

The Nebraska Foster Care Review Office Quarterly Report



Submitted pursuant to Neb. Rev. Stat. §43-1303(4)

Issued: March 1, 2017

FCRO BACKGROUND

Mission

The FCRO's mission is to provide oversight of the child welfare and juvenile justice systems by tracking and reviewing children in out-of-home care, reporting on aggregate outcomes, and advocating on individual and systemic levels to ensure that children's best interests and safety needs are met.

Vision

Every child involved in the child welfare or juvenile justice system becomes resilient, safe, healthy, and economically secure.

Purpose for the FCRO Tracking/Data System

The FCRO is mandated to maintain an independent tracking/data system of all children in out of-home placement in the State. The tracking system is used to provide information about numbers of children entering and leaving care as well as data about children's needs and trends in foster care, including data collected as part of the review process, and for internal processes.

Purpose of FCRO Reviews

The FCRO was established as an independent agency to review case plans of children in foster care. The purpose of reviews is to assure that appropriate goals have been set for the child, that realistic time limits have been set for the accomplishment of these goals, that efforts are being made by all parties to achieve these goals, that appropriate services are being delivered to the child and/or his or her family, and that long range planning has been done to ensure timely and appropriate permanency for the child, whether through a return to a home where conditions have changed, adoption, guardianship, or another plan.

Role

The FCRO's role under the Foster Care Review Act is to: 1) independently track children in out-of-home care, 2) review those children's cases, 3) collect and analyze data related to the children, 4) identify conditions and outcomes for Nebraska's children in out-of-home care, 5) make recommendations to the child welfare and juvenile justice systems on needed corrective actions, and 6) inform policy makers and the public on issues related to out-of-home care. The FCRO is an independent state agency, not affiliated with DHHS, Courts, the Office of Probation, or any other entity.

About this Report

Data quoted within this Report are from the FCRO's independent data tracking system and completed case file reviews unless otherwise noted.

Neb. Rev. Statute §43-1303 requires DHHS (whether by direct staff or contractors), courts, the Office of Probation, and child-placing agencies to report to the FCRO any child's out-of-home placement, as well as changes in the child's status (e.g., placement changes and worker changes). By comparing information from multiple sources the FCRO is able to identify discrepancies. When case files of children are reviewed, previously received information is verified, updated, and additional information is gathered. Prior to individual case review reports being issued, additional quality control steps are taken.

Please feel free to contact us if there is a specific topic on which you would like more information, or check our website (www.fcro.nebraska.gov) for past annual and quarterly reports and other topics of interest.

Executive Summary

The Foster Care Review Office (FCRO) provides each Quarterly Report to inform the Nebraska Legislature, child welfare system stakeholders, other policy makers, and the public on identified conditions and outcomes for Nebraska's children in out-of-home [foster] care as defined by statute, as well as to recommend needed changes. This Report is divided into the following sections:

- **Section I** concentrates on all children currently in out-of-home care through the Department of Health and Human Services (DHHS), the DHHS Office of Juvenile Services (OJS), or the Office of Probation Administration Juvenile Division (Probation).
- **Section II** gives an overview on issues that can occur for many children post-adoption.

Based on the research, the FCRO makes the following recommendations to the Child Welfare and Juvenile Justice Systems.

All stakeholders are aware that this State is facing massive fiscal shortfalls. No one, including the FCRO, wants Nebraska children to suffer. They are the future of this State. It means that all of us adults need to come together to thoroughly analyze all aspects of our child welfare and juvenile justice system. We need to ensure that we are maximizing our federal funds in order to meet the State's needs. We need to become innovative in our solutions and not merely to maintain the status quo. We need targeted solutions to effectively utilize our limited resources to positively meet the needs of Nebraska children. There are no easy solutions but there are impactful solutions. Our primary focus must be on the need to build the capabilities of **ALL** the important adults whom these vulnerable children rely on.

The FCRO has provided fact-based solutions to the issues facing our child welfare and juvenile justice system throughout its entire 35 year history. In the past year, the FCRO has recommended specific solutions to the rising number of children in out-of-home care through our Quarterly and Annual Reports. To date, many of these recommendations have not been implemented or even considered by the child welfare and juvenile justice system. **We, as a public and private system, need to concentrate on creating impactful solutions in these main areas:**

1. Determining why children enter out-of-home care in Nebraska. We need to complete an in-depth analysis of these reasons. Based upon these reasons, we need to create focused prevention and early intervention services in all areas of the State. Funding prevention and early intervention services is best for Nebraska families and over the

long-term provides cost savings for the State of Nebraska by eliminating the need for more expensive services such as out-of-home care.

2. For those children that truly need out-of-home care due to a safety issue, identify and use the resources that are most impactful in achieving permanency in an expedient way. Every removal from home for a child is a traumatic experience with life-long consequences. The longer a child is in out-of-home care, the more long-lasting damage is being done to the child that often continues into their adult years. The length of stay in out-of-home care needs to decrease. Besides the use of goal-driven targeted services with service providers, we need to actively involve the judicial system in effective solutions.
3. For those children in out-of-home care, we need to strive to minimize the number of placements experienced. There is abundant evidence that shows that placement disruptions are a source of stress and negative outcomes for children. There are models that monitor developing problems while in care and provide early alerts of the risk of placement disruptions.

The FCRO remains ready, willing and able to be at the table to solve each of these issues as evidenced through our Reports in order to ensure that **ALL** children in Nebraska have safety, permanency and well-being.

The following is some relevant data from the research:

[Section I](#)

[All Children/Youth in Out-of-Home Care](#)

On February 1, 2017, Nebraska's 4,836 children in out-of-home [foster] care included:

- **3,833 children** (79%) who had experienced abuse or neglect and were under the Department of Health and Human Services (DHHS).
- **119 children** (3%) that had committed status or delinquent offenses and were placed at the Geneva or Kearney Youth Rehabilitation and Treatment Centers (YRTC's).
- **735 children** (15%) that had committed status or delinquent offenses, were under the Office of Probation Administration (Probation), and were placed out-of-home.
- **149 children** (3%) were placed in foster care under both DHHS and Probation. (page 1).

NDHHS State Wards

- There was a **6.0% increase** from July 2016 to February 2017 in DHHS wards in out-of-home care (excluding those on trial home visit). There are substantial variations by DHHS Service Area with **Southeast (19%)** and **Western (13.7%)** having the highest increases and **Northeast (2.1%)** and **Eastern (NFC) (3.4%)** having the smallest increases. (pages 2 and 3).
- There were more young children and fewer teenagers under DHHS in out-of-home care. (page 5).
- Over **95%** of the children in out-of-home care were placed in a family-like setting. For these children, **63%** were placed with relatives or kin and **37%** were placed in agency-based foster care. The vast majority of these children were in out-of-home care in Nebraska with 4% being placed in another State. (pages 6 and 8).

Youth Placed at Youth Rehabilitation and Treatment Centers (YRTC)

- On 2/1/2017 there were **119** DHHS/OJS wards at the YRTC's in Kearney and Geneva. While there have been fluctuations in the past year, the number of youth at the YRTC's has remained fairly consistent. These youth do come from all areas of the State with the largest population from Lancaster and Douglas Counties. (pages 9 and 10).
- The average age for a girl at YRTC –Geneva was **17.02** years, a boy at YRTC-Kearney was **17.14** years. (page 11)

Juvenile Probation Youth in Out-of-Home Care

- There has been an average of **725** probation youth in out-of-home care since July 2016. These youth range in age from 11-18 years with **27%** under the age of 16 years. (pages 12 and 13).
- Over **42%** of these youth were placed in a moderately restrictive placement such as a group home and over **34%** were placed in the most restrictive placement such as a detention center or treatment facility. **92%** of these youth were placed in facilities in Nebraska while **8%** were placed in other States. (pages 14 and 15).

Youth with both DHHS and Probation Involvement in Out-of-Home Care

- There were **149** dually adjudicated youth placed in out-of-home care. There has been a substantial decrease since July of 2016. The vast majority (**96%**) of these youth were ages 13-18 years. (pages 16 and 17).
- **One-third** of these youth were in the least restrictive placement with another **one-third** placed in the most restrictive placement. (page 18).

Section II

Adoption Displacements

A collaborative workgroup was convened to examine the increased occurrences of children coming to the attention of DHHS or Office of Probation following a displaced adoption or guardianship. (page 19). These are children/youth that had experienced abuse or neglect; were removed from their parents; placed in one or more temporary placements; subsequently left the foster care system via an adoption or guardianship; and have now re-entered out-of-home care. This collaborative workgroup analyzed all adoptions from 2005 through 2016 and on pages 34 and 35 further research areas are detailed that this workgroup will continue to work on during the next year.

- With regard to the yearly number of adoptions, the low was **347** children in 2005, and the high was **568** children in 2008 (which coincided with the availability of some additional federal adoption assistance funds). The most recent five year average was **490** per year. It is concerning that **26%** of displacements occurred within two years of the adoption. (page 20, 21 and 29).
- The number of adopted children/youth in each Service Area tend to be proportionate to populations of children in out-of-home care, which slightly varies from the general population. (page 22).
- The number of adoption displacements has varied over the last 11 years with a low of **28** and a high of **91** in 2015. The highest areas of displacement were the Eastern (**12%**) and Northern (**12%**) Service areas with a statewide average of **10.6%**. (pages 23 and 24).
- For the past two years, the agency involved with these children/youth on re-entry has changed so that now **55%** are involved with DHHS and **37%** are involved with probation. (page 25).
- Upon removal from their adoptive home, the highest placement was in detention (**26%**); followed by a non-relative foster home (**22%**); then a shelter (**18%**). This does raise the question as to why remove a child from the adoptive home (which used to be a foster home) only to be placed in another foster home. (page 26).
- While **78%** of the families had one child displaced, **16%** of the families had two children displaced and **5%** of the families had 3 or more children displaced. (page 27).
- No matter the age of adoption, displacement is more likely to occur during the early teen years. (page 28).
- **82%** of these children had been placed out-of-home care at least two years prior to their adoption, with over half (**55%**) in out-of-home care more than three years. **86%** of these children had experienced five or more placements, with nearly **50%** experiencing 10 or more placements. (page 30 and 32).

Section I

All Children in Out-of-Home Care

On February 1, 2017, Nebraska’s 4,836 children in out-of-home [foster] care included:

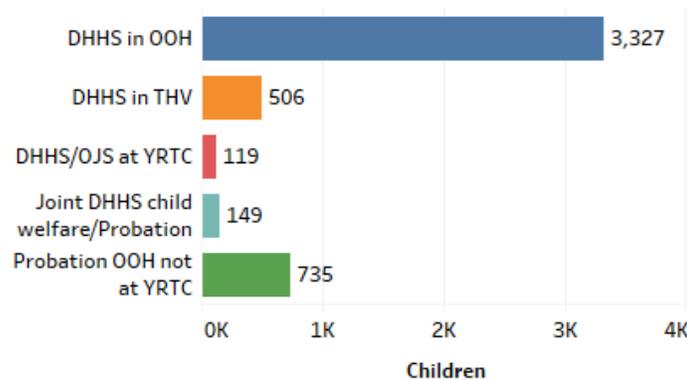
- **3,833 children (79%)** who had experienced abuse or neglect and were under the Department of Health and Human Services (DHHS). As shown on the next page, 3,327 of those children were placed out-of-home, and 506 children were on a trial home visit awaiting permanency.
- **119 children (3%)** that had committed status or delinquent offenses and were placed at the Geneva or Kearney Youth Rehabilitation and Treatment Centers (YRTC’s) and thus were under the DHHS Office of Juvenile Services (OJS).
- **735 children (15%)** that had committed status or delinquent offenses, were under the Office of Probation Administration (Probation), and were placed out-of-home but not at a YRTC.
- **149 children (3%)** who had both experienced abuse or neglect AND committed a status or delinquent offense, were placed in foster care, and were under both DHHS and Probation.

These groups did not include:

- Children served by DHHS that were not removed (in-home services only).
- Youth served by Probation that were not removed (in-home services only).
- Youth continuing to be served by Probation after return to the parental home.

Table 1 better illustrates the proportions.

