



Patterns of foster care service delivery[☆]

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Abstract

This study explored direct client services provided by one foster care program. A cohort of 44 families was followed for up to 36 months by monitoring the frequency of eight service activity categories (i.e., service planning, therapy, family visits, court hearings, foster child contacts, foster parent contacts, family of origin contacts, collateral contacts) provided by the program's front-line staff. Service activity data recorded by staff on daily time sheets were used to describe the type and frequency of service provided to families between intake and discharge. Findings revealed that service delivery peaked immediately following intake and at regularly scheduled reviews such as the hearing to decide termination of parental rights. Overall, the frequency of foster care services to clients declined over the time that children were in care. Factors associated with the receipt of fewer services were the following: families with young children, relative care placements, placement stability in one foster home, caseworker turnover, and adoption. Race of the birth family was associated with different patterns of service delivery. Overall, the findings suggest that foster care service patterns emerged more from responses to client and system demands than to the program's service model.

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[☆] Color copies of the graphs presented in this article are available in electronic form and can be requested from Yvonne.Unrau@wmich.edu.

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1. Introduction

In the United States, there are currently over 500,000 children in foster care. Although there has been considerable attention given to studying rates of permanency for foster children, little is known about how foster care services are delivered or how such services link to program outcomes. A 1992 survey of specialized foster care programs across North America revealed that only half of the programs surveyed reported that their services were based on a specific intervention or treatment approach. The behavioral-operant approach was most frequently claimed by programs followed by social learning, family systems, eclectic, and reality therapy (Hudson, Nutter, & Galaway, 1992). However, since more than 80% of survey respondents admitted that no research had been conducted on their programs, these self-report claims of treatment orientation offer no more than reflections of service ideology or program intent.

Hudson et al. (1992) noted that the number of specialized foster family care programs had been growing despite the fact that details of service delivery were largely unknown. They went on to say,

“Information is lacking as to what these programs actually do, how they do it, and how they vary. This seems to be largely the result of failure to do research aimed at documenting program processes. Work needs to be done on specifying the resources required, activities undertaken, results expected, and the logic linking the resources, activities, and results”. (p. 62)

While the above quote refers specifically to specialized foster care programs, the researchers’ observations were germane to the full continuum of foster family care programs. In the 12 years since the Hudson et al. survey results were published, the number of children in US foster care programs grew 35%, from 400,000 in the 1990s to over 542,000 by the end of the decade (Child Trends, 2003). The rise in foster care cases has been explained as much by children remaining in care for extended stays and by children reentering care after having achieved their “permanent” placement as by new children entering the system (Wulczyn, Kogan, & Dilts, 2001). This begs the question as to what is happening within foster care programs if children are experiencing longer stays and returning after discharge?

To date, there is a dearth of empirical research investigating foster care program processes or how foster care services are actually delivered. Allocation of worker time has been one method of describing and investigating program processes. Using time sheet data, Fein and Staff (1991) reported that foster care workers allocated their time as follows: 28% direct client contacts, 20% meetings, 16% travel, 15% case recording, 12% collateral contacts, 9% administrative, and 3% prospective foster families.

Unrau and Hartnett (2001) also used time sheet data from a foster care program to investigate the proportion of time that workers spent on a variety of activities. They compared worker time across two programs and expected that the family-centered, strengths-focused, team-oriented changes made to one of the programs would improve client outcomes. The process evaluation component of the study revealed that the innovative and comparison programs being compared varied only slightly, with 43% and 38% of worker activities, respectively, spent in direct contact with clients (Unrau &

Hartnett, 2001). In turn, the outcome portion of the evaluation also revealed modest program differences; compared to the conventional program, the innovative model achieved greater caseworker stability, somewhat better placement stability (i.e., fewer multiple moves, fewer moves to institutional placements), but showed no difference in permanency (i.e., reunification, adoption, subsidized guardianship) outcomes (Unrau, Wells, & Hartnett, 2004).

The research on foster care worker activity suggests that the majority of staff time does not directly involve clients. Instead, activities related to preparation, consultation, transportation, and summarization take up considerable human resources of foster care workers. Thus, it is not so surprising that so few foster care programs in the Hudson et al. (1992) study made any claim to a particular treatment model or intervention theory. Indeed, it may be that foster care programs should be using organizational theory or advocacy models as frameworks for practice as much as they are utilizing etiological models and intervention theories to train and guide foster care workers.

Nevertheless, foster care remains a remedial program that focuses on creating client change, whether the focus is on foster children, their birth parents, or both (Lindsey, 1994; Martin, 2000). Service plans in foster care specify tasks and milestones that foster children, or more typically their birth parents, must demonstrate to be reunified as a family. Moreover, clients have a limited amount of time in which to show the expected progress. Given that foster care workers spend less than half of their time providing services directly to clients, it is important to better understand the nature of this service delivery so that policymakers, administrators, and practitioners can make informed decisions when planning programs and setting outcome expectations. This study is exploratory and takes a look into the “black box” of foster care. It took place in a foster care program named Promise.

1.1. The Promise model of foster care

Promise was defined by four distinct features that set the program apart from other foster care services in the same state (Unrau & Hartnett, 2001; Unrau et al., 2004).

- First, staff worked in teams, and all team members (i.e., supervisor, therapists, caseworkers, family advocates, and clerical assistant) were apprised of every case assigned to the team.
- Second, the teams worked from a family-centered and strength-based approach to practice.
- Third, the model allowed for foster parents to earn supplementary remuneration for providing additional services, such as monitoring family and sibling visits, providing peer support to birth parents, extra supervision of foster children, and extra involvement in foster children’s educational plans. These additional services were assessed in response to the needs of foster children and the ability of foster parents to carry out the needed services.
- Fourth, the greatest innovation of the model (relative to how other foster care programs in the same region were required to operate) was that foster care staff had line-level authority to determine which type of service (and how much of it) would

most benefit foster children and their families. Each team was provided a modest budget that made it possible for staff to make payment for critical goods and services such as basic needs to stabilize a placement or specialized assessment and counseling.

1.2. Purpose of study

The purpose of this study was to explore the type and frequency of services received by foster children and their birth families in the months and years following entry into the Promise foster care program. In addition, the patterns of service delivery were compared across three family variables (i.e., age of children, race of family, relative placement) and three output variables (i.e., foster home stability, caseworker stability, type of permanency achieved). The study did not compare the Promise service delivery to any other model of foster care. The main interest of the study was to describe service provision as it was actually delivered to children and families served by the Promise model of foster care.

