plans and Best Interest of the Child

This quantitatively oriented study did not attempt to collect data regarding the decision making process involved in determining if and when a child should experience a placement change. The categories used to group the change of placement reasons do not signify whether moves were good or bad events in a child's life or whether the moves were necessary to progress the permanency plan. It is not possible to report that all system and policy related changes of placement, for example, were positive or negative in terms of the child's needs. This study did, however, ask case managers to identify if each move was a planned move as recorded in the child's written case plan and whether the case manager believed the move was in the child's best interest.

Case managers reported that moves due to policy and system related reasons were planned 60.2% of the time. Case managers also reported that system/policy related moves were in the child's best interest 95.3% of the time. It is interesting to note that 31.6% of all the moves in this category were to move a child from emergency foster care and that 9.6% of these moves were to move a child from an emergency placement to another emergency placement. Even when the move was to another emergency home, only 5 of the 16 moves were considered to not be in the child's best interest.

These findings raise other questions which may be beneficial to explore. Do case managers consider the moves in the best interest of the child because they are following policy? What training do case managers and other decision makers receive regarding the impact of

instability in placement? Under what circumstances is it in the child's best interest to be placed in family homes that are designed to be for short periods of time? Other reasons given may also prompt similar questions, such as why and when is it in a child's best interest to change placements as a result of their case management services being transferred between public and private providers? Placement changes made in efforts to place siblings together represented 11.8% of all moves in this category. Are other relationships, such as the child's relationship with their foster parents, school and other children in the home, sacrificed in an effort to keep siblings together? Under what circumstances is it more advantageous for the child to be with siblings than to remain with caretakers they have, perhaps, formed a primary attachment with over a considerable period of time?

Case managers reported that 81% of the foster and adoptive parent related moves were in the child's best interest; however, only 19.2% of the moves were part of the child's written permanency plan. Within this category, 6.2% of the moves were a result of foster parents going on vacation, and 9.6% were moves due to foster parents terminating their contract. Again, these findings may indicate a need to explore why foster parents do not take children with them on vacations or why a move was made instead of the foster parents using respite care or some other type of 24 hour childcare? Are these services readily available and accessible to alternative care providers? Are funds made available to help foster parents who would take foster children on vacation? Why are foster parents terminating their contracts? What can be done to motivate alternative care providers to continue delivering services?

Biological family related moves were recorded as being in the child's best interest 92.5% of the time but were not a part of the case plan 92.5% of the time. The largest number of moves,

29 out of 40, in this category was due to concerns during a trial home placements with the biological parents (72.5% of all moves in the category). This finding may warrant a closer look at trial home placements. What percentage of trial home placements results in legally permanent reunification? Are there additional services that could be offered to support trial home placements? Why are some placements failing while others succeed?

Child related moves were not included in the child's written plan 70.1% of the time, but these moves were reported as being in the child's best interest 88.4% of the time. This category includes moves due to the child running away. If the child was currently on run away status, the case managers reported that this was not in the child's best interest. If the child was found and placement was made to put them in a safe environment, then case managers reported that the move was in their best interest. Seventeen or 5.8% of all moves in this category were due to the child's refusal to stay in the placement and request to be moved. This may indicate a reason to more closely explore all moves made at the request of the children. Are there similar situations that result in a child's dissatisfaction with particular placements? Is there any correlation between the children who run away and those who, at some point in time, requested to be moved? What actions are taken when a child request to be moved? Are efforts made to improve the placement first?

Sample and Limitations

The sample for this study was drawn from 1,700 changes in alternative care placements that occurred in Missouri during the months of May and June 2007. Each placement change, for which a survey was completed and received, was only included one time in the study. Each placement move was assigned only one primary reason for placement change. Of the 1,700

placement changes, 1,047 (61.6%) included children who experienced one placement change during the two month time period. The remaining 653 (38.4%) placement changes involved children who moved more than one time during May and June 2007. Of these 653 moves, 283 (16.6%) involved a child who had experienced two moves during the two month period. Another 283 (16.6%) placement changes involved children who experienced three moves during May and June. Sixty six (3.9%) of the moves involved children who experienced three or more placement changes. Eighteen (1.1%) placement changes involved children who experienced four or more moves; and three (0.2%) children who experienced five moves during the two month period.

