
*Neighbor To Family –
Supporting Sibling Groups in Foster Care
Formative and Efficacy Evaluation*

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ABSTRACT

This paper summarizes research on approaches to providing services for sibling groups in foster care. The Neighbor To Family (NTF) program focuses on three innovations for providing foster care and preparing sibling groups for permanency and the future. NTF has developed strategies for keeping sibling groups together in foster care using professional caregivers instead of traditional foster parents and a team based approach to overall care with includes the family, kin and caregivers as equal partners in the team. This paper reports a formative study that clarified the NTF service practice model and two efficacy studies comparing the Neighbor To Family program to other approaches to foster care. Neighbor To Family is a clinically enhanced version of Neighbor to Neighbor, which were both established and developed by Gordon Johnson. The first study reports a small pilot project in Volusia County Florida through which a formative evaluation refined the NTN process and an efficacy evaluation found significant impact on several key indicators for child welfare compared to other forms of traditional case management and foster care. The second study was a matched comparison study of the enhanced NTF model with traditional case management in four counties in central Georgia. The outcomes for 417 children in foster care receiving the enhanced NTF service were compared to a matched group of 417 children receiving traditional foster care services in four counties around Atlanta Georgia (i.e., DeKalb, Fulton, Gwinnett, and Clayton). A separate process evaluation demonstrated fidelity to the NTF model for the study group. The reported efficacy evaluation showed significant improvement in placement within county, placement with siblings, stability of placement, safety during and after foster care, rate of reunification and time and type of permanent placement for the children receiving NTF services compared to the children who received other forms of foster care. The studies are discussed in terms of their implications for foster care practice and the need for future research.

Introduction

Defining and developing effective approaches for meeting the foster care needs of children and their siblings is a major child welfare challenge. Children in foster care have consistently reported that they want more contact with siblings for over 30 years (Zimmerman, 1982; Gustavsson & MacEachrow, 2010). In the mid 1800s cities, states and courts began to take special interest in protecting children from homelessness and maltreatment (Anderberg, 2008). By 1926, 18 states had some version of county child welfare boards whose purpose was to coordinate public and private child related work (Ellett & Leighninger, 2007). In 1974, Congress passed the Child Abuse Prevention and Treatment Act, which took the first steps toward federally addressing the issue of child abuse and neglect. These policies led to the 1997 Adoption and Safe Families Act (ASFA), much of which guides current child welfare practice. From the early 1970s until the end of the century, there was a steady increase in the number of children in foster care. In 1999, the number of children in foster care nationwide topped 562,000 children. Since that time, there has been a slow decrease in the number of children in care to less than 490,000 but the average complexity and level of intensity of need for the families still in foster care is more severe than ever before.

ASFA was developed to minimize trauma for children through performance standards which were monitored for each state. Trauma is related to violence and neglect but is psychologically experienced more as a loss of control. When a child feels traumatized by abuse or neglect the accompanying loss of control is a central feature of the trauma. Removing a child from an unsafe environment is one approach to reducing trauma. On the other hand, the impact of taking children away from their homes results in multiple additional trauma and uncontrollable losses. These children lose their parents, and if they move out of their neighborhoods, often lose their churches, schools, friends, and health care professionals. When children are in foster care for any length of time they may live in multiple foster homes which is another form of trauma and instability for the children. Changing economic conditions in the United States have resulted in more demand for both parents in a home to work which has reduced availability of people able to provide foster care. This leads to less choice in where to place children which makes it harder to find homes close to the children's neighborhoods. It also makes it harder to find homes with the capacity to handle sibling groups. These many losses for the child combined with the trauma of the abuse and neglect often cause severe emotional reactions that can last a lifetime. Many of these children suffer from post traumatic stress that is as much caused by the solution than the original unsafe or neglectful situation.

In addition to all of the above traumatic events, the loss of connection with siblings may be the most traumatic. Approximately 70 percent of children in foster care in the United States have another sibling also in care (Shlonsky, Elkins, Bellamy, & Ashare, 2005). The most stable relationship in a child's life is often with his/her siblings. Sibling relationships are emotionally powerful and critically important not only in childhood but over the course of a lifetime. Siblings are often the first social group to teach children how to play, how to socialize, how to resolve conflicts, negotiate, and are often the people that can most be counted on most. For children entering foster care, siblings can serve to buffer against the worst effects of the trauma

of the abuse, neglect, and separation from so many important aspects of their life. When stress makes parents unable to meet their children's needs, the usually strong bonds between siblings may become stronger, perhaps even stronger than those between parents and children. When the move to foster care also disrupts these bonds, children are often left isolated with no lasting supports.

In 1994, the Jane Addams Hull House in Chicago under the direction of Gordon Johnson developed a professional foster caregiver model from 45 years of personal and professional experience and named it Neighbor to Neighbor (NTN). As a former state director of child welfare in Illinois Mr. Johnson had witnessed the changes in society that had decreased the potential number of volunteer foster parents. He also witnessed the trends that continued to separate sibling groups. With more dual family incomes needed to meet economic demands, many potential foster care providers were now employed outside the home. In the NTN model the foster caregivers were recruited from the communities where there was the most need for foster care and established as paid professionals with benefits meaning they did not need to have second jobs. Neighbor to Neighbor was an innovative strategy to keep sibling groups together and increase the number and quality of foster caregivers by employing professional foster caregivers from the children's communities who would work with whole sibling groups. This strategy is based on research that shows children who are kept with their siblings are spared lasting effects that are caused by the incredible pain and loss separation inflicts on children already traumatized by abuse and neglect (Hegar, 2005; Linares, Li, Shrout, & Brody, 2006). The model also results in more and better trained foster care providers to provide stable foster care for sibling groups.