2. Methodology

The sample was a cohort of 44 birth families that had at least one child enter the Promise program during the calendar year 2000. The sample was one of convenience and accounted for just over half of the 79 families that had children enter the program in that year. Thirty-five (46%) families were dropped from the sample due to insufficient service delivery data resulting from either incomplete or erroneous computer data entry. The year 2000 was selected for the sample since it allowed for up to 36 months of follow-up and was the first year that the program had fully implemented their system of recording worker activity. Service data collection actually began in mid-1999, but the initial 6-month period was considered a “training” period for staff.

This study was a component of a larger evaluation that investigated foster care services and outcomes over a 6-year period (Unrau, 2003). A longitudinal cohort design covering a 3-year period (2000 to 2002) was used. Daily service activity performed and recorded by Promise team members (i.e., foster care staff) was observed for all 44 families from the point of intake in 2000 up to program discharge or the end of the study period (December 31, 2002). The birth family was defined as the unit of analysis instead of the foster child because the service data used could not be reliably attributed to individuals. The study was based on secondary quantitative data since all of the data used had been previously collected and coded by program staff as part of their regular work obligations and not for research purposes. All data had been computer-entered by a clerical staff and stored in the program’s administrative database.

2.1. Family characteristic variables

Four variables, selected for their salience in foster care research and prominence in program planning, were used to describe families in the study sample. For each family

characteristic, the 44 families in the sample were compared to the 35 families dropped because of missing service data, and no differences were found. In other words, chi-square-tests-determined statistical significance was not achieved below the 0.05 level.

- *Number of children per family living in a Promise foster home.* Fourteen families (32%) had one child in care of the program, 6 (14%) had two children, 14 (32%) had three children, and 10 (23%) families had four or more children in the program. Siblings of foster children still living in the care of their parents were excluded from this measure of family size.
- *Family race.* Race for each member of the family was reported by birth parents (or guardians) to an intake worker at program entry. Race of the family was determined by the researcher after considering the racial composition of each family. Twenty-one (48%) families were African-American only, 13 (30%) were Caucasian only, and 10 (22%) were either mixed race (mixed-race individuals or multiple races in one family) or members of another minority racial group.
- *Age group of children in a family.* Individual ages of children were also documented during the intake process. After examining the composition of families by ages of children, five categories emerged: 16 (36%) families only had children 5 years old or younger (preschool), 14 (32%) only had children between the ages of 6 and 12 years (latency age), 6 (14%) only had children 13 years or older (teenagers), 4 (9%) families had a mix of preschool and latency aged children, and 4 (9%) had a mix of latency and teenaged children.
- *Placement in relative foster homes.* Eighteen (41%) families had children placed only with relatives, and an additional 10 (23%) had at least one child placed with relatives. All remaining children were placed in nonrelative homes. This measure did not assume that siblings were placed in the same home (e.g., two siblings, each placed with a different relative).

2.2. Output variables

Three output variables that were available in the program's administrative database were defined for this study. Missing variable analyses revealed that the 44 families in the sample did not differ statistically from the 35 families that were dropped from the sample on any of the output measures.

- *Placement stability.* This variable accounted for the number of foster home moves experienced by children in one birth family. Moves were counted when a child vacated one of the program's foster homes after a stay of 7 days or more and moved to another foster home within the program. Of the sample of 44 birth families, 18 (40%) had children that did not experience any moves, 11 (25%) had children experience one or two foster home moves, and 15 (34%) had children experience three or more moves.
- *Caseworker stability.* This variable counted the number of caseworker changes experienced by children in one birth family. Only caseworker assignments lasting 30 days or more were counted so as to provide some assurance that children had in fact met workers before the reassignment took place. Seventeen (39%) families did not

experience any caseworker changes, 14 (32%) experienced one or two reassignments, and 13 families (30%) experienced three or more changes in their caseworker.

- *Permanency status.* This variable was defined by the placement arrangement of children at either program discharge or the end of the study observation period (December 31, 2002). Four mutually exclusive response categories were possible. First, 11 (25%) birth families had children still in care at the study's end. This meant that foster child(ren) remained in the program and had neither achieved permanency nor had been discharged. Second, 18 (41%) had children return home to live with birth parents or the family of origin. Third, children in nine (21%) families achieved permanency via adoption or subsidized guardianship arrangements. In both instances, foster children legally joined families different from their birth family, but adoption also involved the legal termination of parental rights, whereas subsidized guardianship did not. Fourth, six (14%) families had children discharged to other exits, which included program exits to more restrictive settings (e.g., juvenile detention, residential care) and lateral transfers to foster care programs in other agencies.

2.3. Service activity variables

Service activity variables were extracted from daily time sheets where foster care workers were trained to select from a list of over 40 service codes to indicate the specific service provided to a particular client (foster child or birth parent). For the purposes of this study, the codes were collapsed into the following eight categories of service activity.

- *Service planning.* This first category comprised several service codes that reflected case assessment, monitoring, and treatment planning activities. The Promise model promoted a family-centered and strength-based approach to service planning. Workers were to assess risk and safety of foster children in the ecological context of the family of origin. Including birth parents in the service planning process was a priority. To facilitate birth parent involvement, efforts were made to conduct service planning in locations away from the office and in places that were more comfortable such as the birth family home.
- *Therapy.* This second category included counseling or therapy provided to foster children, their siblings, or their birth parents, as well as individual, group, or family sessions. Because therapists were part of the Promise staff team, they were fully apprised of casework matters and not just concerned with specific psychological issues affecting foster children. The therapist was available to foster children, birth parents, and foster parents to assist with problems raised by any of the three constituents. Furthermore, therapists were given discretion to adjust the amount of time in a therapeutic session to best address the needs of the client on any given day. For example, therapy sessions could last as little as 15 min or as long as several hours. In keeping with the family-centered approach of the program, therapists often conducted sessions away from the office and in locations such as the foster home or the birth family home (Unrau & Hartnett, 2001).
- *Hearings.* Court appearances, case reviews, and other official inquiries mandated by federal, state, and local policy, or by practice guidelines were included in this third

category of service. In addition to providing any requested information at hearings, program workers advocated for families as appropriate by pointing out existing family strengths and promoting family-centered solutions to adjudicators of hearings and case reviews.