Since 76% of all children in care during fiscal year 2006 experienced between two and sixteen placement moves and the average number of moves for children in custody during fiscal year 2006 was 3.58 per child, it was assumed that during any other given time period, placement moves would include children who moved multiple times. In fact, the very nature of some placement decisions ensures that multiple placements involving the same child will occur in a 30 to 60 day time period. If for example, a child was moved to an emergency foster home in May 2007, policy required that same child to be moved a second time by the end of June 2007. If a child was placed in a 30 day treatment program in May, then the same child was likely involved in another placement move when the 30 day treatment period ended in May or June. More than two moves involving the same child is also possible. If, for example, a child was first moved from one emergency home to another emergency home, then onto a regular foster home, they would be involved in three different placement changes during the two month period. It is also possible that a child may experience multiple moves due primarily to their behaviors. These

moves would be counted each time in the change of placement related to the child's behavior category.

There are many factors involved in placement moves that may impact the reasons they occur. These factors are dynamic and are often overlapping. Some of these factors include the characteristics of the children themselves, the same case managers responsible for coordinating multiple move decisions, caretakers who have numerous children placed in their home or facility, siblings and other biological family members and the local application of policies and practices. The decision to include all moves, regardless of whether some of the moves involved the same child or other overlapping factors, was made in order to maximize representation of all placement reasons that occurred during the time period. If moves were eliminated from the sample because two or more placement changes involved the same child, case manager, siblings, care providers or policy important information needed to identify all placement reasons and frequencies of occurrence would be lost. The uniqueness of the two month sample, however limits the generalizability of the studies findings to the sample population in Missouri.

Detailed Discussion of the Hypotheses

Hypothesis I

There is a statistically significant relationship between the four categories of reasons for placement change categories and the geographical regions of case management services for children involved in placement changes.

The Administration for Children and Families' (ACF) 2005 review of states found that only 15 states were in compliance with federal benchmarks for ensuring that children have safe and stable placements. ACF also found that compliance rates varied markedly from state to state

(CRS Report for Congress, 2005). Unfortunately, geographical differences have been scarcely considered in scholarly research on instability. A review of literature did not render a single scholarly journal article that viewed geographical location as a possible factor related to the reasons children experience instability in alternative care. Two recent studies did consider geographical factors in relation to obtaining permanent placements for children. Smith (2003) conducted a study including 1,995 children in alternative care in seven states to analyze factors associated with when children exit alternative care after their parents' parental rights have been terminated. Smith found that the rate of exiting care for children whose parents' rights have been terminated varied greatly by state. In a seven state comparison, Smith (2003) found that the likelihood of exiting care within one year after becoming eligible for adoption ranged from 22% in one state to 53% in another state. Becker, Jordan and Larsen (2007) conducted a study to examine the role of race, diagnosis and place of residence as factors in predicting successful permanency planning and length of stay in foster care. Their study found that the child's geographic district of residence within the state of Florida was the most important predictor of outcomes for children in care.

Analysis in this study found that during the months of May and June 2007, 55.8% of all moves occurred in only two of seven regions. These regions included the East Urban (28.7%) and the Southwest (27.1%). These two regions experienced nearly twice as many moves than any other region in the state. In comparison, placement changes in the Northwest region only represented 5.4% of all the placement moves that occurred during the two month time period. Based on comparisons with the fiscal year 2006 population of children in Missouri's alternative care system, however, the percentages of moves experienced are roughly in proportion with the

percentage of children being case managed in each area. The East Urban area, for example, was responsible for case managing 27% of the 2006 population and was case managing 27% of all the moves that occurred during the two month period in 2007. On the low end, the Northwest Region case managed 5.4% of the 2006 population and experienced 6% of the placement moves in May and June. This finding may indicate further exploration. Would concentrated, additional efforts to improve stability in the high placement areas benefit the overall state performance on federal compliance measures?

Chi square analysis conducted for this study revealed that geographical region is related to reasons for placements change categories. Smith (2003) suggested that state to state differences regarding permanency for children whose parent(s) rights have been terminated may be due to different ways in which states define and view permanency, differences in state practices and policies and different court processes. Perhaps this same reasoning applies to regional differences in reasons for placement changes. Since placement changes are reported to and often require prior approval from the courts, it may be that courts within regions account for the difference.

