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Foster Care Dynamics 2000-2005

A Report from the Multistate Foster Care Data Archive

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1. The Update Report

This report is a follow-up to reports produced in the late 1990s and in 2000 using data from the Multistate Foster Care Data Archive (FCDA). The FCDA is a repository of state administrative data provided by state child welfare agencies to Chapin Hall to support research and development in the child welfare field, with specific emphasis on children who are placed in foster care.

As was the case with prior reports, the purpose of the update is to provide a general overview of what happens when children are placed in foster care. Because of the large number of children for whom data are collected and how the data are organized, the data provide a useful baseline for studying entry and exit patterns. In turn, the basic patterns in the data can be used to draw inferences related to the question, "Given admission into foster care, what is the typical trajectory of children through the system?" Because the data are longitudinal in nature, cover an extended time period, and refer to multiple jurisdictions, the data are particularly useful for conducting basic epidemiological research.

For the most part, the data are self-explanatory, and it is up to the reader to attach significance to any particular set of facts. We add only modest commentary around certain broad themes. Across the various Archive reports, the span of time covered goes back to the late 1980s. This report covers the years 2000 to 2005, but together with the other reports, the data reveal underlying patterns that are largely unchanged over the years. At the same time, the policy and practice context that helps determine what happens to foster children has changed over the years. When the basic patterns shift in ways that appear to be a response to how the policy and practice context has changed, we try to point that out.

To preserve a historical perspective, the update is organized along lines that are quite similar to the earlier reports. We start with a brief overview of the data that is followed by a series of tables and figures that describe basic population trends. The data are presented in a manner that follows the basic placement process. The first section describes entry dynamics; subsequent sections examine placement type; placement stability; exit patterns, including length of time in care and the likelihood of exit by type of exit (e.g., reunification or adoption); and reentry to care.

There are a couple of changes worth pointing out, however. In the prior reports, the data were presented with an emphasis on the individual contributing states. In the update, we have adopted a tactic that focuses more on the group of children

admitted to foster care between the years 2000 and 2005 as a series of entry cohorts contributing to a single population of foster children, irrespective of the state with jurisdiction over the child. The shift reflects our desire to understand foster children in a context that is not necessarily defined by state boundaries. State variation is clearly important, but the importance of state variation is more easily understood as a series of departures from patterns that represent what is true on average for a very large segment of the population in question. For example, entries to and exits from foster care follow certain well-defined patterns when all children are treated as belonging to a single population. To the extent that a given pattern—for example, higher rates of admission among infants—does not hold true in a particular jurisdiction, the significance of the observed pattern is a function of how much it differs from the general case.

Stated another way, the child-level data in the FCDA form a three-level hierarchy that consists of individual-level data nested within counties that are nested within states.[1] The significance of the nested structure has to do with the underlying impact each level exerts on what happens to children. Much of what happens to children in the foster care system happens because of who they are. For example, young children (i.e., infants) in virtually every state are much more likely to be adopted than older children are. Nevertheless, the actual (or observed) likelihood of adoption is affected by the county and state handling the placement. The cross-level influences are of particular importance to policymakers and practitioners provided they are placed in a more general context. The aim of this report is to provide that general context, at the individual level.

The second major change affecting the FCDA is organizational. Chapin Hall has been at the forefront of developing multistate placement data since the late 1980s, a time when the very first administrative data systems were coming on line. The goal then and now has been to harness the knowledge contained in the data systems as part of an effort to improve services to children and families. The FCDA grew larger as the value of administrative data for research purposes grew more apparent. At the time of the last Archive report in 2000 (with data through 1998), there were twelve contributing states; today, the Archive has comparable data from nearly twenty states.

To manage the data resources housed as part of the Archive, Chapin Hall, together with the American Public Human Services Associations, the National Association

[1] Although we will not discuss the issue here in detail, it should be pointed out that other levels exist within the data. For example, in jurisdictions that have privatized their foster care systems, children are nested within agencies, within counties, and within states.

of Public Child Welfare Administrators, the University of California/Berkeley, and the University of North Carolina, formed the Center for State Foster Care and Adoption Data within Chapin Hall. Governed by an advisory group of state child welfare leaders and representatives from the universities, the purpose of the Center is to further improve state access to and use of longitudinal data. Funds to support the Center come from the Annie E. Casey Foundation, which provides core support, and fees paid by member states. In addition, special projects funding for research undertaken by the Center (such as this report) comes from public and private sources, including Casey Family Programs.

The primary goal of the Center is to promote research and development that leads to better utilization of the underlying administrative data by the states themselves. To that end, Chapin Hall staff and colleagues who work on Center projects have developed a range of applications using a data model developed specifically for these purposes. Among the applications, the following reflect the range of issues that are easily adapted to the Center's data model:

1. Basic studies of foster care dynamics (such as this report)
2. Monitoring of system-level outcomes (i.e., permanency, stability, and reentry)
3. Studies of racial disparities in entry and exit to foster care
4. Placement stability and movement trajectories
5. Performance-based contracting
6. Monitoring of contract agency outcomes
7. Monitoring of child-level outcomes over time at the state and county levels
8. Spatial analysis of entries and exits at the census tract, county, and state levels
9. Projection models that forecast the cost of providing foster care in a given jurisdiction

In addition to research projects, the Center sponsors training that focuses on the utilization of data. Administrative Data Institutes are held annually in Chicago. In October 2007, Chapin Hall, with support from Casey Family Programs, hosted an advanced analytics workshop to further promote the use of administrative data. Finally, to grant wider access to administrative data, the Center has developed a suite of end-user tools that put sophisticated longitudinal data within easy reach of public officials.

For its work, the Center for State Foster Care and Adoption Data was selected as a finalist in 2007 for the Innovations in American Government award, presented each year by Harvard University and the Ford Foundation to a handful of exemplary programs dedicated to the idea of effective government through innovation.

2. Profile of the Multistate Foster Care Data Archive

Administrative Data Model and Archive Methodology

The Multistate Foster Care Data Archive is a database constructed from information drawn directly from the administrative databases that state agencies use to manage their child welfare programs. Use of administrative records from state agencies for research purposes has expanded considerably in human services over the past 20 years. Toward that end, the Archive has been used to pioneer comparative research with administrative data.

Because it often stores information on entire service populations, an administrative database is an especially valuable resource. In the foster care system, for example, relevant personal characteristics and service events are recorded for every child who is placed with these agencies. Even rare events and complex placement patterns can be monitored without the sampling concerns or the expense involved with other methods of observation.

Nonetheless, comparative research with administrative data poses a particular set of challenges, many of which become apparent when information from multiple systems is brought together. The most fundamental challenge is comparability. In part, comparability problems arise from the fact that each state has developed its own record-keeping system. An electronic record-keeping system is tantamount to a filing system that is used to organize basic information; each state uses a slightly different approach. Difficulties that stem from how the information is stored are compounded by the fact that states adopted computer systems at different times. In one state, administrative data go back to the mid-1970s; in a handful of other states, the first systems were put in place in the early 1980s. However, for a significant number of states, the first usable information is not available until after 2000. Aligning data with different starting points creates yet another layer of complexity. Finally, there is the issue of local policy, practice, and tradition. Although the basic outlines of the placement system are inherently similar, local practices shape what information a state chooses to collect.

In developing the Archive so that comparability is maximized, we start with a limited set of child characteristics and event types that have clear meaning from one jurisdiction to the next. We process the child welfare data from each state in order to fit the data into a robust data model that preserves state individuality and achieves comparability across states. With each state, we collaborated with a local data manager

to ensure that the underlying integrity of the data was preserved throughout the process. The result is a new database that is much simpler in form than any of the contributing state data files.

The core module of the Archive database stores components of substitute care histories within a design that keeps one record for every individual child and a separate record for each event of interest that a child has experienced. The database includes the following:

Child Record	**Event Record**
Unique identifier	Unique identifier
State	Date of event
County	Type of placement and exit destination[2]
Date of birth	
Gender	
Race/ethnicity	

The idea of a *spell* in substitute care is a key methodological concept that shapes most of the comparative analysis completed with the Archive. A *spell* is defined as a continuous episode spent in out-of-home child welfare arrangements. It begins with a new foster care placement (i.e., an event) and continues until reunification, adoption, or some other discharge from the child welfare system occurs. One child can experience multiple spells by leaving and returning to the foster care system. Although a single spell can, and often does, include a sequence of movements through two or more physical placements, it always reflects an uninterrupted period in the care and custody of the state. Most of the descriptive work done to date with Archive information has focused on spells because of their clear substantive importance and their comparative simplicity—a child is either in substitute care or is not.

By aggregating the Archive data, we can readily obtain descriptions of state foster care caseloads, their size and composition, and how they change over time. By looking at the histories of different subgroups of children, we can compare and analyze different patterns of entry into foster care, the stability of placement, the length of time spent in care, and the likelihood of reentry to care. When the subgroups are defined by a number of different criteria—by characteristics of the children (gender, age, race/ethnicity), by characteristics of their child welfare experience (children in kinship care settings, children who have reentered care, children who are adopted from care), or by

[2] Events tracked include the following: placement in nonrelative foster home, placement in kinship foster home, placement in congregate care facility, and exit destination from substitute care (e.g., reunification, adoption, guardianship, death, independence, runaway, detention).

external attributes (children from the city, the cohort of children entering in 2000)—a wide range of important questions can be studied.

What these data do not contain are indicators for some other, more commonly discussed aspects of the placement process, such as permanency goals and plans, the precipitating reason for placement, or any type of social, behavioral, or medical assessment. Although these other indicators are available for some of the participating states, for a variety of reasons they present methodological problems regarding comparability, reliability, or interpretation across all the participating states.[3] Nevertheless, one significant contribution of the Archive project has been to demonstrate that simple indicators, when carefully conceived and collected, can capture and represent the essence of a number of complex and important outcomes.

Special Archive Definitions

Because each state's definition of its own foster care population is unique, the Archive applied standard definitions to the data as it was processed. To be included in the comparative analyses:

- Children must have entered foster care before turning age 18.
- Children must be in state care for reasons of dependency, abuse, or neglect.
- For nonrelative placements, the substitute care placement must be state supervised and supported with a board and maintenance payment. For relative placements, the state must have legal custody of the child regardless of whether or not the relative is receiving a board and maintenance payment.

Three additional modifications are made to enhance the comparability of Archive data across states:

- Spells in care that lasted fewer than 5 days were excluded from analyses because the shorter spells, which are typically court-vacated protective custodies, tend to be reported only in certain states and distort certain comparisons.
- When spells in foster care were terminated for exit reasons other than reunification or adoption, and reentry then occurred within 1 week, the gap was "bridged," and the two separate spells are treated as a single spell. This change was needed to remove certain "paper change" events that are recorded in the state data systems and to adjust for local differences in reporting sensitivity.
- State policies regarding the participation of older adolescents (young adults) in foster care vary widely. Spells described here are "ended" on the twenty-first

[3] In addition to the core model described in this report, all of the data provided from each state are retained by the Archive in an extended module of the database. These data can be utilized on a state-by-state basis to support analyses that cannot be addressed with the full Archive database.

birthday regardless of whether the state's administrative data indicate an official exit from care.

Although we do our best to ensure comparable data across states, there are some instances in which we have had to make allowances for a particular state's approach to identifying specific placement types or exit destinations. For example, some states do not distinguish licensed kinship care from conventional foster care placement. These placement types are all displayed as foster care placement in our report. In other states, once a foster child is placed in a preadoptive home, the child takes on a new identity and is represented as a new entry in the data system. Also note that in all states, the "exit to other" category includes not only "other" exits, such as transfer to juvenile justice custody, and death, but also exits for which the destination was missing in the source data.

Organization of the Report

An overview of the children whose placement histories are summarized in the update can be found in Chapter 4. Briefly, there are 348,695 children in the sample of children admitted to foster care for the first time between 2000 and 2005. As noted, the report follows a format developed for prior reports. The sample of 348,695 children is based on the children admitted to foster care for the first time between 2000 and 2005 in eleven states. In Chapter 3, the data are based on six states; in all other chapters, the data are based on eleven states.

We start with basic counts of children in care. These data provide a basic orientation to the question: Is the number of children in foster care in these states growing or shrinking. In addition to the basic population counts, we show the basic admission and discharge dynamics that control population growth and decline. These data are presented on a monthly time scale to highlight the basic rhythms that are found within the overall system of care.

Attention then turns to the volume of children entering care. These data are presented for sub-populations defined by race/ethnicity, age, and gender. To account for differences in the size of the underlying populations, rates per 1,000 children in the general population are used to describe the chances a child will enter the foster care system.

Once inside the foster care system, the experiences of children are summarized using placement type, movement, and exit rates. Placement type refers to whether children were placed in family settings at the time of the *initial* placement; placement stability refers to how often the child moved from one home (or setting) to another; and exit rates refer to how and when children leave foster care.