Table 1. Children in Foster Care or Juvenile Justice 2/1/2017 by Agency



Source: Foster Care Review Office independent data system.

Each group above is discussed in more detail in the pages that follow.

DHHS Wards not involved with OJS or Probation

One way that “DHHS wards” as used here can be categorized is by whether the child is in an out-of-home placement or on a trial home visit. By statute a trial home visit is a temporary placement with the parent from which the child was originally removed and during which the Court and DHHS remain involved. The following applies to the population on 2/1/2017:

Out-of-home care (OOH)	3,327 children
Trial home visit (THV)	<u>506 children</u>
Total	3,383 children

In comparison, on 6/30/2015 there were 3,145 DHHS wards in an out-of-home placement. Thus, in that time the number in out-of-home care has risen by 5.8%.

Statute did not allow the FCRO to begin to track or review children in a trial home visit until the end of August 2015. Due to that recent start, meaningful data on trial home visit trends are not currently available but will be in the future.

Trends

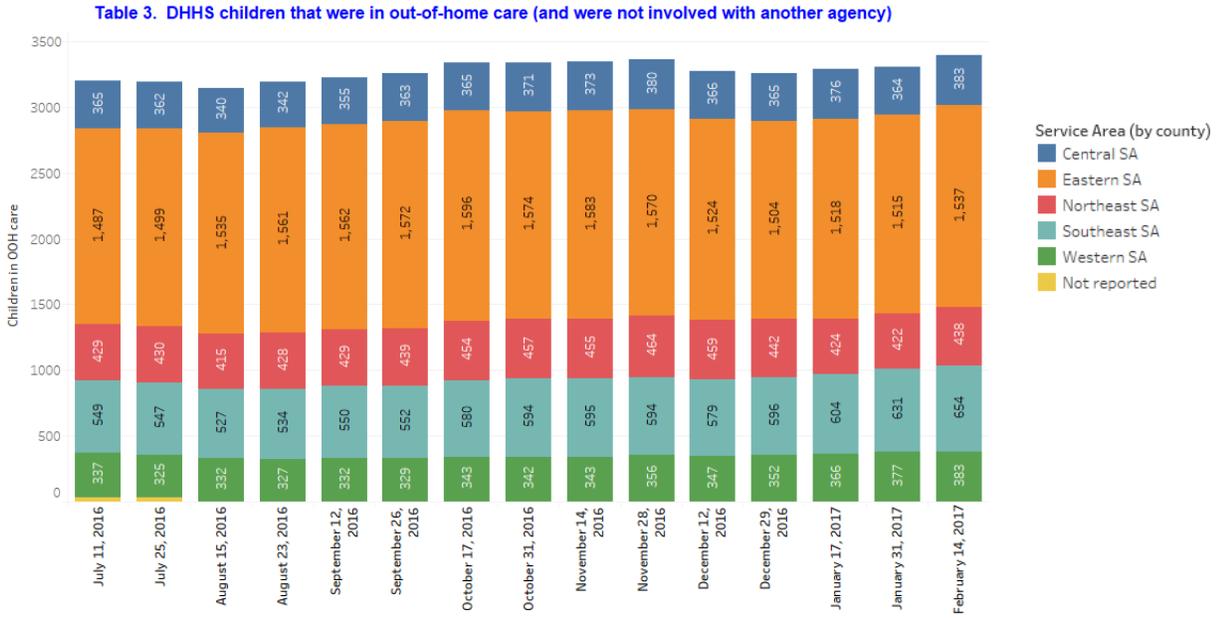
Table 2 shows the number of DHHS wards in out-of-home care (excluding those on trial home visit) on specific dates since the beginning of this fiscal year. The low was 3,149, the high was the current 3,396. **There was a 6.0% increase from July 2016 to February 2017.**

Table 2. DHHS children that were in out-of-home care and that were not involved with another agency



DHHS wards in out-of-home care on the various dates selected. This chart does not include DHHS wards in a trial home visit. Source: Foster Care Review Office independent data system.

Table 3 shows the number of DHHS wards in out-of-home care on specific dates since the beginning of this fiscal year by the geographic area (service area) that was serving the child’s case on that date.



DHHS wards in out-of-home care on the various dates selected. Includes Service Area, if known. Source: Foster Care Review Office independent data system.

All areas saw an increase in children placed outside the parental home between July 2016 and Feb. 2017, with the biggest increase in the Southeast area. More research is needed to determine why the Southeast and Western areas experienced such large increases.

Service Area	Percentage Change
Central	+4.9%
Eastern	+3.4%
Northeast	+2.1%
Southeast	+19.1%
Western	+13.7%

Children’s geographic location of origin

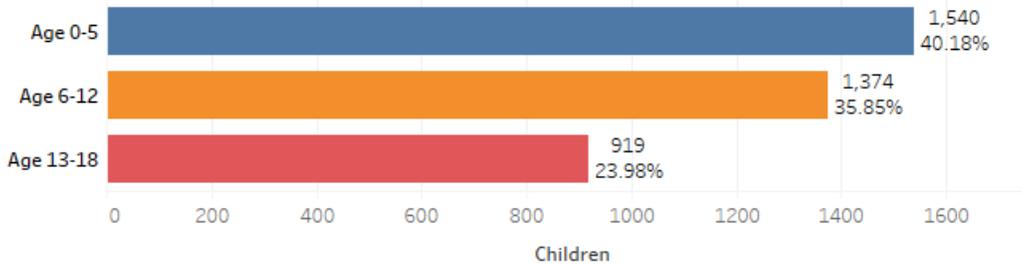
DHHS wards in out-of-home care or trial home visit come from every geographic area, from Omaha to Scottsbluff, Falls City to Chadron, and Sioux City to McCook. **Table 4** shows the 3,833 DHHS wards by their region, and the map to the right of it illustrates those statutory regions.

As expected most children come from more populous areas of the state. There has been no appreciable change in rates by area.

Ages of DHHS wards

Table 6 shows that for the 3,383 DHHS wards (both in out-of-home and in trial home visit), 40% were preschoolers, 36% were in elementary/early middle school, and 23% were teenagers. Prior to delinquents being under the Office of Probation, the three age groups were roughly equal. Now there were more young children and fewer teenagers under DHHS.

Table 6. Age of DHHS wards in out-of-home or trial home visit on 2/1/2017

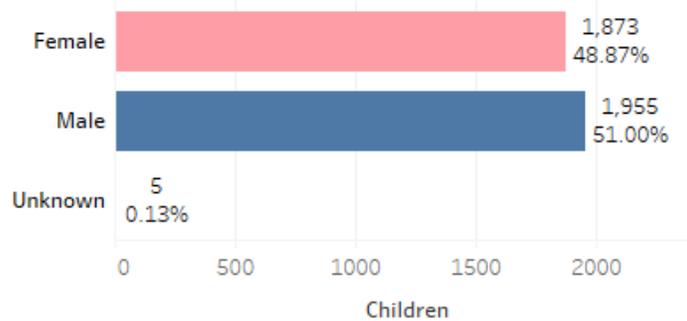


Source: Foster Care Review Office independent tracking system.

Ratio of boys to girls

Table 7 shows that for the 3,383 DHHS wards (both in out-of-home and in trial home visit), girls are 48.9% of the population, while boys are 51.0%. The ratio has been hovering at around 47% female to 53% male for quite some time.

Table 7. DHHS wards in out-of-home or trial home visit 2/1/2017 by gender

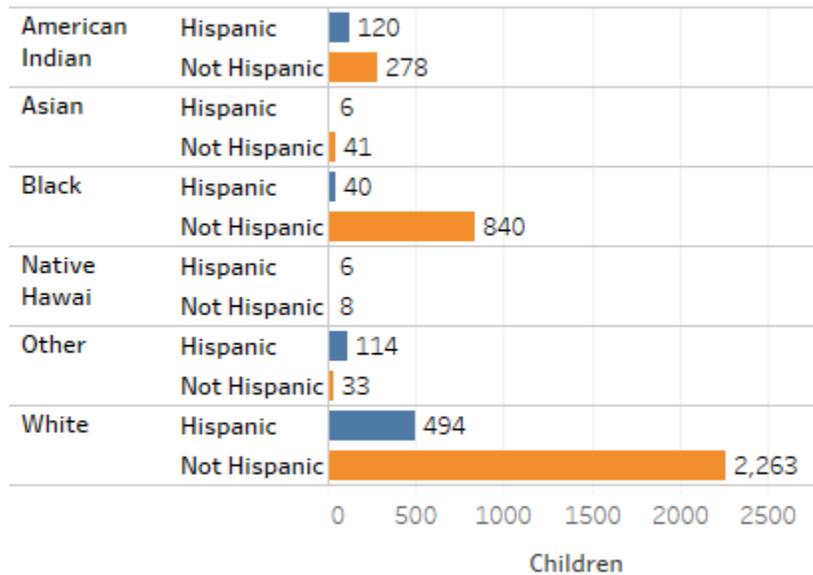


Source: Foster Care Review Office independent data system.

Race

Table 8 shows the race or races indicated per child (some children have multiple racial backgrounds identified), with Hispanic ethnicity included.

Table 8. Race of DHHS wards in out-of-home or trial home visit on 2/1/2017
(Multiple races per child allowed)



Since children can have multiple racial backgrounds the total will exceed the total number of children in care. Source: Foster Care Review Office independent data system.

Table 9 shows race without ethnicity, and with percentage of the total population. There continues to be disproportionality when compared to Nebraska’s population of children (see December 2016 Annual Report, page 4).

Table 9. Race of DHHS wards in out-of-home or trial home visit on 2/1/2017 - excluding ethnicity
(Multiple races per child allowed)

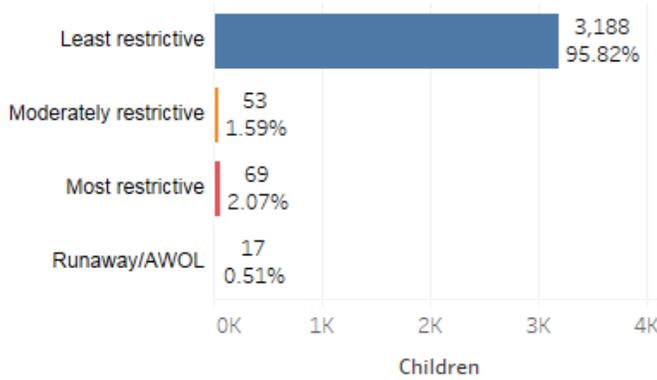
Race	% of total population	Total
American Indian	9.40%	398
Asian	1.11%	47
Black	20.79%	880
Native Hawaiian	0.33%	14
Other	3.47%	147
White	64.89%	2,747

Since children can have multiple racial backgrounds the total will exceed the total number of children in care. Source: Foster Care Review Office independent data system.

Restrictiveness level of children’s placements

Table 10, the restrictiveness levels chart, shows that most (95.8%) of the 3,327 children not in the parental home are placed in a family-like setting.

Table 10. Restrictiveness of out-of-home placements



Least restrictive includes placements in a home-like setting or supervised independent living.

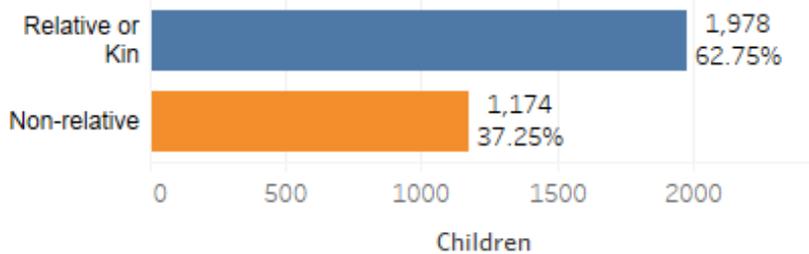
Moderately restrictive includes non-treatment group homes and boarding schools.

Most restrictive includes psychiatric facilities, medical facilities, youth rehabilitation and treatment centers, youth detention, and emergency shelters.

Source: Foster Care Review Office independent data system.