Another possible reason for regional differences may be attributable to services and resources that are available within each region. A closer analysis of the 53 primary reasons used to develop the four categories reveals that use of emergency foster homes and placement changes due to admittance or discharge into a hospital or drug treatment setting made up a high percentage of moves for all six regions. The West Urban region was an exception in terms of emergency foster care, in that placement from emergency foster care to regular placement constituted only 3.9% of the moves, as opposed to 11.3% in the East Urban region. Emergency

foster care placements are designed to be short term alternative care placements and subsequently ensure at least one more move in alternative care. Moves due to discharge from the hospital or drug treatment program made up 10.4% of all moves in the Northwest, 9.7% of moves in the West Urban, 8.6% in the Southwest and only 3.2% in the East Urban. Moves due to discharge from hospitals and drug treatment programs were not given as a primary reason in the Southwest and the Northeast. The findings of this study do not render explanations for the region to region differences. The findings do, however, render more questions for possible exploration. Are there differences in the available and accessible resources allotted to each area? Are some areas experiencing a population proportionate shortage of certain resources, such as regular and specially trained contracted foster parents? Do such shortages result in case managers utilizing emergency foster homes or institutional placements more often? Are there more hospitals and residential treatment centers available in some regions than others? Do regions with more facilities available use them more readily than other areas?

Hypothesis 2

There is a statistically significant relationship between the four reasons for placement change categories and the age of children involved in the placement changes.

Age was found to be statistically, significantly related to the categories of reasons children experience placement changes in this study. It is interesting to note that the age categories with the largest number of placement moves were on the opposite end of the age range. Placement moves involving children between the ages of zero and two years of age made up 108 (13%) of all moves. Placement moves involving children 12 to 14 years of age made up 165 (19.8%) of all moves and moves involving children 14 and older made up 296 (35.5%) of all

moves. The number of placement changes involving children in the three other age categories combined constituted 264 (15%) of the total number of placements. Perhaps the parental responsibilities required to care for infants who need close monitoring and supervision at all times and the developmental crisis often associated with adolescents offer some insight into this finding. It may also indicate a shortage of regular foster homes prepared to care for the youngest and oldest children in alternative care. Children who enter care as infants may also be entering care due to drug exposure at birth or other physical or mental challenges which require a more intensive level of care.

Seventy three percent of all moves due to child related reasons included children 12 to 18 years of age. Child related moves include moves due to being admitted or discharged from a hospital or drug treatment program, running away, foster parents unable to deal with child's behaviors and moves to independent living settings. These move reasons, as opposed to system/policy related reasons, which include moves to be with a relative or to be with a prospective adoptive parent, have less immediate impact on ensuring a permanent family home. Placement moves related to system and policy reasons, more often involved younger children, between the ages of 0 to 11.

Although studies that examined the relationship between age of the child and the reasons for placement changes were not found, a few studies have considered age and its relationship to placement instability in alternative care. Pardeck (1984) found that age was positively related to number of placements in care, but only after the child was in care at least three years. Webster, Barth and Needle (2000) also found that age was positively correlated with number of moves experienced in alternative care. Wulczyn, Kogan and Harden (2003) found that child's age had

the most profound impact on movement in alternative care. The relationship of child related move and age, particularly those reasons most given for adolescents seems compatible with findings that older children experience moves more often. If older children are moving more often for reasons less directly associated with permanency, then it stands to reason that they will also move more often. Wulczyn, Kogan and Harden's (2003) also noted the changes that become more marked at the onset of adolescents. They found that children in the 11 to 13 age group averaged .697 moves per child as compared to infants who averaged .521 moves per child. Becker, Jordan and Larsen (2007) also found that as children became older, they were less likely to successfully exit care. They specifically note that the odds of reunification were not significantly different for children under age 6 than for children between 6-12 years of age. They were significantly different for children over 12 years of age.

Hypothesis 3

There is a statistically significant relationship between the four reasons for placement change categories and the race of the children who were involved in placement changes.