3. Foster Care Caseloads

Caseload Counts

One of the most basic child welfare indicators is the count of children in substitute care at a given point in time. Caseload size helps to quickly identify one of the most obvious and important trends: Is the caseload growing or shrinking?

Changes in the number of children in substitute care result from a complex set of underlying processes and conditions. When the number of children in foster care is stable over time, it is because the various forces that cause children to move in and out of care are at equilibrium, whereas the caseload changes size because of an imbalance between admissions and exits. Whether admissions are rising or falling, the net population will grow as long as the number of admissions exceeds the number of children discharged. This important relation between admissions, discharges, and caseload change is simple in form and has unambiguous implications—to reduce the size of the substitute care population, the number of children discharged must exceed the number of new entries for an extended period of time.

Figure 3.1. State Foster Care Census—End-of-Year Counts and Annual Percent Caseload Change

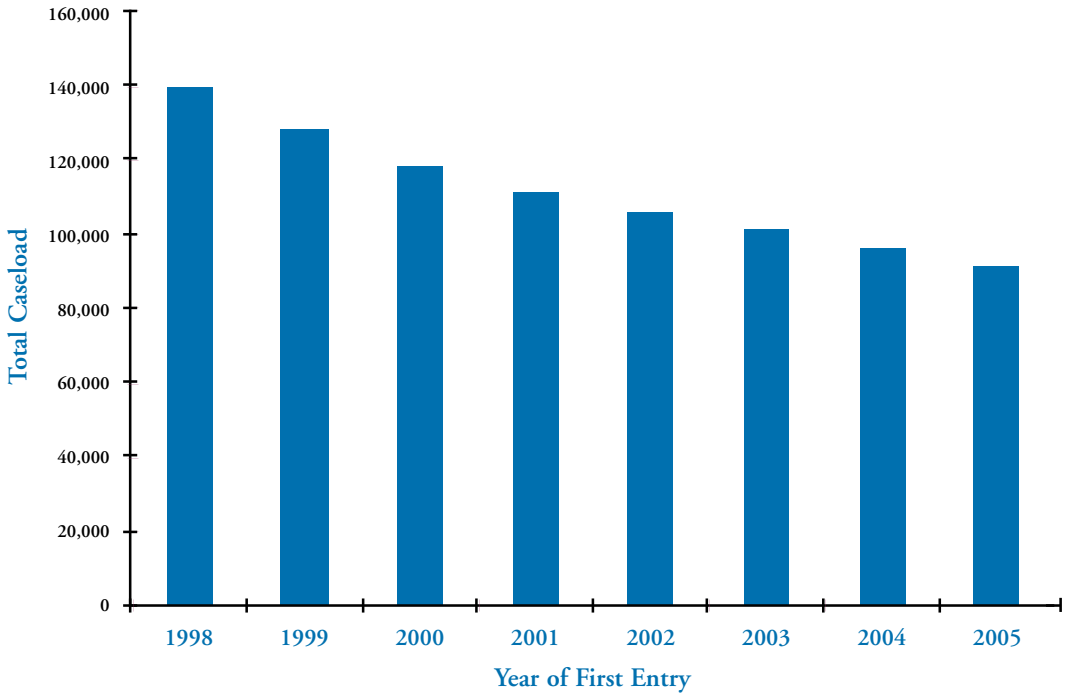


Figure 3.1 displays the foster care census by year from 1998 to 2005. These data point to an overall decline in the number of children in foster care, a trend that mirrors what happened nationally over the same time period. Compared with prior Archive reports, the downward trend represents a significant shift, given that there was sustained and significant growth in the number of children in foster care between 1983 and 1997.

The shrinking caseload is largely attributable to changes in the foster care population in states with large urban centers. In particular, there were well-publicized declines in Illinois and New York, two states that are included in the counts represented in Figure 3.1. Changes in the number of children entering care are described more fully in the next section.

We also see from Figure 3.1 that:

- The total caseload has steadily declined since 1998, particularly in 1999 and 2000 when the average rate of decline was about 8 percent.

Admissions and Discharges

Caseload dynamics, expressed as the number of admissions, the number of discharges, and the resulting net change in the population size, is broken down on a monthly basis for the states with complete point-in-time data from 2000 to 2005. These data are presented in Figure 3.2 in order to depict the regular cycle of discharges that characterizes the basic exit process in most, if not all, child welfare systems. The regular cycle of discharges is somewhat in contrast to the more irregular cycle of admissions. Nevertheless, both processes reveal underlying regularities, with admissions tending to be fewer late in the calendar year and discharges tending to be higher in the months leading up to summer. These identical patterns have been present in the data going back to the early 1980s, even during periods when the overall caseload is growing rapidly or shrinking, as is the case more recently. The persistence of these patterns points to structural features in the child welfare system that govern the basic behavior of the systems involved. For example, the larger number of discharges in the months leading up to summer probably reflects a preference for holding off on discharges so that school children return home after the school year has ended.

Figure 3.2. Foster Care Admissions, Discharges, and Net Change

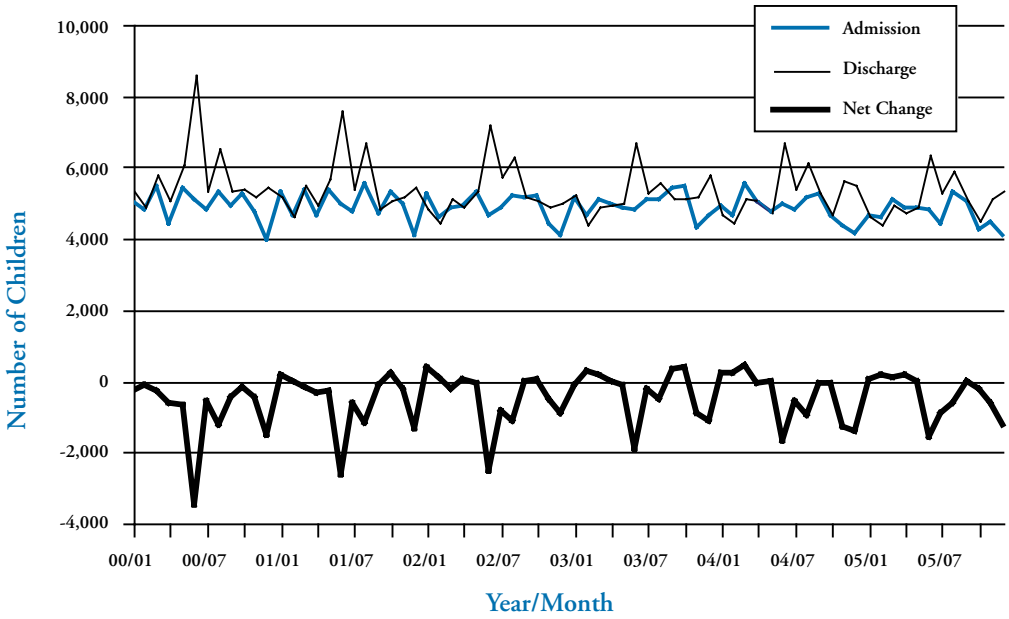


Figure 3.2 shows the following:

- In most months from 2000 through 2005, the net change has been negative, which is consistent with the shrinking caseload reported in Figure 3.1.
- The decline in caseloads is more drastic in the earlier years. This is mainly due to the large number of discharges in these years, exceeding 8,000 in the summer months of 2000.
- There is regular seasonal variation in discharges from foster care. Each year, discharges increase during the summer and then return to the spring level in the autumn.

4. Children Entering Foster Care

The moment a child enters care for the first time—the time at which the state first assumes care and custody—defines the starting point of every individual foster care history. This is the "front door" to the foster care system. Decisions made about whether to admit children as well as the characteristics of the children admitted can have a profound impact on the future size and composition of the child welfare population.

In the first part of this section, the number of children first admitted to care between 2000 and 2005 is presented. The data, which cover nearly 350,000 children, offer a basic look at the children included in the sample upon which the report is based. In the following section, we examine incidence rates in order to convey how the risk of placement for some groups of children differs from the risk for other groups.

Number of Children Placed for the First Time

The number of children placed for the first time is shown in Table 4.1 (see page 14). The corresponding percentages are shown in Table 4.2 (see page 15). From the perspective of past Archive reports, the population of children entering foster care consists of very young children who are African American and from urban areas. In the more recent period covered by this report, there has been a shift in the basic demographics of the caseload.

From Tables 4.1 and 4.2, we can see that:

- About one in five children admitted to foster care is under the age of 1 year at the time of admission. This figure has been relatively stable since 1983. Children from the other age groups are evenly divided. The basic age structure of the child welfare caseload is one of the most stable features of the child welfare population.
- The number and proportion of children admitted to foster care who are White or Hispanic have increased, whereas the number and proportion of children who are African American have declined.
- The number and proportion of children from secondary urban and nonurban areas have increased, whereas the number and proportion of children from primary urban areas declined. In 2000, children from urban areas made up the largest segment of the foster care population (at admission); by 2005, more children were from nonurban areas.
- The gender balance of the population remained unchanged.

Table 4.1. Description of First Admissions for Entry Cohorts 2000–2005

Characteristics	Year of First Admission						Total
	2000	2001	2002	2003	2004	2005	
Age at Entry							
Less than 1 year	10,806	10,909	10,904	11,244	11,197	11,279	66,339
1 to 5 years	14,835	15,476	15,099	15,777	15,341	15,187	91,715
6 to 12 years	17,015	17,135	16,434	16,146	14,832	14,114	95,676
13 to 17 years	16,108	16,463	15,721	15,918	15,640	15,115	94,965
Race/Ethnicity							
White	26,475	28,045	27,681	28,809	28,197	27,812	167,019
African American	23,083	23,179	21,702	20,835	19,477	18,358	126,634
Hispanic	5,113	5,283	5,622	6,218	6,062	5,637	33,935
Other	4,093	3,476	3,153	3,223	3,274	3,888	21,107
Urbanicity							
Nonurban	19,812	20,606	20,682	21,982	21,621	21,864	126,567
Secondary urban	17,915	19,385	18,812	19,286	19,233	18,722	113,353
Primary urban	21,037	19,992	18,664	17,817	16,156	15,109	108,775
Gender							
Male	30,030	30,433	29,466	29,946	28,941	28,204	177,020
Female	28,734	29,550	28,692	29,139	28,069	27,491	171,675
Total	58,764	59,983	58,158	59,085	57,010	55,695	348,695

Table 4.2. Percentage Distributions of First Admissions for Entry Cohorts 2000–2005

	Year of First Admission						
Characteristics	2000	2001	2002	2003	2004	2005	Total
Age at Entry							
Less than 1 year	18%	18%	19%	19%	20%	20%	19%
1 to 5 years	25%	26%	26%	27%	27%	27%	26%
6 to 12 years	29%	29%	28%	27%	26%	25%	27%
13 to 17 years	27%	27%	27%	27%	27%	27%	27%
Race/Ethnicity							
White	45%	47%	48%	49%	49%	50%	48%
African American	39%	39%	37%	35%	34%	33%	36%
Hispanic	9%	9%	10%	11%	11%	10%	10%
Other	7%	6%	5%	5%	6%	7%	6%
Urbanicity							
Nonurban	34%	34%	36%	37%	38%	39%	36%
Secondary urban	30%	32%	32%	33%	34%	34%	33%
Primary urban	36%	33%	32%	30%	28%	27%	31%
Gender							
Male	51%	51%	51%	51%	51%	51%	51%
Female	49%	49%	49%	49%	49%	49%	49%
Total	100%	100%	100%	100%	100%	100%	100%

First Admissions to Care: Incidence Rates

Because the number of children in a given population strongly influences the number of children who enter foster care, adjusting admission counts for the size of the populations involved facilitates population comparisons. Incidence rates (or entry rates) look at the number of new entrants relative to the child population in each state and are expressed as the number of children who first enter foster care during the year per 1,000 children. Incidence rates are true measures of the risk of entering care; they are highly comparable across populations.

Figure 4.1 shows the annual incidence rates of first entry to foster care for the states combined as well as for the two states with the highest and lowest incidence rates. In part, entry levels vary because of differences in the proportion of children in the population who are at risk.