- *Collateral contacts.* Contacts with all professionals and others relevant to a particular case were collapsed into a fourth category of service. The list of collaterals included representatives from school, medical and dental offices, courts and other legal organizations, police departments, the state department of child welfare, other social service agencies, psychiatrist and psychologist services, and other professional and paraprofessional groups. Contacts made in person or by telephone were both included.
- *Contacts with foster children, family of origin, and foster parents.* Program interaction with the three main constituents of foster care—foster children, birth parents, and foster parents—made up the fifth, sixth, and seventh categories of service. These contacts were measured as three separate variables but are introduced together to emphasize the program’s focus on maintaining communication with the triad. The program aimed to ensure that birth parents in particular were informed of developments in their case and consistently involved in the lives of their children. This meant that some portion of worker contacts was allotted to forging positive working relationships between birth and foster parents. Because the program utilized foster families as a resource to provide additional services such as monitoring parent–child visits, contacts between program staff and foster parents sometimes involved added supervision. As with collateral contacts, both in person and telephone interactions were counted as contacts.
- *Foster child visits with their families.* This eighth category primarily accounted for supervised visits between foster children and their birth parents but also included program-arranged meetings between foster children and their siblings or other relatives. Visits were viewed as an intervention aimed at improving parent–child relationships by focusing on family strengths, as well as addressing problem behaviors and conditions identified as threats to children’s safety and well-being by child protection investigators. Although caseworkers were responsible for ensuring that that visits occurred with regularity, foster parents and case aids (known as family advocates in the Promise model) typically performed the supervisory function during visitation (Unrau & Hartnett, 2001).

2.4. Approach to analysis

The scope of this investigation was limited by the fact that only quantitative data available in the program’s database were used. Furthermore, problems associated with the staff time-sheet data ultimately determined how service variables were measured. In sum, available data were reduced to the “lowest common denominator” by measuring service at the family level and by using the following counting rule: if the same worker provided the same service activity (based on the original 40 codes prior to collapsing service activities into the eight categories as described above) to any member of one family during a single day, then the occurrence of that service code was counted once for the family. This approach to counting underestimated the frequency of service provided. Furthermore, it did not account for the duration of interactions between staff and clients nor did it offer

any measure of service quality. However, this counting method made the most of available data and allowed an exploratory investigation of the minimum amount service provided to families from intake up to the third year of a foster care stay.

Using the family as the unit of analysis created an additional obstacle for analysis because not all families had the same number of children placed in the Promise program, and some families had multiple children placed in separate Promise foster homes. A statistically significant (Kendall’s Tau *b*) relationship emerged between the number of children in a family and the number of services received ($r=0.27, p<0.05$). Consequently, the analysis was conducted by first dividing the number of service activities per family (for each month of service) by the number of children in the family. This adjustment of service activity measures did not completely eliminate bias of family size but did allow for more straightforward comparisons in the presentation of findings.

3. Findings and discussion

The findings of this study are descriptive and aim to show several snapshots of estimates of service activity directly provided to families between program intake and discharge (or the end of the study). The analysis also explored whether patterns of service delivery were distinguishable by select family characteristics and program outputs.

3.1. General patterns of service activity

Fig. 1 gives a summary picture of the average number of total services (i.e., sum of eight categories) received by birth families for each month that their children lived in a

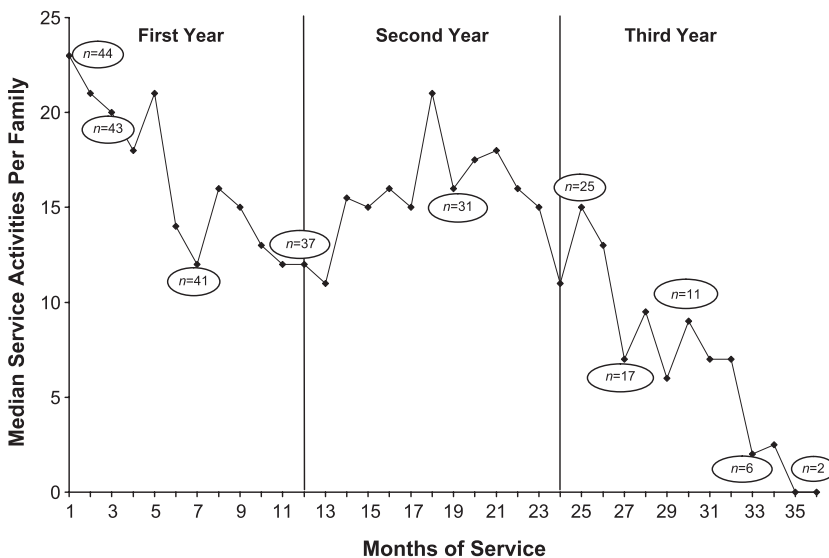


Fig. 1. Median monthly service activity (showing sample attrition).

Promise foster home. The graph (and all subsequent graphs in this article) accounted for sample attrition by adjusting median values for any families discharged from the program in a given month. Overall, Fig. 1 shows that total service activity was highest in the month following intake and generally tapered off thereafter. Compared to the first year in foster care, service frequency decreased only slightly in the second year and substantially in the third year. Fig. 1 also shows that, on average, families experienced a “surge” in service activity in the fifth and eighteenth months of service. These two time points corresponded with federally mandated court review hearings that were required to occur every 6 months; however, a similar increase that might have been expected around the 12-month hearing did not occur. The 18-month point held additional significance because it corresponded to the timing of the permanency hearing mandated by the Adoption and Safe Families Act that considered termination of parental rights when foster children had been in care for 15 out of the most recent 22 months and their parents failed to comply with plans for reunification (Badeau & Gesiriech, 2003). In sum, Fig. 1 suggests that frequency of service activity is both time-dependent since service activity decreases as length of stay increases and system-dependent because the rate of service activity peaked in response to expected dates of fixed court

Fig. 2a and b offer a more detailed summary of service activity over time by displaying the breakdown of the eight service activity categories measured in the study. Two graphs are used to allow for a more orderly visual display of all eight service categories; however, note that both Fig. 2a and b display the same tapering pattern as seen in Fig. 1. Fig. 2a shows that service planning and contact with collateral professionals appeared to be priorities in the first few months of foster care as workers compiled clinical and administrative facts about their new cases. Contact with collaterals showed visible peaks in the month prior to the sixth and eighteenth month reviews. In contrast, the frequency of therapy to clients gradually increased in the months following intake, reaching its peak in the fifth month of care. Client hearings happened less than once a month on average but were steady occurrences throughout the duration of the foster care stay.

Fig. 2b displays the frequency of contact between workers and the trio of foster care constituents—foster children, foster families, and birth parents (or the family of origin) mentioned earlier. The fourth line shown in Fig. 2b depicts the frequency of supervised visits between foster children and members of their family of origin, which in most cases involved birth parents. Overall, the pattern of contact across the three constituent groups was relatively parallel over time, which suggests that foster children, their birth parents, and foster parents were consistently included in communications with program workers, as prescribed by the Promise model. The complexity of this service coordination should not be underestimated since workers were not only expected to satisfactorily communicate with foster parents, foster children, and birth parents but also to facilitate constructive interactions between the three constituents.