The child's identified race/ethnicity was not found to be related to reasons for placement change in this study. A review of the literature did not result in a single study that looked at reasons for placement moves and race/ethnicity, however other research suggests that race of the child and instability in care are related. Leathers (2006) found that African American youth were two and a half times more likely to experience placement disruption than youth of other races. Smith (2003) found that children, whose biological parents' rights have been terminated, exit care at a slower rate if they are older, African American, placed in kinship care and have more alternative care placements while in care. Becker, Jordan and Larsen (2007) found that white

children were more likely to exit care successfully than non-white children. Other studies, however, found that African American race predicted greater stability (James et al., 2004; Webster, Barth, & Needell, 2000). Webster, Barth, & Needlell (2000) actually found that increased age and Caucasian ethnicity increased the probability of instability for children in long-term alternative care. Wulczyn, Kogan and Harden (2003), however, did not find that race and ethnicity were related to the rate of placement changes. Certainly, the findings may indicate that Missouri's child welfare practices have been successful in ensuring that placement related services and practices are free of racial bias. Conflicting findings in the body of research, however, indicates a need for research that looks at the relationships between reasons for placement moves, rate of placement moves and race/ethnicity.

Hypothesis 4

There is a statistically significant relationship between the four categories of reasons for placement change and the gender of the children who were involved in the placement changes.

Gender and reasons for placement change categories were not related in this study. Although studies examining gender and reasons for placement change were not found, other studies related to placement outcomes have found an association. Leathers (2006) study that examined children placed in alternative family homes and child behavioral issues found that males were significantly more likely to experience negative placement outcomes than females. The findings of this study are more consistent with those of Wulczyn, Kogan and Harden (2003), who did not find gender to be related to the rate of placement changes. If there is indeed no relationship between gender and placement change reasons or rates of placement changes, then efforts to recruit placement providers based on the gender make-up of children involved may not

be necessary: or perhaps current efforts are successful. This finding also may indicate that Missouri's child welfare agency has been successful at ensuring that placement services offered to children are free of gender bias. Nevertheless, findings regarding gender in related areas of placement stability are inconsistent and indicate a need for future research which analyzes the possible relationships between gender, rate of placement and reasons for placement moves as related factors.

Implications and Recommendations for Future Research

The findings of this exploratory study contribute to the empirical evidence regarding reasons for placement change and the relationship between placement reasons, gender, age and geographical region of service delivery. Information about the reasons children experience placement changes is needed to inform the development of more effective policies, practices, and services. The findings of this initial, exploratory study raise many additional questions that have implications for researchers, child welfare administrators and program development professionals.

Systematic identification of reasons for placement changes conducted in this study and in James' (2004) study resulted in the discovery of a multitude of reasons for placement changes. Both studies also found that the most prevalent reasons for placement changes are system and policy related. These findings are contrary to commonly held beliefs that the vast majority of placement changes occur as a result of foster parents' requests for children to be removed from their homes. At this time, the United State's Administration for Children and Families requires data collection on the number of placements experienced in specific timeframes. The focus on number of placements by time in care is used to measure compliance with federal benchmarks,

but may have little to offer child welfare experts in need of information to develop policies, practices and services to improve stability in alternative care. If state and national child welfare systems collected data and had easy access to the data regarding reasons for placement moves, targeted efforts to identify potential policy, practice or training issues specific to any given reason or category of reasons could more readily be conducted. If, for example, a large number of placement changes were attributed to policies that encourage the use of emergency foster home care, then states may be more inclined to consider the benefits, costs and possible alternatives to such policies. The findings of this study may well indicate the need for systematic and ongoing collection of state data which identifies the primary reasons placement changes occur.

The results of this study showed that regional differences in primary reasons for placement changes vary in potentially important ways. Why do some regions experience a higher rate of moves as a result of placements in emergency foster homes than other regions? Why does discharge from hospitals and drug treatment programs make up 3.2% to 10.4% of all placement moves in four regions but was not given as a primary reason for any moves in two geographical areas? Consideration of the similarities and differences regarding specific reasons for placement moves at a regional or other geographical level may reveal a need for more precise policy, practice and resource development strategies at a localized level. Further research is needed. Do court requirements within the region or other unique practices within a particular county explain the differences? Do the resources vary from region to region? If so, do the areas with fewer residential or institutional facilities or regular foster homes use other placement options more

readily? Do the findings remain consistent across the entire region or are there particular counties within a region that are significantly different?