Figure 4.1. Annual Incidence Rate of First Entry to Foster Care, Ages 0–17 Combined

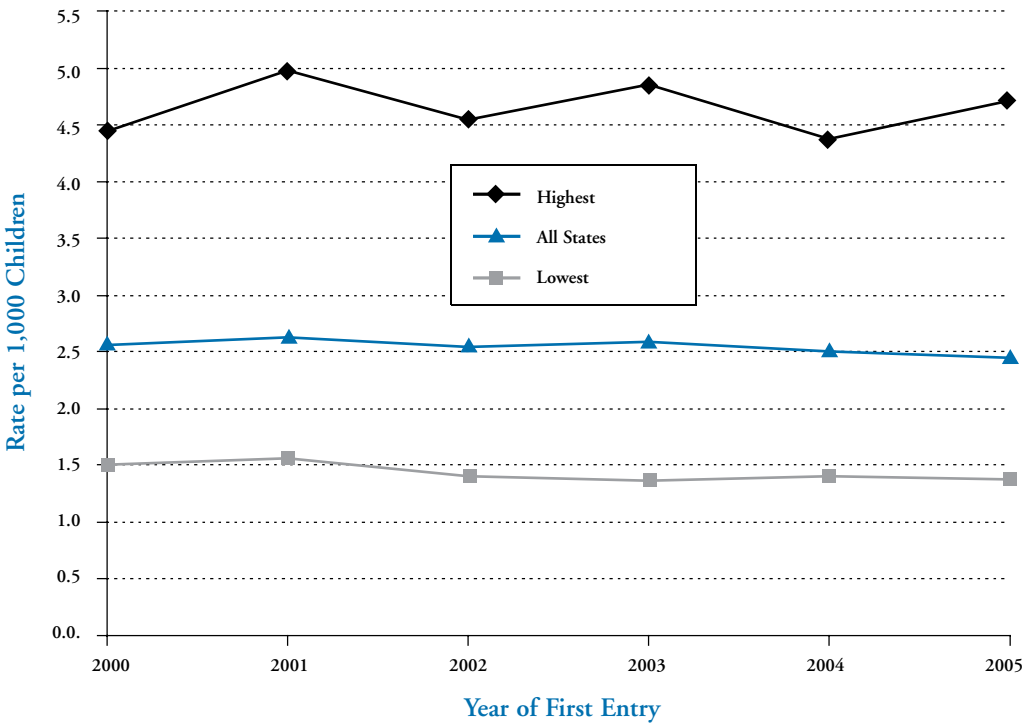


Figure 4.1 shows the following:

- The average entry rates were fairly stable, with around 2.6 placements per 1,000 children. By 2005, the rate had dipped to 2.4 per 1,000.
- The state with the highest entry rates for all 6 years reported an entry rate of 4.5 admissions per 1,000 children. The entry rate in the state with the lowest placement rate was 1.5 per 1,000.

Age at Entry

The period of general decline in foster care caseloads between 2000 and 2005 did not dramatically affect the age distribution, as we mentioned earlier.

Figure 4.2 illustrates these changes by dividing the Archive population into three entry cohorts—children who entered in 2000–2001, 2002–2003, and 2004–2005 and showing the distribution of entrants by single years of age.

Figure 4.2. Age at First Entry to Foster Care, by Year of Entry: Percentage Distribution

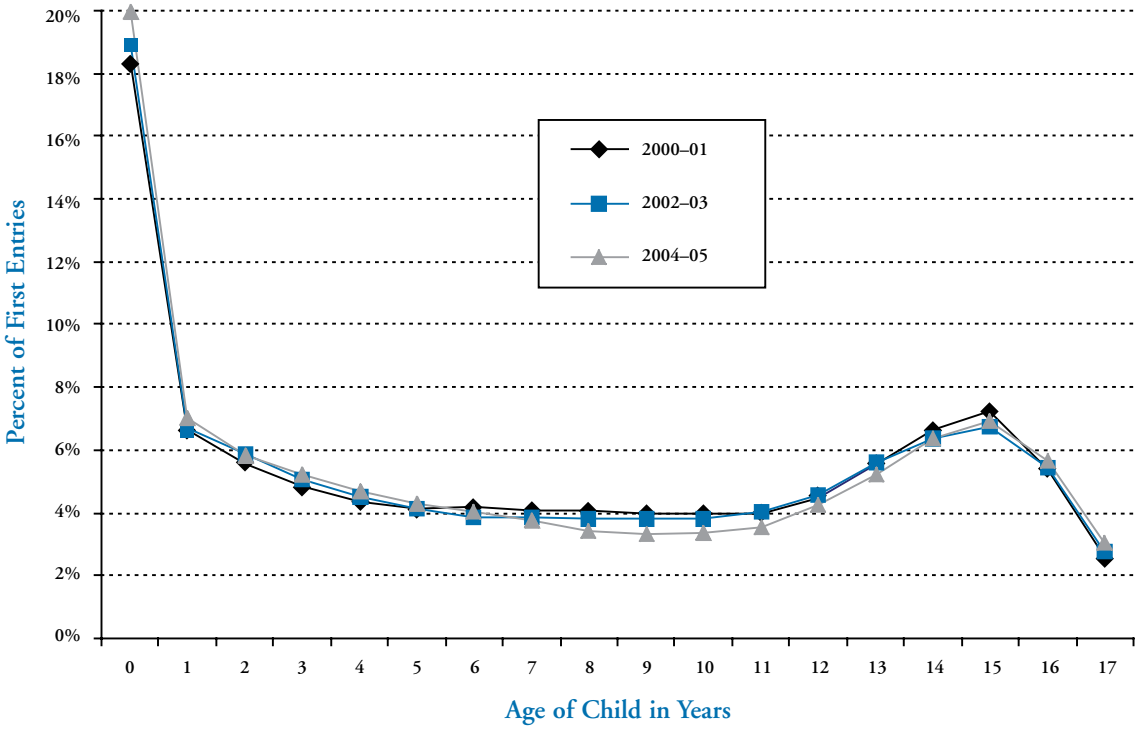


Figure 4.2 shows that:

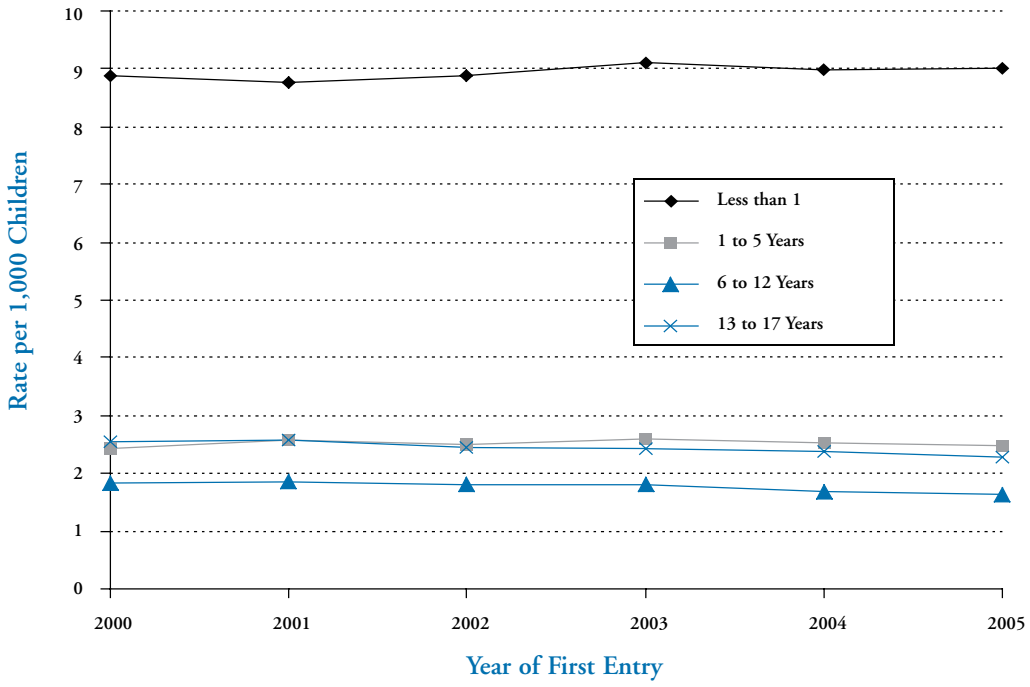
- Infants continue to be the largest group of children entering care, making up 18 to 20 percent of all children entering care from 0 to 17 years of age, from 2000 to 2005.
- Compared with infants, older children of any age constitute only 7 percent or less of the foster care admissions during the three time periods.
- The percentage of infants in entry cohorts increased slightly from 18.3 percent (2000–2001) to 19.9 percent (2004–2005).
- The proportion of children entering at 7 to 11 years of age decreased slightly from 2000–2001 to 2004–2005.

Incidence rates for different age groups are presented in Figure 4.3. The age groups are infants, children aged 1 to 5, children aged 6 to 12, and children aged 13 to 17.

In Figure 4.3, we see that:

- Infants have the highest entry rate of the four age groups, averaging over 8.9 per 1,000 per year from 2000 to 2005.
- Children aged 6 to 12 have the lowest entry rate, averaging 1.8 per 1,000 from 2000 to 2005.
- The entry rate over time has declined slightly among 6- to 17-year-olds, compared with rates for infants and 1- to 5-year-olds.

Figure 4.3. Incidence Rate of First Entry to Foster Care, by Year and Age at Entry



Race and Ethnicity

All states classify foster children by primary racial and ethnic characteristics, although these categories sometimes lack precision. That said, involvement in foster care does vary along ethnic and racial lines, as widely reported.

Figure 4.4 (see page 20) shows the racial/ethnic composition of foster care entry cohorts from 2000 to 2005:

- Although White children constitute the largest racial/ethnic group in each of the six foster care entry cohorts, the proportion has not exceeded 50 percent of the foster care population.
- African American children make up 39 percent of the 2000 and 2001 entry cohorts. These data point to one of the reasons why African American children are overrepresented in the foster care population. The data, however, indicate that the proportion of African American children has declined while the proportion of White children has increased, from 45 percent in 2000 to 50 percent in 2005.
- The proportion of Hispanic children has remained relatively stable at 8 to 10 percent in each year.

Figure 4.5 (see page 20) compares the incidence rates for the three racial/ethnic groups from 2000 to 2005. These data further describe the risk of placement and the change in racial/ethnic composition of the entry cohorts over time.

In Figure 4.5, we see that:

- White children have an annual incidence rate ranging from 1.8 to 2.0 per 1,000, which is similar to the incidence rate of Hispanic children.
- For each of the six entry cohorts, African American children have the highest incidence rates of the three racial/ethnic groups, which partly explains their overrepresentation in the foster care population.
- The incidence rate of African American children decreased from 5.4 to 4.3 per 1,000 from 2000 to 2005, while the incidence rates of White and Hispanic children remained fairly stable. This explains the decline in the proportion of African American children entering foster care. Although the data are not presented separately, the decline in admissions from urban areas accounts for the decline in admissions among African American children.

Figure 4.4. Percentage of Race/Ethnic Group in First Entry to Foster Care, by Year of Entry