The birth parents and family of origin are clearly depicted as central recipients of service delivery in Fig. 2b. Indeed, the frequency of worker contact with birth parents paralleled contacts with both foster parents and foster children, even after the second year of care when, theoretically, parental rights would have been terminated. This raises questions about why the rate of workers' communication with foster children and foster parents significantly diminished in the third year after reunification efforts would have

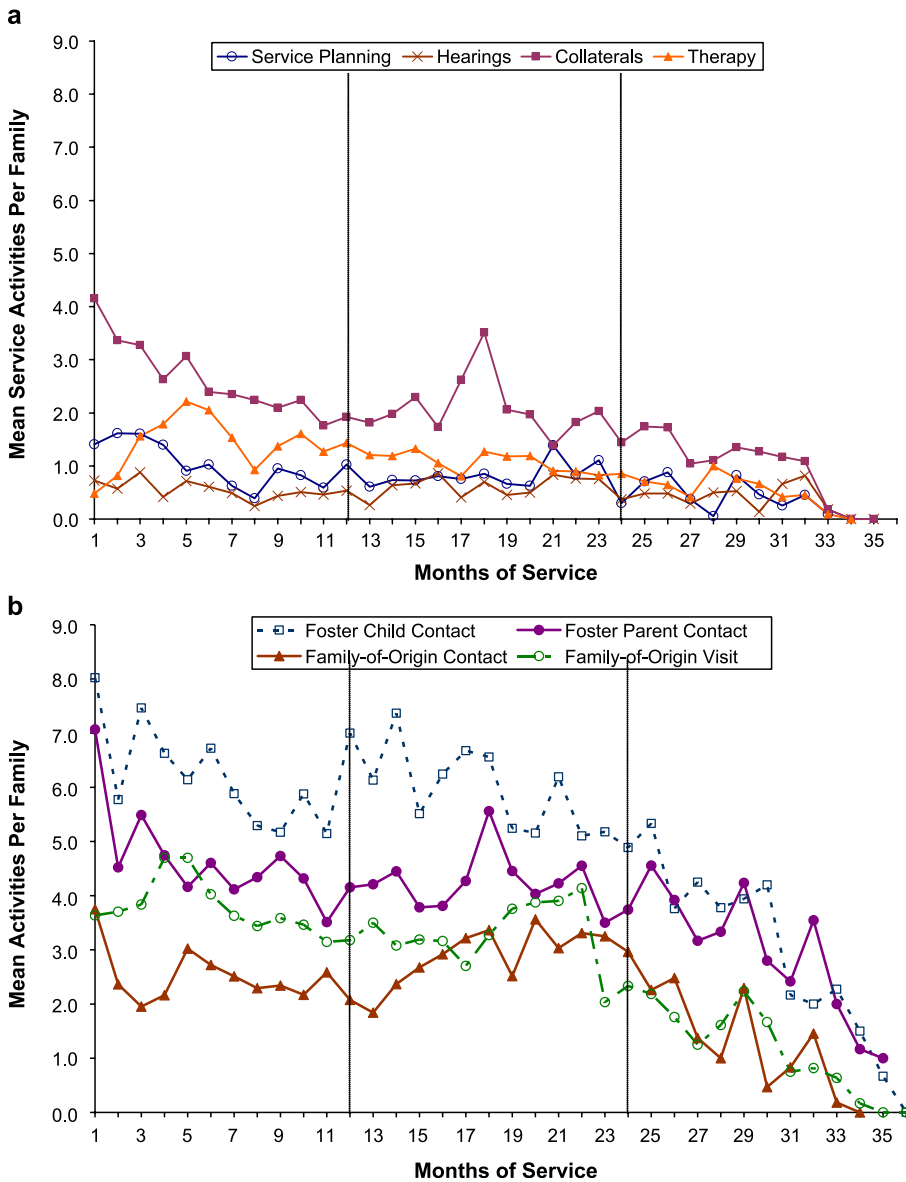


Fig. 2. (a) Mean monthly service activity—service planning, hearings, collateral, contacts, and therapy, (b) Mean monthly service activity—contacts and visits.

been abandoned. While reunification may call for different type of service effort from workers when compared to other permanency goals, services to families are expected to continue until the court orders otherwise (Katz, 1999).

Seemingly important patterns of interaction between workers and the family of origin emerged in the early part of the foster care stay (see Fig. 2b). Specifically, the line

depicting worker contact with the family of origin revealed a distinctive dip in the first 5 months of care. In contrast, the line tracking supervised visits showed a gradual rise. These data suggest that birth parents maintained regularly scheduled visits with their children despite “low” contact from program workers. Given the legal jurisdiction in which Promise was situated, this pattern may have been a consequence of defense attorneys advising parents to appear for all visits with their children but to minimize interaction with representatives of child welfare, which included Promise foster care workers (Taylor, G., personal communication, September 4, 2003). Nevertheless, this pattern suggests a heightened initiative by birth parents to stay connected with their children after placement has occurred, which reinforces the importance of engaging birth parents early on to sustain regular contact throughout the long-term effort of working toward reunification (Hess, 1988).

Fig. 2b also shows that the frequency of visits and contacts between the family of origin and their children rose from the thirteenth to the eighteenth month of service, which may have been indicative of staff efforts to encourage positive gains with birth parents (family of origin) before returning to court for the permanency hearing. The surge in family visits between the seventeenth and twenty-fourth month of service may have been a sign of final attempts to create family change necessary to persuade the courts to refrain from terminating parental rights or extra effort needed to prepare foster children and parents for permanent separation.