Table 11 shows that the majority (**62.8%**) of the children in a foster home are placed with **relatives** or kin (fictive relatives, such as a coach or teacher that had a prior positive relationship with the children). **This is an increase from June 30, 2016, when 55% of those in a foster home were in a relative/kin placement.**

Table 11. DHHS wards 2/1/2017 in a foster home by whether that is with relative/kin or not

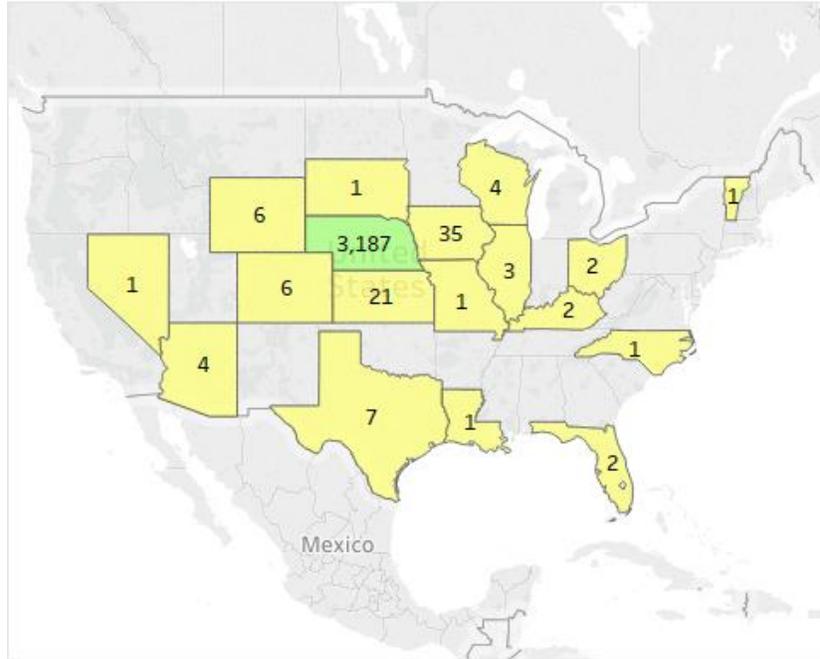


Source: Foster Care Review Office independent data system.

State where children are placed

Table 12 shows states where the 3,327 children in out-of-home care are placed (with the exception of the 42 runaways). Most (3,187 or 95.8%) are in Nebraska.

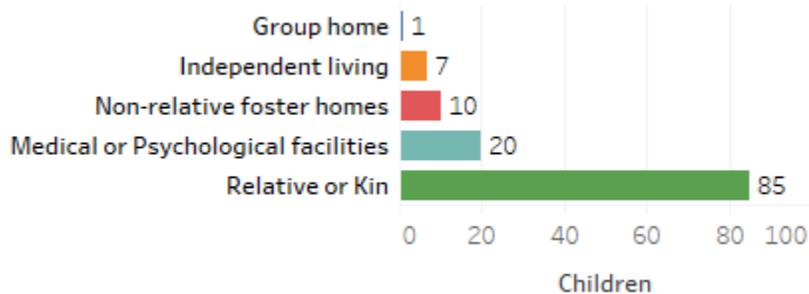
Table 12. State where DHHS wards in out-of-home care on 2/1/2017 were placed



Excludes 42 runaways whose current location is unknown. Source: Foster Care Review Office independent data system.

Table 13 shows the types of placement for DHHS wards placed out-of-state. Most (69.1%) are with relatives in a foster placement, 16.3% are in medical or psychological facilities, and the rest are in other types.

Table 13. DHHS in out of state placement 2/1/2017 by facility type



Out of State Placements of DHHS wards in out-of-home care 2/1/2017.

Source: Foster Care Review Office independent data system.

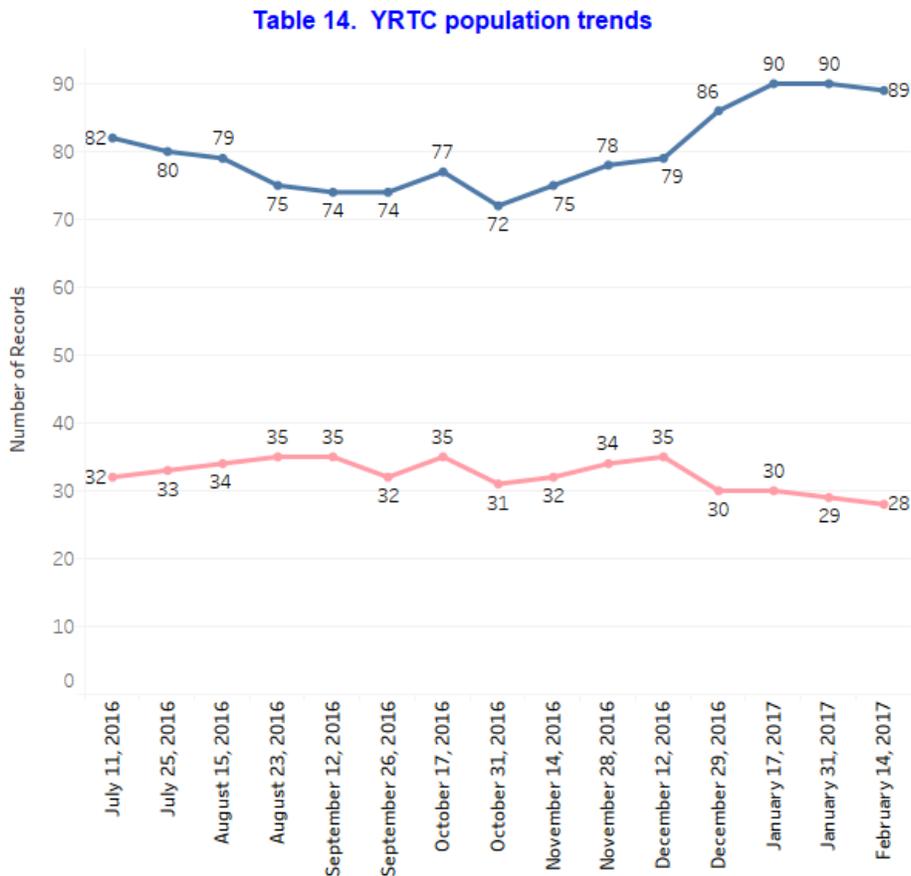
DHHS/OJS Wards

On 2/1/2017 there were 119 DHHS/OJS wards at the YRTC’s. The DHHS Office of Juvenile Services [OJS] is responsible for the Youth Rehabilitation and Treatment Centers [YRTC’s] at Kearney (boys) and Geneva (girls), and has been since juvenile justice response was changed in October 2013. In most cases post-release and other types of rehabilitative services for law violators fall to the Office of Probation, which is described elsewhere in this report.

Placement at a rehabilitation and training center is the most restrictive type of placement.

Trends

Table 14 shows the number of OJS wards at each of the YRTC’s on specific dates since the beginning of this fiscal year and also illustrates the ratio of the boys to girls.



Youth Rehabilitation and Treatment Center (YRTC) populations. Source: Foster Care Review Office independent data system.

Placement name (group)
■ YRTC - Geneva (girls)
■ YRTC - Kearney (boys)

The ratio of boys to girls in **Table 14** above is interesting. There are currently more than three times as many boys as girls committed to youth rehabilitation facilities. This finding was recently confirmed by the Office of Juvenile Services.

Where youth are from

Youth at the YRTC’s come from every region of the state, as illustrated in **Table 15**, with most from the more populous regions.

Table 15 - YRTC youth on 2/1/2017 by Court involved

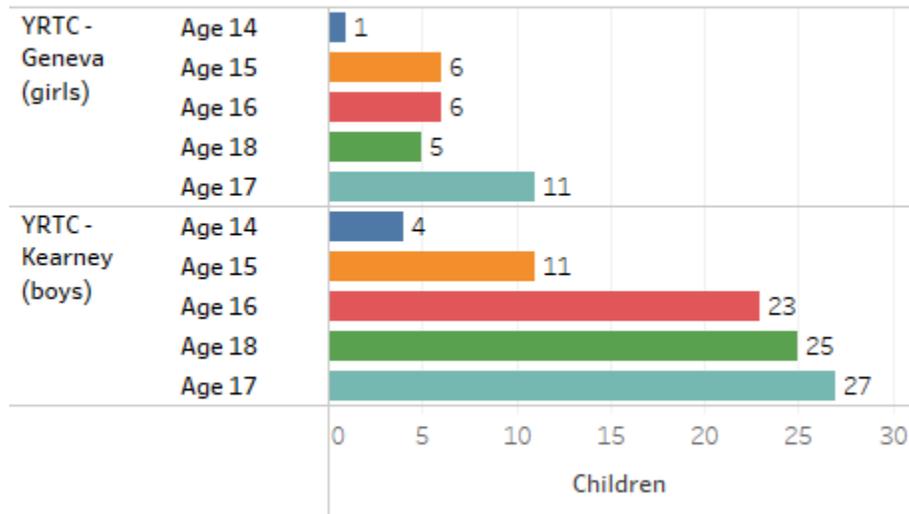
Court involved	Placement name (group)	
Adams	YRTC - Kearney	4
Buffalo	YRTC - Geneva	1
	YRTC - Kearney	5
Cass	YRTC - Kearney	1
Dakota	YRTC - Kearney	3
Dodge	YRTC - Kearney	2
Douglas	YRTC - Geneva	11
	YRTC - Kearney	23
Furnas	YRTC - Kearney	1
Gage	YRTC - Kearney	1
Hall	YRTC - Geneva	1
	YRTC - Kearney	5
Hamilton	YRTC - Geneva	1
Knox	YRTC - Kearney	1
Lancaster	YRTC - Geneva	10
	YRTC - Kearney	24
Lincoln	YRTC - Geneva	1
	YRTC - Kearney	6
Madison	YRTC - Kearney	5
Otoe	YRTC - Kearney	1
Pierce	YRTC - Kearney	1
Platte	YRTC - Kearney	3
Sarpy	YRTC - Geneva	1
Scotts Bluff	YRTC - Geneva	1
	YRTC - Kearney	3
Thurston	YRTC - Geneva	1
Washington	YRTC - Kearney	1
Wayne	YRTC - Geneva	1

YRTC youth 2/1/2017 by Court of Origin. Source: Foster Care Review Office.

Ages

Per Neb. Rev. Stat. §43-251.01(4), youth committed to a youth rehabilitation and treatment center (and thus under OJS) must be at least 14 years of age. The average age for a girl at Geneva was 17.02 years, a boy at Kearney was 17.14 years. See **Table 16** for more details.

Table 16. Ages of children at the YRTC's on 2/1/2017



Youth Rehabilitation and Treatment Center (YRTC) populations. Source: Foster Care Review Office independent data system.

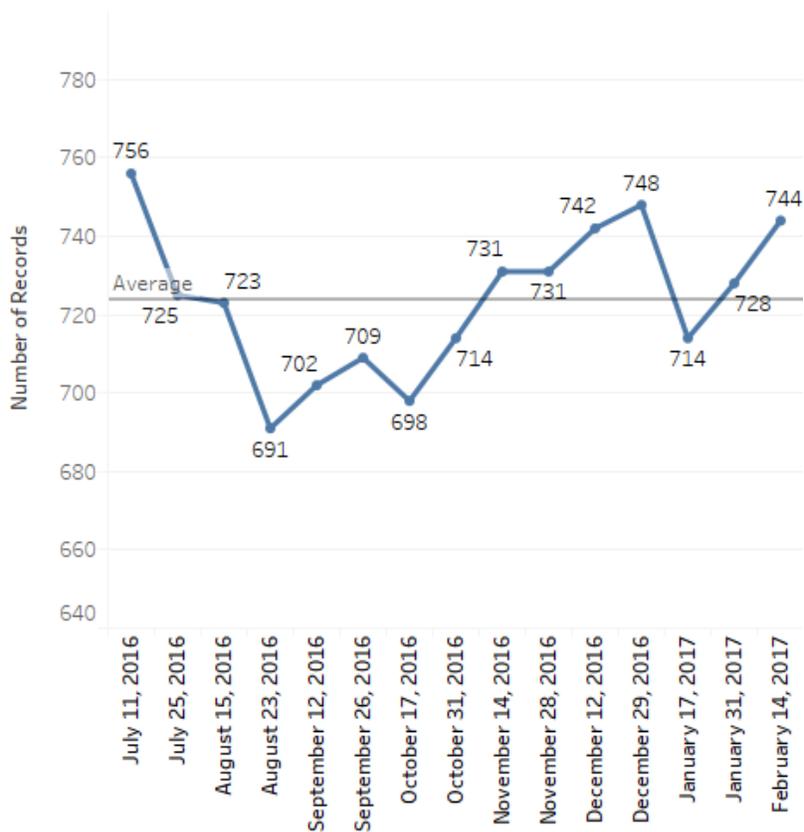
Probation youth not involved with DHHS/OJS or DHHS child welfare

The Office of Juvenile Probation has been responsible since October 2013 for youth found by a Court to be delinquent or status offenders,¹ with the exception of those placed at a Youth Rehabilitation and Treatment Centers (which are under DHHS/OJS). This section focuses on youth in out-of-home care under Probation that are not involved with either DHHS/OJS or DHHS child welfare.