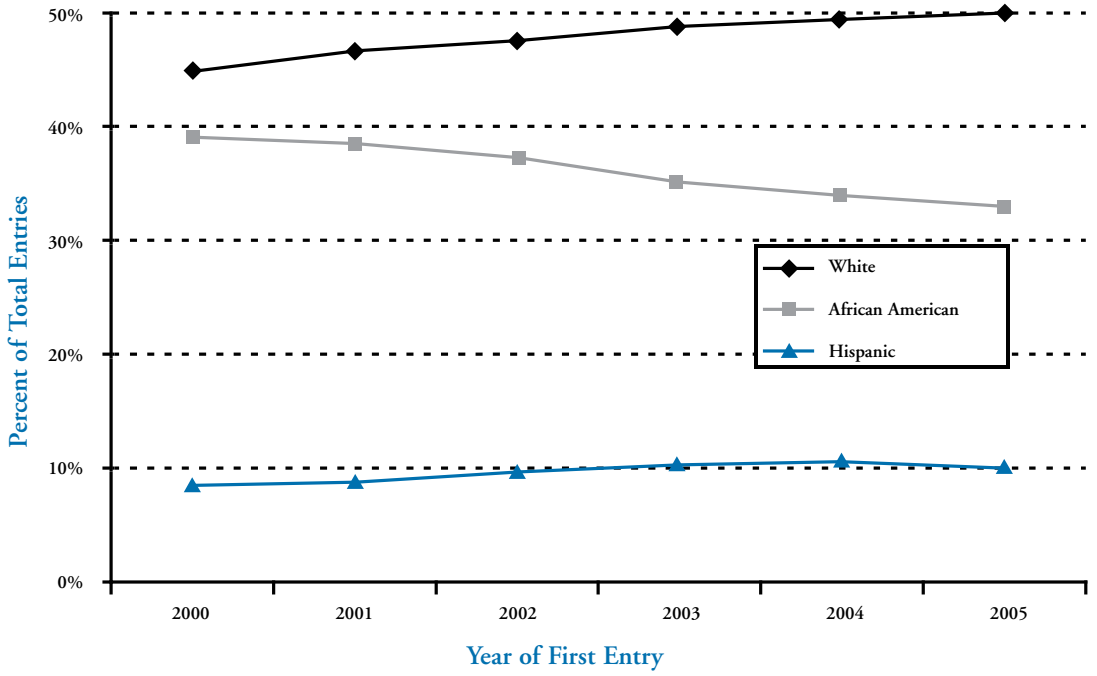
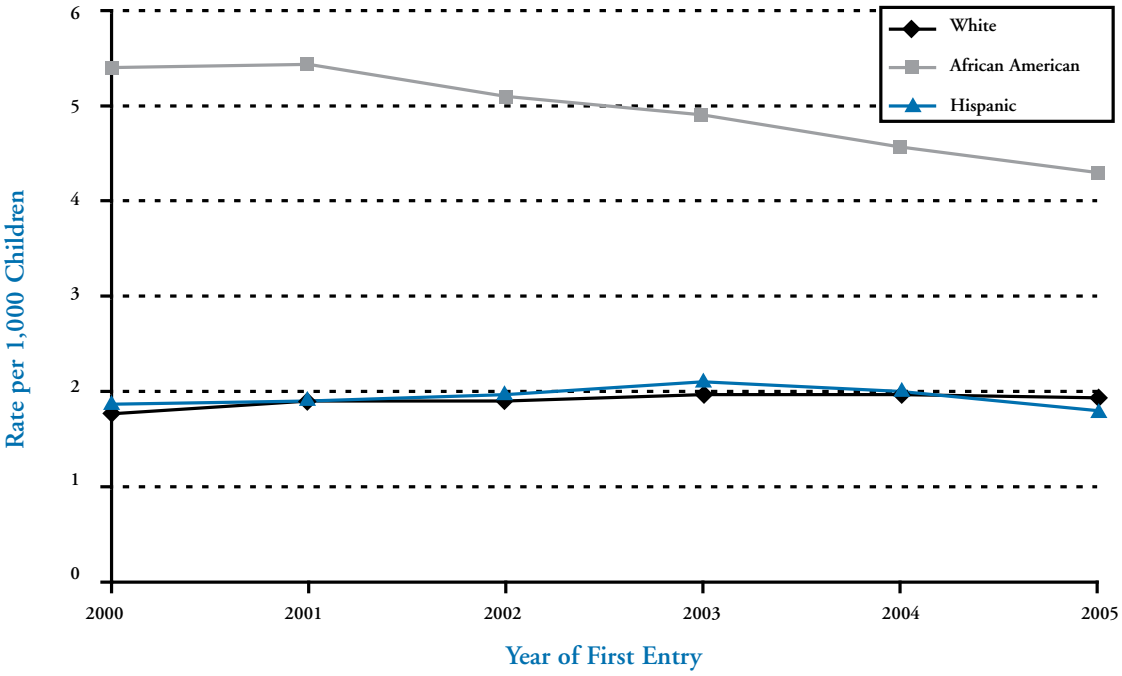


Figure 4.5. Incidence Rate of First Entry to Foster Care, by Year and Race/Ethnicity



5. Keeping Children in Family Settings: Placement Type

Children entering foster care may be placed in different settings. Besides the conventional foster homes, a child can be placed with relatives such as grandparents, in group homes, and in residential facilities. For children who are placed in foster care, an important goal of the foster care system is that they be placed in family-like settings rather than in residential/group care settings. Children placed with relatives or in nonrelative foster homes are more likely to have a nurturing home environment conducive to healthy physical and mental development. This section will demonstrate the changes in the relative proportion of children in various placement settings from 2000 to 2005 and compare the percentages of children of different ages, racial/ethnic groups, and geographic areas placed in different settings.

Because a child may experience multiple placements and change placement settings in a foster care spell, we will distinguish the initial placement type from the dominant placement type. The first placement can be in one of four settings: conventional foster care, kinship care, congregate care (e.g., group homes, residential care), and other settings (e.g., independent living). If a child spends over half of the foster care spell in any one setting, that setting is regarded as the primary placement setting. If none of the four settings covers more than half of the time a child spent in care, the primary care type is then considered as "mixed." This section will show the results for the first placement type only. We should note that the first placement may not be the primary setting where a child spends most of the time in a foster care spell. In later sections, the primary foster care setting will also be used in the analysis.

Change in Placement Setting by Entry Cohort Year

Table 5.1 shows the numbers of children in each of the four initial placement settings for the 2000 to 2005 entry cohorts. The most revealing is the change in the relative proportion of children in each placement setting from 2000 to 2005.

Table 5.1. Type of First Placement by Year of Entry

	2000	2001	2002	2003	2004	2005
Type of First Placement						
Congregate care	13,075	12,803	11,831	11,606	11,004	10,742
Foster care	33,940	34,478	32,712	32,886	30,753	30,321
Relative care	9,936	11,065	12,068	12,928	13,500	13,009
Other	1,813	1,637	1,547	1,665	1,753	1,623
Total	58,764	59,983	58,158	59,085	57,010	55,695
Type of First Placement						
Congregate care	22%	21%	20%	20%	19%	19%
Foster care	58%	57%	56%	56%	54%	54%
Relative care	17%	18%	21%	22%	24%	23%
Other	3%	3%	3%	3%	3%	3%
Total	100%	100%	100%	100%	100%	100%

We note from Table 5.1 that:

- For each entry cohort, a large majority of the children (54–58%) are placed initially in conventional foster homes.
- The percentage of children placed in kinship care has increased from 17 percent in 2000 to 23 percent in 2005, while the percentages of children placed in conventional foster homes and congregate settings have decreased.
- The proportion of children placed in family-like settings (foster homes and kinship care) has seen a modest increase from 75 percent in 2000 to 77 percent in 2005.

Placement Setting by Entry Age, Race/Ethnicity, and Urbanicity

Children of different age groups, race/ethnicity, and region can also vary in their distribution of placement settings. Table 5.2 shows the proportions of children with different demographic characteristics in the four placement settings.

Table 5.2. Type of First Placement by Entry Age, Race/Ethnicity, and Urbanicity, from 2000 to 2005

	Congregate Care	Foster Care	Kinship Care	Other Care	Total
Age at Entry					
Less than 1 year	5%	68%	17%	9%	100%
1 to 5 years	7%	65%	26%	1%	100%
6 to 12 years	15%	58%	26%	1%	100%
13 to 17 years	49%	37%	13%	2%	100%
Race/Ethnicity					
White	19%	60%	19%	3%	100%
African American	20%	53%	23%	4%	100%
Hispanic	28%	46%	24%	2%	100%
Other	25%	59%	15%	2%	100%
Urbanicity					
Nonurban	15%	65%	17%	2%	100%
Secondary urban	22%	54%	21%	2%	100%
Primary urban	25%	47%	25%	4%	100%

From Table 5.2 , we see that:

- Children aged 1 to 5 years are more often placed in family settings (91% in foster homes or kinship care) than either infants (85%), 6- to 12-year-olds (83%), or teenagers (50%). Forty-nine percent of teenagers are placed in congregate care, which is a much higher percentage than for any of the younger age groups. Only 5 percent of infants are placed in congregate care, the lowest percentage of the four age groups.

- A much higher percentage of children of Hispanic origin (28%) are placed in congregate care than of White children (19%) or African American children (20%). A higher proportion of White children (60%) are placed in conventional foster homes than of African American children (53%) or Hispanics (46%); African American children are more likely to be placed in kinship care (23%) than are White children (19%).
- Children from primary urban areas are more likely to be placed in congregate care than children in secondary urban and nonurban areas (25%, 22%, and 15%, respectively). Children from primary urban areas are also more likely to be placed in kinship care than children in secondary urban or nonurban areas (25%, 21%, and 17%). In contrast, children from nonurban areas are more likely to be placed in nonrelative foster homes than are children from either primary urban or secondary urban areas (65%, 47%, and 54%, respectively).

6. Stability of Placement in Foster Care

Multiple placements while in foster care are damaging experiences for children because their family and social bonds are repeatedly disrupted. Therefore, a well-functioning child welfare system should endeavor to find the right placement setting and ensure that a child experiences no more than one move while in care. The means of achieving placement stability is to place a child in the right foster or relative home and to provide services to that child and foster home to make the placement successful.

Although the idea of placement stability has intuitive appeal, actual measures of placement stability are somewhat difficult to construct. The conventional measure is the number of moves per child during the foster care spell. When measuring the number of moves per child, we should also take into account the duration of the foster care spell and the timing of the moves relative to admission. To achieve this, three measures of placement stability are computed for both the first 6 months after entering care and the second 6 months for those who are still in care. The three measures are the average moves per child, percentage of children moved once, and percentage of children moved two or more times for each of the two 6-month periods.

Placement Stability by Entry Year

Table 6.1 shows the three measures of placement stability during the first 6-month and second 6-month intervals for the 2000 to 2005 entry cohorts.

Table 6.1. Placement Moves for Children within First and Second 6 Months of Entering Care in 2000–2005, First Spell Only

	2000	2001	2002	2003	2004	2005*	Total
First 6 Months							
Total children admitted	58,764	59,983	58,158	59,085	57,010	28,621	321,621
Children without moves	33,931	34,496	33,683	33,920	32,862	16,296	185,188
Percent of children moved	42%	42%	42%	43%	42%	43%	42%
Percent two or more moves	16%	16%	15%	15%	15%	15%	15%
Total moves	40,138	41,448	39,125	39,695	37,845	19,281	217,532
Average moves per child	0.68	0.69	0.67	0.67	0.66	0.67	0.68
Second 6 Months							
Total children still in care	36,000	37,168	36,259	36,940	35,641	-	182,008
Children without moves	28,829	29,681	29,003	29,497	28,672	-	145,682
Percent of children moved	20%	20%	20%	20%	20%	-	20%
Percent two or more moves	6%	5%	5%	5%	5%	-	5%
Total moves	10,405	10,794	10,307	10,567	9,814	-	51,835
Average moves per child	0.29	0.29	0.28	0.29	0.28	-	0.29

* *For entry cohort 2005, only children entering care in the first half of the year are included. Because they completed the first 6 months in care but not the second full 6 months by the censoring date of 12/31/2005, the indicator values for the second 6-month period are not calculated.*

Table 6.1 shows that:

- For each entry cohort, about 42 to 43 percent of children have experienced at least one placement change within the first 6 months after admission into foster care, whereas 15 to 16 percent have moved two or more times.
- In the second 6-month interval, those children remaining in care move less frequently than in the first 6 months. Only 20 percent have moved once or more.
- There is little difference in the average number of moves per child across the entry cohort years in both the first 6 months and the second 6 months.

Table 6.2. Placement Moves for Children within First 6 Months and Second 6 Months of Entering Care in 2000–2004 for Different Age Groups, First Spell Only

	Less than 1	1 to 5 Years	6 to 12 Years	13 to 17 Years	Total
First 6 Months					
Total children in care	55,060	76,528	81,562	79,850	293,000
Children without moves	32,352	44,035	46,302	46,203	168,892
Percent of children moved	41%	42%	43%	42%	42%
Percent two or more moves	12%	14%	16%	18%	15%
Total moves	32,002	47,978	58,116	60,613	198,709
Average moves per child	0.58	0.63	0.71	0.76	0.68
Second 6 Months					
Total children in care	40,579	49,341	51,591	40,497	182,008
Children without moves	34,226	40,489	40,272	30,695	145,682
Percent of children moved	16%	18%	22%	24%	20%
Percent two or more moves	3%	4%	6%	8%	5%
Total moves	7,840	11,650	16,633	15,764	51,887
Average moves per child	0.19	0.24	0.32	0.39	0.29

Placement Stability by Age at Entry, Race/Ethnicity, and Region

Tables 6.2, 6.3, and 6.4 compare the placement stability for children of different age groups, different race/ethnicity, and different regions during the first and second 6-month intervals for the 2000 to 2004 entry cohorts. The 2005 entry cohort is not included because the duration of foster care spells for some children is censored (incomplete).

Tables 6.2, 6.3, and 6.4 (see pages 28 and 29) show that:

- Older children are more likely to move than younger children. While 12 percent of infants experienced two or more placement changes within the first 6 months after admission into foster care, 18 percent of the teenagers moved twice or more.
- White children experience more moves on average than children of any other ethnic group. In the first 6-month interval, about 44 percent of White children experienced at least one placement change, which is higher than the proportion of African American children (42%) or Hispanic children (39%).

