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SOCIAL WORKERS PERSPECTIVES ON THE CAUSES OF PLACEMENT INSTABILITY AMONG ADOLESCENTS

Adella Jimenez

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Social Workers Perspectives on the Causes of Placement Instability Among Adolescents

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Adella Ruth Jimenez

June 2019
ABSTRACT

Various levels of research over the past three decades have concluded that children are harmed by constant changes to where they reside when they are removed from the care of their parents. Regardless of that, minimal research has been conducted to investigate this problem from the perspective of the social worker. This study explores the problem of placement instability among adolescent populations from the perspective of foster family agency social workers in Riverside County, California. Interviews with foster family agency social workers were conducted using a digital voice-recording device. The audio files were transcribed to text and thematically analyzed for relevant commonalities among participants. The data provided more detailed information regarding what the social workers believed to be the factors involved in placement instability. Four main categories were observed and explored in detail; trauma, interagency communication, mental health access and foster parent education were consistent themes of the data set. This research provides the groundwork for further research from people who work in a central role that is pivotal to lessening the instances of placement instability.
ACKNOWLEDGEMENTS

The CSUSB Staff

Thank you for always making me feel as if my time, effort and presence are valued, it mattered to me more than you can image. I genuinely feel so grateful for the way the School of Social Work staff made me feel at home and welcomed when I just wanted to run back to what is comfortable. Thank you.

My Family

Thank you for missing me as much as I missed you, thank you for your pride and support in me. I was only able to accomplish this with your love. You have inspired me every day to keep working
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CHAPTER ONE

PROBLEM STATEMENT

Working Definitions

When a child is removed from their home by a child welfare agency it is never under positive circumstances. Finding placement stability after that initial removal has become the number one goal of child welfare agencies around the nation and the world. Social worker’s insight into this realm is invaluable to developing informed interventions for the practice of social work. In order to understand placement instability, we must grasp the working definition of a placement as well as what constitutes placement instability. When a child is removed from his or her home, it is counted as an official placement change by most child welfare agencies. Yet when studying placement instability, these incidences were not always added to the research data output. In some cases, placement change data was also excluded if it involved a child being placed back with birth parents, even if the placement turned out to be temporary (Cross, 2013). For the purposes of this research we will be defining instability, also often described as, ‘foster care drift’, as three or more placement changes throughout the time a child has been a dependent of a child welfare agency. Achieving permanency will be defined as: any placement with biological or non-biological families that lasts for the duration of the time the dependent is a minor. The focus of this research will be specific to adolescent populations within the age range of
11 to 15 years old. This study will also focus on social workers specific to the foster family agency organizational realm.

Current Policies

The reason for the shared goal of permanency is that research on the impact of placement instability suggests negative impacts on almost all developmental categories. Statistical outcomes suggest lower educational, mental and physical health outcomes. The Adoption Assistance and Child Welfare Act (AACWA) of 1980 (GovTrak, 2018) has made it a priority of child welfare agencies to safely keep children within their birth families when this is a viable option. Once efforts to maintain a safe home environment have been exhausted a child will be removed and placed in out of home care. Out of home care placements can still include a biologically related caregiver for the child. There are circumstances when the child welfare agency cannot find a relative that fits the legal requirements of a foster care provider. The law states that the agency must exhaust all possible placement options within a child's biological family before they choose an outside care provider.

Foster family agencies in California work in conjunction with state and county run organizations to fulfill placement needs of dependent children. Part of those placement needs includes supporting and training foster parents for the purposes of certification. Foster family agencies also provide assistance with placement based on the level of care a child needs. There are approximately 500,000 children currently in foster care in the United States. (ACF.gov, 2018)
There has been a drop in the number of available foster parents/foster homes that has been partly blamed for the extended amount of time some children wait for a permanent placement. Kinship (familial relationship) placements have seen a rise in numbers, according to nationwide studies (ACF.gov).

Stress is a natural response to placement instability; we know that raised cortisol levels can be detrimental to a child's well-being (Fisher, 2015). Infants and teenagers are the two most likely groups to experience placement instability (Chambers 2016). Even infants who were mistakenly assumed the least impacted by placement instability have been proven to be particularly vulnerable. It is now written into our nation's laws that social workers follow specific protocols to acquire and maintain placement permanency for every child removed from their homes by child welfare agencies (Watkins, 2013). Some research output shows a positive correlation between negative behaviors and placement instability within the teenage population of dependents. These negative behaviors can contribute to a foster parent asking for the removal of the dependent from their home, which can contribute to a cycle of negative behavior and consequential placement changes. The research points to trend in higher rates of four or more moves among adolescents aged 14 and up, as well as higher rates in females ages 12-15 years old (Chambers 2016).
Purpose of the Study

The purpose of this study is to explore the perspective of social workers regarding the factors of placement instability among adolescent populations. The county of Riverside California DPSS is already taking measures to lessen placement instability among adolescent dependents. The agency rates below the average for placement moves on a national scale in every demographic except those dependents who are 11 to 15 years old (BCT Consulting, Inc., 2015). Riverside county DPSS participates in a self-assessment process that helps them to evaluate and target areas of improvement. The most recent assessment showed three areas of improvement: Increase safe and timely reunification, increase placement stability and reduce re-entry. This research will help target the specific set of goals outlined by the assessment, while exploring how social workers perceive the problem.