Trends

Table 17 shows the number of Probation wards in out-of-home care on specific dates since the beginning of this fiscal year. The low was 691, the high was 756.

Table 17. Probation wards that were in out-of-home care and that were not involved with another agency



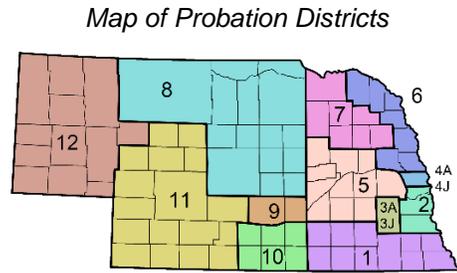
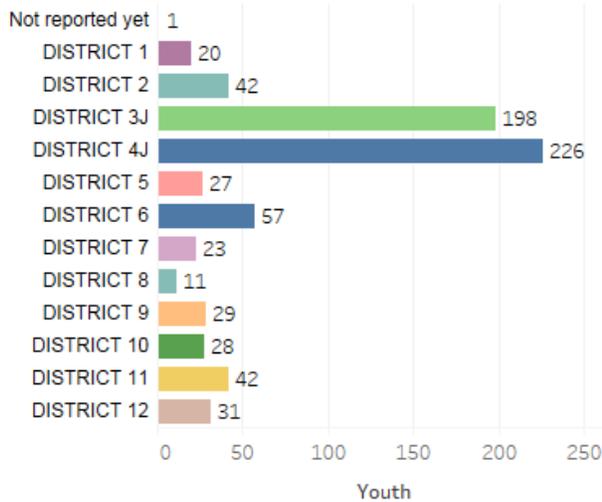
Probation wards in out-of-home care on the various dates selected. Source: Foster Care Review Office independent data system.

¹ Status offenders are youth charged with issues that an adult could not be charged with, such as truancy, failure to follow curfews, etc.

Where children are from

Table 18 shows the area of origin for the 735 youth under Probation, with a map to the right showing Probation’s statutory districts.

Table 18. Youth in out-of-home under Probation on 2/1/2017 by District

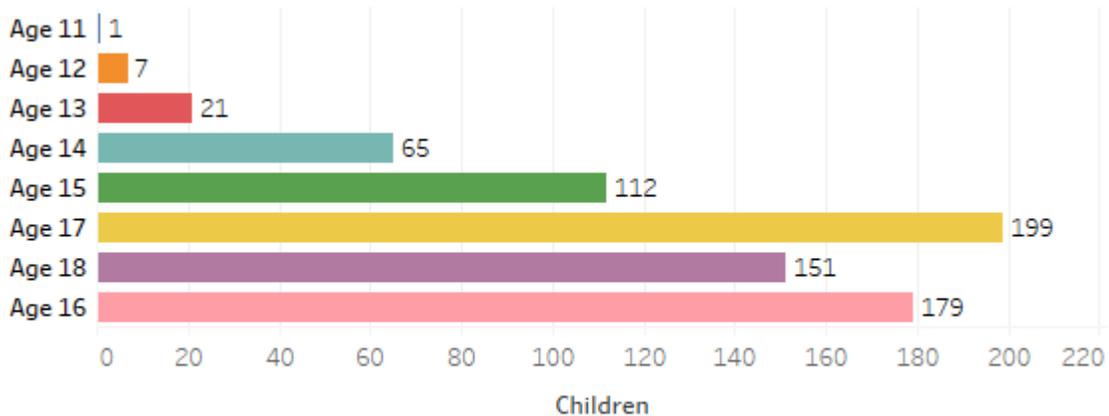


Youth in out-of-home care on 2/1/2017 under Probation by the Probation District serving that youth. Source: Foster Care Review Office independent tracking system.

Ages

Table 19 shows the ages of Probation youth in out-of-home care on 2/1/2017. **It is important to note that 27.2% are under age 16.**

Table 19. Probation youth in out-of-home care on 2/1/2017 by age

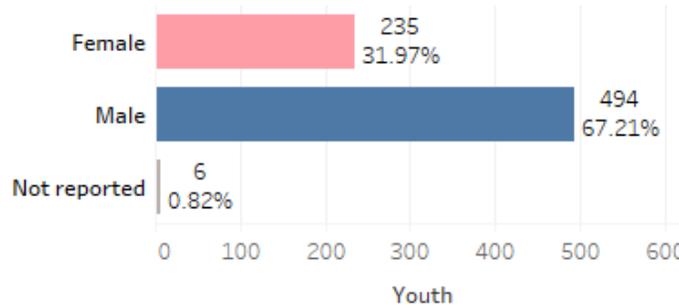


Youth in out-of-home care under Probation on 2/1/2017 by age. Source: Foster Care Review Office independent data system.

Ratio of boys to girls

There are about twice as many boys in out-of-home care under Probation as there are girls, as shown in **Table 20**. There are many theories for this disparity, most of which are beyond the scope of this Report.

**Table 20. Gender of youth under Probation
2/1/2017**

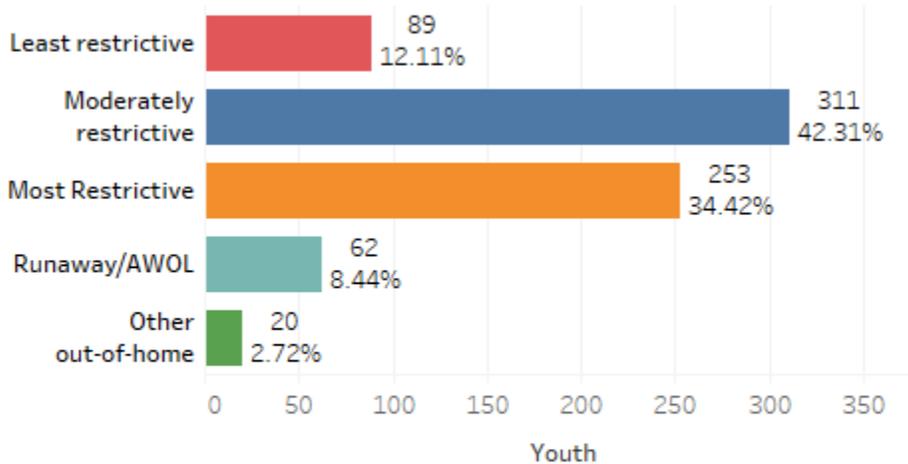


Source: Foster Care Review Office independent data system.

Restrictiveness level of children’s placements

Per **Table 21**, Probation youth in out-of-home care tend to be in moderately restrictive placements, such as *non-treatment* group homes, or in more restrictive placements.

**Table 21. Placement restrictiveness for Probation wards in
out-of-home care on 2/1/2017**



Least restrictive includes placements in a home-like setting or supervised independent living.

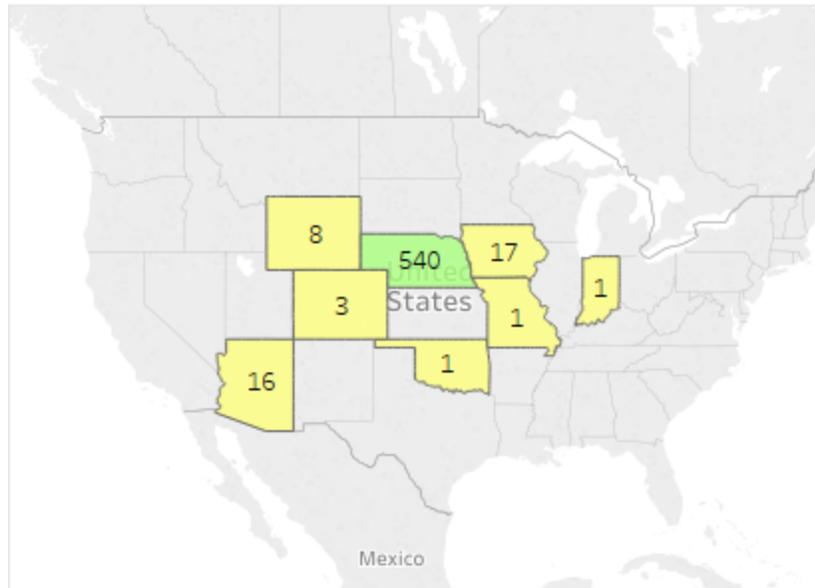
Moderately restrictive includes non-treatment group homes and boarding schools.

Most restrictive includes psychiatric facilities, medical facilities, youth detention, and emergency shelters. **Youth at the YRTC’s are not included in this table.**

Source: Foster Care Review Office independent data system.

Regarding the state of placement, it was not reported for 148 youth. For the remaining 587 youth, 92.0% were placed in Nebraska, 2.9% were in Iowa, 2.7% were in Arizona, 1.4% were in Wyoming, and the rest were in other states as illustrated in **Table 22**.

Table 22. Probation wards in out-of-home care 2/1/2017 by state of placement.



Source: Foster Care Review Office independent data system..

Youth with both DHHS and Probation involvement

Some children are involved with both DHHS (usually for prior abuse/neglect or to obtain mental or physical health treatment), and the Office of Juvenile Probation (for a status offense or delinquent act).

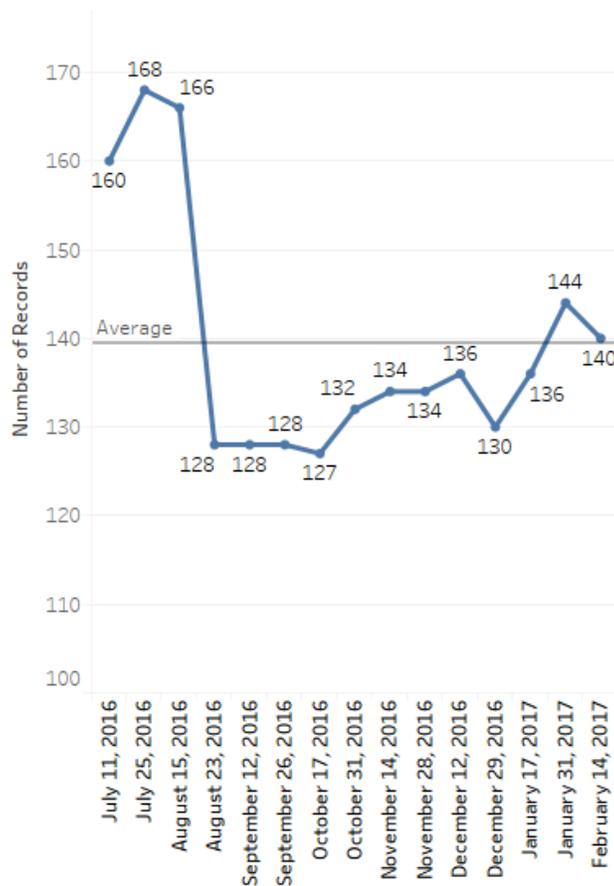
The 149 dual wards can be categorized by major category of placement:

Out-of-home	145 children
Trial home visit following an out-of-home placement	4 children

Trends

Table 23 shows the number of dual agency wards in out-of-home care on specific dates since the beginning of this fiscal year. The low was 127, the high was 168.