3.2. Service activity patterns by family characteristics

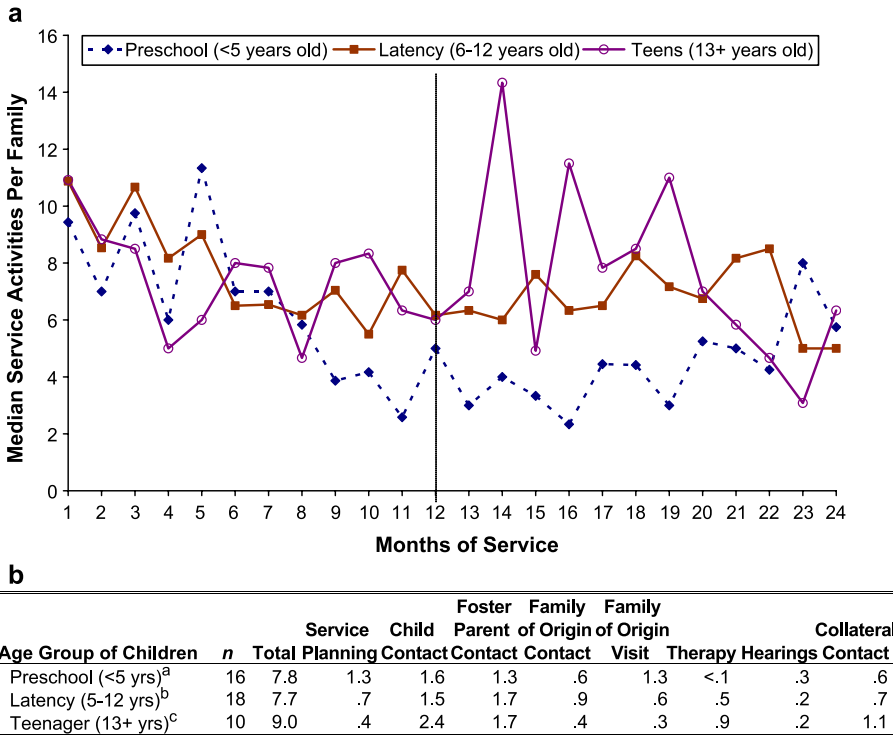
A next step in the analysis was to explore whether the pattern of service frequency differed according to three family characteristics: age grouping of children, birth family race, and placement of children in relative versus nonrelative foster homes. Bivariate associations between these three variables were examined as a preliminary screening tool to confirm that they did not overlap. Accordingly, the three graphs that follow each depict different groups of clients.

3.2.1. Age group of foster children

Fig. 3a displays the frequency of total monthly service according to the age groupings of children in the family. Three age groupings were created to capture three stages of family life—the preschool years (included only children 5 years old and younger), the latency years (included families with children between 6 and 12 years of age plus four families that also had preschool children), and the teenage years (included families with children ages 13 years or older plus four families that had additional latency age children).

The pattern of service for the three age groupings was similar in the initial 4 months of foster care and then diverged by age group thereafter. As shown in Fig. 3a, service to the youngest children dropped in frequency after the eighth month in care. In contrast, service to adolescents peaked after youth reached their 1-year anniversary in the program’s care. This increase may have been related to additional efforts to stabilize placements for youth who learned they would never return home.

Fig. 3b indicates that workers engaged in more service planning and coordinated more visits for families with preschool age children despite the fact that they had



^aIncludes two families with only (< 1 year old).
^bIncludes four families with children in both preschool and latency age groups.
^cIncludes four families with children in both latency and teenage groups.

Fig. 3. (a) Median monthly service activity (adjusted for number of children per family) by age group of children. (b) Median monthly service activity category (adjusted for number of children per family) per month by age group of children.

received fewer services overall. In contrast, workers had more contact with both foster children and collateral contacts for families with older youth in care. The higher rate of contact with older youth in care was not surprising since teenagers are known to struggle with the additional challenges of adolescence. However, since worker time is a finite resource, foster care workers must maintain awareness that additional service time given to teenage youth may reduce amount of service available to younger clients when other factors such as caseload size and work hours are fixed.

3.2.2. Race of birth family

The picture presented in Fig. 4a shows Caucasian families as having received slightly less service, on average, for the first 15 months of service. After the sixteenth month in care, service to Caucasian families soared past that of minority families for reasons that are not clear and may be a consequence of small sample sizes. In contrast, service to families that were minority (but not African-American) or of mixed race had several bouts of heightened intensity of service at somewhat irregular intervals. The