Table 6.3. Placement Moves for Children within First 6 Months and Second 6 Months of Entering Care in 2000–2004 for Different Ethnic Groups, First Spell

	White	African American	Hispanic	Other	Total
First 6 Months					
Total children in care	139,207	108,276	28,298	17,219	293,000
Children without moves	78,260	62,352	17,142	11,138	168,892
Percent of children moved	44%	42%	39%	35%	42%
Percent two or more moves	16%	15%	13%	11%	15%
Total moves	98,528	73,574	17,240	9,367	198,709
Average moves per child	0.71	0.68	0.61	0.54	0.68
Second 6 Months					
Total children in care	83,381	71,720	16,993	9,914	182,008
Children without moves	66,289	57,387	13,776	8,230	145,682
Percent of children moved	20%	20%	19%	17%	20%
Percent two or more moves	6%	5%	5%	5%	5%
Total moves	24,341	20,402	4,646	2,498	51,887
Average moves per child	0.29	0.28	0.27	0.25	0.29

- A higher proportion of foster children in rural areas experienced one or more placement changes (44%) than of children in urban areas (41%) in the first 6 months in care.

Placement Stability by Initial Placement Type

Table 6.5 (see page 30) shows the placement stability for children in different initial placement settings during the first and second 6-month intervals for the 2000 to 2004 entry cohorts. We see from Table 6.5 that:

- In both the first and second 6-month intervals after admission, children initially placed with relatives are the least likely to experience placement changes.
- Children first placed in congregate care experience a higher average number of moves than children in either kinship care or conventional foster homes.

Table 6.4. Placement Moves for Children within First 6 Months and Second 6 Months of Entering Care in 2000–2004 from Different Regions, First Spell

	Nonurban	Secondary Urban	Primary Urban	Total
First 6 Months				
Total children in care	104,703	94,631	93,666	293,000
Children without moves	58,602	55,492	54,798	168,892
Percent of children moved	44%	41%	41%	42%
Percent two or more moves	16%	15%	15%	15%
Total moves	75,433	61,670	61,606	198,709
Average moves per child	0.72	0.65	0.66	0.68
Second 6 Months				
Total children in care	60,925	58,542	62,541	182,008
Children without moves	48,446	46,744	50,492	145,682
Percent of children moved	20%	20%	19%	20%
Percent two or more moves	6%	5%	5%	5%
Total moves	18,201	16,478	17,208	51,887
Average moves per child	0.30	0.28	0.28	0.29

Table 6.5. Placement Moves for Children within First 6 Months and Second 6 Months of Entering Care in 2000–2004 by First Placement Type, First Spell

	Congregate Care	Foster Care	Kinship Care	Other	Total
First 6 Months					
Total children in care	60,319	164,769	59,497	8,415	293,000
Children without moves	31,345	91,861	44,347	1,339	168,892
Percent of children moved	48%	44%	25%	84%	42%
Percent two or more moves	19%	16%	8%	32%	15%
Total moves	49,319	115,457	22,650	11,283	198,709
Average moves per child	0.82	0.70	0.38	1.34	0.68
Second 6 Months					
Total children in care	32,912	100,630	42,195	6,271	182,008
Children without moves	25,329	79,535	35,711	5,107	145,682
Percent of children moved	23%	21%	15%	19%	20%
Percent two or more moves	7%	5%	4%	5%	5%
Total moves	11,581	29,564	9,045	1,697	51,887
Average moves per child	0.35	0.29	0.21	0.27	0.29

7. Duration of Spells in Foster Care

The length of time that children spend in out-of-home care is a matter of central interest in child welfare. The amount of time that a child is separated from the home environment determines the amount of state and federal resources required to support the child's stay in care. *Duration effects* have a huge influence on the size of foster care caseloads. Because duration varies for different groups of children, identifying and understanding which groups have tended to stay in care for longer spells help to explain why caseloads have remained high and also help child welfare agencies identify children particularly at risk of long-term stays in care.

Although measuring the duration of foster care episodes is conceptually straightforward, it is methodologically complex. Full enumeration of duration is often impractical, as it requires the observation of entry cohorts until all children have exited from care. Those studies using cross-sectional samples or exit cohorts typically produce biased estimates that distort our understanding of placement duration. Fortunately, empirical tools such as *event history methods* allow us to estimate and analyze duration distributions from longitudinal datasets that contain incomplete (censored) observations.

Estimated Median Duration in Care

The *median duration* is the point in time by which one-half of the children in a given entry cohort or set of cohorts have experienced the event of interest (exit from care), while the other half have not. Most of the discussion of duration in this section will summarize duration distributions by their median value.

Table 7.1. Duration Quartiles (in months) of First Foster Care Spells by Year of Entry (as of December 31, 2005)

Quartiles	2000	2001	2002	2003	2004	2005
25%	2.9	3.1	3.2	3.3	3.3	3.5
50%	11.5	11.4	11.7	11.6	11.6	11.5
75%	27.8	27.0	26.7	26.0	-	-

Note: *"-" indicates that there are not enough completed placement spells for calculation of the value.*

Table 7.1 shows estimated duration quartiles (expressed in months) for all first admissions to care from 2000 through 2005. The first quartile (25%) indicates how much time elapsed before 25 percent of the children admitted between 2000 and 2005 were discharged from their first spell in foster care. Similarly, the 50th and 75th percentiles indicate how much time elapsed before 50 and 75 percent of the children were discharged from care. The quartile distributions provide an indication of the underlying "survival" distribution. Typically, the survival distribution is characterized by a relatively rapid rate of discharge in the months following admission to foster care.

Table 7.1 shows the following:

- In each entry cohort, 25 percent of first admissions are discharged from placement in 3 to 3.5 months. It takes 8 more months for the next 25 percent to leave placement, which makes the median duration of first spells in foster care over 11 months.
- The median spell duration in foster care is similar for the six entry cohorts. This indicates that children in recent entry cohorts stay in care for about the same time as earlier entry cohorts.

Table 7.2. Median Duration (in months) of First Foster Care Spells by Year of Entry (as of December 31, 2005)

Median Duration	2000	2001	2002	2003	2004	2005
State with shortest duration	2.6	2.8	3.3	2.9	3.5	4.4
State with longest duration	27.6	27.3	27.8	28.1	-	-
Total sample of children	11.5	11.4	11.7	11.6	11.6	11.5

Note: *"-" indicates that there are not enough completed placement spells for calculation of the value.*

Table 7.2 indicates that the median duration of foster care spells varies greatly from state to state. The shortest median duration is less than 5 months for each entry cohort in one state; the longest median duration is over 27 months for each entry cohort in another state.

Table 7.3 (see page 34) compares the median duration of first foster care spells for children of different age groups, racial/ethnic origins, regions of residence, and first placement types.

Table 7.3 shows the following:

- Infants have a much longer median duration than older children. While the median duration for infants has declined from 18.7 months to 17.6 months from 2000 to 2004, the median duration in foster care for teenagers has increased from 6.6 months to 7.6 months from 2000 to 2004.
- Concerning racial/ethnic differences, African American children have the longest median duration of about 14 months for each entry cohort, while the median duration for White, Hispanic, and other children is only 10 to 11 months.
- Children in primary urban areas have a median duration of 14 to 15 months for each entry cohort, which is much longer than either the 11 months for children of secondary urban regions or the 9 to 10 months for children in rural areas.
- The median duration of first foster care spells also varies for children in different placement settings. Children first placed in congregate care have the shortest duration, which ranges from 7.7 to 9.3 months during 2000 to 2005. Children placed in kinship care have the longest median duration in foster care, which is 15 months for the 2000 entry year. However, the median duration for children in kinship care decreased from 15 months in 2000 to 14 months for the 2004 entry cohorts.

Table 7.3. Median Duration (in months) of First Placement Spell by Year of Entry for Race/Ethnicity, Age at Entry, Region, and First Placement Type (as of December 31, 2005)

	2000	2001	2002	2003	2004	2005
Age at Entry						
Less than 1 year	18.7	17.7	17.9	17.5	17.6	-
1 to 5 years	12.9	12.6	12.7	12.4	12.4	-
6 to 12 years	12.0	12.0	12.1	12.0	12.0	11.5
13 to 17 years	6.6	6.9	7.3	7.6	7.6	7.8
Race/Ethnicity						
White	10.0	10.1	10.5	10.6	10.6	11.0
African American	14.1	13.9	14.2	13.8	13.6	-
Hispanic	10.9	11.0	10.8	11.4	11.7	11.5
Other/unknown	10.5	9.4	9.7	9.8	10.3	9.9
Urbanicity						
Nonurban	9.4	9.3	9.8	10.3	9.9	10.5
Secondary urban	11.1	11.0	11.5	11.5	11.3	11.7
Primary urban	14.7	15.2	14.7	13.9	15.2	-
First Placement Type						
Congregate care	7.7	8.2	8.7	9.3	9.1	9.2
Foster care	11.8	11.4	11.7	11.5	11.2	11.2
Kinship care	15.1	14.8	14.2	13.3	14.1	-
Other	19.7	18.4	19.5	18.6	17.9	-

Note: *"-" indicates that not enough completed spells have ended by the end of 2005 to calculate the value.*

Analysis of Duration Patterns

The length of time children spend in first spells in foster care clearly varies across states and for children with different characteristics and in different circumstances. The univariate medians described above show that duration differs significantly by region, by the race/ethnicity of the children, and by the age at first entry. We know that race, region, and age are interrelated variables and that they are distributed differentially in each of the Archive states. Therefore, it is reasonable to question whether some of the variation in spell duration that we attribute to any of these variables might be explained simply by its relationship to one or more of the other variables.

We applied a proportional hazards analysis to the duration data to investigate the relationship between each of these variables and the likelihood of leaving foster care, while controlling for the effects of the other variables. In addition to the multivariate nature of these models, the proportional hazards approach has the added advantage of considering information from the entire distribution of observed durations. This analysis does not rely on a single statistic (such as the median) to summarize duration, but instead evaluates the "observed" duration value for each individual spell.

Proportional hazards models are estimated for first spells in care in a model with data from the entire sample pooled together. The dependent variable, the hazard of exit from foster care, is the probability that a child will exit the spell in foster care at a specific point in time, given that he or she has not yet been discarged. The independent variables are the year the spell started, region, race/ethnicity, gender, age at entry, and the type of placement.

Proportional hazards are not intuitively easy to interpret. The most useful statistics they produce are estimates of the *hazard ratios* associated with each level of each factor in the model. These hazard ratios show the relative hazard or "risk" that a child with the given attribute will leave foster care, other things being equal. The model is structured with one category of each variable set as a standard against which hazard ratios for the other categories of this variable can be evaluated. Each "standard" category is readily identified by a hazard ratio value of 1.00.

Hazard ratios from the pooled model are presented in Table 7.4. It is important to understand that because the hazard defined is that of leaving care, higher hazard ratios (above 1) imply shorter spells, and lower hazard ratios (less than 1) imply longer spells. Each hazard ratio is estimated in a way that controls for the effects of all of the other variables in the model. Overall, we found that age, urban region, ethnicity, and care type had significant and independent influences on the duration of spells in foster care.

Table 7.4 shows the following:

- Controlling for child demographics, the average durations of foster care spells for the six entry cohorts does not differ significantly. Although the hazard ratio for the 2005 cohort is statistically significant, because many of its spells are not completed by the censoring date (i.e., December 31, 2005), the estimate may not be stable.
- Infants stay in care longer than children in all other age groups. Children aged 13 to 17 stay in care for a much shorter duration than infants and younger children.
- With regard to children of different racial/ethnic origin, African American children have longer average spell duration than White and Hispanic children. Hispanic children stay in care for a shorter period than African American children or White children.
- With regard to different initial placement types, children first placed in congregate care have the shortest foster care spells. Children placed in nonrelative foster homes and in kinship care do not differ in their average length of stay in foster care.[4]
- Children from rural counties generally have shorter foster care spells than those from either primary or secondary urban areas. Children in primary urban areas have the longest spells in foster care.

[4] This finding seems to contradict the results in Table 7.3, where children in kinship care have a longer median duration than children in conventional foster care. This may be explained by the fact that kinship care occurs more often in primary urban areas and for African American children (see Table 5.2). Because children in primary urban regions and African American children stay in care longer, when they are controlled for in the proportional hazards model, children in kinship care are no longer significantly different from children in nonrelative foster care in the average duration of foster care spells.

Table 7.4. Hazard Ratios of Discharge from First Spell in Foster Care, 2000–2005, from Proportional Hazards Model (as of December 31, 2005)

Variables	Hazard Ratio
Year of Entry	
2000	1.0
2001	1.01
2002	1.01
2003	1.01
2004	1.00
2005	0.95 *
Region	
Nonurban	1.0
Secondary urban	0.92 *
Primary urban	0.77 *
Age at Entry	
Less than 1	1.0
1 to 5	1.16 *
6 to 12	1.10 *
13 to 17	1.53 *
Race/Ethnicity	
White	1.0
African American	0.87 *
Hispanic	1.04 *
Other/unknown	1.05 *
Care Type	
Foster care	1.0
Congregate care	1.22 *
Kinship care	0.99
Other type	0.97

Note: *"Other type" includes independent living, mixed care, and unknown care type.*
** Has a significance level of at least 0.05.*

8. Exits from Foster Care Spells

Most of the discussion up to this point has focused on entry to foster care and on the length of time that children stay in care after entry. We now shift our focus toward the endpoint of the spell—the exit, or discharge, of the child from state care. Because most children are involved in only one substitute care episode, the exit from the first spell is typically the final outcome of a child's foster care experience. The key attribute of an exit, in addition to when it happens, is the discharge destination—where the child moves when leaving substitute care. Prevailing models of policy and practice view substitute care placements as temporary arrangements for maintaining children while the home environment is stabilized for their safe return. For most children in care, and for the system as a whole, reunification with the family of origin is the preferred exit. Other discharge options, such as adoption and living with relatives, are pursued when reasonable efforts do not result in reunification.