Table 23. Wards of both DHHS and Probation that were in out-of-home care

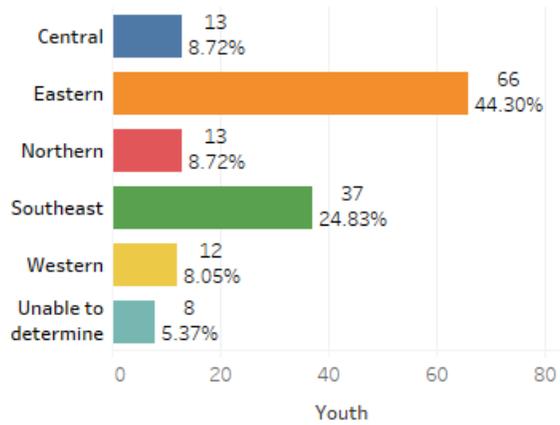


Wards of both DHHS & Probation in out-of-home care on the various dates selected. Source: Foster Care Review Office independent data system.

Where youth are from

These youth come from all parts of the state, as illustrated in **Table 24** below.

Table 24. Youth under both DHHS & Probation in out-of-home care 2/1/2017, by area

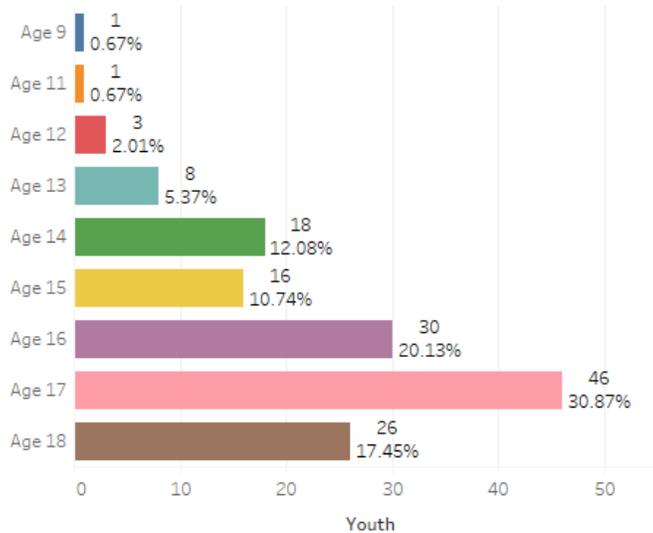


Youth in out-of-home care on 2/1/2017 that are under both DHHS and Probation. Source: Foster Care Review Office independent data system.

Ages

Table 25 indicates that most dual-agency youth are teenagers, although a few are as young as nine years of age. **It is concerning that there are five children age 9-12 involved with both systems.**

Table 25. Youth under both DHHS & Probation in out-of-home care 2/1/2017, by age

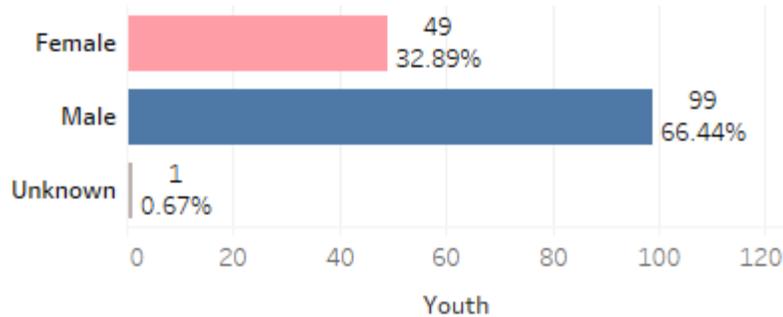


Youth in out-of-home care on 2/1/2017 that are under both DHHS and Probation. Source: Foster Care Review Office independent data system.

Ratio of boys to girls

Table 26 shows that, as is true with other populations involved with status offenses or delinquency actions, there are about twice as many boys in this group as girls.

Table 26. Youth under both DHHS & Probation in out-of-home care 2/1/2017, by gender

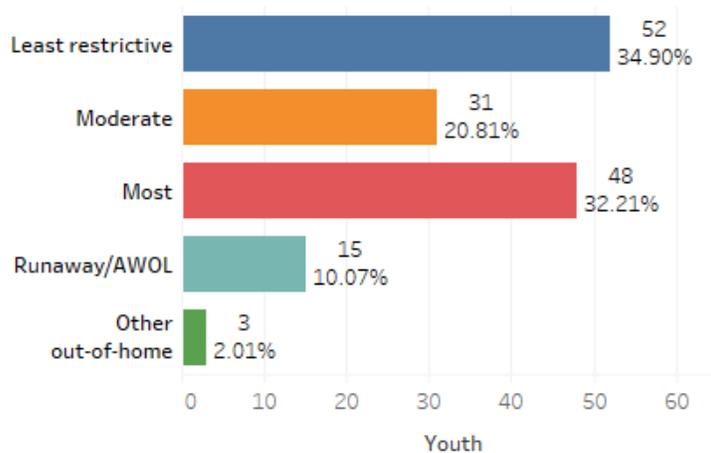


Youth in out-of-home care on 2/1/2017 that are under both DHHS and Probation. Source: Foster Care Review Office independent data system.

Restrictiveness level of children’s placements

Table 27 shows that slightly more children are in least restrictive placement types than in most restrictive.

Table 27. Youth under both DHHS & Probation in out-of-home care 2/1/2017, by placement restrictiveness



Least restrictive includes placements in a home-like setting or supervised independent living.

Moderately restrictive includes non-treatment group homes and boarding schools.

Most restrictive includes psychiatric facilities, medical facilities, youth rehabilitation and treatment centers, youth detention, and emergency shelters.

Source: Foster Care Review Office independent data system.

Section II – Adoption and Guardianship Displacements

Displacement (re-entry) is an out-of-home placement after a finalized adoption or guardianship.

Children in this section:

- Experienced abuse or neglect,
- Were removed from their parent(s),
- Were then placed in one or more temporary living arrangements (placements),
- Had parent(s) that were unwilling or unable to correct issues that led to removal from their home,
- Subsequently left the foster care system via either adoption or guardianship, and
- Either re-entered an out-of-home care situation, or were at serious risk to do so.

A workgroup has been convened to examine increased occurrences of children coming to the attention of either DHHS (Department of Health and Human Services) or the Office of Juvenile Probation following a displaced adoption or guardianship.

Members are representatives of DHHS, Probation, Right Turn, the Court Improvement Project, the Inspector General for Child Welfare, NFC (Nebraska Families Collaborative – a DHHS contractor), various private organizations, and the FCRO (Foster Care Review Office).

Data presented in this Report will focus exclusively on adoptions with subsequent displacements. Guardianships will be discussed in a future Quarterly Report.

Before presenting data there is one major caveat:

Nebraska does not have a child ID that follows them across agencies or changes of circumstances. Children that are adopted often change names and matching those re-entering care to their prior records under a different name can be challenging. Therefore, these statistics under-report the true extent of occurrences.

Key definitions:

Displacement – there are two levels of displacement

- *Out of home placement by either probation or DHHS after a filing in juvenile court. The parent can either be engaged in the child returning home or not requesting the child be returned home.*
- *Parental Commitment to child's return home without the filing in juvenile court and with voluntary services.*

Dissolution – legally dissolving the guardianship or relinquishing parental rights.

Disruption - includes only those cases where the adoption or guardianship disrupts prior to finalization.

These terms are often erroneously used interchangeably.

ADOPTION AND DISPLACEMENTS

Data in this section tells us about children who experienced a displacement from the adoptive home and also about some supports that are needed by adoptive families in order for their family to remain intact.

Pool potentially needing post-adoptive services

By considering all state wards who were adopted and determining those that have not obtained legal age of adulthood² the maximum number of children on a given day that might need post-adoptive services can be determined, whether those services occur in-home or out-of-home.

Date	Children	How determined
1/1/2017	5,508	Actual number adopted before 2017 and less than 19 years of age on Jan. 1st.
1/1/2018	5,687	5,197 children adopted before 2017 who will be less than 19 years of age on 1/1/2018, plus an estimated 490 children adopted during 2017. The estimate is based on the 5-year average of adoptions of state wards.
1/1/2019	5,866	4,886 children adopted before 2017 who will be less than 19 years of age on 1/1/2019, plus an estimated 490 children adopted during 2017 and another estimated 490 children adopted in 2018.

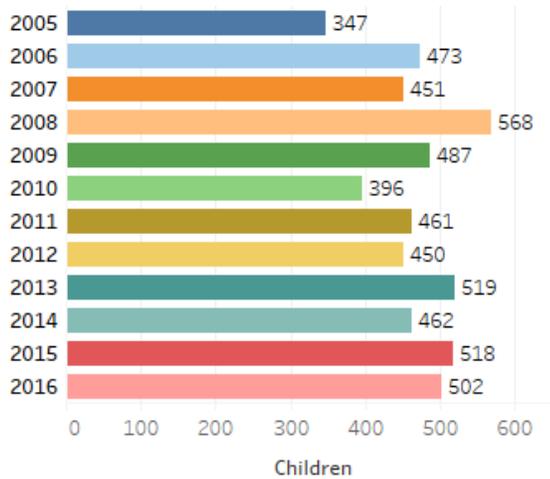
Given the numbers of children adopted after a traumatic early childhood, Nebraska needs to seriously consider the types and availability of prevention services to keep those children from having yet another traumatic experience and being placed in out-of-home care for another time. Some of those children will go on to experience yet another traumatic event if the adoption is dissolved (permanently severed) and the children lose another set of parents.

² The age of majority for children and youth under DHHS is age 19 per Neb. Rev. Stat. §43-2101.

Number of adoptions of state wards completed yearly

Table 28 shows state wards adopted each year. The low was 347 children in 2005, the high 568 children in 2008 (which coincided with the availability of some additional federal adoption assistance funds). The most recent five year average was 490 adoptions of state wards per year.

Table 28. Former State Wards Adopted 2005-2016, by year of adoption



This chart shows the number of state wards that were adopted each year. Due to an issue with a prior data conversion, we only include those since 2005. Source: Foster Care Review Office independent data system.

Table 29 shows the number of state wards adopted by age at adoption.

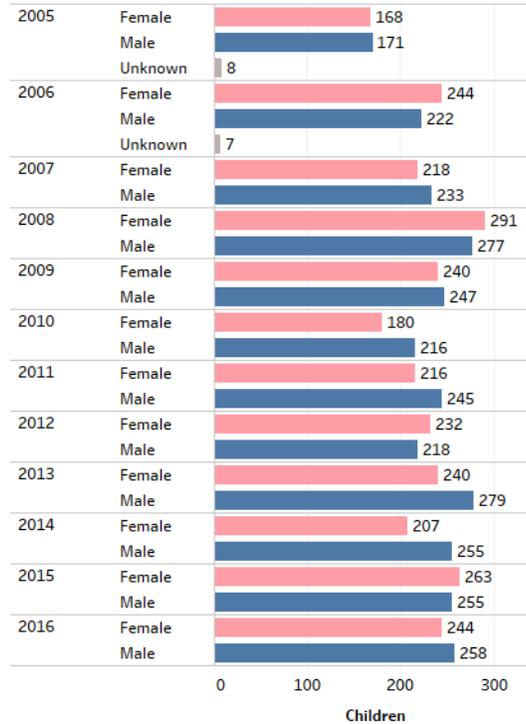
Table 29. Former State Wards Adopted 2005-2016, by age at adoption

	Children	%
Under 1 year old	112	1.99%
Age 1	598	10.62%
Age 2	708	12.57%
Age 3	625	11.10%
Age 4	538	9.55%
Age 5	466	8.27%
Age 6	419	7.44%
Age 7	364	6.46%
Age 8	334	5.93%
Age 9	291	5.17%
Age 10	240	4.26%
Age 11	230	4.08%
Age 12	194	3.44%
Age 13	145	2.57%
Age 14	127	2.25%
Age 15	100	1.78%
Age 16	65	1.15%
Age 17	52	0.92%
Age 18	25	0.44%

This chart shows the number of state wards that were adopted each year. Due to an issue with a prior data conversion, we only include those since 2005. Source: Foster Care Review Office independent data system.