This study also found that the primary reasons for placement changes and the age of the children involved are related. Child related placement moves involving 12 to 18 year olds, for example, occurred much more frequently than child related moves that involved children under 12 years of age. Child related reasons, which may include being admitted or discharged from a hospital, residential or drug treatment program, running away, or involve foster parents who were unable to deal with the child's behaviors or specific issues, may indicate the need for differential recruitment, training and placement sustaining services for older children. The specific needs of younger and older children, may therefore, call for different programs and services. Youth 12 to 18 years of age are certainly able to voice their desires, concerns and ideas about placement needs. They should be involved in a salient manner, in informing researchers, administrators and policy makers at the county, regional and state levels. If foster parenting older youth requires specific skills and resources, perhaps child welfare systems should consider higher maintenance payments and more specifically tailored services for all foster parents who specialize in caring for children 12 and older. Services such as child and foster parent support groups, respite care for older children, and particular training to meet the developmental needs of children may be effective at reducing placement change due to reasons such as foster parents feeling incapable of handling the youth, youth running away and youth requesting to be moved from the placement.

This study did not find a relationship between the reasons for placement change categories and race or gender. Other studies conducted on related issues, such as rate of

placement change and permanency outcomes have resulted in conflicting findings regarding the relationship between stability in alternative care and race and gender. For these reasons, additional studies are needed to determine the role of race and gender in placement stability, including any differences other studies may find in relationship to reasons for placement change, gender and race. Longitudinal studies that examine all the reasons for placement change in conjunction with time in care, rate of placements and factors such as age, race, gender, geographical regions and are particularly needed.

Finally, the Administration for Children and Families 2005 Child and Family Service Reviews found 15 states in compliance with the federal benchmarks. The top three performing areas were West Virginia 99.9% compliance, Puerto Rico at 99.6% compliance and Delaware had 97.7% compliance. A study that examines the differences between states in terms of services available, policies and practices that promote stability may be particularly valuable in providing states that are struggling with stability issues constructive information to build upon.

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Appendix A

Case Manager Survey on Placement Instability
of Children in Alternative Care

Please provide the following information to the best of your ability. Some of the questions you are asked are similar to the information you address in the child's record. The categories that you may choose from, however, have been expanded. Your answers should be based on your memory of the specific move experienced by the child that is indicated in the electronic mail you received with this survey.

Please select the appropriate answer.

Child's age in years:

- | | |
|-------------------------------|-----------------------|
| Under the age of 1 year _____ | 10 years of age _____ |
| 2 years of age _____ | 11 years of age _____ |
| 3 years of age _____ | 12 years of age _____ |
| 4 years of age _____ | 13 years of age _____ |
| 5 years of age _____ | 14 years of age _____ |
| 6 years of age _____ | 15 years of age _____ |
| 7 years of age _____ | 16 years of age _____ |
| 8 years of age _____ | 17 years of age _____ |
| 9 years of age _____ | 18 years of age _____ |

Gender:

_____ male _____ female

Case Management County Name: _____

Child's race/ethnicity (please check one)

- | | |
|----------------------------|---|
| ___ White | ___ Native American/Hawaiian/Pacific Islander |
| ___ Black/African American | ___ Multiracial |
| ___ Hispanic/Latino | ___ Asian |

If multiracial, please indicate the primary racial description of each parent

Father _____ Mother _____

If Other, please specify _____

There are often many reasons involved in a decision to move a child. In your own words, briefly describe the reasons you believe the child was replaced (50 words or less).

From this list of 34 primary reasons why a child might be moved, select the one that best fits this situation. If none of these fit, select “other” and give a brief description.