We should recognize that the two types of events that define the endpoints of a spell in foster care, admission and discharge, result from quite different underlying processes. At any given point in time, new entries arise mostly when the child welfare agency is responding to events occurring beyond the operation of the foster care system—in the home environments of the children, in the operation of child protective activities, and in the courts. Discharges, on the other hand, are more heavily influenced by the internal processes that define agency operations and child welfare practice. The seasonal cycle of discharge found in Figure 3.2 provides stark evidence of the routines that characterize the internal working of the foster care system.

One analytic implication is that, unless the foster care system has been extremely stable in recent time, an exit-cohort view of exits should be expected to produce a distorted picture of discharge patterns. Just as a point-in-time analysis of duration exaggerates the contribution of longer spells, a fixed-interval analysis of exits can also produce a biased picture. Although the exact nature of the bias can be affected by caseload trends in the aggregate, exit populations will generally overstate the presence of short stayers. Taking a longitudinal view of the discharge process increases both the interpretability and reliability of the tracking of discharge activity. In this section, all discussion of the time from entry to exit and description of exit distributions (i.e., by discharge destination) are based on the experiences of entry cohorts (groupings of cases according to date of entry into care). This strategy reduces the influence of problems attributable to duration bias, because the cohorts are defined by the time of a child's entry into the child welfare system.

A separate methodological issue related to exits is the fact that discharge information, by definition, is unobserved for all right-censored cases, i.e., those in which the child remains in foster care at the end of the period of observation (i.e., December 31, 2005). When describing spell duration, we are able to apply methodologies that allow the already-elapsed portion of a censored case to contribute to estimates of duration patterns. However, there is no valid way to predict the destination at discharge for censored spells—we only know that the child still remains in care at the end of our observation and will, eventually, exit.

Exits from Pooled 2000–2005 Entry Cohort

Table 8.1 summarizes the observed exit experiences of the population of children who first entered foster care during the 2000–2005 period. We understand there are some biases inherent in studying exits of this population because some discharges from this cohort are right-censored.

Table 8.1. Exit Destinations of Children Who First Entered Care 2000–2005

			Exit Type					
First Entry 2000–2005	Still in Care 12/31/2005	Discharged	Reunify	Adoptions	Relatives	Reached Majority	Runaway	Other
348,695	85,904	262,791	143,200	34,736	34,556	5,842	10,550	33,907

	As Percent of Entries		As Percent of Entries					
First Entry 2000–2005	Still in Care 12/31/2005	Discharged	Reunify	Adoptions	Relatives	Reached Majority	Runaway	Other
100%	24.6%	75.4%	41.1%	10.0%	9.9%	1.7%	3.0%	9.7%

Note: *"Other" exits include exit destinations not listed separately such as transfers out of the child welfare system and death, as well as exits for which destination was not provided in the data.*

Table 8.1 shows the following:

- Of the children who first entered foster care between 2000 and 2005, 25 percent were still in their first out-of-home spell at the end of December 2005, with 75 percent discharged from care.
- Of all children entering care during this period, 41 percent were reunified with their own families and another 10 percent were discharged to the homes of relatives outside of the child welfare system (i.e., not to kinship foster care). Ten percent were adopted in this time period. The rest were divided between those who "aged out" of care, those who ran away, and those who exited for "other" reasons.
- If adoption, reunification, and living with relatives are counted as permanency outcomes, 61 percent of all children were discharged to permanency. The proportion of children achieving permanency during this period ranges from 47 to 72 percent.

Table 8.2 (see page 40) presents the discharge destinations classified by the age of the child at the time of first entry to care for the 2000–2005 cohorts.

Table 8.2 shows the following:

- For children of all ages, only 25 percent are still in care by the end of the observation period. However, a higher percentage of infants remain in care than of children in older age groups.
- Of all the discharge destinations, family reunifications account for the highest proportion of children from each age group.
- Discharge patterns for children who first entered care as infants and those entering at older ages are quite different. Children who enter as infants (age 0) are far more likely to be adopted than any of the other children. The adoption levels drop precipitously from 24 percent for infants to 14 percent for 1-year-olds and then decrease slowly from 1 year upward. However, infants are much less likely to be reunified with families than children of any other age groups.
- Children 13 years and older are less likely to be either adopted or living with relatives than are younger children. However, teenagers are much more likely to run away from foster care than are younger children.

Table 8.2. Exit Distribution of Children from First Spell in Foster Care by Age, 2000–2005 Entry Cohort

	As Percent of All Entries						
	Destination at Discharge						
Age at First Entry	Reunify	Adoptions	Relatives	Reached Majority	Runaway	Other	Still First Spell
0 yrs	28.6%	24.0%	9.5%	0.0%	0.0%	7.6%	30.3%
1 yr	40.5%	13.6%	11.8%	0.0%	0.0%	7.8%	26.4%
2 yrs	42.4%	13.0%	12.1%	0.0%	0.0%	7.3%	25.2%
3 yrs	43.3%	11.6%	12.0%	0.0%	0.0%	7.4%	25.7%
4 yrs	44.0%	11.1%	11.4%	0.0%	0.0%	7.4%	26.1%
5 yrs	43.8%	10.4%	11.9%	0.0%	0.0%	8.0%	26.0%
6 yrs	44.4%	9.1%	11.8%	0.0%	0.0%	8.2%	26.6%
7 yrs	45.3%	8.6%	11.9%	0.0%	0.0%	8.3%	25.8%
8 yrs	45.7%	8.1%	11.6%	0.0%	0.1%	8.5%	26.0%
9 yrs	45.9%	7.9%	11.5%	0.0%	0.3%	9.0%	25.3%
10 yrs	45.9%	6.5%	11.5%	0.0%	0.8%	9.3%	26.1%
11 yrs	45.4%	4.9%	11.1%	0.0%	1.8%	9.5%	27.2%
12 yrs	44.9%	3.5%	10.1%	0.3%	4.1%	10.7%	26.4%
13 yrs	46.4%	2.3%	8.4%	0.9%	6.7%	12.4%	22.9%
14 yrs	45.7%	1.4%	7.6%	2.2%	9.8%	13.7%	19.7%
15 yrs	46.1%	0.8%	6.5%	4.3%	11.4%	14.0%	16.9%
16 yrs	42.4%	0.5%	6.1%	9.1%	11.7%	15.1%	15.0%
17 yrs	33.6%	0.3%	5.1%	23.9%	10.4%	14.8%	11.9%
0–17 yrs	41.1%	10.0%	9.9%	1.7%	3.0%	9.7%	24.6%

Table 8.3. Exit Distributions of First Spell in Foster Care by Care Type and Race/Ethnicity, 2000–2005 Entry Cohort

			Exit Destination as Percent of All Entries					
	Number of Children	Percent Discharged by 12/31/05	Reunify	Adoptions	Reached Relatives	Majority	Runaway	Other
Primary Care Type								
Foster care	189,335	74.6%	40.8%	14.5%	8.9%	1.3%	1.6%	7.6%
Kinship care	92,233	72.4%	38.6%	7.6%	14.8%	0.8%	1.2%	9.4%
Congregate care	62,210	82.2%	46.5%	0.4%	6.0%	3.3%	9.8%	16.2%
Mixed care	1,658	63.6%	25.9%	3.0%	10.3%	7.5%	8.5%	8.3%
Other care types	3,259	77.9%	31.6%	2.0%	6.9%	12.2%	5.1%	20.1%
Race/Ethnicity								
African American	126,634	72.3%	36.2%	10.3%	10.6%	1.4%	3.5%	10.2%
Hispanic	33,935	75.1%	42.0%	8.3%	8.4%	1.3%	5.0%	10.0%
White	167,019	77.6%	44.4%	10.1%	9.8%	2.0%	2.2%	9.1%
Other/unknown	21,107	76.6%	41.9%	9.2%	9.3%	1.4%	3.5%	11.3%
Primary Care Type by Race/Ethnicity								
Foster Care								
African American	66,043	71.2%	36.0%	15.0%	10.2%	0.9%	1.9%	7.2%
Hispanic	15,837	74.4%	43.9%	12.1%	6.9%	0.8%	1.9%	8.7%
White	95,346	76.9%	43.6%	14.6%	8.1%	1.7%	1.3%	7.5%
Kinship Care								
African American	37,345	69.7%	35.4%	8.2%	13.5%	0.9%	1.6%	10.2%
Hispanic	9,858	69.3%	37.7%	8.5%	13.8%	0.8%	2.0%	6.6%
White	41,138	75.7%	41.4%	6.8%	16.5%	0.8%	0.8%	9.4%
Congregate Care								
African American	21,304	80.5%	39.1%	0.4%	7.0%	3.1%	11.6%	19.3%
Hispanic	7,900	84.2%	44.2%	0.5%	5.0%	2.6%	14.9%	16.9%
White	28,095	82.7%	52.8%	0.5%	5.6%	3.8%	6.9%	13.2%
Mixed Care								
African American	647	63.5%	26.9%	3.2%	8.7%	6.8%	10.4%	7.6%
Hispanic	169	53.3%	21.9%	4.1%	5.9%	3.6%	6.5%	11.2%
White	799	66.0%	25.9%	2.6%	12.6%	9.1%	7.6%	8.0%

Table 8.3 (see page 41) demonstrates that overall exit levels vary greatly with certain characteristics: for example, White children and children from congregate care placement types are discharged from care in higher proportions than other children, and African American children and children from kinship foster care placements leave more slowly. We now examine the distribution of discharge destinations according to type of substitute care placement, race/ethnicity, and region.

Care Type

Table 8.3 shows the following regarding care types:

- Fifteen percent of the children in conventional foster care and 8 percent of those in kinship foster care are adopted. Adoptions occur for less than 3 percent of children exiting from mixed care type spells, and very few children who leave congregate care spells are adopted.
- Children from congregate care placements are more likely than children in other care types to be reunified with their parents. They are also more likely than children in relative and nonrelative foster care to run away from their placements—findings that are related to the high proportion of adolescents in this category.

Race/Ethnicity

With regard to race/ethnicity, Table 8.3 shows the following:

- A smaller percentage of African American children are discharged from foster care than of White or Hispanic children.
- White and Hispanic children are more likely to be reunified with their families of origin than are African American children.
- African American children are somewhat more likely to enter a care arrangement with another relative than are White or Hispanic children.

Because care type and race/ethnicity are interrelated, discharge measures were computed for these two variables jointly, as shown in the lower panel of Table 8.3. All of the relationships observed for each variable separately persisted in the bivariate table with one exception. African American children in kinship care placements are no more likely to exit to living with relatives than are White children.