Table 30 shows adoptions by gender.

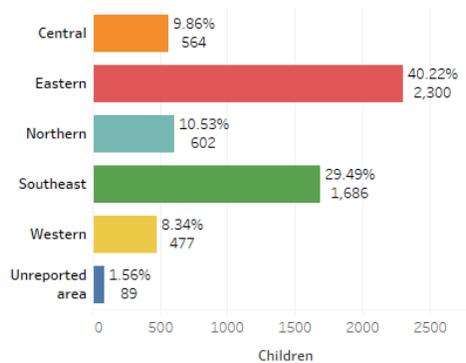
Table 30. Former State Wards Adopted 2005-2016, by gender



This chart shows the number of state wards that were adopted each year. Due to an issue with a prior data conversion, we only include those since 2005. Source: Foster Care Review Office independent data system.

Considering 2005-2016 as whole, **Table 31** shows what area of the state adopted children were from by DHHS Service Area (see the map on page 4). Numbers adopted in each area tend to be proportionate to populations of children in out-of-home care, which slightly varies from the general population.³

Table 31. Adoption by area overview



This is a combination of years 2005-2016. Source: Foster Care Review Office independent data system.

³ See FCRO Annual Report, December 2016, page 3.

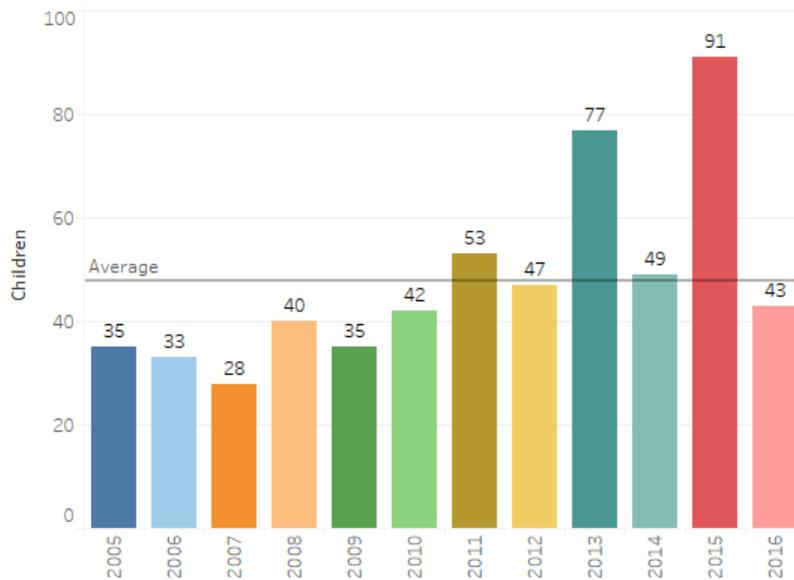
Number of displacements

Table 32 shows numbers of adopted children that re-entered the system each year *and* were placed in out-of-home care. It does not include any children that may have received services in the adoptive home who never re-entered an out-of-home placement.

An important point of clarification, displacements do not always equate to a “failed” adoption. It is prudent for adopted families to seek treatment placements for a child if it is needed. Often families can maintain commitment and support the child throughout the treatment.

Again, please note the caveat that this likely under-represents total numbers.

Table 32. Adoption displacements 2005-2016



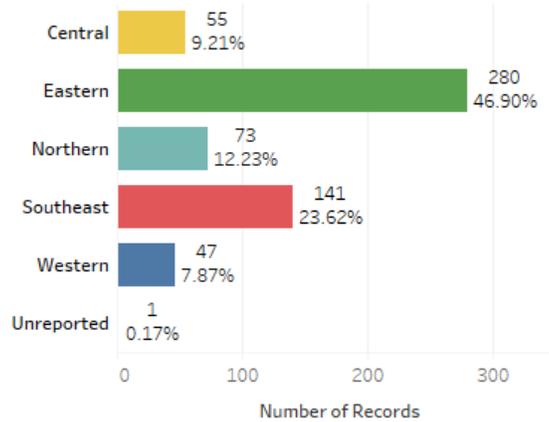
This chart shows the number of former state wards displaced each year. Due to an issue with a prior data conversion, we only include those since 2005. Children that are adopted often change names and matching those re-entering care to their prior records under a different name can be challenging. Therefore, these statistics likely under-report the true extent of the issue.

Source: Foster Care Review Office independent data system.

Geographic area of displaced children

Table 33 represents the geographical locations of the displaced children identified in the chart above. Population plays a role in the number of youth represented in each location.

Table 33. Displacements 2005-2016 by Area



Source: Foster Care Review Office independent data system.

The following chart shows numbers of adoptions 2005-2016, numbers displaced 2005-2016, and ratios of displaced compared to adoptions to assist in determining regional differences. There are some differences, and further research is needed on this.

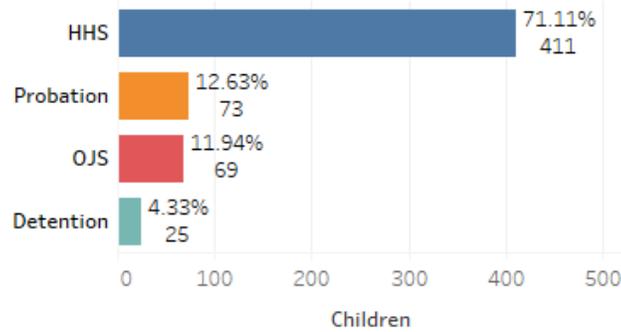
Area	# of adoptions and percent of total adoptions	# of displaced and percent of total displaced	Displaced compared to # of adoptions by area
Central	564 (10.0%)	55 (9.2%)	9.8%
Eastern	2,300 (40.8%)	280 (47.0%)	12.1%
Northern	602 (10.7%)	73 (12.2%)	12.1%
Southeast	1,686 (30.0%)	141 (23.7%)	8.4%
Western	477 (8.5%)	47 (7.8%)	9.9%
TOTAL	5,629	596	10.6% (statewide average)

Therefore, if there are there 5,687 children who are post-adoption on January 1, 2018, it might be expected that at minimum 603 of those children may at some point re-enter out-of-home care. As a State, Nebraska needs to be prepared to meet needs of those children and their families.

Agency involved on re-entry.

Due to several changes to data systems of both reporters and the FCRO during the 11 year span of 2005-2016, which agency was involved immediately upon removal was ascertained for 578 of the 597 children. **Table 34** shows that 71% were with DHHS, the rest were involved with some form of law violation. This was not unexpected, as prior to 2013 youth entering care for a law violation were only reported from DHHS, OJS, or Detention facilities.

Table 34. Agency involved at re-entry 2005-2016

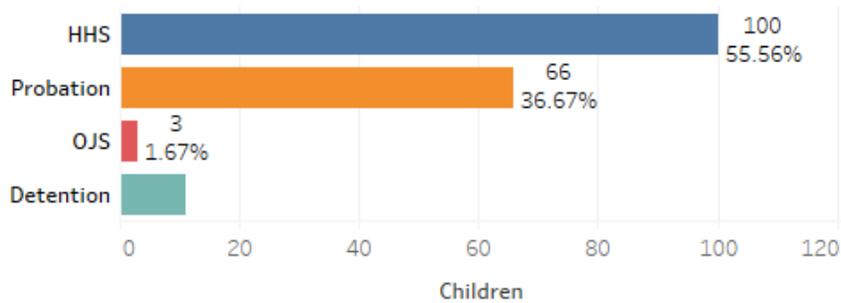


Due to several data conversions of both data providers and the FCRO, this information was available for 578 of the 597 adopted children that re-entered out-of-home care from 2005-2016.

Source: Foster Care Review Office independent data system.

Since the implementation of Juvenile Justice Reform and moving all delinquent youth to the Administrative Office of Probation (AOP) beginning in October 2013, current percentages are different as shown in **Table 35**. DHHS was involved in 55.5% of these cases, compared to 71% earlier.

Table 35. Agency involved at re-entry 2014-2016



This information for the 180 adopted children that re-entered out-of-home care from 2014-2016.

Source: Foster Care Review Office independent data system.

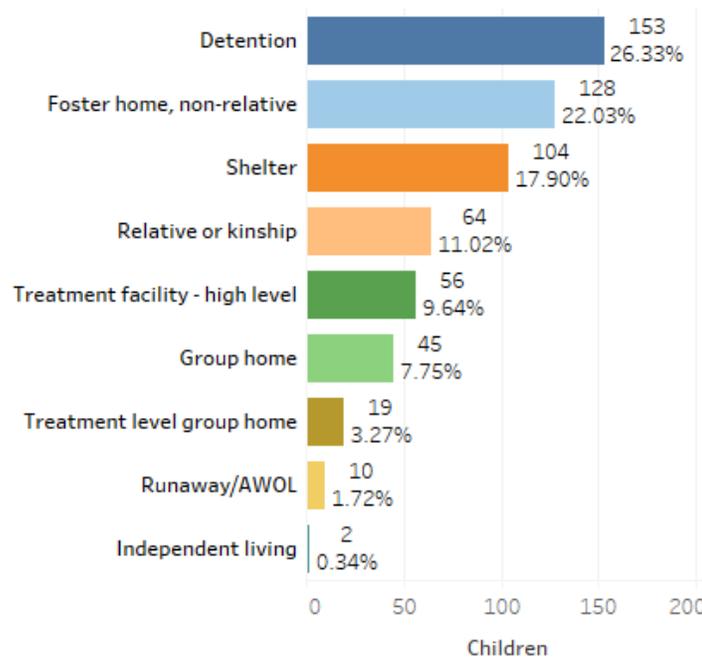
In some ways, this may be a positive change. When children are on probation, the parents remain parents and make decisions. This feels different for the youth. Even though they may be placed out of home, their parents are often still involved and they are not being parented by the State. On the other hand, Probation may not have the same type of resources as does child welfare that are needed to help youth who have suffered serious trauma in the past.

Type of placement on re-entry.

Table 36 shows types of placement that the 597 children experienced upon removal from adoptive home. The top five categories were:

1. Detention.
2. Non-relative foster homes.
3. Emergency shelter.
4. Relative/Kin.
5. Intensive level treatment facility, such as a PRTF.

Table 36. First placement type on re-entry (where available) for a post-adoption out-of-home placement



Type of placement for the first placement after re-entry into out-of-home care.
Source: Foster Care Review Office.

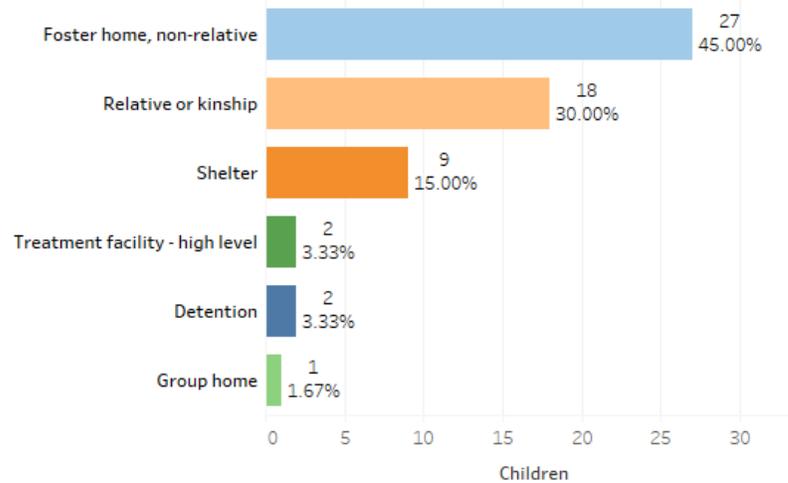
Concerning the children placed in a non-relative foster home, the question needs to be asked why remove a child from the adoptive home (which used to be a foster home) only to place in another foster home. Presumably, these new foster parents would have the same level of training and skills as the adoptive parents. This speaks to a need for in-home services for adoptive families without necessitating becoming system involved.