1. _____ Moved because maintenance funds were too low for the caretaker
2. _____ Moved to be closer to biological parent or school
3. _____ Child was moved to be with their sibling(s)
4. _____ Moved with sibling because of sibling(s) problems in the placement
5. _____ Group home or residential home closed or their contract was terminated
6. _____ Moved as part of a step-down plan to a less restrictive environment
7. _____ Foster family moved
8. _____ Foster family went on vacation
9. _____ Foster parent died
10. _____ Foster parent stops being a foster parent
11. _____ Foster parent becomes seriously ill
12. _____ Foster parent has a family member who becomes seriously ill
13. _____ Foster parent does not want the child around other children in the home
14. _____ Foster parent request move because of life crisis
15. _____ Foster parent did not WANT to deal with the child’s behavioral issues
16. _____ Foster parent are UNABLE to deal with the child’s behavior issues
17. _____ Foster parent were in disagreement with the case plan for the child
18. _____ Foster parent did not feel supported by their worker or service providers
19. _____ Foster parent involved in criminal activities
20. _____ Foster home placed on hold due to licensing problems
21. _____ Foster parent was not meeting the child’s treatment needs
22. _____ Concerns for the child’s safety or well-being but not actual evidence of abuse or neglect (no hotline report made)
23. _____ Foster parent(s) behavior is deemed generally inappropriate
24. _____ Foster parent named in sexual abuse allegations or sexually inappropriate behaviors
25. _____ Foster parent named in physical abuse allegations
26. _____ Foster parent named in neglect allegations
27. _____ Foster parents requested move because of problems with the biological family
28. _____ Biological parents posed harm to the child or foster parents and the child was moved to a confidential or safer location
29. _____ Child was home on trial basis and was moved due to concerns
30. _____ Child committed a status offense and court ordered the child to be retained in a specific Facility

- 31. _____ Child's case was transferred to a Children's Division case manager
- 32. _____ Child's case was transferred to a contracted case management agency
- 33. _____ Child refused to stay in the home or requested to be moved
- _____ Child was removed for a primary reason not listed above. Please

explain: _____

Was the move included as part of the child's written case plan prior to the move occurring?

Yes _____ No _____

Do you think the move was in the child's best interest?

Yes _____ No _____

Appendix B

MEMORANDUM ON INSTABILITY IN ALTERNATIVE CARE RESEARCH STUDY

TO: Children's Service Worker's involved in moving a child from one alternative care placement to another alternative care placement

FROM: Children's Division Director

SUBJECT: This memorandum is in reference to a specific child on your case load

Instability in alternative care has been a concern for all stakeholders' involved in the lives of children we serve through the Children's Division. Instability in alternative care has been associated with the development of life long psychological, emotional, mental and physical problems for our most vulnerable children. National concern for their plight prompted the passage of regulations that require states to ensure children in care have stability in their living situations. Our state has made many efforts to improve on stability in alternative care via our Program Improvement Plan. Despite our collective efforts, our goal of ensuring that every child experiences no more than two moves while in alternative care has not yet been realized. In order to develop new strategies to better address this complex and grave problem, additional research is needed.

I am writing to ask you to participate in a study that looks more deeply into the reasons why children are moved and to identify the various stakeholders who initiate decisions to move children from one alternative care setting to another. Case Managers serving specific children that moved during the months of May and June and July are being asked to participate. In order to collect important information on every move, you may receive more than one survey to complete. You will receive a survey for every child moved and for every move experienced by any child during this timeframe. Each survey will take less than five minutes of your time and must be completed on line. Please respond to the survey within one week of receiving this memorandum. Due to the large number of moves for which data is being collected; paper copies mailed to the researcher can not be included in the study.

If you agree to participate, you will play an important role in helping us discover innovative approaches to improve the lives of the children you and your colleagues serve. If you choose to answer and send back the questions in the attached survey, the only person who will see the survey is the researcher. The survey will be printed off separately and will not contain any information that identifies you or the child for whom you are completing the survey. Your e-mail response will be deleted from the Department of Social Services system. All the data provided on returned surveys will undergo statistical testing and all results will be presented aggregately. The results will be stratified at the county level so that your county office and/or contracted agency may have detailed information to aid in local planning. The researcher conducting the study is Jerrie Jacobs-Kenner, a PhD Candidate through the University of Missouri-Columbia, School of

Social Work. Jerrie worked in the private sector and for Children's Services, within the Division of Family Services for 15 years prior to teaching and directing the social work program at William Woods University.

Your participation is voluntary and your decision to not participate will not involve any penalty or loss of benefits. The researcher may withdraw your survey from the study at any time after explaining to you the reason for withdrawal. The study poses no anticipated risks to those who complete the survey questions; however you are encouraged to discuss any risk you perceive with the researcher. The researcher may be reached by replying to this electronic mail address, which has been specifically assigned for the researcher's use only.

