A Rigorous Evaluation of Family Finding in North Carolina

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EXECUTIVE SUMMARY

Background

Each year nearly 250,000 children are removed from the custody of their parents due to abuse or neglect. Typically, children stay in foster care for a brief period of time, during which the family completes a case plan of services targeted at rehabilitation and prevention of future child maltreatment.

One factor that may facilitate a successful reunification of children with their parents—or failing that, provide an alternate route to permanency—is youths' connections with extended family. However, because foster care frequently disrupts youths' social connections, practitioners may need to take extra steps to help youth to maintain connections with their extended family.

Over the past decade, federal and state legislation has encouraged, and, in some cases, required child welfare agencies to use search and engagement techniques to identify relatives. For example, the 2008 Fostering Connections federal legislation requires states to notify relatives of children placed in out-of-home care. Government and private funding also has facilitated the implementation of these techniques. These approaches—including Family Finding and family meetings, among others—have become popular due to an increasing shift toward placing children with relatives. This trend is in keeping with anecdotal evidence and non-experimental evaluations of Family Finding suggesting that children who had been in out-of-home care for several years and who had lost contact with family members were reconnecting and finding permanent homes with their relatives.

> The **Family Finding model** is comprised of six steps or stages:
>
> 1. *Discover* at least 40 family members and important people in the child's life;
>
> 2. *Engage* as many family members and supportive adults willing to participate in a planning meeting;
>
> 3. *Plan* for the successful future of the child with the participation of family members;
>
> 4. Make *decisions* during family meetings that support legal and emotional permanency for the child;
>
> 5. *Evaluate* the permanency plans developed; and
>
> 6. Provide *follow-up supports* to ensure the child and family can maintain the permanency plans.

The Family Finding model, developed by Kevin Campbell and his colleagues, was inspired by the family-tracing techniques used by agencies such as the Red Cross to find and reunite family members who had been separated by war, civil disturbance, or natural disaster. (See text box.) The goal of Family Finding is to find and engage relatives and other kin of children in foster care to provide options for legal and emotional permanency. Legal permanency may include adoption and guardianship, as well as reunification. Emotional, or relational, permanency refers to establishing a life-long connection with an adult who will unconditionally support and maintain healthy contact with the child, beyond the age of 18.

Below, we briefly describe the evaluation design before presenting the findings.

Evaluation Design

Child Trends evaluated Family Finding services in nine North Carolina counties through a rigorous impact evaluation and an accompanying process study. The impact evaluation involved random assignment of eligible children to a treatment or control group. The treatment group received Family Finding services in addition to traditional child welfare services, whereas the control group received traditional child welfare services only. Eligible children were in foster care; were 10 or older at the time of referral; did not have a goal of reunification; and lacked an identified permanent placement. The accompanying process study examined program outputs, outcomes, and linkages between the project components and other contextual factors.

We were interested in testing hypotheses that Family Finding would affect outcomes in three areas: child welfare permanency, child well-being, and child welfare safety. However, examining impacts on the array of outcomes across these areas would result in a greater likelihood of finding one or more significant impacts by chance. To address this problem, we selected one outcome—"step-downs" in placements (defined broadly to include a move to a less restrictive placement and/or a move from a non-relative to a relative placement)—to be the focus of a "confirmatory" analysis; any impacts on additional outcomes are "exploratory" and merit further investigation. We would have preferred to assess impacts on emotional permanency, but we found that the data were insufficient to assess this outcome. We theorized, however, that increased connections to kin would enhance well-being, making step-downs possible. Stepping down to a family foster home, and in particular to a relative's home, may provide an opportunity for the child to develop permanent emotional connections with that family.

Data for the impact study came from child welfare administrative data (for measures of child permanency and safety) and two rounds of interviews with the subset of youth who were 13 or older at the time of referral (for measures of well-being). A total of 532 children were included in our analysis of impacts on child permanency and child safety. The analytic sample for our analyses of well-being included 305 youth who completed a round 1 interview 12 months following referral to Family Finding and 281 who completed a round 2 interview 24 months following referral. Our process study data sources included annual site visits to each of the participating counties and a Web-based Family Finding database developed to document child-level information on program activities and outputs. During the annual site visits, the Child Trends research team conducted interviews, focus groups, and observations with Family Finding program staff and supervisors, as well as with social workers, supervisors, and agency administrators.