Some of the children are in a treatment level facility. That does not automatically mean the adoption “failed”. A child can be placed at a treatment level with parents that remain committed to that child. This speaks to access to treatment level resources available to children and families that are not system involved. Often times “the system” tells families that the only way to obtain the necessary treatment for their child is to make them a state ward.

Re-entries for young children

Consideration was given to the first placement at re-entry for the children that were birth through nine years of age. As **Table 37** shows, most young children (45%) were in a non-relative foster home placement on displacement, with another 30% in a relative placement.

Table 37. Age 0-9, first type of caregivers after displacement



Placement on re-entry for children age 0-9. Source: Foster Care Review Office independent data system.

Sibling groups displaced

The 597 children that were displaced came from 466 families.

- 368 families (78.5%) had 1 child displaced.
 - This does not mean that all 368 families had adopted just one child – they could have adopted more – this statistic shows that only one child from the family had a re-entry.
 - The total number of children in the family and whether those children were adopted from the State or through a private adoption is not available.
- 75 families (16.0%) had 2 children displaced.
- 16 families (3.4%) had 3 children displaced.
- 7 families (1.3%) had 4 or more children displaced.

Age at displacement

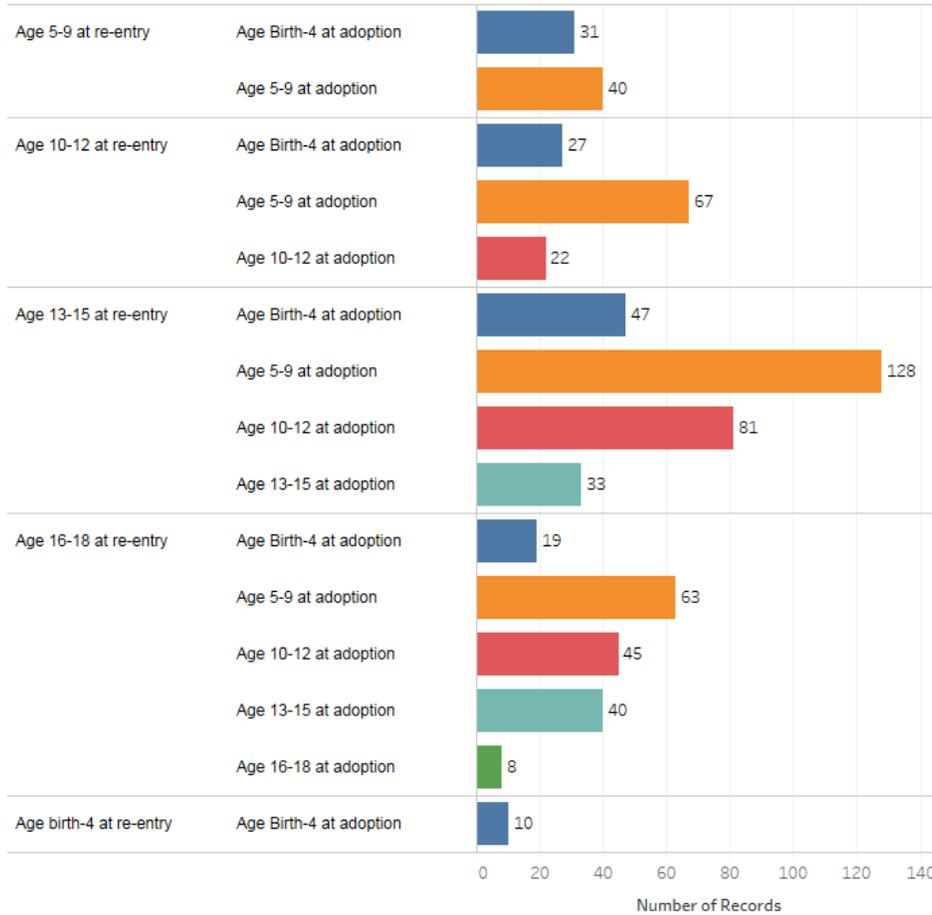
Displacement is more likely to occur during early teen years as statistics on **Table 38** show.

Child development experts theorize that as adolescent brains develops they often need to re-evaluate earlier traumas in light of increased capacity for abstract thinking. Children may also need to evaluate adoption-specific issues, especially questions surrounding why they entered care, relinquishment, why their adoptive parents adopted them, why the bio- parents were no longer parenting, etc. Further, these children know that few, if any, of their peers

may have been adopted. At an age where fitting in and being similar to the peer group becomes highly important to many adolescents, youth who have been adopted can feel very isolated.⁴

More research is needed to explain the circumstances for the infants-4 year old children that experience displacement, and the age 5-9 cohort that re-entered care.

Table 38. Age at disruption compared to age at adoption.



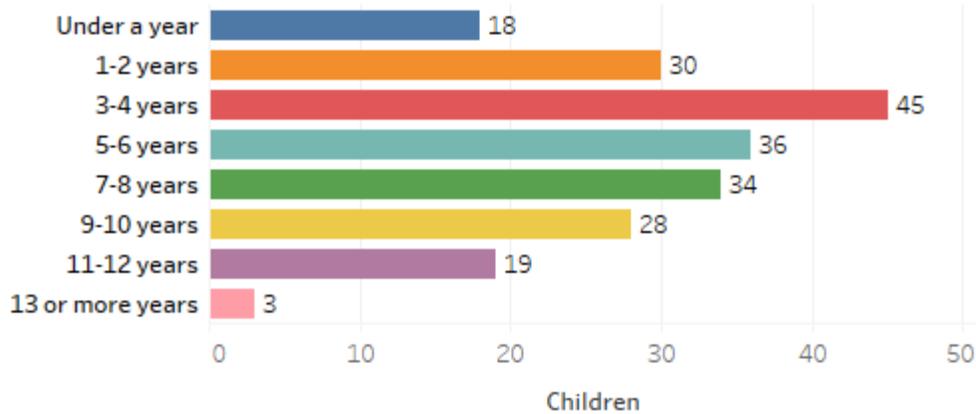
Source: Foster Care Review Office independent data system.

Another consideration was the time between adoption and return to out-of-home care by age strata, with two such strata displayed below.

⁴ Experts include the American Psychological Association, the National Child Traumatic Stress Network, and many others.

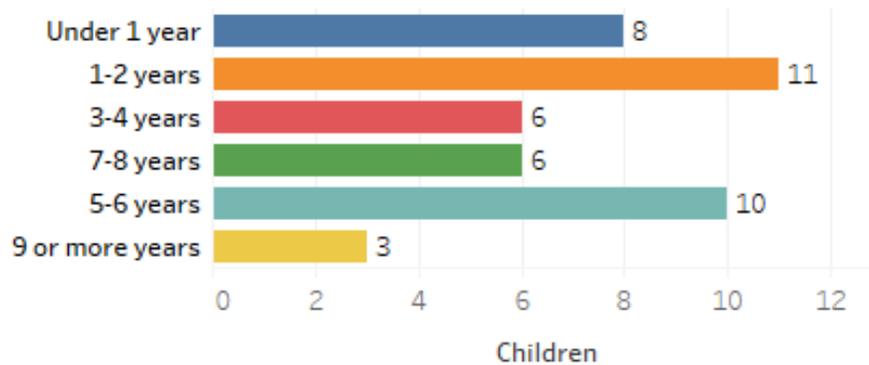
Table 39 is for children who would now be 15-18 years old, and **Table 40** is for children now 10-14 years old. Each strata would have a different number of years during which an adoption displacement might take place.

Table 39. Time in years between adoption and return to out-of-home care, children born 1998-2002 - who would now be 15-18 years of age.



For children born between 1998-2002 [who would now be 15-18].
 Source: Foster Care Review Office independent data system.

Table 40. Time in years between adoption and return to out-of-home care, children born 2003-2007 - who would now be 10-14 years of age.



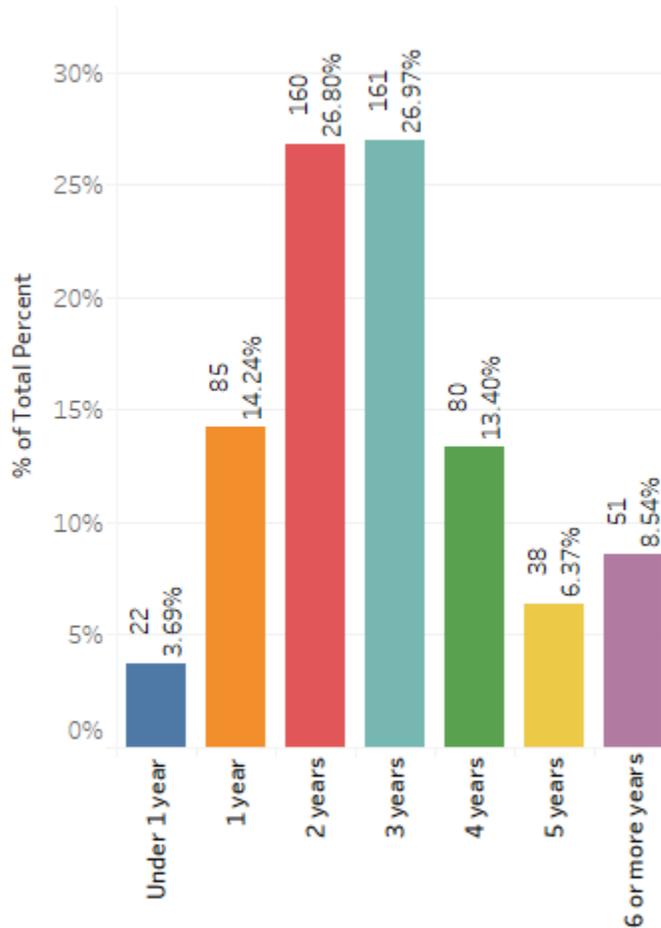
For children born between 2003-2007 [who would now be 10-14].
 Source: Foster Care Review Office independent data system.

It is concerning how many children displace within a short time after adoption.

Children’s out-of-home care experience prior to adoption

Table 41 shows the number of years that displaced children were in out-of-home care prior to their adoption. Most (82.0%) were in out-of-home care at least two years, and over half (55.3%) were in out-of-home care at least three years. Reasons for this include that adoptions of children whose parental rights were terminated cannot be completed until after the appeals process (which can take a year or more) has concluded, and most terminations are appealed; and further often a late identification of paternity can delay freeing the children for adoption.

Table 41. Years in out-of-home care prior to adoption

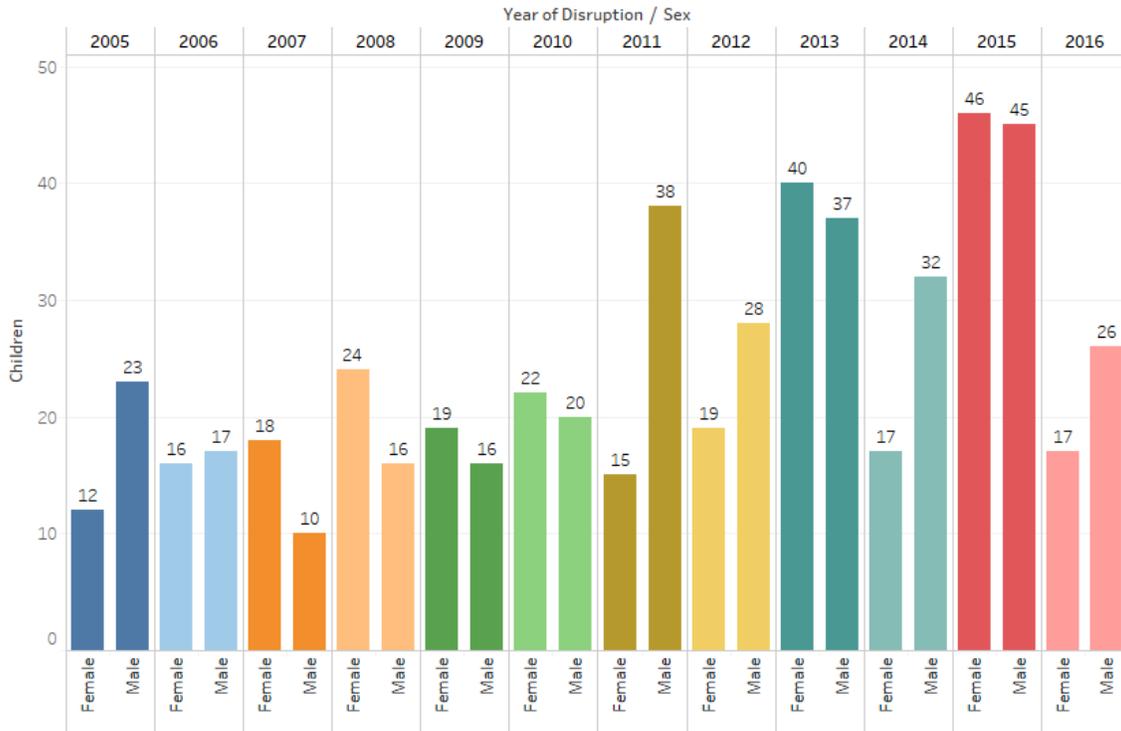


Children with displacements 2005-2016. Source: Foster Care Review Office independent data system.