In 1997, Mr. Johnson introduced the Neighbor to Neighbor model to Florida where it was improved based on lessons learned in Chicago and the new version was labeled Neighbor To Family (NTF). The program was first piloted in Volusia and Flagler Counties, Florida in December 1998. NTF built on the NTN model that promotes a strong recruitment and retention strategy for foster caregivers that include an annual salary and benefits. In that model the professional foster parents receive respite care and 32 hours of required training, which has been shown to increase retention and satisfaction (Cowen & Reed, 2002). The original NTF model added both regular peer to peer and professional social support which have been shown to improve quality and job satisfaction (Finn & Kerman, 2004; Rodger, Cummings & Leschied, 2006) and established the caregiver as a true partner in the planning and implementation process for the sibling groups in their care.

In 2001 the Volusia County site was chosen to be evaluated as a best practice site in Florida by Florida Representative now Florida State Senator Evelyn Lynn The evaluation was done through the Florida Ounce of Prevention fund by two external evaluators from the University of Central Florida (Dziegielewski, 2002; Ortega, 2003). The formative and summative evaluations were conducted from November 2001 through February 2002. The two evaluations examined the same service delivery by two different evaluators and had similar findings.

Summary of Formative Evaluation. In compliance with the Ounce of Prevention Fund of Florida's contractual requirements, the Neighbor To Family program developed a logic model that translated the program goals into quantifiable objectives and outcomes for service process

and child and family outcomes. The two evaluations of the Florida project found good overall fidelity to the model as shown in Table One below.

Fidelity Outcomes

- Professional caregivers were recruited to provide care for all sibling groups
- Professional caregivers received a minimum of 32 hours of training
- 85% reported that they got good background information on children
- 95% reported that they received prompt support from NTF
- 98% felt they had 24 hour a day crisis support
- 85% felt they were listened to and respected
- 86% felt strongly supported in their jobs
- 83% felt involved in the treatment planning process

Table One shows the results from the initial formative evaluation of the project done through review of electronic data from the NTF quality assurance system and through interviews, surveys, and focus groups with caregivers, biological families and children.

The evaluation provided a thorough review of the process and although the assessment found the program to be very successful, it also made a number of recommendations for improvements as seen in Table Two. The recommendations resulted in a reevaluation of the overall logic model and some of the activities of the program. While the overall goals and strategies to support sibling groups in foster care with professional foster care givers from their home communities did not change, several enhancements to the model were made

Recommendations

- Review and update the program model to reflect the findings of the study
- Provide more social and professional support to homes and caregivers
- Provide additional training and support in special topics for caregivers
- Provide linkages to the child's biological family and cultural heritage
- Develop additional strategies to support staff team culture
- Support caregivers as a stronger partner in the process
- Provide aftercare service to reduce parental risk factors

Table Two shows the recommendations from the initial fidelity evaluations of the project.

The theory of change and fidelity expectations were changed based on these recommendations. The enhanced NTF model provides more extensive in-service training for the care givers including an increase to a required 50 hours per year and more required topics including: increasing positive parent-child interaction, emotional communication skills, disciplinary consistency (Kaminski, Valle, Filene, and Boyle, 2008). The training program incorporates all other team members, which appears to be effective in producing long term change. Training also addresses trauma-informed care, attachment and behavior management methods (Chamberlain, Price & Laurent, et. al., 2008) and training in co-parenting and support for reunification (Simms & Bolden, 1991; Linares, Monalto, Li, et., al, 2006).

In addition, NTF provides case management support from on-site NTF staff and added a team-approach involving foster caregivers as full partner in case staffing and individual planning for the children in their care. The revised NTF model emphasizes aggressive outreach to birth parents and extended family with a goal of reunifying sibling groups with their families. To aid in reunification, the program includes family-focused comprehensive services for all family members and employs a team-based approach to casework. Involving foster parents as equals in service planning can increase the quality of the plans and plan implementation and improve their personal satisfaction and retention (Hudson & Levaseur, 2002; Rhodes, Orme & Buehler, 2001). In this role they take leadership in supporting the children, reunification and permanent placement for the child. The professional caregivers have planning and goal setting meetings with the biological parents or eventual permanent placement creating collaborative parenting situations which enhances the success of reunification and improves foster caregivers job satisfaction (Cowen & Reed, 2002).

NTF also creates a team based culture. Support groups and social supports are important for maintaining connections, assisting with life style changes and preventing drift in service practice (Kramer and Houston, 1999). Social support of foster parents is linked to greater satisfaction, retention and improved child behavior (Denby, Rindfleisch, and Bean, 1999; Fisher, Gibbs Sinclair and Wilson, 2000). Support provided by caseworkers is linked to greater foster parent satisfaction and retention (Rodger, Cummings & Leschied, 2006). Open positive supportive relationships with the social worker increases satisfaction and retention of foster parents (Denby et al., 1999). Good teamwork, communication and confidence in relation to both the agency and its professional increases care giver satisfaction (Rodger et al, 2006).

Based on these recommendations the above changes to the model were made and the revised NTF program was implemented in several counties in Florida and then in four counties in Georgia.