More than half of the youth in the analytical sample were male (58%). Exactly half were non-Hispanic black, and 41 percent were non-Hispanic white. Nearly eight out of 10 (79%) were older than 13 at study enrollment. On average, the youth in the sample had spent almost three-and-a-half years in foster care at the time of referral to the program, and the majority (60%) were in a non-relative foster home, although a third were in congregate-care settings. The interview sample is very similar to the full sample

in terms of demographic and case history characteristics, with the obvious exception that all in the smaller sample were 13 or older at the time of study enrollment.

Impact Findings

The evaluation yielded some evidence that is consistent with practitioners' and program developers' expectations about how Family Finding works, but also some evidence to the contrary. For the most part, the Family Finding

> Children who received Family Finding were no more likely than control group children to experience a "step-down" in their placement.

intervention served the intended population. In general, the study population was disconnected from their family members, though perhaps to a lesser degree than agency staff presumed. Family Finding workers did succeed in identifying and engaging relatives and kin of youth in North Carolina. However, children who received Family Finding services were no more likely than were control group children to experience a "step-down" in their placement during the study period. In addition, no impacts were found among any of the exploratory child welfare permanency and safety outcomes examined.

We did find potential impacts on contact with relatives. Specifically, 12 months following random assignment, a larger share of the treatment than the control group had contact (though less than monthly) with at least one

> We did find potential impacts on contact with relatives and for specific subgroups of the sample.

sibling (10% compared with 6%); monthly or more frequent contact with at least one grandparent (47% compared with 37%); and monthly or more frequent contact with at least one other relative (47% compared with 33%). Among those still in foster care at the time of the interview, a larger share of the treatment group reported being close to at least one other child in the household (64% compared with 54%). However, 24 months following random assignment, many of these differences appeared to dissipate.

We also found some evidence of positive impacts for specific subgroups of the sample. For children referred prior to age 13, those in the treatment group experienced fewer placement changes than did those in the control group. In addition, the program may have improved safety outcomes and placement stability in a subgroup of counties. However, we found no other positive impacts among exploratory permanency, safety, or well-being outcomes for the full sample of youth. In particular, we found no differences in the level of social support between the treatment and control groups.

Although the program did not demonstrate the desired positive impacts, we found minimal but noteworthy indication of negative impacts on youth well-being. In qualitative interviews, social workers and therapists voiced concerns that the Family Finding process might exacerbate youth behavior problems, and one finding about exploratory outcomes was consistent with this concern. Treatment group members were more likely to have a clinical level of internalizing behavior problems (symptoms of depression) than were control group members 24 months following random assignment, a difference that did not attain statistical significance 12 months after random assignment. Because we lacked

baseline data on behavior problems, we could not explore whether the experimental groups differed by chance in their levels of behavior problems at random assignment.

Implementation Findings

For youth receiving Family Finding services, family connections were discovered and engaged, and plans were developed for family members' continuing contact and support for the children. (See text boxes for contextual facilitators and challenges to implementing Family Finding.) On average, 34 newly discovered family members were found for each child served. In addition, 63 percent of children served had at least one family member commit to ongoing contact with the child.

Nearly half of cases (46%) had at least 40 known connections (including baseline and newly discovered connections) at the end of the intervention. These individuals had a variety of relationships with the child, with slightly more than half (54%) being maternal family members. It took an average of just over a month (34 days from random assignment) for Family Finding workers to make a new discovery.

The Family Finding workers used the engagement phase to begin discussions about relatives' interests in serving as life-long supports or placement resources for the child. In order not to overwhelm relatives at the initial engagement stage, Family Finding workers kept initial conversations general. They refrained from focusing on any particular action, but focused instead on explaining that a related child was in foster care and needed help. Frequently, the Family Finding workers served as a listening ear to relatives who were frustrated about prior experiences with the child's parents and/or the child, as well as with the agency. On average, for each child, the Family Finding workers engaged with five people. Engagement with maternal family members was more common than was engagement with paternal family members.

During the planning and decision-making process, the Family Finding workers held meetings with family members aimed at identifying three viable plans to support the child. On average, one family meeting

Facilitators:
- *Designated Family Finding worker.* Having a designated staff member implement Family Finding was reported to be more effective than having the case-carrying social worker take on the work.
- *Communication.* Family Finding workers and social workers repeatedly stressed the importance of a good relationship and ongoing communication with the entire child welfare team.
- *Staff training.* Training for Family Finding workers and agency staff was reported to have increased the visibility of the program and created buy-in among social workers.