Gender differences/similarities

Table 42 shows that there were some interesting gender differences and commonalities. More males had an adoption displacement than females in the same time period (2005-2016).

Table 42. Gender of children with displacements after adoption



Source: Foster Care Review Office independent data system.

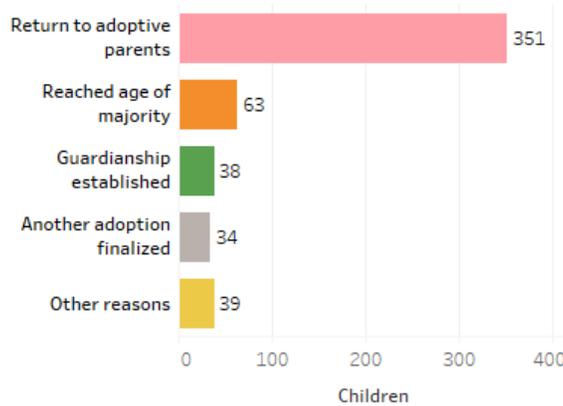
Outcomes after a displacement

The cohort being studied could be categorized in two groups:

- 72 children that had a displacement that resulted in an out-of-home care time period, and were still in an out-of-home placement.
- 597 had a displacement that resulted in an out-of-home care time period, and had since left out-of-home care.

Table 43 shows what happened for those 597 children. Most (66.9%) returned to their adoptive parents, followed by 12.0% that reached the legal age of adulthood without achieving permanency.

Table 43. Reason for leaving out-of-home care after an adoption displacement



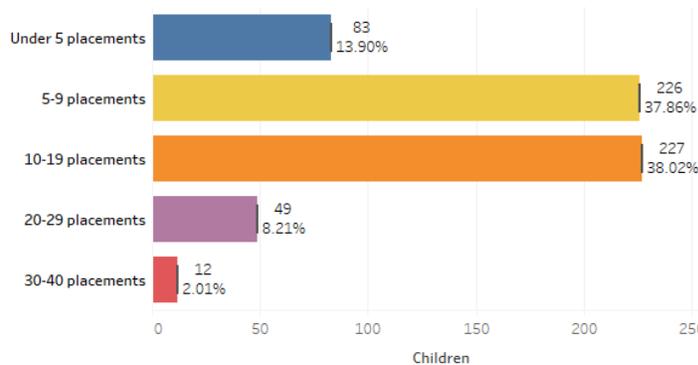
Reason the child left the displacement episode for children displaced 2005-2016. Source: Foster Care Review Office independent data system.

There is more to consider than just whether/why they left care; specifically other measures of children’s well-being.

National researchers have found that children who experience four or more moves between foster caregivers over their lifetime are significantly more likely to suffer consequences of that instability far into adult life.⁵

Therefore, statistics in **Table 44** that follows are particularly alarming. Specifically, 86% of these children experienced five or more placement moves, and **nearly half (48.2%) experienced 10 or more placement moves in their lifetime.**

Table 44. Lifetime placements

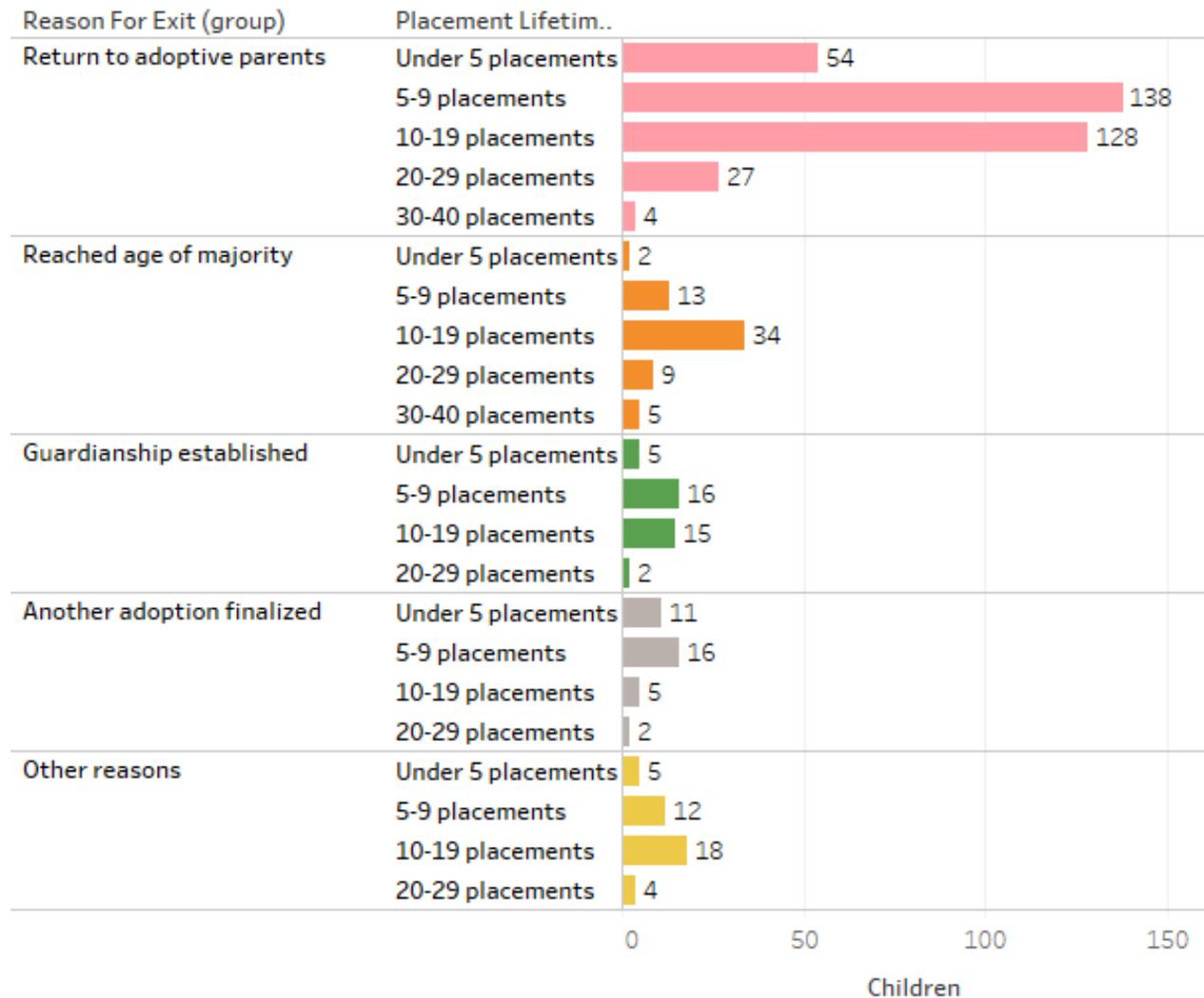


Children with displacements 2005-2016. Source: Foster Care Review Office.

⁵ Some examples include: Hartnett, Falconnier, Leathers & Tests, 1999; Webster, Barth & Needell, 2000; the American Academy of Pediatrics, 2000; Noonan, Kathleen, Rubin, David, Mekonnen, Robin, Zlotnik, Sarah, and O’Reilly, Amanda. Dr. Peter Pecora, Senior Director of Research Services with Casey Family Programs and Professor at the School of Social Work at the University of Washington, in The Foster Care Alumni Studies – Why Should the Child Welfare Field Focus on Minimizing Placement Change (2007); and Securing Child Safety, Well-being, and Permanency Through Placement Stability in Foster Care. Children’s Hospital of Philadelphia Research Institute Policy Lab, Evidence to Action, Fall 2009.

Differences exist in lifetime numbers of placements, which varies depending on the reason children left care after the displacement ended. Children who returned to their adoptive parents tended to have the most lifetime placements as shown in **Table 45**.

Table 45. Lifetime placements by Exit from Displacement



Children with displacements 2005-2016 that have since exited out-of-home care. (Excludes those still in out-of-home placement)

Source: Foster Care Review Office.

Questions and further research remaining

Remaining questions and considerations fall into several broad categories.

Prevention:

- What should the State do for the child and family prior to adoption to ensure it is a good match and to prepare them?
- Does the State properly assess the suitability of the family to adopt and meet the lifelong needs of the child? Is there a recognition that being a foster parent is vastly different than adopting? Are families adequately prepared to truly make a lifelong commitment to their child?
- Does the State provide education to the child and family about adoption as a lifelong issue and how it will impact the child at various developmental stages? Does it provide training specific to the child's unique needs?
- Do some potential adoptive parents have more difficulty in assimilating an adopted child into their home with the same commitment as to biological children? If so, what can be done prior to adoption finalization to help recognize or prevent this? Is there adequate assessment of motivation to adopt? If the parents cannot demonstrate an unconditional commitment, they may not be suitable for adoption.

Attitudes:

- Does the State prepare potential adoptive parents so that reaching out for help as their children grow older is seen as positive?
- Does the State encourage parents to look for help prior to reaching a crisis situation?
- Why have so many adoptive parents seemingly "called it quits"? Why is the systemic response different to adoptive families rescinding their parental commitment?
- Does the system work as hard to keep adoptive families intact it does for biological families? If not, why not?
- Are parents able to access services in order to meet their child's needs in home and prevent out-of-home care? If not, how could that be changed?

Data points not available at this time:

- What are the demographics of adoptive parents, and does that impact displacements?
- How many adoptions are cross-racial adoptions? Are there racial and ethnic biases that impact returns to care?
- How many displacements turn into dissolutions (permanent severing of the adoption ties)?
- What were the reasons that children re-entered out-of-home care?

- How many of these children were suffering from mental/behavioral health issues or adoption specific issues?
- How many are entering because of status offense or law violation?
- How many of these children experienced abuse or neglect in the adoptive home as well as in their home of origin?
- What were the reasons that children were removed from the biologic parents? Does this impact the tendency to experience re-entries into out-of-home care?
- Can the State quantify some of the issues that Right Turn sees on a case-by-case basis so it can use this information to determine specific adoptions issues that families might need more preparation or training on?

Other things to consider:

- Is pre-adoption matching, assessment, and training adequate? The system needs to do all of this prior to finalization. Is there utilization of evidenced-based or promising practices for adoption preparation, recruitment, and assessments?
- Is the adoption home study actually used as an assessment rather than a checklist item? The state should be completing the adoption home study prior to adoptive placement so that it has fully assessed for suitability for adoption and to meet the lifelong needs of that child.
- What can stakeholders learn and apply to cases prior to adoptions, and what can be learned and applied to access, availability, and education on post-adoptive services?
- How does the State balance reaching out to parents in a post-adoption situation without unnecessary intrusion into their lives?
- What contingencies do adoptive parents have in place should they be physically unable to care for their children? Are those adequate?
- How many adoptive parents themselves have a significant trauma history that impacts their ability to care for children at different stages of development?

It is the intention of the collaborative workgroup to keep meeting and apply what is learned to help adoptive families and the systems that serve them.

The Foster Care Review Office can be reached at:

**Foster Care Review Office
521 S. 14th, Suite 401
Lincoln NE 68508
402.471.4420**

email: fcro.contact@nebraska.gov

www.fcro.nebraska.gov