Significance of the Study for Social Work Practice

Understanding the various reasons for placement instability is the most effective means to formulating prevention and intervention of it. It is imperative to explore the topic of placement instability from the perspective of all parties involved. This issue is pertinent to social workers in several ways: developing our profession based on peer reviewed research and the prevention of harm to our clients. Another vested interest is in keeping the professional level in line with the newest legal standards that guide our practice. Clients have a vested interest in
the output of this research because it can improve the care they receive from child welfare agencies. That care can result in much better outcomes in their adult lives when they transition out of care as well. Federal, local and state institutions can also benefit from a better-implemented child welfare system because of long term funding. Research on child welfare efficiency points to a cost benefit related to keeping a child with family members or reunifying in a safe manner with the birth family (BCT Consulting, Inc., 2015). Limiting trauma also gives a child a better opportunity to one day be a productive, contributing member of society. Potential foster or adoptive families can be positively impacted by this research data as well. They can have a positive relationship with the agencies they are required to interact with on a consistent basis. Initial placements can be improved as an effort to prevent a child being placed in home that is incompatible with their needs. There is already an effort underway to better support foster families, especially those who are caring for children with special needs. Educational and financial support from the state has had a positive impact on foster family placements. I have a vested interest in learning more about placement instability causes and prevention because I can use this information to be a more effective professional. I do not have any preconceived notions about what the results will be at the end of this research. I hope to use the results to improve outcomes for children throughout my future career in the realm of child welfare.
When contemplating the complex situation of a child’s removal we can observe that the social worker is the only person in the equation that has contact with all involved parties. The social worker has communication with the dependent, placement representative, legal system, law enforcement, birth parents etc. Despite this pivotal position in the child welfare system, the social workers view on placement changes is not always included in the record of why a placement change was necessary. What is the social workers perspective on the prevalence and causes of placement instability among adolescent populations?
Chapter two will present a review of literature that is relevant to placement instability on both local and national levels. Topics addressed will be the factors of placement instability, theories guiding both past and present research. The specific topic of social workers perspectives on placement instability will be explored in more specific detail.

Factors Involved in Placement Instability

Generally, the factors responsible for a placement change can be broken down into 5 major categories: Caregiver related reasons, behavior related reasons, unexpected life changes for the caregiver, compliance with child welfare, state or federal policies and reunification with the family of origin. There are some similarities across several major studies in regard to the factors for placement changes among adolescents. What can easily be assessed is that there are no simple answers and all of the explanations for placement moves are tied into several aspects of the minor’s situation. For example, mental health issues related to trauma can be a reason for a minor to act out; the recorded issue may be the negative behaviors exhibited and reported by the caregiver. Foster family agencies and government run child welfare agencies are responsible for facilitating these placements. Both types of organizations also
take preventative measures within families to keep the changes minimal. This explains one part of the move, but it does not give us a fuller picture of the environmental factors that could have also been influential. Newton noted that it is difficult to distinguish when a child is acting out due to placement instability and when they experience instability due to behavior problems. That minor could have experienced a lack of treatment due to resource issues, such as insurance coverage limitations. The caregiver could be uneducated on how to recognize and respond to issues such as, trauma induced PTSD. In order to get a wider scope on the issue more research needs to be conducted from multiple perspectives. Delinquency within the legal system also causes its own set of placement issues. Group homes and shelters pose a risk for minors who are facing emotional turmoil already. There is a much higher risk of becoming involved in the criminal legal system if they are placed in a group home compared to placement with a foster family. Minors who have experienced maltreatment are 47% more likely to be involved in legal troubles; arrests are not consistently recorded as placement moves (Stuewig & McCloskey, 2005, p. 324).

Placement Instability has proven to have a negative impact on dependent populations, yet placement changes in general should not be considered the only metric of effective child welfare policies. Some moves are due to an improvement in the child’s behavior due to effective therapeutic practices. Adolescents are the age group most likely to be in institutional settings, such as group homes. When an adolescent shows an improvement in behavior they may require less
supervision or less intensive in house therapy sessions. Given these situations, the scope of literature reviewed for this project included moves that were related specifically to instability.

Limitations of Current Research

Aside from the lack of input from social workers on factors related to placement instability there is also some issues with what is recorded as a placement change. Half of the studies reviewed for this research excluded movements that were planned. An example of a planned movement would be if a child is removed in the middle of the night and must stay at a child welfare agency office until a foster or suitable relative could be found. Until that child was placed they would not consider the move from the care of a social worker on the night shift to the care of an aunt or uncle to be a change in placement. Norgate (2016) noted that these incidences should be included when studying placement instability due to the possibility of these changes being traumatic, even if planned or short term in nature. Even these short changes can be traumatic because temporary caretakers often do not think to include the children in the information loop for fear that it could cause negative behaviors (Chambers, 2016). All placement changes should be considered in the studies on placement instability and especially on research regarding its impact and prevention. When interviewing several former foster youth Ward (2009) asked what the worst aspects of placement changes were for them. The answers were broken in two
categories of importance: the unexpectedness of the move and the lack of explanation for why the move was happening to them.

Social Workers Perspectives on Placement Instability

Most of the data collected on the reason for why a child’s placement was changed was done by a variety of methods that usually did not include asking the social worker one on one. Most of this research is collected via case reviews and occasionally surveys are implemented as well. There is very little research available on the social workers perspective of this issue. The reasons for this lack of methodology are probably related to feasibility issues. Interviewing is expensive and time consuming, the data lacks generalizability as well. Some of the data available does include placement movements made at the request of the social worker on the case at the time (Cross et al. 2013). In contrast to that methodology, some studies directly include reasons for placement movements provided by social workers. (Fisher et al. 2013).