Thank you for your time and I hope you will volunteer to participate in this important work. If you have further questions or concerns, I encourage you to address them with the researcher by way of this e-mail address.

Appendix C

Regional Comparison of Reasons Children Experienced Placement Change

East Urban (N=185)	Southeast (N=148)	Southwest (N=236)	West Urban (N=102)	Northwest (N=48)	Northeast (N=114)
Emergency to Regular placement (11.3%)	Foster parent unable To deal with child (8.6%)	Emergency to regular place (9.5%)	Move result of step down plan (10.7%)	Emergency to regular placement (10.4%)	Foster parent unable to deal with child (8.8%)
Child ran away (8.6%)	Child discharged from hospital/ Drug treatment program (8.6%)	Move result of step down plan (8.7%)	Discharged hospital/drug treatment program (9.7%)	Child discharged from hospital/Drug treatment program (10.4%)	Emergency to regular placement (7.9%)
Foster parent does not Want to deal with child (7.5%)	Child placed with relative/kin (8.6%)	Foster parent unable to deal with the child (7.1%)	Child placed with relative or kin (9.7%)	Moved from trial home visit due to concerns (8.3%)	Moved from trial home visit due to concerns (7.0%)
Child placed with relative/kin (7.5%)	Moved from trial home visit Due to concerns (6.6%)	Moved to be with sibling (6.2%)	Foster parent does not want to deal with child (8.7%)	Moved to residential/hospital/drug treatment settings (8.3%)	Moved to residential/hospital or drug treatment setting (7.0%)
Child refused to stay in placement (4.3%)	Move result of step-down plan (6%)	Child placed with relative/kin (6.2%)	Foster parent is unable to deal with the child (8.7%)	Foster parent does not want to deal with the child (6.3%)	Child moved to residential/hospital or drug treatment setting (7.0%)
Placed in residential, hospital Treatment setting (4.3%)	Emergency to regular Placement (6%)	Child's behavior posed safety concerns (4.6%)	Child ran away (6.8%)	Foster parent is unable to deal with the child (6.3%)	Foster parents named in physical abuse allegations (5.3%)

Emergency to emergency Placement (4.3%)	Foster parent stopped foster Parenting (4.6%)	Case transferred to Children's Division case manager (4.1%)	Concern for child's safety/well being- no hotline (4.9%)	Youth began ILP or TLP (6.3%)	Child placed with relative or kinship provider (5.3%)
Child's behavior posed safety Concern (4.3%)	Child moved to residential Hospital or drug treatment (4.6%)	Foster parent does not want to deal with child (3.7%)	Foster home placed on hold for licensing problem (3.9%)	Emergency to emergency placement (6.3%)	Emergency to emergency placement (5.3%)
Move result of step down plan (3.8%)	Child's behavior posed safety Concerns (4.6%)	Moved to guardianship or adoption home (3.7%)	Moved to guardianship or adoptive home (3.9%)	Move result of step down plan (4.2%)	Placed with sibling(s) (4.4%)
Foster parent unable to deal with child (3.8%)	Moved to be closer to parent Or school (4%)	Emergency to emergency placement (3.7%)	Emergency to regular placement (3.9%)	Child refused to stay in the placement and requested move (4.2%)	Foster parent does not want child around other children in the home (4.4%)
Moved to be with sibling (3.2%)	Foster parent does not want to Deal with child (4%)	Group, treatment, residential provider stated needed different level of care (3.3%)	Emergency to emergency placement (3.9%)	Child's behavior posed safety concerns (4.2%)	Move as a result of a step down plan (3.5%)
Foster parent stopped foster parenting (3.2%)	Concerns for child's safety/well Being but no hotline (3.3%)	Foster family went on vacation (2.9%)	Child's behavior posed safety concerns (3.9%)	Moved to be placed with sibling(s) 2.1%	Foster parent does not want to deal with child (3.5%)

Concern for child's safety/well being But no hotline (3.2%)	Moved to guardianship or adoption Home (3.3%)	Child moved to residential, hospital or drug treatment (2.9%)	Foster parent became seriously ill (2.1%)	Foster home placed on hold for licensing problem (3.5%)
Foster parents named in physical abuse allegations (3.2%)	Moved to be with sibling(s) (2.6%)	Foster parent does not want child around other children in the home (2.5%)	Foster parent does not want child around other children in the home (2.1%)	Biological family posed threat to child or foster home-safe location needed (3.5%)
Moved to guardianship or adoptive home (3.2%)	Foster family moved (2.0%)	Child arrested for status or criminal offense and ordered to specific facility (2.5%)	Foster parent named in physical abuse allegations (2.1%)	Moved to guardianship or adoptive home (2.6%)

Note: List contains reasons that constituted at least 2% of the total number of reason codes selected by case managers in each region of the state.

