Keeping it in the family: The impact of a Family Finding intervention on placement, permanency, and well-being outcomes ☆

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ABSTRACT

Child-centered recruitment via Family Finding has gained national attention as an approach to search, discover, and engage kin and fictive kin to support the attachment and permanency needs of children in foster care. However, despite its promise it has received scant attention in the empirical literature. The current study compared the outcomes of a front-end Family Finding intervention ($n = 196$) and a comparison group ($n = 262$) among children in foster care in Cook County Illinois between the ages of 6 and 13. Results showed that there were no differences between the intervention and comparison group on reunification rates, placement stability, or on longitudinal externalizing behavior and internalizing symptoms. However, the intervention found close to 75% more relatives than the control group, and many of these relatives were significant figures in the children's lives. The intervention was also associated with a higher proportion of relative placements to total placements for a subgroup of children with five or more placements. Further, the effect of the intervention on this proportion (relative placements to total placements) was mediated by the greater number of relatives found in the intervention. Finally, the intervention was associated with relatively better Concurrent Planning. These results suggest that Family Finding has the potential to impact proximal outcomes related to discovery, engagement and planning but is currently not impacting more distal outcomes such as permanency and well-being. Family Finding approaches should continue to innovate, possibly through integration with psychosocial interventions, to affect more distal variables such as well-being outcomes.

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1. Introduction

For children in foster care, the negative impacts of maltreatment can be compounded by the social separation that often comes with entry into the system. Prior research indicates that social disruption- in the form of separation from schools, parents, foster parents, and peers-can be independently associated with increased emotional and behavioral difficulties above and beyond the effects of maltreatment (Salazar, Keller, & Courtney, 2011; Collins, Spencer, & Ward, 2010; Perry, 2006). This research dovetails with important theoretical advances in developmental psychology over the past several decades highlighting both the importance and complexity of the social forces that interplay at multiple ecological levels in predicting adjustment (Bronfenbrenner, 1992).

However, of glaring absence in the literature on the social and ecological factors influencing foster care children's adjustment is the potential role that non-resident kin and fictive kin may play on placement,

permanency, and well-being outcomes. Rather, the focus in the child welfare literature has been on the impact of continuous ties to biological parents and the effect of kinship foster care on these outcomes (Cuddeback, 2004; Zielinski & Bradshaw, 2006; McWey, Acock, & Porter, 2010) rather than the broader kinship network outside of the foster home. This omission is all the more glaring when considering that African-American children are over-represented in child welfare (Lu et al., 2004) and that kinship networks are often stronger and seen as more integral to development in the African-American community (Cazenave & Straus, 1979; Hunter & Taylor, 1998; Harrison, Wilson, Pine, Chan, & Buriel, 1990). Further, research on children outside of the foster care system has found that support from the kinship network among ethnic minority families (e.g., financial, emotional, or instrumental aid) can be protective regarding the development of anxiety, substance use, and antisocial behaviors (e.g., McLoyd, Jayaratne, Ceballo, & Borquez, 1994; Taylor, Seaton, & Dominguez, 2008).

Fortunately, the child welfare system is beginning to understand the potential importance of children's kinship networks. At the federal level, the 2008 Fostering Connections to Success and Increasing Adoptions act promotes kinship network connections in two ways: 1) Notice to all adult relatives, paternal and maternal, of removal and 2) family connection grants. Family connection grants were intended to fund

demonstration projects to develop an empirical research base to support the engagement and involvement of extended families throughout and after children's time in care. These include Kinship Navigators, Family Finding, Family Group Decision-Making, and Residential Family Treatment. The program and evaluation described in the current study was supported by a family connections grant implemented through the Children's Bureau.

One of the grant areas described above, Family Finding, involves concerted efforts to locate, engage, and involve extended family members in service planning to support children's placement, permanency, and well-being outcomes. The most common intervention is the Family Finding model of Kevin Campbell (Campbell, 2010). Campbell's Family Finding model consists of six stages: 1) *Discovery*. During this stage, family finders are trained to locate at least 40 relatives through interview, word-of-mouth, internet searches, file reviews, and specialized genealogical search tools; 2) *Engagement*. The goal of this stage is to highlight to appropriate family members (individually or in small groups) the need the child has for social connections, especially after entering care. Family members are encouraged to appreciate that they might be able to serve a vital function in supporting the child across all of his/her developmental needs; 3) *Planning*. After engaging individual or small groups of family members in the engagement stage, planning involves bringing as many family members together as possible to share knowledge about the child and the ways they may work together to meet the developmental needs of the child; 4) *Decision-Making*. After the planning meeting(s), family members meet again to make concrete commitments to the child's development. Decisions are made among family members about specific roles, goals, plans, and dates; 5) *Evaluation*. Upon completion of the decision-making phase, family members should have an individualized plan to support what is referred to as the child's "legal and emotional permanency". After a provisional plan has been made, family members work together to review and evaluate the plan and determine possible alternatives to the plan if it should falter. This is where Concurrent Planning activities are conducted; 6) *Follow-up Supports*. Family members will be introduced to and given information about natural and informal supports in the community (e.g., dedicated teachers, coaches, church members) that can help the family members achieve their goals and roles involving the child. Family Finding staff will follow-up with family members at specific periods after formal case activities have ended.