The interviewee’s responses across several studies point to a variety of reasons for placement instability. The responses can be separated into three separate categories: movement by request of the worker or agency, the foster placement or the juvenile delinquency system. The reason a worker or agency would make the decision to change a placement include situations regarding reunification with original caretaker, a request made by the child, to reunite with siblings or finding a foster placement to be unsafe. There are also many reasons
a foster parent or parents would request a change such as: change in life circumstances, feeling unprepared to meet the needs of a special needs child, behavioral and or emotional difficulties with the child, limited resources or inability to accommodate the child’s basic needs. As mentioned previously, there is minimal data on the social workers perspective of this issue. When compared with the responses provided by other methods of collection a focus on broader, more structural problems can be observed in the workers responses. Where the research that is sourced from case files or foster families seemed to garner more individualized or specific answers, the social workers talked about structural flaws that lead to placement instability (Pelton, 2015). The structural flaws noted were related to funding and time limitations as well a lack of trained workers and foster placements. Funding seemed to be a recurring theme. Most workers felt hiring and training more workers would decrease caseload, so cases would not be passed around as workers took vacation time or stress leave. Pelton noted that lack of funding lead to a lack of resources for foster families as well. Some workers noted that placement instability could be lessened if foster families were trained more thoroughly on how to deal with certain behaviors. In reviewing these responses, a macro perspective of the social workers outlook can be observed. They do not simply consider a placement change as the result of hard to deal with behavior, though that is part of it. They attribute the move to a lack of funding that leads to a lack of training instead.
Delving deeper into the social workers perspective via interviews in a local agency will be beneficial to understanding the problem on a smaller structural scale. This work will also help Riverside County to further develop the programs they have aimed at adolescent populations. Riverside County currently off

Theories Guiding Past Research

Some of the studies reviewed did not mention specific theories but they did note methodological frameworks that social workers felt would be of value in training new staff. These training models varied by country and even city. Some were different versions of, *The Signs of Safety Approach* by Turnell and Edwards (2016) which was developed in Australia’s Child Welfare system in the early 1990’s and adopted by agencies worldwide. From a scientific perspective, some studies focused on the effects of stress on the developing brain in order to measure how placement instability can cause adversity during development. Much of the research seemed to be aimed at helping child welfare agencies improve intervention effectiveness to minimize harm to dependents.

Newton (2016) attempted to understand the relationship between placement moves and negative behavior issues. The research showed a positive correlation between placement moves and negative behaviors but it was too difficult to discern which came first. Another group of researchers in California found that children in placements that included a biological relative were 30% less likely to experience a placement move (Webster, et al, 2000). This California
based research is significant because the state has the largest number of children who are in out of home placements in the United States. Webster (2000) defined placement instability as three or more moves throughout the time a child is in state care, 50% of children not placed in relative care were shown to experience instability in placement (Webster, et al, 2000).

Theories Guiding Conceptualization

There are two main theories guiding this research: Maslow's hierarchy of needs and Bowlby's Attachment Theory. Both theories can be used to help guide this research within a framework of understanding human development.

Maslow's psychological theory (White, 2015) presented a hierarchy of needs with the most urgent at the beginning of a person's prioritization. The first few levels must be satisfied before the person is motivated to tackle the next, though he did explain the needs do often overlap in the higher levels. The first two levels contain things like food, safety of resources, a place to live etc. the next levels deal with psychological needs such as belonging, love and accomplishments. The last levels deal with personal fulfillment of creative ideation and goals; this is what Maslow described as self-actualization.

This theory can be applied and observed throughout the time a child welfare agency is involved in a child's life. It is a fair assumption that the first set of the hierarchy needs was not met for some of these children, hence the removal. Not having a consistent safe place can prevent development to the
other phases that lead to self-actualization. Lack of food and safety are considered the most pressing and urgent requirements according to Maslow. The next step is safety and security, this level includes learning who to take shelter with when feeling anxious or scared and learning to set limits to ensure personal safety. Children who are constantly moved from placement to placement do not get to develop this safety net that is the threshold for the second tier. Not meeting the third tier of love and belonging can be detrimental for teens and older children. Maslow felt that this stage is where humans learn to trust and emotionally invest in his or her relationships. Again, this level of advancement is impaired within the child welfare system the more a child is moved and interacts with adults and peers on a temporary basis. (Tucker, 2007)

Bowlby’s attachment theory can be applied to the children within the care of child welfare agencies by exploring how the lack of attachment manifests in each stage of life. Bowlby’s original research was aimed at proving a child needed more than their physical needs met by a caregiver; he theorized the child needs an emotional attachment to thrive. Having multiple caregivers in an institutional setting is a difficult situation for an infant to be able to form any attachment. Childcare workers are warned off being overly affectionate and do not have the time to be as attentive as a single caregiver would be. Not forming proper attachment can manifest in the form of low self-esteem, low impulse control, inability to maintain healthy romantic relationships or friendships. These possible
outcomes from lack of attachment can be compared to the adversity foster children face as they become adults. (Ainsworth, 2015)

This work will expand on established knowledge. It will help fill in the information gap from the social workers perspective in an individualized approach. The interview techniques will provide an opportunity to acquire data from a centralized person in the child welfare equation. There are not many studies on the social workers perspective done in interview format.
CHAPTER THREE

METHODS

Introduction

This section will be a description of the methods used for this study. Data collection, sampling and the study's design will be of particular importance. Information on how the data was analyzed after the gathering phase was completed will be included in this section. This chapter will also include the measures that were taken by this investigator to ensure the participants protection during the study and after it was completed.

Study Design

The purpose of this study is to explore social worker’s perspectives on placement instability among adolescents. More specifically this study aims to understand the outlook of social workers who work within the realm of foster family agencies.

This study used a qualitative design for the collection of data. This researcher used open ended questions during interviews. This method of collection allowed for a wider array of responses. Interviewees were able to answer in any manner they deemed appropriate without influence from pre-selected survey questions. In-person interviews also allowed the investigator to ask follow up questions or request clarification/expansion on a given response.
The problem of instability in child welfare organizations is known, however, the insight of social workers on it is not as well researched. Social workers have a unique perspective that requires detailed examination in order to build on established information. The recorded reason for a placement change usually comes from a foster representative or the child welfare agency, rarely is the social worker the source of this information.