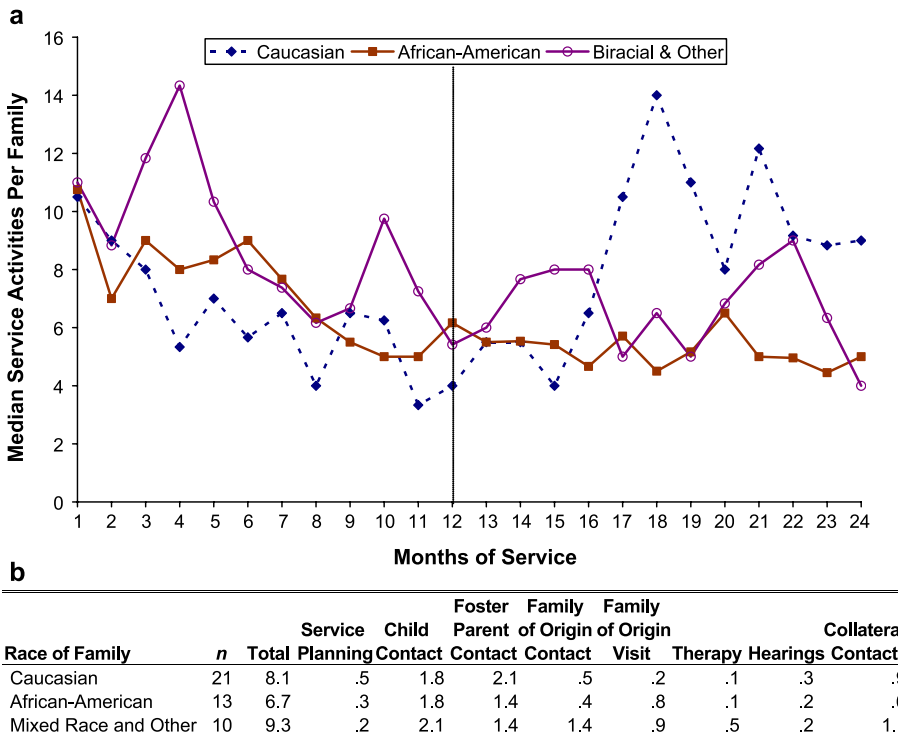


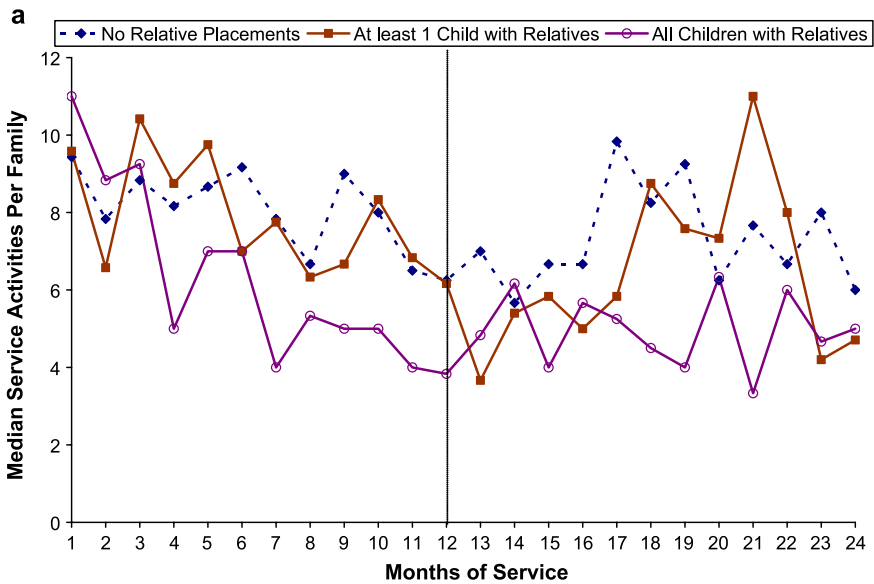
Fig. 4. (a) Median monthly service activity (adjusted for number of children per family) by family race. (b) Median monthly service activity category (adjusted for number of children per family) by family race.

service pattern for African-American families was steadiest and most closely matched the overall service delivery pattern displayed earlier in Fig. 1.

Fig. 4b gives some insight into the nature of the service variation experienced by families of different races. Compared to minority families, workers reported more foster parent contacts but fewer family of origin visits for Caucasian families. In contrast, mixed race and other minority families received more therapy, as well as more worker contact with both foster children and the family of origin. The variation in service patterns to families of different races should be a high priority for further investigation. Whether such service differences are explained by response to cultural variations or other confounding factors such as poverty or single parenthood has important implications for guiding service development. As it turned out, family race was associated placement stability ($\chi^2=10.9, df=4, p<0.03$), which was one of the three output variables measured in this study. In sum, many of the children in the mixed race group were also the children who experienced one or two foster home moves. The overlap of these two variables is discussed later in this article.

3.2.3. Placement in relative foster homes

Fig. 5a compares frequency of service activity according to whether all, some, or none of the children in a family were placed with relatives. Overall, the frequency of



b

Type of Placement	n	Total	Foster Family						Collateral	
			Service Planning	Child Contact	Parent Contact	Family of Origin Contact	Visit	Therapy		Hearings
No relative ^a	16	8.9	.3	2.2	2.0	.5	1.1	.1	.2	.5
Some relative ^b	10	7.9	.3	2.2	1.3	.7	1.1	.3	.1	.8
All relative ^c	18	7.8	3	1.6	1.5	.8	.6	.3	3	1.0

^a Four families (25%) had children separately placed in two or more foster homes.

^b All families had children separately placed in two or more foster homes.

^c One family (5%) had children separately placed in two foster homes.

Fig. 5. (a) Median monthly service activity (adjusted for number of children per family) by type of placement. (b) Median monthly service activity category (adjusted for number of children per family) by type of placement.

service to families by type of foster care placement did not vary greatly. However, families that had all children placed with relatives received slightly fewer services for the majority of their foster care stay. The lower rate of service for relative foster homes is partly explained by the fact that all but one birth family had its children placed together in a single home. In contrast, this was true for 75% of the nonrelative placements and none of the cases where at least one sibling was placed in a relative home and another in a nonrelative placement. The latter group, with multiple foster homes per birth family, was expected to receive higher amounts of service (e.g., multiple foster parents to contact, additional service planning, and a larger pool of collaterals). However, the scenario of multiple foster homes does not adequately explain the difference in service frequency since the service pattern for the group with no relative placement was more similar to the multiple placement group than the relative care group despite the fact that 75% of cases were in a single home.

The data in Fig. 5b indicate that workers had less contact with relative foster parents but that children staying with relatives received more therapy. On the other hand, workers had

less contact with foster children and coordinated fewer visits with parents when only relative placements were used.

Interpreting the service patterns pictured in Fig. 5a and b are further complicated by the fact that type of foster home placement was associated both with the number of foster home moves experienced by children ($\chi^2=13.2$, $df=4$, $p<0.01$) and number of caseworker changes ($\chi^2=12.2$, $df=4$, $p<0.02$). In sum, children placed only in nonrelative foster homes were more likely to experience three or more moves; however, they were also the group most likely to have experienced the continuity of a single caseworker. In contrast, children placed in relative foster homes were more likely to have experienced one or two caseworker changes. The overlap of these variables is discussed in the next section of this article.

3.3. *Service activity patterns by program output*

A final step in the analysis was to explore whether patterns of service frequency differed according to the three output measures included in the study. As mentioned earlier, the interpretation of service patterns by program outputs was complicated by bivariate associations or overlap between placement stability and family race, placement stability and type of foster home placement, and caseworker stability and type of foster home placement. However, the three output variables that were discussed next were not statistically related to each other when bivariate tests of association were used.

3.3.1. *Placement stability*

The graph in Fig. 6a suggests that placement instability (moving from one foster home to another) may be associated with more service. The increase in service was possibly a result of additional efforts by workers to stabilize existing placements or coordinate new ones. However, Fig. 6a clearly shows that more service was received by cases experiencing one-to-two foster home moves compared to those that moved three or more times. Since number of moves was associated with both family race and type of placement, as discussed earlier, it follows that the graph line for one-to-two moves in Fig. 6a also largely represents families that were of mixed race or a minority race other than African-American. Additionally, the graph line showing three-plus moves for the most part represents families with children placed in nonrelative foster homes.

The data in Fig. 6b indicate that cases with one-to-two moves received more action from workers with respect to contacting foster children, birth parents, foster parents, and collateral professionals. These cases also received a greater amount of worker attention to organize visits between foster children and their family of origin when compared to either cases reporting three or more foster home moves or cases reporting no moves at all. Reasons as to why cases with one or two foster home moves would receive greater amounts of service are not obvious and raise questions about the characteristics of the “multiple movers.” Perhaps the behaviors of foster children who ended up moving three or more times were viewed as more unstable by workers, which might have been the case of runaways, for example. Consequently, it may be that workers were less willing