The exit outcomes of children in foster care also vary by region. Table 8.4 (see page 43) describes the exit distribution of children in the three regions. Children

Table 8.4. Exit Distributions of First Spell in Foster Care by Region, 2000–2005 Entry Cohort

			Exit Destination as Percent of All Entries					
	Number of Children	Percent Discharged by 12/31/05	Reunify	Adoptions	Relatives	Reached Majority	Runaway	Other
Region								
Nonurban	126,567	78.0%	47.1%	9.4%	9.7%	1.9%	1.9%	8.0%
Secondary urban	113,353	75.6%	40.0%	10.0%	10.3%	1.9%	2.6%	10.9%
Primary urban	108,775	72.1%	35.2%	10.6%	9.8%	1.2%	4.8%	10.5%
All regions	348,695	75.4%	41.1%	10.0%	9.9%	1.7%	3.0%	9.7%

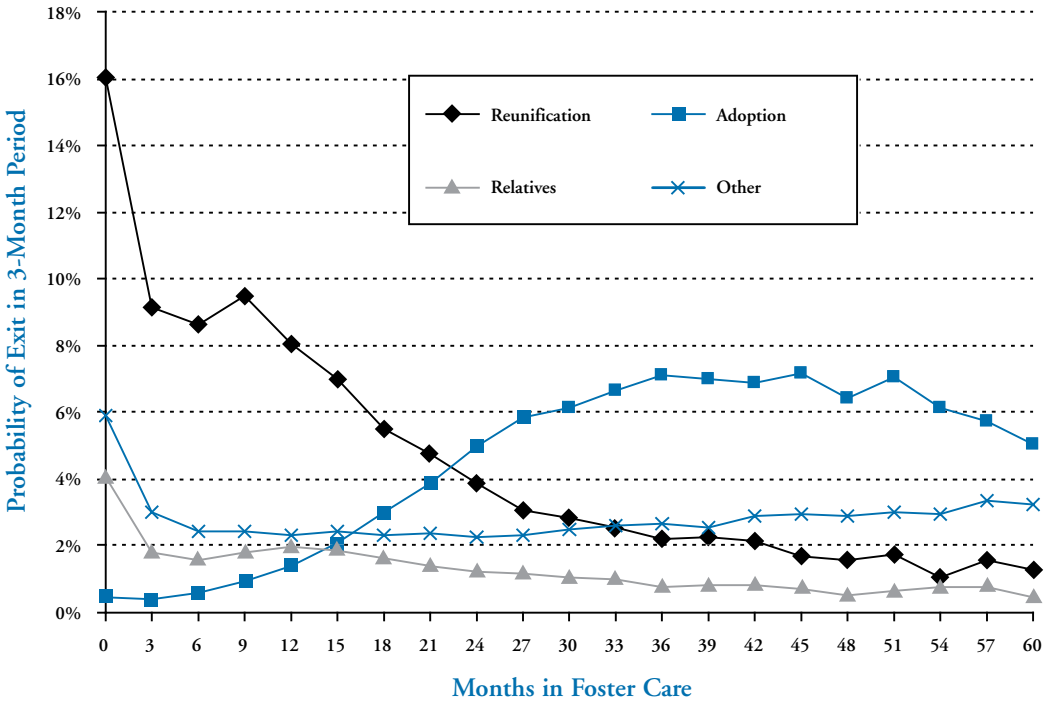
in primary urban counties are less likely to be discharged from foster care than children in rural counties. This is mainly because a lower percentage of children in primary urban areas are reunified with families than children in rural areas. However, children in primary urban counties are somewhat more likely to run away from care than are their rural counterparts.

Likelihood of Exit by Time in Care

The pattern of exits observed for a cohort of children changes as the amount of time they spend in care increases. This means that the likelihood of an individual child leaving care and the type of exit destination shift fundamentally during the course of the child's stay in care.

Considering this phenomenon from the point of view of the individual case experience, we can describe how the probabilities of discharge to different destinations change as the child spends more time in care. Part of this dynamic is illustrated by Figure 8.1, which represents observed exits by members of the 2000-2002 entry cohorts. Only the earliest two cohorts are selected so that a high proportion of spells will have had time to become resolved by the end of 2005. The horizontal axis represents the amount of time a child has already spent in care. The graph lines describe the probability that any child who remains in care at the beginning of any 3-month period will exit to a particular type of destination within that 3-month period. These statistics are the conditional probabilities of exit, by destination, given the time spent in care. They may be more familiar to some as

Figure 8.1. Conditional Probability of Exit from First Spell for 2000–2002 Entrants, by Destination and Elapsed Duration



variants of the hazard rate. Note that the population of children for whom exits are possible decreases as time passes because children who have already been discharged can no longer experience a first exit.

The conditional probability of exits—which are classified as family reunifications, other relative placements, adoptions, or "other" exits—is pictured in Figure 8.1.

Figure 8.1 shows the following:

- The exit patterns observed show higher levels of reunification in the very early stages of care that drop sharply in the first few months and continue to diminish gradually over time. Beginning at month 0 (the initial date of placement for each child), more than 16 percent of the children in care were observed to exit by reunification within 3 months. During this initial 3-month period, discharge levels are about 4 percent for living with relatives, 6 percent by "other" exits, and very few by adoption.

- Of the children who still remained in care after the first 3 months, the proportion leaving to reunification over the next 3-month period drops sharply to 9 percent; exits to relatives and "other exits" also decrease by more than half to 2 and 3 percent, respectively.
- There is a delayed—but then constant—increase in the likelihood of adoption starting 6 months after placement begins. The likelihood of adoption increases slowly with the passage of time, so that by 2 years after entry into care, adoption becomes the most likely discharge destination for the children who have remained in care. Note that by this time less than a third of the original entry cohorts are still in care.
- The probability of exit to reunification is higher from months 9 through 12 than during months 6 to 9, a pattern that may reflect a case review process.

9. Reentry to Substitute Care

Children reentering foster care are a significant component of all admissions to substitute care. As a group, reentrants might be expected to differ from the population of first-time entrants in the patterns of care they experience.

In this section, Archive data are used to analyze reentry patterns and how the likelihood of reentry is related to child demographics and prior placement experiences. The most compelling reason to examine the histories of children who return to foster care is to gain insight into the apparent success or failure of the initial discharge from care. Reentry may be a signal that the discharge was inappropriate or premature; however, from the available data, we cannot determine why any given child is returned to care. Nonetheless, analysis of reentry rates should help, at the aggregate level, to evaluate the success of discharges.

The study of reentry presents significant methodological challenges because although reentry itself is a single event that occurs at one point in time, it is an event that is embedded in the child's entire history with the system. This ongoing and sequential nature of the events that define reentry introduces a significant potential for observation bias. When using data that cover a limited time period, we observe the reentry process more completely for children who move more quickly by having shorter initial spells, shorter times to reentry, and shorter reentry spells.

Two main indicators are used to describe reentry patterns, both of which express the number of children who reenter care as a percentage of a larger group of children. First, reentry is described as a percentage of the original population of first entrants. This measure is useful to portray the relative size of the reentry group, and to gauge the potential effect of reentry on the foster care caseload as a whole. Second, reentry is also described as a percentage of the number of children who have exited their first spell in care. Because the discharge group is the population "at risk" of reentry, this indicator is similar to a reentry "rate" and can be interpreted as the likelihood, or propensity, of a discharged child to reenter care. We focus on these two rates because the reentry profile of a population can vary in two basic ways—around differences in the initial level of discharges (which determine the pool of children "at risk" of possible reentry), and around the actual reentry patterns among this group.

Patterns and Trends in Reentry to Foster Care

Table 9.1 presents discharge and reentry statistics from 2000 through 2005. Because our observation of these cases continued only through December 2005, both the discharge and reentry percentages drop off fairly quickly for the cohorts after 2002. Children who entered substitute care at later dates have had less elapsed time in which to be discharged or to reenter.

Table 9.1. Substitute Care Status at the End of 2005, by Year of First Entry to Care and First Spell Duration

	Year of First Entry					
	2000	2001	2002	2003	2004	2005
Entries to first spell	58,764	59,983	58,158	59,085	57,010	55,695
Total exits	55,622	55,177	50,825	46,732	36,346	18,089
As percent of all entries	95%	92%	87%	79%	64%	32%
Total reentry	12,051	11,377	9,918	8,807	5,840	2,129
As percent of all entries	21%	19%	17%	15%	10%	4%
Reentry within 1 year of exit	8,421	8,282	7,643	7,423	5,502	2,129
As percent of all entries	14%	14%	13%	13%	10%	4%
Reentry within 1 year of exit						
As percent of all exits	15%	15%	15%	16%	15%	12%
Reentry within 1 year as percent of exits by first spell duration						
Under 1 month	24%	24%	24%	23%	22%*	15%
1 to 2 months	24%	23%	22%	22%	21%*	12%
3 to 5 months	20%	19%	17%	19%	16%*	10%
6 to 11 months	15%	15%	16%	17%	12%*	6%
12 to 23 months	11%	12%	11%	11%*	6%	**
24 to 35 months	7%	7%	7%*	4%	**	**
Over 3 years	6%	5%	3%	**	**	**

Note: *The cells with two asterisks are fully censored in the observation of discharges and in the observation of reentry within 1 year of discharge. The cells with one asterisk have observed all discharges yet are partially censored in the observation of reentry within 1 year of discharge. The cells shaded in gray are partially censored.*

Table 9.1 shows the following:

- The 2000 entry cohort, although 95 percent were discharged by the end of 2005, only 21 percent reentered care.
- As a percentage of entries, reentries have been declining for each passing cohort year because the observation period becomes shorter.
- A large majority of the reentries occur within 1 year after discharge from care. For the 2000 entry cohort, 14 percent reentered within 1 year of exit, but only 7 percent reentered after more than 1 year of exit.
- About 15 percent of children who were discharged from each entry cohort reentered care within 1 year of exit.

Initial Spell Length and Reentry

The lower panel of Table 9.1 illustrates the relationship between the length of the initial spell and the percentage of discharged children who reenter care within 1 year of exit. One concern often expressed about initiatives designed to increase the rate of discharge from substitute care is that reentry rates may increase because children leave care "too early." In this table, reentry rates are classified by the length of time the child spent in the initial spell in care. In order for reentry rates to be comparable for various lengths of spell duration and across entry years, the reentry rates are only for children reentering care within 1 year of exit. Then, the exact reentry rates of children from the earlier entry years whose first spell duration is shorter than 2 or 3 years will be known by the censoring date of December 31, 2005. When we look at the first three or four entry cohorts, an association between the duration of the first spell and the likelihood of reentry is evident.

The lower panel of Table 9.1 shows the following:

- About a quarter of the children who stay in care for less than 1 month reenter care within 1 year of exit.
- Children who stay in foster care longer have a lower reentry rate than those with shorter durations. Whereas 15 to 17 percent of children who stay in care between 6 and 11 months reenter, only 11 to 12 percent of children with 12 to 23 months' duration reenter care within 1 year.
- The reentry pattern for children with various spell lengths is similar for different entry cohorts. These results should not be interpreted to mean that increasing time in care is an effective strategy for lowering reentry rates.

Reentry Rates by Child Characteristics and Placement Experiences

Tables 9.2 to 9.5 demonstrate the reentry rates within 1 year of exit for children with different placement experiences, discharge destinations, ages at discharge, and race/ethnicity. Only children in the 2000–2002 entry cohorts are included, because children in these cohorts who stay in care for less than 24 months (2 years) have left care for over 1 year by the censoring date of December 31, 2005. Thus, their exact reentry rate can be calculated, which eliminates the uncertainty of comparing children with various characteristics.

Table 9.2. Reentry within 1 Year of Exit, for 2000–2002 Cohorts, by Primary Care Type and First Spell Duration

	Primary Care Type					
	Foster Care	**Congregate Care**	**Kinship Care**	**Mixed Care**	**Other Type**	**Total**
Entries to first spell	98,331	33,148	42,692	966	1,768	176,905
Total exits	89,103	31,248	38,942	721	1,610	161,624
As percent all entries	91%	94%	91%	75%	91%	91%
Total reentries	18,314	9,410	5,166	168	288	33,346
As percent of all exits	21%	30%	13%	23%	18%	21%
Reentry within 1 year	12,922	7,646	3,414	139	225	24,346
As percent of all entries	13%	23%	8%	14%	13%	14%
As percent of all exits	15%	24%	9%	19%	14%	15%
Reentry within 1 year as percent of exits by first spell duration						
Under 1 month	23%	27%	17%	14%	21%	24%
1 to 2 months	22%	33%	14%	30%	21%	23%
3 to 5 months	18%	29%	11%	32%	19%	19%
6 to 11 months	16%	21%	10%	33%	16%	15%
12 to 23 months	11%	20%	7%	17%	8%	12%
24 to 35 months	6%	19%	5%	16%	5%	7%
Over 3 years	4%	16%	4%	12%	1%	6%

Note: *Cells shaded in gray are partially censored.*

Reentry Rates by Type of Care Arrangements

Table 9.2 (see page 49) shows the reentry experiences of the 2000–2002 cohorts, classified by the primary type of care arrangement experienced during their first spell in substitute care.

Table 9.2 shows the following:

- The children in congregate care arrangements experienced the highest discharge level (94%), the highest reentry level within 1 year given discharge (24%), and hence the highest overall reentry rate (23%).
- The children in nonrelative foster care had moderate discharge levels (91%), moderate rates of reentry within 1 year given discharge (15%), and hence moderate reentry levels (13%).
- Children in kinship foster care had lower discharge levels (91%) than those in congregate care. Their within-1-year reentry rate given discharge and their overall within-1-year reentry rate are the lowest at 9 and 8 percent, respectively.
- The general pattern of longer spell duration corresponding to lower reentry rate applies to children in each primary care arrangement with the exception of children in congregate care for less than 1 month.

Reentry Rates by Discharge Destination

Reentry levels also vary substantially according to the child's destination at first exit from care. Because discharge destinations can only be defined for children who have, indeed, left their first spells in care, only the percentage of reentrants after exit is presented in Table 9.3 (see page 51).

Table 9.3 shows the following:

- Of the 2000–2002 entry cohort members who were eventually discharged, 15 percent reentered within 1 year of discharge, and 21 percent reentered by the end of 2005.
- Very few children who reach majority or are adopted reenter care because of data construction rules. In the Archive, children in care who reach the age of majority (usually 18 or older) are considered to have "aged out" of the foster care system; any future reentry will not be counted. Adopted children may well return to foster care. However, because they acquire a new identity after adoption, any subsequent reentries are defined as new cases in the data system and thus are not considered reentries in the Archive.