There are 36 foster family agencies in Riverside County. This researcher interviewed 10 workers from different offices in the region. The justification for this sampling methodology was that each office has its own subculture. The explanation for these slight differences can be attributed to management style, peer worker cohesiveness, worker retention rates, etc. Targeting each location allowed for increased generalizability.

Due to the small sample size, this research did not produce results that are representative of the foster family agencies in Riverside County. Additionally, qualitative design has the limitation of being unable to check or verify participant’s responses. The design limits this researcher’s ability to validate results.

This research output was able to provide one small step in the direction of understanding social workers perspectives on placement instability among adolescent populations.
Sampling

The type of sampling used in this study was quota and convenience sampling. The investigator sought out a total of 10 social workers from different FFA locations within the Riverside County. Social workers that have worked with adolescents aged 11 to 15 were asked to participate. There was no other selection criteria, besides having worked with this adolescents specifically at some point in their careers. This researcher was able to acquire participants from three major regions of Riverside County extending west to Temecula, California to the easternmost part of Blythe, California. Some of these interviews were conducted via phone conversations, recorded with the use of a digital recorder. The participants who were interviewed via phone conversation were provided with an email containing the informed consent form as well as a debriefing statement.

Data Collection and Instruments

This study collected data via interviews that were structured to include unbiased, open ended questions. This investigator utilized an interview guide of 8 questions (See Appendix A). The interview questions were asked after this investigator went through some demographics questions with the participant. Demographic questions included: Age, ethnicity, gender, years employed as a social workers, and educational background. (See Appendix B)
This qualitative method was the most effective way to obtain responses that may not otherwise be secured. The existing data on placement instability is lacking quantity in regard to social workers input and opinions. Those opinions were gathered and expanded on more easily in an interview than in a survey format. The questions were not worded in a manner that would suggest a desire from this investigator for a specific answer. The wording of the questions was designed to minimize bias or influence over the social workers responses. The majority of the questions were aimed at exploring aspects of instability experienced by foster youth. The interview guide (Appendix A) was utilized throughout the interview. The guide was followed, but occasionally the need for clarification of an answer arose. Potentially, there could have been a problem of holding back any answers the worker thought their supervisors would not approve of. There was also the limitation of answering in a more socially acceptable manner when participants had to answer in person. This is a limitation this investigator attempted to mitigate by reinforcing the concept of confidentiality. Another possible limitation was that occasionally the social worker did not have enough time to do a thorough interview.

Procedures

This investigator utilized face to face interactions and telephonic contact with FFA social workers in order to recruit them to participate. This researcher also utilized her own network of contacts in local agencies, those contacts were
asked to recruit on this researchers behalf. An interview guide containing 8 questions was utilized by this researcher. These questions were asked after some demographics questions were completed with the participant. Demographic questions included: Age, ethnicity, gender, years employed as a social worker and educational background. Participants were given an informed consent form (See Appendix C) via email as a follow up to the phone call that solicited their participation. The informed consent allowed the potential participant to see information about the project which allowed them to make an informed choice to participate or not. The form contained the duration of their time needed to participate, what the research purpose is, what institution the research is associated with, etc. When the interview was completed participants were reminded that our conversation was confidential. The conversations were recorded and transcribed using a digital recording device. The participants were informed of a free raffle ticket entry for everyone who participates. One winner received a 25 dollar gift card for Starbucks coffee. The interviews took place at the office the social worker was working out of or they requested that we meet outside the office, three were completed by phone due to distance and time restrictions. Each interview lasted between 7 and 16 minutes. This time frame depended on the social workers ability or willingness to offer more detailed responses or allow follow up questions. After the interview was completed this investigator gave each participant a debriefing statement (See Appendix D)
Protection of Human Subjects

This investigator made protection of participants a priority throughout the study. Appropriate measures were taken to ensure the confidentiality of participants. It was made clear that participation was completely voluntary and could be rescinded at any time during the interview. Interviews were recorded and later transcribed, therefore participants were asked to sign an ‘X’ to represent their consent to these terms. (See Appendix A) Participants were also fully informed of why the study was being conducted and which institutions have access to the information now that it is completed. The investigator also informed them of the identity of the supervising professor on this research project. The numbers assigned to them correspond to a set of data collected during the interview process; this is another layer of protection against exposure of their identity. Participants were informed that their names were not be recorded by the investigator. Upon completion of the interviews the data was saved on a password protected computer and accessed only by this investigator. When the data was no longer needed it was destroyed as was any other data having to do with the interviews.

Data Analysis

The first tool used by this researcher was a project journal. This journal includes information on how participants were recruited, notes on interviews and the rules of the project. The raw data for this project consists of electronic audio
recordings of each interview. The raw data was transcribed verbatim by this researcher. The advantage of the researcher completing the transcription process was that interviewer was well versed with the data set. No identifying information was added to the transcripts or the audio recordings. Once the transcript was completed, the researcher reviewed it in order to start the process of analysis. Once categories were observed, codes were assigned to specific categories. All categories were added to the project journal kept by this researcher. This researcher obtained perspective from more experienced researchers in order to mitigate bias or inconsistencies in conclusions.

Summary

This chapter presented a detailed description of the methodology that was utilized for this research. This research used a qualitative design aimed at collecting data in order to build on previous knowledge the perspectives of social workers regarding placement instability. This investigator utilized both convenience and quota sampling. In person interviews were conducted with Riverside county FFA social workers from 10 different locations. The specific ways this investigator will protect participants was presented and explained in detail. Also explained was the way in which the data was analyzed.
CHAPTER FOUR

RESULTS

Introduction

During the data analysis process many interesting themes were observed. The factors of placement instability that emerged from this data set are varied and cover many different levels of interaction from micro to macro. In order to conceptualize the data in a more easily understood manner, these emergent factors will be referred to as instability factors. The demographic information will be explained followed by the factors of placement instability from the perspective of FFA social workers.