Summary of Evaluation Findings for Initial Study. The 68 children who entered the program were between 4 months and 17 years of age with a median age of 5.7 years. Forty-four percent were female and fifty-six percent were male. Sixty-three percent were White, eighteen percent Multi/Bi-racial, ten percent Hispanic, seven percent African American and two percent Asian. Thirty-four children exited from the program during the first three years of the program.

The initial assessment examined the outcomes for these sixty children and reported high rates of stability as documented that 82% of the children were only in one placement before moving to a permanent home and that 54% were placed within 25 miles of their family. The study found positive results for permanency with 94% of the children being reunified or placed in a permanent placement within 12 months and 53% of the children over seven had increased knowledge, coping skills and strategies for managing personal problems. The evaluation reported that 99% of the children had no verifiable maltreatment while in services and 92% had none for the year after services ended. The study found that all children had timely immunizations, 75% over the age of four had improved self esteem, 89% made progress toward developmental and social milestones and 79% improved their academic performance (Ortega, 2003). This evaluation also reported very high levels of satisfaction with the services by youth, biological families and caregivers.

The study was done as part of a program evaluation effort for multiple projects funded by the Ounce of Prevention Fund and necessarily focused on program implementation and short term outcomes. The first goal of the current paper was to do a retrospective comparison evaluation of the results of this project compared to other foster care programs in Volusia County at the same time. The Florida Department of Children Youth and Families (DCYF) maintains public data on programs provided and funded by the state. The data system for children in foster care has evolved and changed since the initial NTF program was implemented and evaluated but historical data was obtained through the DCYF database that allowed a comparison of two of the primary outcomes of the project with other programs offered for children and youth in foster care at the time. These two outcomes were abuse during and after foster care placement and time to a permanent placement. These comparisons are the basis of the additional information added to the previous evaluations as part of study one.

Method for Study One

Project Description and Location

Neighbor To Family (NTF) began serving children in Flagler and Volusia Counties Florida in December 1998. The Volusia County site was chosen for evaluation, as the most mature site with the most children receiving services. An assessment was completed in October 2001 that determined the site was established enough for both summative and formative evaluation. The initial formative and summative evaluations were conducted from November 2001 through February 2002 on program data from December 1998 through December 2001. The follow-up evaluation was completed with state child welfare data gathered in December 2009.

Research Design

The initial evaluation (Ortega, 2003) used a mixed methodology of quantitative and qualitative methods. The evaluation combined quantitative data collected on the participants, foster care givers, staff and quality assurance measure through an electronic data collection system. In addition, the evaluator conducted interviews, focus groups, observations and file reviews to collect additional quantitative and qualitative data. The evaluation assessed the fidelity of program implementation and the impact on the children served through the intervention. The evaluation focused on the logic model and related goals and objectives set for the program.

The follow-up evaluation used data from DCYF to compare the results for the children served by NTF with children served through other four other foster care programs in Volusia County. The data that was available for comparison was of the amount of abuse and neglect during and after care and the type of permanent placements and length of time to placement. These were the only measures from the original evaluation that allowed adequate controls for comparison.

Participants

For the follow-up study there were five groups of children. Three of the groups began in diversion programs and two went directly into foster care. The diversion and family support groups were 152 children who received prevention and diversion services through the Home Builders (HB) program, 183 children who received Intensive Crisis Counseling and 2929 children who were in DCYF protective services but remained with their families at the beginning

of the study. The two groups in foster care were the 68 children receiving NTF services and 783 children placed into traditional foster care. Selection criteria would suggest that the abuse and neglect concerns for the three groups of children who received preventative programs should have been less than the NTF and traditional foster care group. The children selected for inclusion into NTF were based on availability of NTF slots and should be comparable to the other children placed in foster care. Data was gathered from the DCF data files on the five groups of children. It was not possible to retrieve data on individual children in this retrospective service analysis.

Study Measures

The first two measures were obtained on each of the five groups of children. These were the number of confirmed findings of abuse and neglect during the time the children were in services and the number of findings of abuse and neglect in the year after services ended. The final two measures looked at permanent placement for the two groups of children in foster care. The first measure looked at the permanent placement within four years for the two groups. This data was gathered as percentage of each group that had been reunified with their parents, adopted or placed into guardianship with relatives, adopted by non family members or not placed in a permanent placement within four years. The second part of this data examined the length of time to permanent placement for the two groups. The data was recorded by group and is part of the public record for child welfare services in Volusia County.

Results for Study One

The first comparison looked at the safety of the children in the five different programs as measured by confirmed cases of abuse or neglect. The measure was the percentage of children who had no confirmed abuse or neglect. Figure three shows the results of these two measures. The chart on the left shows the percentage of children free of abuse during services. In the time that children were receiving the three preventative protective custody services 2.7 to 6.9% of the children experienced confirmed abuse. For children in foster care the percentage was 8.4%. Children in NTF were safe from abuse 98.5% of the time. This is statistically significant at the .05 level compared to foster care and at the .10 level for the preventative programs.

The chart on the right side of figure three shows the level of confirmed abuse for the 12 months following the end of services. 15.7 to 19.1% of the children in the three prevention programs experienced confirmed abuse in the year following services compared to 5.3 and 5.6% of the children who had been in NTF or traditional foster care. This is statistically significant at the .05 level compared to three preventative programs and not significantly different than for children in foster care.