- As expected, children who ran away from placement showed the highest reentry percentage (59%). The reported figure may seem low, but it is partially explained by the fact that many runaways who did not reenter had reached the age of 18 and were not eligible to return to foster care.
- About 16 percent of children who are reunified with families and 12 percent who are discharged to relatives return to foster care within 1 year of discharge.
- For children who join their families or live with relatives, the reentry rates are higher whenever foster care spells are shorter. Only among runaways and "other" exits was this not uniformly the case.

Table 9.3. Reentry within 1 Year of Exit, for 2000–2002 Cohorts, by Discharge Destination and First Spell Duration

	Discharge Destination						
	Reunification	**Relatives**	**Adoption**	**Reach Majority**	**Runaway**	**Other**	**Total**
Total exits	83,176	19,273	27,318	4,101	6,329	21,427	161,624
Total reentries	19,974	3,412	N/A	17	3,889	5,873	33,346
As percent of all exits	24%	18%	N/A	0%	61%	27%	21%
Reentry within 1 year	13,460	2,217	N/A	12	3,728	4,812	24,346
As percent of all exits	16%	12%	N/A	0%	59%	22%	15%
As percent of all reentries	67%	65%	N/A	71%	96%	82%	73%
Reentry in 1 year as percent of exits by first spell duration							
Under 1 month	22%	20%	N/A	4%	54%	28%	24%
1 to 2 months	20%	18%	N/A	2%	61%	30%	23%
3 to 5 months	16%	13%	N/A	0%	66%	27%	19%
6 to 11 months	14%	9%	N/A	0%	62%	22%	15%
12 to 23 months	14%	6%	N/A	0%	57%	16%	12%
24 to 35 months	12%	6%	N/A	0%	57%	14%	7%
Over 3 years	9%	5%	N/A	0%	50%	17%	6%

Note: *Cells shaded in gray are partially censored.*

Reentry Rates by Age at Discharge

Reentry levels may also vary according to the child's age at exit from foster care. Because age at discharge is only defined for children who have left their first spells in care, only the percentage of reentries from total exits is presented in Table 9.4.

Table 9.4. Reentry within 1 Year of Exit, for 2000–2002 Cohorts, by Age at Discharge and First Spell Duration

	Age at Discharge					
	Less than 1 year	**1 to 5 years**	**6 to 12 years**	**13 to 17 years**	**18 or older**	**Total**
Total exits	9,518	52,877	45,651	48,022	5,556	161,624
Total reentry	2,496	7,797	9,417	13,636	-	33,346
As percent of all exits	26%	15%	21%	28%	-	21%
Reentry within 1 year	1,669	5,095	6,051	11,531	-	24,346
As percent of all exits	18%	10%	13%	24%	-	15%
Reentry in 1 year as percent of exits by first spell duration						
Under 1 month	23%	19%	21%	28%	-	24%
1 to 2 months	19%	17%	20%	31%	-	23%
3 to 5 months	17%	14%	15%	26%	-	19%
6 to 11 months	11%	12%	14%	20%	-	15%
12 to 23 months	-	8%	11%	20%	-	12%
24 to 35 months	-	3%	7%	20%	-	7%
Over 3 years	-	2%	4%	19%	-	6%

Note: *Cells shaded in gray are partially censored. "-" indicates no reentry occurs.*

Table 9.4 shows the following:

- As the Archive is defined, children who are 18 or older at the time of exit have "aged out" of foster care and are not eligible to return to the foster care system.
- Among children who are discharged before the age of 18, the 13- to 17-year-old group has the highest reentry rate at 28 percent, followed by infants at 26 percent. Children aged 1 to 5 years have the lowest reentry rate (15%).
- For reentry within 1 year of exit, the same relative order holds for children in the three age groups: Twenty-four percent of children aged 13 to 17 reenter

within 1 year; 18 percent of infants; and 10 percent of 1- to 5-year-olds.

- For each age group, longer duration corresponds to lower rate of reentry.

Reentry Rates by Race/Ethnicity

It has been shown that racial/ethnic groups differ in their probability of exit from foster care, with African American children much slower to be discharged than either White or Hispanic children. Will the reentry levels also vary among children of different racial/ethnic groups? Table 9.5 answers this question.

Table 9.5. Reentry within 1 Year of Exit, for 2000–2002 Cohorts, by Race/Ethnicity and First Spell Duration

	Race/Ethnicity				
	African American	**Hispanic**	**White**	**Other**	**Total**
Entries to first spell	67,964	16,018	82,201	10,722	176,905
Total exits	59,648	14,626	77,432	9,918	161,624
As percent of all entries	88%	91%	94%	93%	91%
Total reentries	12,204	3,272	15,850	2,020	33,346
As percent of all exits	20%	22%	20%	20%	21%
Reentry within 1 year	8,921	2,464	11,456	1,505	24,346
As percent of all entries	13%	15%	14%	14%	14%
As percent of all exits	15%	17%	15%	15%	15%
Reentry in 1 year as percent of exits by first spell duration					
Under 1 month	24%	21%	25%	21%	24%
1 to 2 months	24%	27%	22%	24%	23%
3 to 5 months	19%	22%	18%	18%	19%
6 to 11 months	16%	16%	15%	14%	15%
12 to 23 months	12%	14%	11%	12%	12%
24 to 35 months	8%	9%	6%	7%	7%
Over 3 years	6%	7%	5%	7%	6%

Note: *Cells shaded in gray are partially censored.*

- About 20 percent of African American children and White children who were discharged from their initial spell in care reentered care by the censoring date of December 31, 2005, and 15 percent of the children of both racial groups reentered within 1 year of discharge.
- Hispanic children who exit their first spells have a higher reentry rate than either African American or White children.

Reentry Rates by Region

We have shown that children in urban areas stay in foster care longer than children in rural areas. Table 9.6 (see page 55) demonstrates whether and how the reentry levels vary across different regions.

Table 9.6 shows the following:

- Urban and rural areas are similar in the percentage of reentry for children who are discharged from care.
- Of the children who exited their initial spell, about 20 to 21 percent reentered care by the end of 2005, and 15 percent reentered within 1 year of exit.
- Whereas 13 percent of the 2000–2002 entry cohorts in primary urban areas returned to care within 1 year, 14 percent did so in secondary and nonurban areas.

Table 9.6. Reentry within 1 Year of Exit, for 2000–2002 Cohorts, by Region and First Spell Duration

	Region			
	Nonurban	Secondary Urban	Primary Urban	Total
Entries to first spell	61,100	56,112	59,693	176,905
Total exits	57,889	51,858	51,877	161,624
As percent of all entries	95%	92%	87%	91%
Total reentries	11,896	10,976	10,474	33,346
As percent of all exits	21%	21%	20%	21%
Reentry within 1 year	8,558	7,906	7,882	24,346
As percent of all entries	14%	14%	13%	14%
As percent of all exits	15%	15%	15%	15%
Reentry in 1 year as percent of exits by first spell duration				
Under 1 month	24%	25%	22%	24%
1 to 2 months	21%	24%	25%	23%
3 to 5 months	18%	18%	20%	19%
6 to 11 months	15%	15%	16%	15%
12 to 23 months	11%	11%	13%	12%
24 to 35 months	6%	7%	8%	7%
Over 3 years	4%	6%	6%	6%

Note: *Cells shaded in gray are partially censored.*

10. Discussion and Implications

The Multistate Foster Care Data Archive records placement events for roughly 1.68 million children in fourteen states. It covers 1.8 million foster care spells. In nine states, the Archive data spans at least 15 years from before 1990 to 2005, a period that coincides with substantial federal investments in family preservation programs, an emphasis on permanency through adoption, and the development of an adoption incentive program.[5]

The particular strength of the Archive lies in the capacity to use time, place, and basic demographic attributes of children to explore the structure of placement utilization. It allows us to first isolate subpopulations of children that exhibit unique placement histories, and then use time and place as a way to represent the social, economic, and policy context of service delivery to understand whether organized patterns persist. The extent to which patterns change as the lenses of time and place are adjusted can clarify the etiology of abuse and neglect and expose the underlying structure of the service system. This knowledge can in turn be used to focus how resources are allocated and progress is monitored.

As we reported in the previous update, the foster care population nationwide grew larger throughout the 1990s, largely because of discharge dynamics rather than a growing number of children entering placement. We did note at that time, however, that the rate of growth nationally slowed to 1 percent between 1998 and 1999, an indication that caseload dynamics may be entering a new phase. This update report confirms this hypothesis. From 2000 to 2005, the total foster care caseload for states used in Chapter 3 dropped largely due to the large number of discharges from 2000 to 2003.

The data also point to the fundamental importance of demographic explanations as a source of insight into the risk of placement, the long-term evolution of the foster care population, and the targeting of resources. The first point concerns the risk of placement and the link to intrafamilial stress. Infants are the most likely to enter foster care, a clear indication that families do have difficulty adjusting to the presence of a young child. The situation is more than likely compounded by the age of the parents and their economic status. Data from National Child Abuse and

[5] Public Law 105-98, otherwise known as the Adoption and Safe Families Act of 1997.

Neglect Data System (NCANDS) and the National Incidence Studies both suggest that neglect is the primary type of maltreatment among very young children who are reported as victims of maltreatment, and that children under the age of 3 make up the largest group of children reported for neglect. Although we do not want to understate the importance of adolescents as a risk group, young children (age 4 and under) generally, and infants specifically, contribute more than any other single group of children to long-term caseload trends.

Because the child's age is strongly correlated with the likelihood a child will enter care, age is also important when looking at how long children stay in foster care and how they leave care. Infants stay in foster care for much longer periods than older children, and teenagers have the shortest duration in care. When children are admitted to foster care before their first birthday, the probability of adoption is much higher than for older children. In contrast, their likelihood of reunification is much lower than for older children. Among children who enter care in their early teens, the probability of adoption is negligible. The essential feature of these findings is their persistence over time and place, suggesting that even though states differ with respect to social and economic context, policy, administrative structures, and modes of providing services, age to a large extent trumps all such factors as a determinant of what happens in the foster care system.

The child's race and ethnic background are also related to both the likelihood of entry into and movement through foster care. The risk of placement for African Americans is much higher than that for White or Hispanic children, leading to their overrepresentation in each state's foster care caseload. However, it is also worth mentioning that the incidence rate for African Americans has been declining, although a large gap with White children still remains. In addition, the data indicate that African American children remain in foster care longer than White or Hispanic children. Moreover, Hispanic children leave foster care at somewhat faster rates than those reported for White children. The slow pace of exit from foster care for African American children can be partly explained by the fact that more African American children are placed with relatives. The kinship care arrangement is relatively stable but lasts longer because it often ends with adoption, a path out of foster care that typically takes longer to complete. The racial gap in the likelihood of discharge between White and African American children has been stable since 2000.

The data also highlight the fact that prior history is a powerful predictor of future events in the life of a child who has been in foster care. Children with short placements are more likely to return to foster care as are children staying in congregate care. Again, the fact that this pattern is stable over time and true without regard for jurisdiction is indicative of the fact that there is a structure that characterizes placement patterns and ultimately frames both management and clinical decision making.

The foster care trajectories of children also differ according to the type of jurisdiction in which they live. First of all, a higher proportion of children in primary urban areas are placed in congregate care and kinship care than children in nonurban areas. This often leads to longer foster care spells for children in urban areas. Children in primary urban areas are also less likely to be discharged through reunification with their families.

In addition to basic demographics, state policy differences have an impact on foster care caseload dynamics, a point well illustrated using foster care entry data. Although the overall incidence rate of first entry to foster care is 2.5 per thousand per year, the state-specific incidence rate ranges widely from about 1.5 to 5. We suspect the discrepancy is partly due to demographic differences in the child population among the states that are measurable at the county level. State context is also important, a point that is depicted in the data that describe the likelihood of adoption relative to reunification. Generally, the conditional probability of reunification is higher in the months immediately following placement. With the passage of time, the probability of reunification falls until the likelihood of adoption is actually higher than reunification. This general pattern or "crossover" can be found in every state; what is unique to each state is the point in time when the crossover occurs. When the states are combined, the crossover is observed at approximately 23 months. Among individual states, however, the crossover is observed as early as 17 months and as late as 30 months. Given that the underlying adoption process in each state entails terminating parental rights and locating adoptive parents, differences of this magnitude may well be attributable to the supply of adoptive parents, the emphasis placed on adoption within the states, or the efficacy of state policies and programs. Again, understanding why the crossover occurs when it does may uncover practices that are worth replicating.

Chapin Hall Center for Children

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