Analyses

Table 1 is a visual representation of the data set related to the participant's demographic responses. The participants ranged in age from 26 to 47 years of age. The participants were 90% female, this is not far from the national average reported by the Labor of Bureau statistics in 2015 that said men make up only 11% of the social workers in the nation (LabStat.gov, 2018). The range level of social work experience among participants was as little as 1 year and long as 17 years. While all participants were clinical social workers in an FFA agency, they had degrees from varying professions. The participants had different educational backgrounds. The majority of participants obtained an MSW
Degree, two of them obtained an MFT and the last participant had a Masters of Psychology.

Tables 2-5 have the factors of placement instability separated by the categories: “People”, “Specific Factors Related to People”, “Organizational Factors” and “Ideas. Table 6. is a visual representation of the themes that were most relevant. These themes were named repeatedly by individual participants, as well as named by the largest number of participants. The sub categories are listed under the larger four categories mentioned above.

Data Thematic Results

The research question posed in this work was what are social workers perspectives on placement instability among adolescent populations? The study was designed to explore a well-researched topic from the lesser-known perspective of the FFA social worker. Four main themes became apparent upon close examination of the data set. The first was that foster children’s trauma plays a major role in placement instability; the second was expressed as a lack of expedient and thorough interagency communication that can lead to an initial placement that is ill suited to both parties. Thirdly, there is a lack of mental health resources available to foster youth and their families during a crisis. Finally, workers described the impact foster parent education can have on placement instability.
Table 1. Demographics of Research Participants

<table>
<thead>
<tr>
<th>Content/Theme</th>
<th>Participant Response</th>
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<tr>
<td>Age:</td>
<td>34,26,35,37,39,33,41,43,45,47</td>
</tr>
<tr>
<td>Gender:</td>
<td>9 Female, 1 Male</td>
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<tr>
<td>Years as an FFA Social Worker:</td>
<td>8, 3, 1,1,14,7,4,3, 11, 15</td>
</tr>
<tr>
<td>Total Years as a Social Worker:</td>
<td>10, 5, 14, 5, 14, 9, 10, 6, 11, 17</td>
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<tr>
<td>Highest Degree Earned:</td>
<td>MSW, MSW, MFT, MA, MSW, MFT, MSW, MSW, MSW, MSW</td>
</tr>
<tr>
<td>Position Title:</td>
<td>All Clinical FFA Social Workers</td>
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Table 2. Research Category: People-General

<table>
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<td>• Foster youth</td>
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<tr>
<td>• Foster Parents</td>
</tr>
<tr>
<td>• Foster Families</td>
</tr>
<tr>
<td>• Bio Families</td>
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<tr>
<td>• County Social Workers</td>
</tr>
<tr>
<td>• FFA Social Workers</td>
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<td>• Counselors</td>
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Table 3. Research Category: Specific Factors Related to People

<table>
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<td>Trauma</td>
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</tr>
<tr>
<td>Biological Family Influence</td>
</tr>
<tr>
<td>Self-Harm</td>
</tr>
<tr>
<td>Underutilization of Resources</td>
</tr>
</tbody>
</table>

Table 4. Research Category: Organizational Factors

<table>
<thead>
<tr>
<th>Content/Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Care Access</td>
</tr>
<tr>
<td>After Hours Crisis Care</td>
</tr>
<tr>
<td>Poor Interagency Communication</td>
</tr>
<tr>
<td>Safety Precautions</td>
</tr>
<tr>
<td>Care Level</td>
</tr>
<tr>
<td>Training/ Education</td>
</tr>
<tr>
<td>Certification Mandates</td>
</tr>
<tr>
<td>Legislative Changes</td>
</tr>
<tr>
<td>Wrap Around</td>
</tr>
<tr>
<td>Content/Theme</td>
</tr>
<tr>
<td>---------------</td>
</tr>
<tr>
<td>● Detained/ Removed</td>
</tr>
<tr>
<td>● Inappropriate Placements</td>
</tr>
<tr>
<td>● Treatment Team Conflict</td>
</tr>
<tr>
<td>● CFTM (Children and Family Team Meeting)</td>
</tr>
</tbody>
</table>

Table 5. Research Category: Ideas

<table>
<thead>
<tr>
<th>Content/Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Personal Communication, Participant 1, April 2019):</td>
</tr>
<tr>
<td>● &quot;From what I have encountered, the biggest issue is the foster parent being informed and educated on trauma and what that looks like from a child.&quot;</td>
</tr>
<tr>
<td>● &quot;Sometimes foster parents have an unrealistic expectation of how this child is going to overcome trauma. They assume that it's possible for them to get over it and begin to behave like a child who has not been exposed to years of trauma.&quot;</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Content/Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Personal Communication, Participant 2, April 2019):</td>
</tr>
<tr>
<td>● &quot;There was a bit of a delay between the FFA social worker and the county social worker. He was not expecting to be removed from the home so he kind of went into shock and shut down.&quot;</td>
</tr>
<tr>
<td>● &quot;Just coming up with a treatment plan is really difficult sometimes. Everyone wants to help the child, but everyone has a different way of helping the child.&quot;</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Content/Theme</th>
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</thead>
<tbody>
<tr>
<td>(Personal Communication, Participant 3, April 2019):</td>
</tr>
<tr>
<td>● &quot;Sometimes the county social worker will give us information or not. I would even venture to say that sometimes they may downplay some things.&quot;</td>
</tr>
</tbody>
</table>
(Personal Communication, Participant 4, April 2019):  
- “I think more education for the foster parent, more resources, making sure their expectations are reasonable and make sure they are ready.”  
- “Yes, I have had that situation (placement change), the child needed a different level of care than the foster parent could provide.”