The five groups are: Family Builders (FB), Intensive Crisis Counseling Program (ICCP), Protective Services (PS), traditional Foster Care (FC), and Neighbor To Family (NTF).

Safety During and After Services

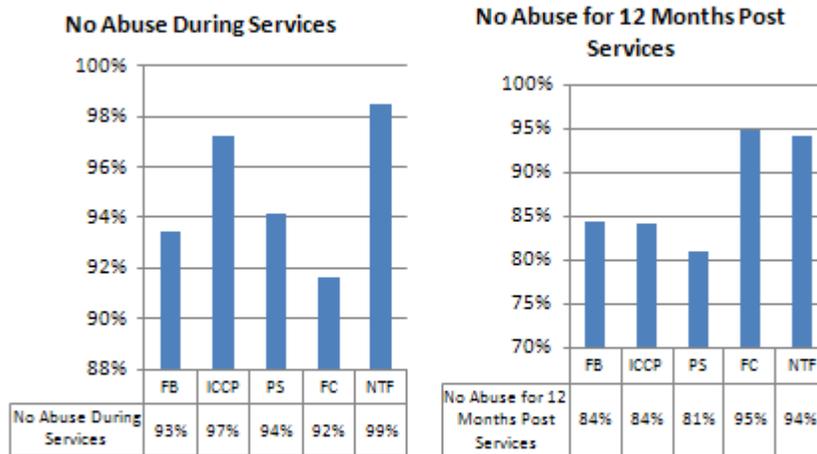


Figure Three shows a comparison of the number of confirmed abuse and neglect findings during and after the evaluation period. The figure on the right shows the percentage of children free from abuse during services. The chart on the right shows the percentage of children free from abuse for the 12 months following services. The data is gathered from the Florida DCYF database.

The second analysis compared permanency outcomes for children in traditional foster care (FC) to children receiving NTF services. The graph on the left side of Figure four shows a comparison of the permanency outcomes for the two groups. Permanency was categorized into four outcomes: reunified with parents, adopted or guardianship with a relative, adopted by a non relative or not placed in a permanent placement within the four year follow-up period. This comparison finds no significant differences between the two groups in the percentage of reunification (35.2% for FC and 32.4% for NTF). On the other hand, a much higher percentage of children in the NTF program were placed with relatives (14.4 to 32.4%) and more youth found other adoptive homes (27.9 to 35.3%). The increase in kinship placements is significant at the .05 level and there is an increase in non relative adoptions which is not significant. Finally 22.4% of the children in traditional foster care did not find a permanent placement during the four years while all children receiving NTF did find a permanent placement. This is significant at the .05 level.

The permanency analysis also examine the length of time it took for the children to achieve their permanent placement. The chart on the right side of Figure four shows a comparison of the amount of time to reunification and the amount of time to adoption for the NTF and FC groups. The data shows that the average time to reunification was less than half for the NTF group to reunification (271 to 557 days) which is significant at the .05 level. The data also shows that the time to adoption was over 140 days quicker for the NTF group (722 days to 869 days) which is significant at the .10 level.

Permanency

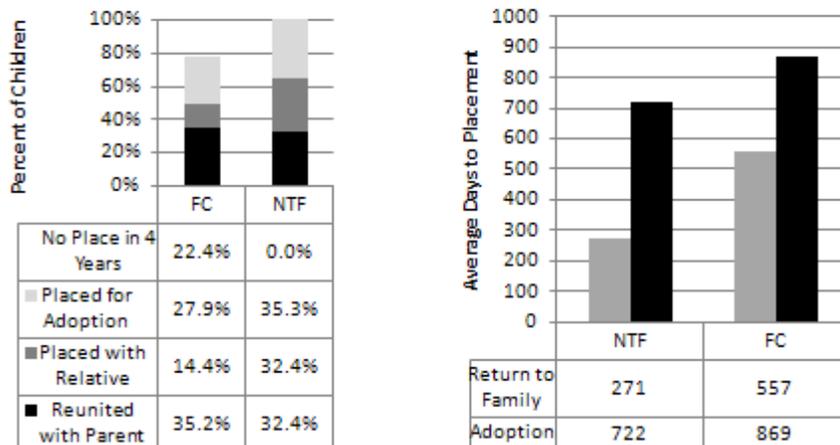


Figure Four shows a comparison of the permanent placements for the children placed into Neighbor To Family (NTF) foster care or traditional Foster Care (FC). The chart on the left shows the percentage of children reunified with their parents, placed with a relative, adopted by a non relative or not placed in the four year evaluation period. The chart on the right shows the average amount of time for placement with family members or non family adoptions for the two groups.

Method for Study Two

Following the Florida study the NTF model was refined according to the recommendations described in the previous study. Staff received the additional training and support, they were involved more directly in the whole process and began providing more directed outreach to help families and other relatives prepare for children's return. NTF services were established in four counties in central Georgia and 417 children entered NTF services from July 1, 2005 through June 30, 2006. A program evaluation was completed on this program that addressed some of the major outcomes and fidelity of the process (Vonk, 2007). This evaluation looked at the outcomes for the children and families during the time they were in services and found excellent impact on safety, reunification, permanency, placing the children close to their biological parents, placing children with their siblings and stability of placement (Vonk, 2007). Unfortunately the evaluation was not able to provide any comparisons to a control group so the relative impact of the outcomes was not known. The evaluation did however, monitor the fidelity of the process to the new NTF model and found that caregivers were given significantly more support, were more directly involved in the overall team process, received more than twice as much training, that their links to biological parents were increased and NTF arranged for two thirds of the children to have services for at least one of their birth parents (Vonk, 2007). In January 2010 additional data was gathered on these 417 children and on a comparison group of 417 children who were served in the traditional foster care system during the same time period. The groups were matched on their home county, sex, age, level of care, and sibling group size. This data provided a longitudinal comparison of NTF services to traditional foster care services in these four Georgia Counties.