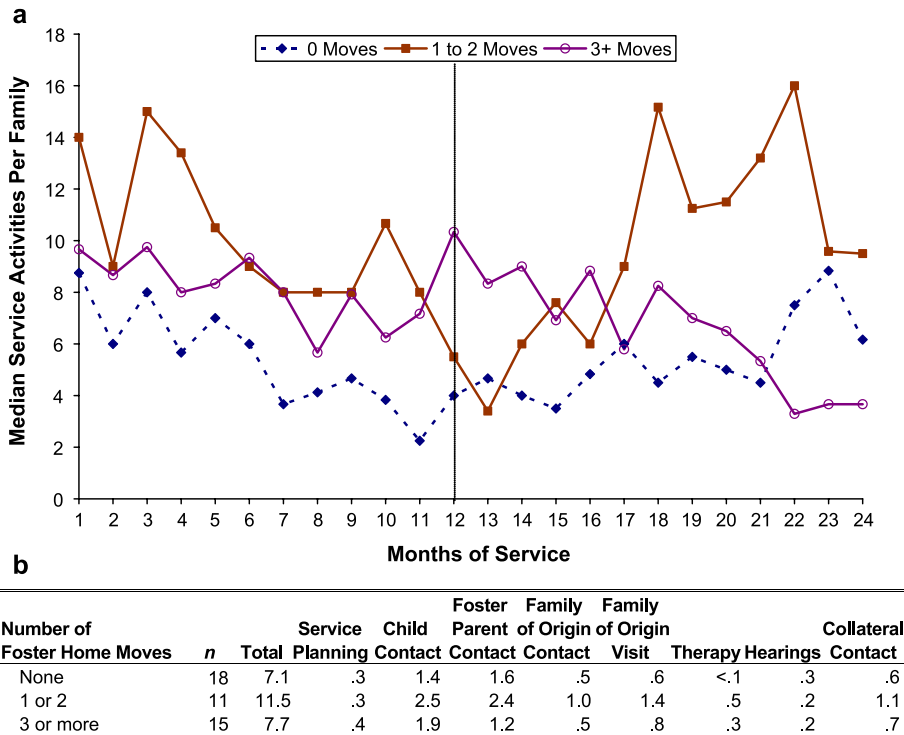


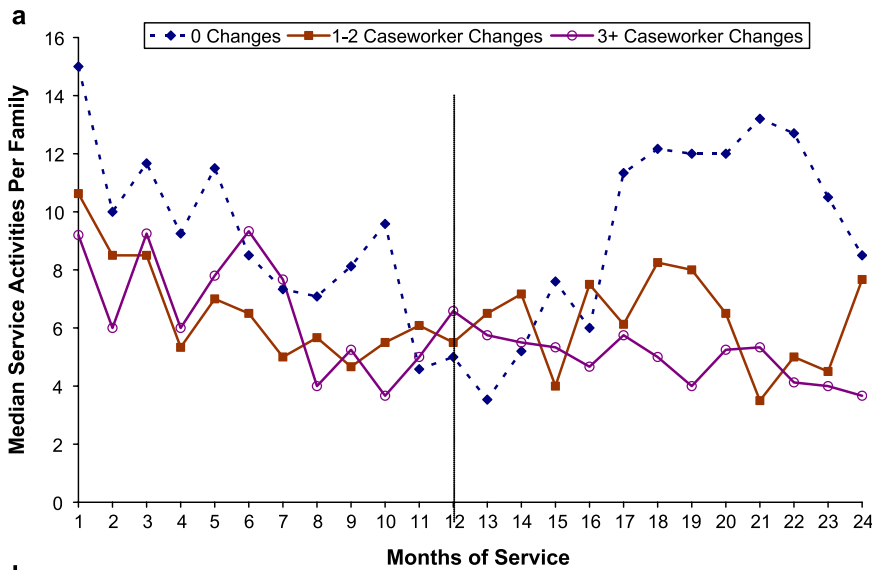
Fig. 6. (a) Median monthly service activity (adjusted for number of children per family) by number of foster home moves. (b) Median monthly service activity category (adjusted for number of children per family) by foster home moves.

to invest time and effort in cases where they felt powerless to affect in a positive way. Clearly, further research into the characteristics of multiple movers and the dynamics of services provided to them would benefit practitioners when planning service provision to these clients.

3.3.2. Caseworker stability

The graph in Fig. 7a supports the notion that caseworker turnover results in less service to foster children and their families. Since caseworker stability was associated with type of placement, as discussed earlier, we know that the graph line for zero caseworker changes in Fig. 7a also largely represents cases placed in nonrelative foster homes. In contrast, the line showing one-to-two caseworker changes largely represents cases placed in relative foster homes.

Fig. 7a shows that frequency of service to families experiencing caseworker turnover was lower from the point of intake and through most of the first year of the foster care stay. In other words, caseworkers that were eventually reassigned offered a lower rate of service when compared to caseworkers that continued with the same cases throughout. Furthermore, the rate of service did not increase substantially over time despite the fact that caseworker reassignment had occurred at some point. This suggests that the



Number of Caseworker Changes	n	Service Total	Foster Family Family							
			Child Planning	Child Contact	Parent of Origin Contact	Family of Origin Visit	Family of Origin Therapy	Family of Origin Hearings	Collateral Contact	
None	17	9.1	.4	2.5	2.1	.4	1.4	<.1	.1	.5
1 or 2	14	8.4	.2	1.6	1.8	.6	.6	.4	.3	1.0
3 or more	13	4.9	.3	.9	.9	.8	.4	.4	2	.7

Fig. 7. (a) Median monthly service activity (adjusted for number of children per family) by number of caseworker changes. (b) Median monthly service activity category (adjusted for number of children per family) by number of caseworker changes.

reassigned caseworker were not able to fully compensate for initial service lags or gaps made by previously assigned caseworkers.

The data in Fig. 7b indicate that foster children and foster parents were contacted less often when caseworker turnover happened. This suggests that service to foster children who were assigned multiple caseworkers may have been in double jeopardy because not only did they receive fewer services overall but they also may not have had the opportunity to establish strong relationships with any one worker. Theoretically, multiple caseworker assignments should have yielded increased contact with foster children since each new worker was expected to require similar amounts of time to engage foster children in a working relationship. Reassignment of caseworkers was associated with fewer visits between foster children and their family of origin, despite the fact that more contact with the family of origin was reported for families that had experienced caseworker turnover.

3.3.3. Permanency outcome

Pattern of service frequency by permanency outcome is likely to draw the greatest interest from readers, so caution may be to avoid viewing this variable as more

important than others examined in this article. The data for permanency were graphed only for 17 months because half of the six families discharged to other exits had departed the program by this point. This subgroup was comprised of three families whose children were under 5 years old and three families with teenagers. Since two of the preschool families were transferred to another foster care agency after only short stays (i.e., 1.5 and 6.5 months) in Promise, the data after the sixth month mark in Fig. 8a primarily depict service to teenagers who were eventually discharged to either a group home or juvenile detention facility.