(Personal Communication, Participant 5, April 2019):  
- “Almost all of the kids are acting out on some level, but when we notice an escalation it is usually around the same time we'll have a foster parent ask us to remove the kid from their home.”

(Personal Communication, Participant 6, April 2019):  
- “There is one walk in crisis center, we need to improve our behavioral health resources, we need more trauma services.”

(Personal Communication, Participant 7, April 2019):  
- “I feel like they come with preconceived (foster parents) notions, they are educated enough, but a lot of that is not retained or called upon when they need it in a time of crisis or trauma.”

(Personal Communication, Participant 8, April 2019):  
- “For the most part we don't always know the behaviors that the children have. Especially if it's the first time they've been removed, we don't know how they are going to respond.”

(Personal Communication, Participant 9, April 2019):
"Due to their trauma, it's just really hard for them to try and think to their future they're stuck in a cycle of thinking about today only."

(Personal Communication, Participant 10, April 2019):

"It (placement change) was a relief for the child because the placement just did not fit with the child. The foster parent and the foster child did not get along."

### Table 6. Research Category: Main Themes

<table>
<thead>
<tr>
<th>Content/ Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Trauma</td>
</tr>
<tr>
<td>• Poor Interagency Communication</td>
</tr>
<tr>
<td>• Mental Health</td>
</tr>
<tr>
<td>• Foster Parent Education</td>
</tr>
</tbody>
</table>

**Summary**

The perspectives of social workers regarding the factors involved in placement instability were divided into four main components: trauma, poor interagency communication, mental health resources and foster parent education. All of these factors were gathered through a process of thematic analysis and review. The transcripts from each interview were organized and labeled according to similar theme patterns. This information was added to into tables with the use of categories relating to placement instability. This aided in
furthering the understanding of the perspectives of FFA social workers on placement instability. The next section will give a more in depth explanation of the results of the data analysis process.
CHAPTER FIVE

DISCUSSION

Introduction

This section will discuss the findings of this research on factors related to placement instability in more detail and depth. The factors being discussed are listed in each table, these include: Organizational Factors, People, Specific Factors Related to People and Ideas. This section will also include further recommendations on how to apply these findings to social work in the realm of research and practice. This study’s limitations and strengths are also discussed in this section.

Discussion

The purpose of this study was to explore the perspective of social workers on placement instability among adolescents. A limitation of the study was the small sample size and the possible discomfort of FFA social workers to say anything that could be interpreted as negative about their agencies. The strengths of the study is that it allowed the social worker to describe their perspective in as much detail as they deemed necessary. The data results were recorded and eventually reported in a clear and concise manner. This research produced many possible factors related to placement instability among foster youth. The themes that were repeated by more than half of the participants were
notated for further examination and explanation. Trauma, Poor Interagency Communication, Mental Health Care Access and Foster Parent Education are (Table.6) examined more closely, as is their role in placement instability. Each of the factors of instability were examined in closer detail by dividing them up and placing them under the larger 4 categories. This created 12 sub categories: Escalation of behaviors, Dichotomy of Behavior, Honeymoon Period, Visitation, Inappropriate Placements, Goodness of Fit, Treatment Team Conflict, Self-Harm, After Hours Mental Health, Treatment Team Conflict, Unrealistic Expectations and Care Level. Participant quotes are used in an explanatory manner under most of the theme subheadings.

**Trauma**

Trauma is listed first in the category, ‘Factors Related to People’, this is due to how often it was named by participants as the underlying cause for placement instability. Trauma can be considered a root cause for many of the behaviors that result in youth becoming labeled, ‘dual status’. Dual status is a term used in child welfare to describe youths that are dependents of the state in both the child welfare realm and the juvenile justice sector. As stated by the majority of participants, trauma can be treated but it takes time, patience, and education for all parties involved.
Escalation of Behavior

This factor also listed in Table 3. Due to the emphasis participants placed on its role in placement instability. Respondents noted an escalation of negative behaviors as a precursor to placement instability. As noted by Participant 5, “Almost all of the kids are acting out on some level, but when we notice an escalation it is usually around the same time we'll have a foster parent ask us to remove the kid from their home.” The behaviors can become too extreme for the foster parents to be able to provide the level of care necessary to provide a safe environment. Some youth require a high level of supervision than the foster family can provide. Higher levels of supervision cannot usually be provided in the home setting and therapeutic group homes may become the social workers next option. All of these factors can cause placement instability to some degree.

Dichotomy of Behavior

This was a lesser-repeated theme in the data output. This terminology was used by several participants to describe when a youth is doing well in one environment or situation and acting out negatively in another. Dichotomy of behavior was also described as a possible precursor to placement instability related to visitation with biological parents. Participants 6, 8 and 9 described situations where a child’s expectations of visitation not being met will result in negative behaviors. Often times the child will expect or hope that their biological
parents will attend pre-arranged visitations and if parents do not come, the youth will act out in defiant ways to express pain over their situation.

**Honeymoon Period.**

The honeymoon period was generally described by participants as phase in the very beginning of a youth’s time in placement. This phase was noted as a time of discomfort for the youth but relative ease for the foster parent. Various workers noted different reasons for the end of this period. They listed factors such as trauma, triggering by non-visitation of biological parents, etc. The end of the honeymoon period was also explained as the beginning of problems that can endanger the placement.

**Poor Interagency Communication**

Poor interagency communication was the most mentioned reason for issues that fall under the category of ‘Organizational Factors’ that make up Table 4. Participants explained that a lack of thorough and accurate communication between the county social workers and FFA social workers can lead to issues that cause placement instability. When a youth is detained/removed by county social workers they are often tasked with finding a placement in an already approved foster home. Several participants described the process as rushed and lacking enough information to make a good choice of placement based on the needs of the youth.
Inappropriate Placements

Participant 3 described a situation where the county social worker withholds vital information for the sake of a faster placement saying, “Sometimes the county social worker will give us information or not. I would even venture to say that sometimes they may downplay some things.” Placements that take place in the evening or late night hours were listed as the least likely to be well researched and appropriate for long term placement. They connected the lack of preparation and information with placements that are terminated for reasons other than reunification with parents. Matching needs with ability is a time consuming process yet vital to long term placement goals.