Dates and Location

This study studied 834 children who were in the foster care system in four counties of Georgia from July 1, 2005 through June 30, 2006. 417 of these children received traditional child welfare foster care services. 417 of these children received foster care services through Neighbor To Family.

Participants

This study studied 834 children who were in the foster care system in four counties of Georgia from July 1, 2005 through June 30, 2006. These children were from DeKalb, Clayton, Gwinnett, and Fulton Counties. Most of the children were in DeKalb and Fulton counties because the NTF programs started there prior to the programs in the other two counties. 417 of these children received traditional child welfare foster care services. 417 of these children received foster care services through Neighbor To Family. The children were referred to NTF based on openings in the program. The children in the control group were selected by matching them in pairs based on their county of origin, age, sex, level of care and sibling group size. Data was gathered through the Georgia Child Welfare Data system on the 834 children from July 1, 2005 through December 31, 2009. The participants in the two groups are presented in Table Five.

Comparison Groups

Category	Subcategory	NTF Children	Comparison
Total	# Children	417	417
County	Cleyton	32	32
	Dekalb	166	166
	Fulton	179	179
	Gwinnett	40	40
Sex	Male	204	199
	Female	213	216
Age	Average	9.0 years	9.6 years
	0-5	29.0%	28.1%
	6-10	34.1%	27.3%
	11-15	24.9%	35.3%
	>16	12.0%	9.4%
Level	Average	2.6	2.46
	1	17%	14%
	2	6%	26%
	3	77%	60%
Sibling	Average	3.17	3.16

Table Five shows a comparison of the two groups of children compared for the Georgia study. The column labeled NTF children shows the number and average for this group of 417 children for the categories. The column labeled comparison children show a group of children matched by geographic location, time period, level of care and siblings.

Treatment Condition

Neighbor To Family has several significant differences from traditional child welfare foster care. First the NTF caregivers are full time employees of the agency with health insurance and benefits while the traditional foster parents are paid on a daily basis for children served. Second, the NTF caregivers receive a minimum of 50 hours of training in addition to the training required for foster care licensure. Third, NTF caregivers receive regular group supervision and training over the minimum training. Fourth, NTF caregivers are full partners in the process of developing and implementing the care plan. For birth parents, NTF emphasizes participation in planning and caring for their own children. Toward that end, NTF caregivers engage in co-parenting with biological parents or when court ordered with other relatives or future adoptive parents. In addition, over two thirds of the children in foster care have at least one biological parent who receives services through the NTF program.

Comparison Measures

Data was gathered for each of the 834 children on a series of measures that reflect safety, stability, placement, permanency and cost. The data was gathered from the Georgia DFCS database and included a coded unique identifier for each child, the county in which they were placed, the county or origin, their date of birth, gender, the date they were removed from their home, the date of permanent placement (or discharge), the placement at discharge, the months in care, the number of placements while in care, the types of placements and number of days in

each, the number of allegations and substantiated abuse allegations while in care, the number of allegations and substantiated abuse for the six months after discharge, whether they were placed with their siblings and whether they returned to custody during the evaluation period.

Results for Study Two

Stability

The first area of assessment was stability. Stability was measured through three measures. The first was whether the children were placed close to their home communities and family of origin. Some of the trauma associated with placement in foster care is being removed from the child’s friends, school, community and church. To reduce this trauma one of the goals of NTF is to locate the child as close to their biological home as possible. The graph on the left side of Figure six shows a comparison of the placement of the two groups. Fewer than 15% of the children in the traditional foster care (FC) group were placed in their home counties while over 73% of the NTF group was placed in their home county. The second measure of stability was placement with siblings. Almost all of the NTF children (98.6%) were placed in a home with some of their siblings compared to only 50.9% of the FC group. In addition 67.9% of the NTF children were placed with all of their siblings compared to 22.2% of the FC group. Each of these measures of stability is significant at the .01 level.

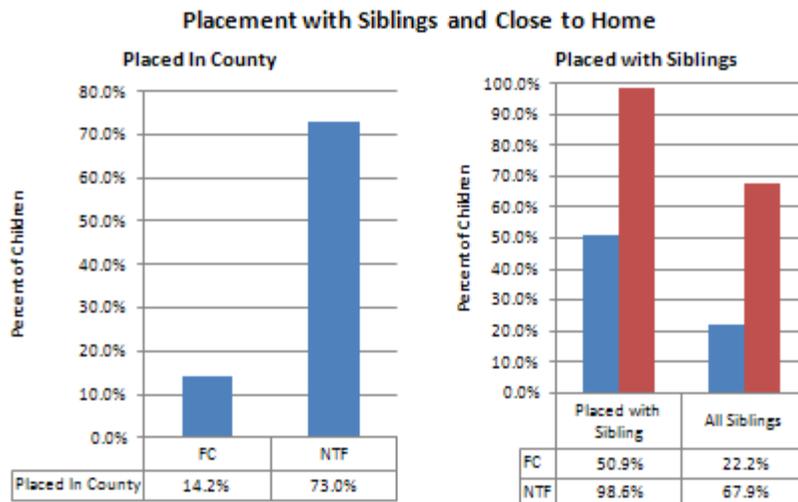


Figure Six shows a comparison of the percentage of each group that were placed in their home county and a comparison of the percentage who were placed with any and all of their siblings. The graph on the left shows the percentage of children placed in their home counties. The graph on the right shows the percentage of children placed with some and all of their siblings.