Despite the national enthusiasm for Family Finding, little attention has been paid to the empirical outcomes of the intervention in the peer-reviewed literature. Landsman, Boel-Studt, and Malone (2014) found that, compared to a control group, Family Finding engaged more family members and was associated with a higher likelihood of relational permanency and a relative adoption. However, Family Finding was not associated with time to permanency or likelihood of reunification. Garwood and Williams (2015) found that their Family Finding intervention was marginally ($p < 0.10$) associated with likelihood of a placement with a relative, but only for the new-to-care (versus lingering-in-care) sample. One problem with treating relative placement as a one-time dichotomous outcome (likelihood of a relative placement compared to a traditional placement) is that it may not capture the involvement of family members as placement resources across multiple placements. It is an unfortunate fact that children in foster care often have multiple placements; many studies report that 50% or more of children in foster care have three or more placements while in care (Newton, Litrownik, & Landsverk, 2000). However, it might be the case that Family Finding interventions- as a result of discovery, engagement, and planning-make it more likely that when placements do fail, new placements are nonetheless more likely to be with other relatives. This hypothesis has not been tested in Family Finding interventions, and is one of the aims of the current study. Clearly, the goal of keeping children connected to family is made more likely if family members are involved as foster parents during care.

Despite the limited attention Family Finding has received in the peer-reviewed literature, a recent report in Child Trends by Vandivere and Malm (2015) reviewed 13 non-peer reviewed evaluations of Family Finding. Their review suggests that Family Finding outcomes are mixed. In general, the Family Finding interventions were able to find more relatives than control groups consisting of casework as usual, suggesting that Family Finding is successful in the discovery stage. Further, and possibly related to success in the engagement stage, children in the intervention groups often had more contacts with relatives and their relatives were more likely remain connected. Family members in two of the interventions were more likely to become a foster parent compared to the control groups, but this finding was not consistent across all of the evaluations.

Longer term outcomes, such as those involving permanency and well-being, were consistently no better in the intervention versus control groups in Vandivere and Malm's (2015) review of Family Finding evaluations. However, their review uncovered just one evaluation that evaluated well-being outcomes using a validated well-being measure. The evaluation reviewed was based on a Family Finding intervention in North Carolina targeted to children ages 13 and above already in care. Evaluators of the Family Finding program used the Youth Self Report (YSR; Achenbach & Rescorla, 2001) to measure well-being outcomes at 12 months and 24 months after the intervention. The authors found no differences between the intervention and control groups in terms of clinical levels of externalizing behavior, but did find a difference in favor of the control group in terms of internalizing behavior; adolescents in the control group actually had lower levels of clinical internalizing behavior at 24 months compared to the intervention. A limitation of the North Carolina evaluation was that, despite randomizing to group, the project did not collect baseline YSR data, limiting interpretation of their findings. One evaluation not included in Vandivere and Malm's (2015) review was a recent evaluation of a Family Finding demonstration grant from Missouri (Extreme Recruitment). The evaluators of the Missouri Family Finding grant compared intervention and control groups on the Child and Adolescent Functional Assessment Scale (CAFAS; Hodges, Kline, Stern, Cytryn, and McKnew (1982)), another validated measure of well-being. However, despite efforts to randomize, the intervention and control group were not randomly assigned and the intervention group had significantly higher scores CAFAS scores at baseline. Further, it does not appear from the evaluation that baseline differences were controlled before comparing changes, limiting interpretation of the findings.

The current study reports on the evaluation findings of a Family Finding intervention in an effort to continue to contribute to the nascent empirical base. The goal is to examine some of the key outcomes that have been previously studied in the evaluation literature, such as number of relatives identified, placement stability, legal permanency, time in care, and well-being. However, this study seeks to take a more nuanced approach to the examination of kinship placements resulting from Family Finding. Specifically, instead of treating relative placement as a dichotomous outcome (likelihood of a relative placement compared to a traditional placement), we sought to determine if relative placements were more common across the overall number of placements (i.e., whether the proportion of relative placements to total placements was higher in the intervention versus control group).

2. Method

2.1. Participants

Children and adolescents between the ages of six and 13, entering the care of the Illinois Department of Children and Family Services (DCFS) in Cook and Will Counties between October 1st, 2011 and October 1st, 2015, were eligible for the present study.