Goodness of Fit.

The term ‘goodness of fit’, is often used by social workers within child welfare to describe the matching of needs of the youth with ability of the foster home. Participants noted that a lack of goodness of fit is not always within the control of any of the agencies involved in caring for the youth. Three participants noted that a lack of goodness of fit should not always be considered the fault of any of the agencies or individuals involved in the care of the youth. It is often difficult to predict how a child will react to being removed from their home as mentioned by Participant 8, “For the most part we don't always know the behaviors that the children have. Especially if it’s the first time they've been removed, we don't know how they are going to respond.” It is not always within the realm of capabilities to find a good fit for a new foster child because the
scope of how their trauma will influence their behavior or emotional state is an unknown variable. Some placement moves are unavoidable and unpredictable.

**Mental Health Resources**

Eight of the ten social workers interviewed expressed a need for access to mental health services for the foster parent and child. Parents are often stressed by the integration of a new member of their family, and all that that process entails. The foster parents may need to have access to mental health services for themselves, even with children who are not acting out. Most of the interviewees focused on access to mental health care for the foster child.

**Self-Harm**

Understanding how to handle situations that involve an adolescent that is participating in self-harm behaviors is important to the safety of the entire foster household. This type of acting out can result in the foster parents asking for removal of the child from their home out of fear that they cannot provide the level of care that is necessary to keep the child safe. Participants felt that in some cases the youth can stay safely in the home if the foster parent is willing to learn how to address the situation and if they are provided with additional assistance.

**After Hours Crisis**

Participants noted a considerable lack of mental health services in Riverside County for an after hour's incident. Participant 6. commented on the lack of availability saying, “There is one walk in crisis center, we need to improve our behavioral health resources, and we need more trauma services.” Riverside
County has approximately 4000 foster youth living within its borders and while not all of them need crisis intervention services, it is obvious one center is not enough to serve this population size (CBT, 2018).

Treatment Team Conflict

This section combines two themes noted by participants for the sake of clarity. The theme “Wrap Around and Treatment Team Conflict” are in reference to similar multi-disciplinary teams used by FFA agencies to plan a treatment Participants noted Wrap Around services as vital to treatment but often hard to convene meetings for. Aside from the technical problems of scheduling there is the added issue of being able to agree on a plan of action for the youth. Participant 1. said this in relation to the conflict, “Just coming up with a treatment plan is really difficult sometimes. Everyone wants to help the child, but everyone has a different way of helping the child”.

Foster Parent Education

Six out of ten participants named some aspect of foster parent education as pivotal in the efforts to reduce placement instability among adolescents. Three of the four main categories can be linked together by an improvement or change in mandates regarding foster parent education.

Unrealistic Expectations

As stated by Participant 1, “Sometimes foster parents have an unrealistic expectation of how this child is going to overcome trauma. They assume that it’s possible for them to get over it and begin to behave like a child who has not been
This unrealistic expectation theme occurred often in the data results and is listed in Table 3. as well. The general idea expressed by the social workers was that foster parents have a hard time reconciling the fact that although the child is no longer experiencing traumatic situations, the past trauma can influence current behavior.

Biological Family Influence

Participants named the relationship between biological parents and foster parents and its impact on placement instability as another factor of instability. Participants 4, 5 and 7 expressed a desire to see foster parents trained on how to interact with biological parents. Foster parents are tasked with providing visitation between the biological family and the foster child, therefore the relationship between biological and foster parents is important to the wellbeing of the child. In some cases the biological parent and the foster parent have an adversarial relationship that can cause an emotional strain on the child. Participants felt that foster parents understanding their role in the child's wellbeing concerning their biological family could be benefit to all parties involved. The reasons for conflict was named by some participants and not by others, reasons varied from addiction to mental health issues.

Care Level

The level of care foster parents are able to provide was labeled by participants as a factor that should be known to the county social worker and the FFA social worker. Participant 10 responded this way concerning research
question seven, “Yes, I have had that situation (placement change), the child needed a different level of care than the foster parent could provide.” Sometimes the constraints on what the foster parents can provide have to do with employment, the amount of other children in the home, foster parent burn out; these are only a few of the possible reasons for insufficient level of care.

**Training and Education**

All foster parents are required to undergo trainings during the certification process. There appeared to be a consensus by participants that more of the available trainings need to be mandated for certification. Participant 4. named this factor as most impactful on placement instability saying, “I think more education for the foster parent, more resources, making sure their expectations are reasonable and make sure they are ready.”

**Research**

This research helped name some of the factors of placement instability from the perspective of FFA social workers. This research represents one small step in the right direction, but it is too limited to fulfill the information gap that exists on this topic. In order to validate these factors on placement instability research that includes more participants in more agencies will be necessary. Further research may yield an expansion on the factors noted here or find new factors that can be explored in detail. This continuance and expansion of the research would help to identify the depth of the problem. The factors noted here
extend through many different structural levels. From the micro and mezzo perspective it can be observed that the data output is rich with possible areas to explore. The micro interaction between individual county social workers and FFA social workers is a contact point between two agencies that can be labeled at the mezzo level as well. Further research into these interactions can improve the state of placement instability within Riverside County and beyond. Another area of possible examination is the way in which foster parents are trained regarding both trauma and interactions with biological parents. Exploring which areas of information need to bolstered and implementing these areas of education by mandate could help foster kids experience a more positive environment. All of these improvements can potentially lessen placement instability thereby improving the lives of foster kids in general.