The third measure of stability was the number of placements the child had while they were in care. Each time that a child moves from one foster care placement to a second placement or to another level of care is another form of trauma for the child. One of the goals is for the child to only be in one placement and then to be reunified with their family or move to another permanent home. The data in the left side of figure seven shows that the 417 children in the NTF program averaged 0.22 moves per child compared to 0.59 moves for the FC group. Thus the

NTF children were moved less than half as often as the FC group. The chart on the right side of Figure Seven shows that 77.9% of the children in NTF care were only placed in one foster placement prior to being reunified with their parents or moving to another permanent placement compared to 69.3% of the FC group.

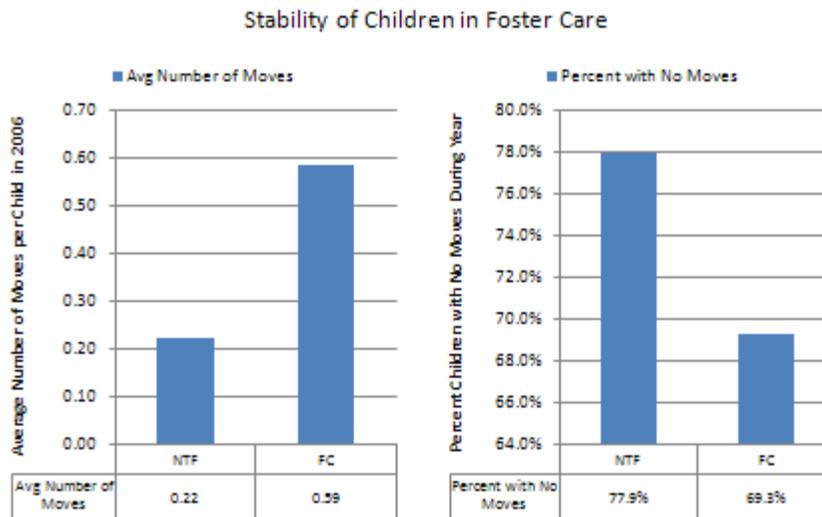


Figure Seven shows two comparisons of the stability of children receiving NTF and traditional foster care services. The graph on the left shows a comparison of the average number of moves per child during the year of the study. The graph on the right shows the percent of children who had no moves except to their permanent placement during the year.

Safety

The second area of assessment was safety of the children. For this study safety is defined in terms of the number of confirmed allegations of abuse or neglect. All of the children in both groups had a confirmed incident of abuse or neglect in the year prior to placement in foster care. Figure eight shows the results of this comparison. The columns on the left side of the figure show the percentage of children who had a confirmed report of abuse or neglect during the 18 months of the comparison study. During the time they were in care 2.4% of the children receiving NTF services had confirmed abuse and neglect incidents compared to 4.9% of the traditional foster care group.

The columns on the right side of Figure eight show the percentage of children in the two groups with confirmed incidents of abuse or neglect in the six months after the end of services (placement). The comparison shows that 1.6% of the children who received NTF services had an incident of abuse or neglect during this period compared to 2.6% of the children who received traditional foster care services. The differences in both of these safety measures are significant at the .01 level.



Figure Eight shows a comparison of the number of confirmed abuse and neglect findings for the two groups. The columns on the left show a comparison for the first twelve months in services for the two groups. The columns on the right show the number of confirmed abuse claims for the two groups in the six months after leaving care.

Permanency

The third area of evaluation was permanency which was examined through two measures. The first measure compared the number of children in each group who had been transitioned to a permanent placement within 18 months. Figure Nine shows this comparison for the two groups. 27.6% of the children in traditional foster care were placed in a permanent placement within 18 months compared to 73.2% of the children in the NTF group. Thus almost three times as many of the children receiving NTF services reached permanency in 18 months which is significant at the .005 level.

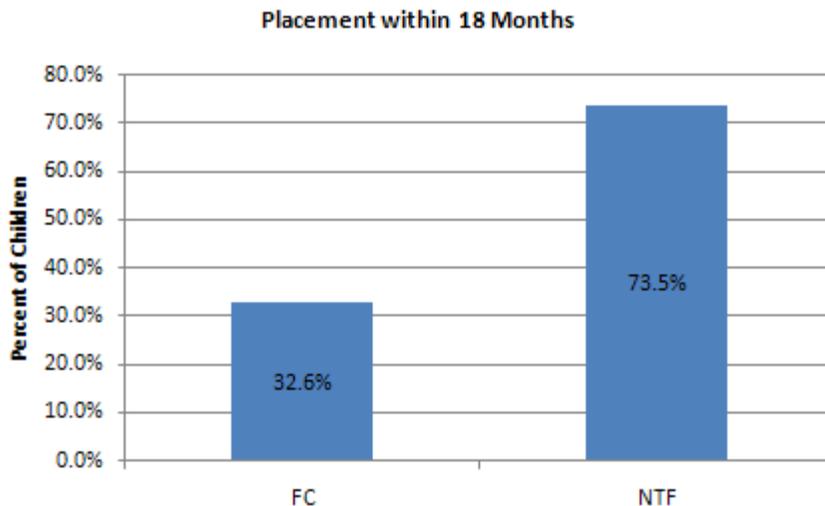


Figure Nine shows a comparison of the percent of children in the two groups who were placed in a permanent home by the end of the eighteen month evaluation period.