The picture in Fig. 8a reveals that families who were reunified received more services overall compared to families that were not reunified, and families that were split up by adoption or subsidized guardianship received the least amount of services overall. In contrast, cases in the “other exit” group experienced a service pattern in the first 8 months that was comparable to adoption cases but then increased to parallel the rate of service to reunification cases after that. However, despite the increased rate of service after 8 months in care, these children failed to attain a permanent placement. These cases are of particular concern to foster care administrators and workers because, despite having received an intensive period of service, they departed the program to undesirable

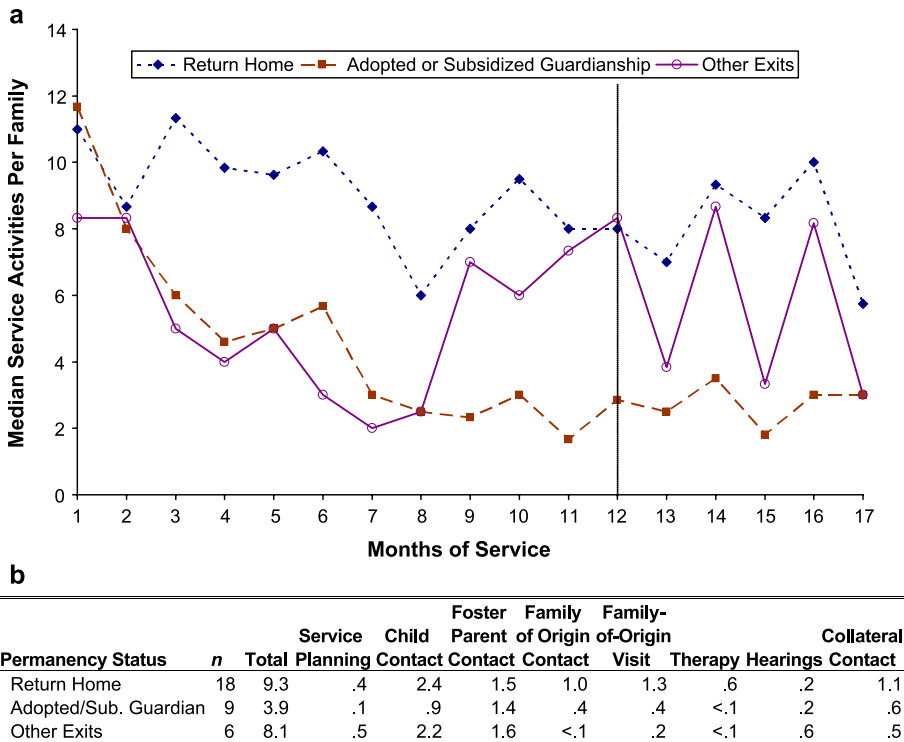


Fig. 8. (a) Median monthly service activity (adjusted for number of children per family) by permanency outcome achieved. (b) Median monthly service activity category (adjusted for number of children per family) by permanency outcome achieved.

outcomes. Families that were still in care by the end of the study are not illustrated in Fig. 8a, but their “service line” was approximately the average of the three groups depicted.

It is worth mentioning that the reduced frequency of total services to families with children adopted could reflect some measurement bias since two of the eight service categories (i.e., family of origin contacts and visits) counted in this study involved the family of origin whose role would have diminished (or vanished) during the adoption process. However, Fig. 8b shows that, compared to the reunified families, the adoption group received fewer services, on average, in all categories but hearings where they were equal. Not surprisingly, families that were reunified at program discharge received more contact from workers and more visits with their children while in foster care. However, these reunification cases also received more therapy and showed more contact with collateral professionals. In contrast, adoption cases received the least amount of service planning and the fewest number of contacts with foster children. Finally, cases discharged to other placements (e.g., residential, jail, and other program) had more frequent hearings, which was likely a consequence of other system involvement such as mental health and the criminal courts.

4. Conclusions and implications

Only when program theory and practice are consistent is it meaningful to ask whether a program model impacted outcomes (Cheetham, 1992). In this study, patterns of service activity provided to clients of the Promise foster care program were investigated. Analyses were limited to counting occurrences of service activities as recorded by teams of foster care staff working under one particular model of foster care service, namely, Promise.

The findings of the study suggest that frequency of services provided by workers of the Promise program gave more resources to reunification than adoption or other permanency outcomes. Thus, the family-centered component of the Promise model appears to emphasize preservation of birth families. To that end, the findings suggest that the initial 5 months of service present a critically important time to engage birth parents in service options. The process of engaging birth parents early on is particularly important since their children typically stay in foster care for a year or more—which is undoubtedly a period of time much longer than parents would expect to be living apart from their children or being under the scrutiny of the state.

Promise’s focus on family reunification also raises questions about services to children whose legal ties to their birth parents are terminated by the courts. More needs to be learned about the dynamics of service delivery when children’s permanency goals change from reunification to another permanency option such as adoption or independence. If concurrent planning efforts are underway, for example, one would expect a change in the nature of service activities provided to foster children but not necessarily a change in quantity of service, as was observed in this study (Katz, 1999).

Service provision under the Promise model of foster care was time-dependent. After a 2-year stay in foster care, frequency of services dropped substantially. It may be that after 2 years, foster care workers curtail efforts for children who will likely live in foster care long

term. While children in this situation are few in number, it is clear that, after 2 years in care, any casework services to these children were provided almost exclusively by foster parents, and not by foster care staff.

This study offers some hints about how particular subgroups of clients might experience foster care service delivery differently. Given the exploratory nature of the study, caution must be exercised in drawing any definitive conclusions because the direction of relationships between variables is not known. For example, it may be that change in caseworkers leads to less service because of service gaps that happen when a case is transferred from one worker to another. However, it is equally plausible that a caseworker reassignment was a consequence of the initial worker being a poor match and therefore unable to provide adequate service.

While some findings (e.g., teenagers demand more service than preschoolers) might be intuitive to the practitioner, others (e.g., differential service frequency by family race) were not. Overall, six snapshots of service provision were offered—three pictures showed from select family characteristics and three pictures showed the perspective of program outputs. The six snapshots of service delivery provided in this article should be considered as a collective to avoid exaggerating differences that emerged as a result of examining only two variables at a time. For example, to attribute service differences to family race risks overemphasizing race and overlooking other characteristics such as poverty that are confounded with race but not measured in this study (Engram, 1982). A pooled view of all the analyses yields a fuller portrait of foster care service provision, but the picture remains both incomplete (given the limited number of variables examined) and preliminary (given the limited sample size). Overall, the findings suggest that service patterns emerged in response to client and system demand and, to a smaller degree, the program model.

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