Policy

This research output points to a possible policy change that could impact several aspects of child welfare. Social workers (within county agencies) are required to have contact with the clients on their caseload once per month. Considering the non-communication between the two types of social workers that was described by participants with commonality, mandated contact between the two agencies should be included in both FFA and county organizations. Sharing information in multidisciplinary team meetings is a new theme in child welfare. The meetings still happen too infrequently to keep updated on the wellbeing of a
foster youth. Due to time constraints already placed on workers of both types of agencies, the contact should be allowed to take place via telephone.

Another possible policy change is within the realm of funding for mental health resources during crises. There is severe lack of help for foster youth and other at risk populations in the county of Riverside. Lack of mental health resources can contribute to placement instability in unexpected ways. Foster parents living with and caring for adolescents with untreated mental health issues are far more likely to ask for a placement change. That problem is compounded by leaving these needs unaddressed for an extended amount of time.

Social Work Practice and Conclusions

This research output shows a problem that is runs through multiple and overlapping areas of child welfare operation. The main conclusion is that there are four areas that need to be addressed to lessen placement instability. Trauma informed care is already a large part of child welfare agencies service goals, those goals need to be extended to include foster parent training. Mandates regarding the type and frequency of communication is a necessary point of improvement between two organizations tasked with care of foster youth. Improvements to mental health services for foster parents and the youth in their homes is important to lessening placement instability. Finally, the way foster parents are trained and certified should be scrutinized and updated to include trauma informed care and maintaining relationships with biological family.
Social workers are beholden to a professional code of ethics that can often conflict with the heavy workload assigned by respective agencies. Further research is the only way to establish evidence based organization wide policy changes. It is an ethical responsibility to pursue a decrease in the instances of placement instability; the effects of it are well documented over years of meta-analysis.
APPENDIX A

INTERVIEW GUIDE
APPENDIX A:

INTERVIEW GUIDE

This Appendix contains an interview guide that was followed in a loose structure that allowed for follow up questions. This survey was designed by the researcher.

1. Can you describe to me the circumstances you have encountered when an adolescent has had to be removed from a placement that was intended to be longer?
2. What do you think is the hardest problem to overcome when an adolescent is having a difficult time at a placement?
3. Do you feel foster families are well supported and informed when an adolescent who has emotional or behavioral issues is placed in their homes?
4. If you were able to change some things that lead to placement instability, what would those changes look like?
5. Have you ever had a sense that an adolescent was going to experience placement instability before it happened, what were some of those indicators you noticed?
6. Have there been times when you think a placement move could have been prevented, why was that?
7. If you have ever made the choice or initiated a removal of an adolescent from a foster home, can you tell me a bit about your reasoning for making that choice?

8. Do you feel the resources provided to foster youth and foster parents are utilized in an effective way?
APPENDIX B

DEMOGRAPHICS QUESTIONS
APPENDIX B:

DEMOGRAPHICS QUESTIONS

These questions will be asked at the beginning of the interview session with each social worker. These responses were transcribed and printed for thematic analysis. The researcher designed this questionnaire.

What is your ethnicity?
What is your age?
What is your Gender?
How long have you been employed as an FFA social worker?
How long have you been a social worker?
What is your highest degree earned?
What is your position title?
APPENDIX C

INFORMED CONSENT
APPENDIX C:
INFORMED CONSENT

The study in which you are asked to participate is designed to examine the perspectives of social workers regarding placement instability among adolescents. The study is being conducted by Adella Jimenez, a MSW student under the supervision of Thomas Davis professor of Social Work in the School of Social Work, California State University, San Bernardino. The study has been approved by the Institutional Review Board Social Work Sub-Committee, California State University, San Bernardino.

PURPOSE: The purpose of the study is to examine the perspective of social workers on placement instability among adolescents.

DESCRIPTION: Participants will be asked a few questions on what they believe regarding the contributing factors of placement instability.

PARTICIPATION: Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY OR ANONYMITY: Your responses will remain anonymous and data will be reported in group form only. You will not have to give your name, the interview will be assigned a number for data analysis purposes only.

DURATION: It will take 10 to 15 minutes to complete the interview.

RISKS: There are no foreseeable risks to the participants.

BENEFITS: There will not be any direct benefits to the participants.

CONTACT: If you have any questions about this study, please feel free to contact Dr. Thomas Davis at 909-537-3939.

RESULTS: Results of the study can be obtained from the Pfalz Library ScholarWorks (http://scholarworks.lib.csusb.edu) at California State University, San Bernardino after December 2019.

This is to certify that I read the above and I am 18 years or older.

Place an X mark here

Date

I agree to be audio recorded: _______________ Yes _______________ No
APPENDIX D

RECRUITMENT EMAIL
Hello,

My name is Adella Jimenez, I am an MSW Intern and I am conducting a research project that is part of my final year’s requirements at CSUSB. I would appreciate it if you would look over the Informed Consent form and Debriefing statement that are included in this email as an attachment. If you choose to participate, you can email me at adellajimenez77@gmail.com or you can text me at 909-276-3657 and we can set up a meeting time or phone call. Thank you.

Sincerely,

Adella Jimenez
APPENDIX E

DEBRIEFING STATEMENT
APPENDIX E:
DEBRIEFING STATEMENT

This study you have just completed was designed to investigate the perspectives of social workers in San Bernardino County. I am interested in exploring their views on placement instability among adolescents aged 11 to 15 years old. This is to inform you that no deception is involved in this study.

Thank you for your participation. If you have any questions about the study, please feel free to contact Dr. Thomas Davis at (909) 537-3839. If you would like to obtain a copy of the group results of this study, please contact the Pfau Library ScholarWorks database (http://scholarworks.lib.csusb.edu/) at California State University, San Bernardino after June 2019.
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