The second analysis of permanency looked at the type of permanent placement the two groups achieved. Figure Ten shows that 39.0% of the NTF group was reunified with their parents compared to 10.3% of the traditional foster care group. 24.2% of the NTF group was adopted by relatives compared to 8.1% of the FC group. 8.1% of the NTF group was adopted by non relatives compared to 6.7% of the FC group and 1.1% of the youth in NTF services aged out of the system without a permanent placement compared to 3.8% of the FC group.

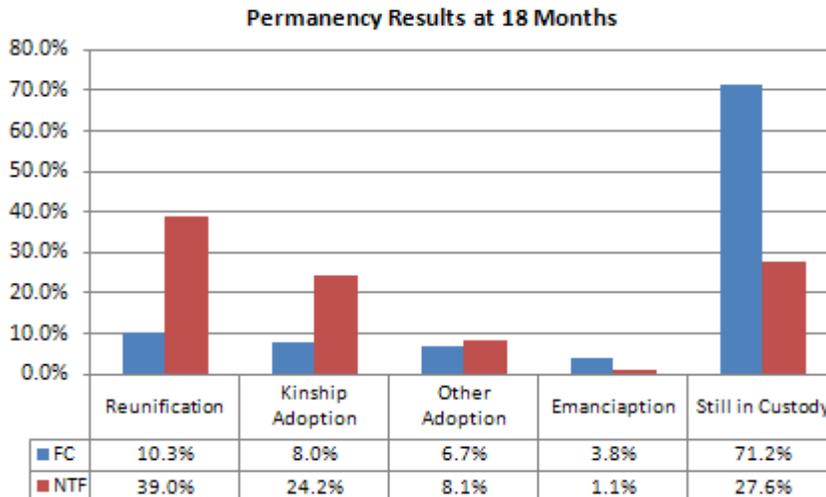


Figure Ten shows the setting children were in at the end of the 18 months of data collection of this study.

Cost of Services

The final comparison of the two groups was on the cost of services. The savings might be viewed in multiple ways and the two most prominent are actual savings during services and predictive savings based on the improved outcomes for the youth and families. Many predictive suggest that the youth who had more stable foster care placements, remained attached to siblings, were subjected to less abuse during and after treatment and who reached permanent placements sooner will have better outcomes as adults which can be turned into predictive cost benefits for society. This paper does not report these predictive comparisons focuses on very conservative comparison of immediate costs.

The data reported focused on child welfare services provided from July 1, 2005 through December 30, 2009. The data reported the number of days in placement and the type of placement. Program costs for NTF were calculated at the NTF rate for the days the children and youth were served. The costs for the comparison group were calculated at the base rates for foster care, specialty foster care which included a daily rate payment to the foster parent and a monthly fixed payment to the specialty foster care agency, and the group home daily rate. The rates all of these services were reduced during the evaluation period due to financial constraints on the Georgia DFCS and these reductions were calculated into the cost. The rates for higher level of placement for children in the comparison group were all calculated at the group home rate even though there were multiple days in higher and thus more expensive levels of care. While in services the cost of case work support was assumed to be the same for the two groups, although the additional case management support provided by NTF lessened demands on the

case workers. The shorter stay in care for the NTF group meant that youth were in care for significantly shorter periods of time and the additional cost of case work staff for these days was calculated at \$3.50 per day for the additional days youth were in care.

This comparison significantly underestimates the actual costs of the comparison group for several reasons. First, NTF provides a wide range of additional services for youth in their care which might be purchased in other ways for children in other programs. These costs were not obtainable so the cost comparisons only reflect the direct cost to the state of Georgia for residential placement and case work. Second many of the children in the comparison group received residential treatment and psychiatric inpatient care which is substantially more expensive than the group home rate. The data did not allow for specification of the number of days in each of these types of placements and thus the comparison is done at the lower group home cost. In addition more than three times as many children remained in care at the end of the study and these future costs would increase the total cost for the comparison group for the residential and case work costs. This means that the real savings of NTF services was larger than these very conservative cost figures.