Appendix D

Statewide Reasons for Placement Changes

Reasons for change of placement (COP)	Frequencies	Percentage of Total COP
Moved from emergency to regular foster home	71	8.4
Foster parent is unable to deal with the child's behavior or other issues	59	15.4
Child placed with relative or kinship	59	22.4
Move result of step down plan	54	28.8
Foster parent does not want to deal with child's behavioral or other issues	45	34.1
Child discharged hospital/drug treatment program	40	38.9
child moved to residential, hospital or drug treatment setting	36	43.1
Child's behavior posed safety concerns	35	47.3
Child ran away	33	51.2
Move to be placed with sibling(s)	31	54.9
Child placed in emergency from emergency placement	31	58.5
Moved from trial home visit due to Concerns	29	62.0
Moved to guardianship or adoptive home	29	65.4
Concerns for child's safety/well being but no actual hotline allegations	23	68.1
Other primary reason-alternative code assigned	21	70.6
Group, treatment or residential provider stated needed higher/lower care level	21	73.1
Foster parent stopped foster parenting	17	75.1
Foster parents named in physical abuse allegations	17	77.1

Child refused to stay in the placement and requested move	17	79.1
Foster parent does not want child around other children in home	16	81.0
Child committed or arrested for a status or criminal offense and court order's specific facility	15	82.8
Youth began ILP or TLP	14	84.5
Moved to be closer to parent or school	12	85.9
Foster home placed on hold for licensing problem	12	87.3
Foster family went on vacation	11	88.6
Case transferred to Children's Division case manager	10	89.8
Foster parent not meeting child's treatment needs	8	90.8
Move with sibling do to siblings problems in placement	7	91.6
Foster family moved	6	92.3
Foster parent became seriously ill	6	93.0
Foster parent requested move due to life crisis	6	93.7
Foster parents behavior is deemed generally inappropriate	6	94.4
Group, treatment, or residential home closed or contract terminated	5	95.0
Move because of problems between foster family and biological family	5	95.6
Biological family posed -moved to safe location	5	96.2
Foster parent changed mind about adopting	5	96.8
Maintenance payment to low	3	97.2
Foster parents were in disagreement with the case plan	3	97.5
Return to placement due to summer break/college	3	97.9

Child participated in inappropriate acts	3	98.2
Foster parent family member became seriously ill	2	98.5
Overcrowding in foster home	2	98.7
Foster parent did not feel supported by their worker or service providers	1	98.8
Foster parent involved in criminal activity	1	98.9
Foster parents named in alleged sexual abuse or sexually inappropriate behavior	1	99.1
Foster parent named in neglect allegations	1	99.2
1003 issue, child left mid-mo custody and family ineligible for ongoing help	1	99.3
Prospective adoptive parent uncooperative with plan	1	99.4
Biological family absconded with the child	1	99.5
Moved to foster home that could transport to summer school	1	99.8
Moved to 30 day YES program for TLP evaluation	1	99.9
Moved from job corp. to foster home due to medical need	1	100.0
Total	844	

VITA

Jerrie Jacobs-Kenner was born and raised in rural Missouri. In 1998 she obtained her undergraduate degree in psychology, from Missouri Valley College, in her hometown of Marshall, Missouri. After two years of working for the Missouri Department of Mental Health, she accepted a position as a case manager with the Missouri Division of Family Services. In 1996, she obtained her Master of Social Work degree, from the University of Missouri, School of Social Work, in Columbia, Missouri. She continued to work in the state's child welfare system in numerous capacities. In 2003 she resigned as the Deputy Director of the Missouri Division of Family Services and accepted a position as the Social Work Program Director, at William Woods University. Dr. Jacobs-Kenner obtained her doctorate degree in social work in 2008. She is currently living and traveling throughout Mexico with her husband, Nelson.