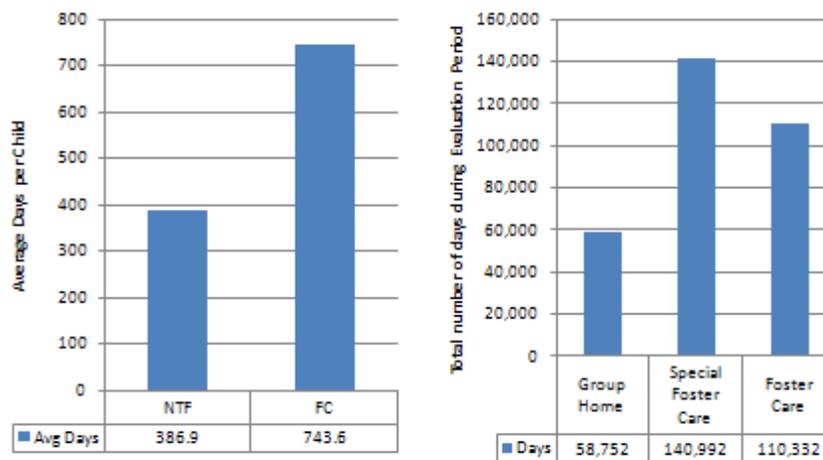


Figure Eleven shows the number of days that children were in care during the evaluation period. The graph on the left shows the average number of days for the 417 children in the NTF program compared to the average number of days the comparison group was in care. All of the NTF children were in the sibling foster care program. The graph on the right shows the total number of days the 417 children in the comparison group were in foster care, specialized foster care and group home or more restrictive placements.

Figure Eleven shows the comparison of the number of days in placement for the two groups. The 417 children in the NTF group averaged 386.9 days in care while the comparison group averaged 743.6 days. The graph on the left side of figure eleven shows this comparison. The graph on the right side of the figure shows the total number of days the 417 children in the comparison group spent in the different levels of care. These groups were matched on the level of care at the time of assignment and the level of intensity of need was higher for these 834 children than the average population on the Georgia DCFS system.

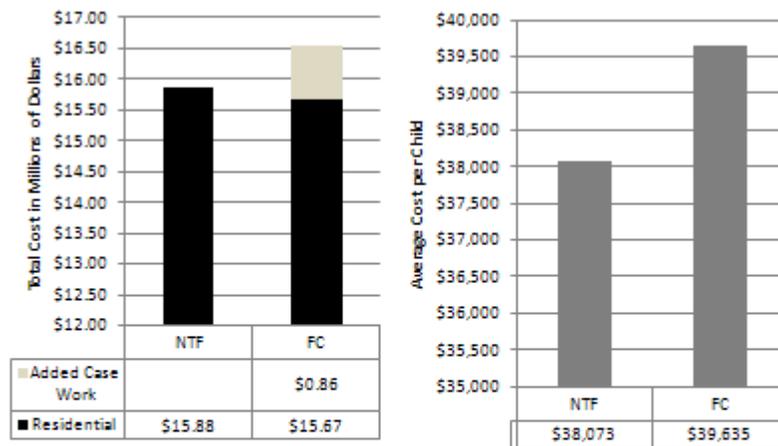


Figure Twelve shows the comparison of residential/program costs and the additional case work costs of having a youth in care for a longer period of time. The base residential cost is calculated at the NTF rate and for the comparison group at the daily rate for the level of service. The additional case work amount is calculated at \$3.50 per day for each additional day a youth was in custody. The graph on the left shows the total of these costs for the 417 children in each group. The graph on the right shows the average cost per child.

Figure Twelve shows the results of the cost comparison. The graph on the left side of the figure shows the total cost of program (residential and additional services for youth in the NTF program) and residential (comparison group) plus the cost for the additional case work services for having children in the program for significantly longer periods of time. The overall cost savings using these very conservative cost estimates was \$615,330 for the NTF group. The graph on the right side of figure shows the average cost per child over the time of the evaluation period.

Overall the children who received NTF services had very similar characteristics to the matched group at intake, which strengthens the confidence that the analysis show the real impact of NTF services compared to more traditional foster care services. The fidelity evaluation done by Vonk (2007) provides confidence that the NTF model was provided with reasonable fidelity so the differences should be largely due to the differences in the models. The stability data demonstrated that the strategy of hiring professional caregivers from the communities with the highest need for foster care was able to keep significantly more of the children in their home county and thus closer to friends, family, local schools and in connection with their home communities. The strategy of hiring professional caregivers who were hired to provide services for sibling groups resulted in a significantly higher number of siblings being placed together and more siblings being placed with all of their siblings which has been shown to reduce trauma and social, emotional, and behavior challenges as children and many health and behavioral health advantages as adults. The combination of professional caregivers, less culture difference in caregivers and sibling placements increases safety and stability on all measures.

The combination of well supported professional caregivers who are tasked to co-parent with biological parents or others designated by child welfare as prospective permanent caretakers has been shown to significantly decrease the time children are in foster care uniting them into permanent home placements.

Discussion

The primary goal and social mandate of child welfare systems is to protect children from harm (abuse and neglect). The adverse childhood experiences (Edwards, Anda, Dube, Dong, Chapman and Felitti, 2005) study shows that trauma has long lasting effects on health and well-being. Protecting children from ongoing abuse and neglect is one necessary action to reduce this trauma, but when the action to stop abuse and neglect results in another series of traumas for the child the results are steadily increasing bad outcomes. A more child-friendly system addresses these potential additional traumatic events and simultaneously builds protective factors that can reduce the impact of the trauma (Langford, 2002).

Neighbor To Family has carefully addressed these issues and developed a program that promotes many of the protective factors while significantly reducing the additional trauma imposed by placement in foster care. The results are placements closer to friends and communities, placements with siblings, more stability in placement and better safety during and faster treatment. In addition, children are reunited with biological families or relatives much more often and in much shorter periods of time. More than 3 times as many children are placed in permanent homes within 18 months. NTF offers a humane and professional alternative to traditional foster care that works for children, families and ultimately society as a whole. Cost comparisons show that the service as an immediate cost savings while producing these much better outcomes for children and families.

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