Challenges:
- *Agency culture.* During the study period, the implementation of Family Finding services marked a shift in culture towards more family involvement.
- *Difficulty securing relative placements.* Many family members who were interested in being placement options for children either did not want to go through or could not pass the foster care licensing process, or could not afford to care for a child without financial assistance.
- *Workload.* Social workers reported that their caseloads often prevent them from supporting family members' contact with the child and plans developed.

was held per child. An average of six family members per child were invited to any meetings held on behalf of the child, and an average of three actually attended at least one meeting.

Implications

Several factors may explain the lack of positive impacts identified in this study. One possibility could be incomplete or inconsistent implementation of the model. In fact, we found barriers to implementation of the two final components of the model—evaluating permanency plans and providing follow-up supports. Family Finding workers lessened their hands-on involvement after completing the model's discovery, engagement, and planning and decision-making components. The remaining model components fell largely to the case-carrying social worker to complete. Family Finding workers commented in interviews that these components of the model were not well articulated during training sessions, and ultimately were not understood well by either the Family Finding staff or the social workers expected to follow through on these activities. Child Trends found similar challenges to implementation in its other evaluations. Because these challenges were not unique to North Carolina, it is possible that the six-step Family Finding model at the time of the evaluation was not specific enough to allow for implementation with fidelity.

Several factors might explain the lack of positive impacts:

- Incomplete or inconsistent implementation.
- A positive impact that is too small to detect given the parameters of the study.
- Inclusion of older youth in the intervention such that not enough time was available for impacts to occur before the youth aged out of foster care.
- Outcomes achieved under services-as-usual are difficult to improve upon.
- Flawed hypotheses about how program activities and outputs affect youth outcomes within the population served.

Another factor that could explain the results could be the inclusion of older youth in the intervention. At the time of study enrollment, four in ten (40%) youth in the study sample were 15 or older, and one in five (21%) was 17 or older. Most youth in North Carolina age out of foster care at 18, so many of those in our sample had a year or less in which to achieve positive child welfare outcomes.

In addition, impacts might not occur if the outcomes achieved under services-as-usual are difficult to improve upon. This situation could occur if: 1) the intervention is no more effective than the services-as-usual model; 2) services-as-usual are similar to the intervention; and/or 3) positive outcomes are common through receipt of services-as-usual. In general, across the participating counties, larger percentages of children were in less restrictive placements at the end of the study period than at the beginning. Yet despite the movement toward less restrictive settings, the last placement setting as of the end of the study period for substantial shares of children was congregate care (20%) or living with non-relatives (50%), suggesting room for improvement in outcomes.

Lastly, the lack of positive impacts could be the result of flawed hypotheses about how program activities and outputs affect youth outcomes within the population served. Sometimes program

developers or researchers are mistaken in their hypotheses about one or more causal linkages between program activities and outcomes. If program activities do not affect the outcomes of interest in the way expected—or if the outcomes sought are simply very difficult to change or to achieve—an impact may not be observed. One of the rationales for specialized relative search and engagement is the expectation that methodically identifying and engaging a wide array of extended family members will increase the chances for children and youth to live with relatives and achieve permanency. This approach contrasts with what typically occurs at public child welfare agencies, in which social workers often take a narrow view of family and assess only one or two easily identified relatives. Our non-experimental analysis yielded conflicting results about how or whether identifying and engaging a specific number of relatives affects youth outcomes.

Discussion

It is difficult to know which of the factors described above might explain the lack of impacts observed, but a careful integration and consideration of findings from the present evaluation with those from evaluations of Family Finding in other sites could shed light on this question. Below we discuss the study's implications for future research and evaluation of family engagement interventions that will inform development and replication of Family Finding intervention programs.

Specialized interventions such as Family Finding can only be successful when social workers and Family Finding workers work together toward a common goal, and when agency and court staff support the interventions' approach and goals. The involvement of the child's social worker is essential when the desired outcome involves a change in child welfare outcomes, such as the child's placement setting or a legal permanency arrangement. However, as is the case in other interventions administered by a specialized worker, the Family Finding worker faces challenges in attempting to incorporate the specialized or "non-mandated" work into the overall public agency case process. Further, the specialized worker and the child's social worker are not the only decision makers involved; a number of child welfare and judicial professionals can weigh in on the placement change decision. Although training on Family Finding and implementation of other kinship-focused initiatives may infuse the agency with a "family-friendly" culture, case-specific factors—including logistical challenges such as family members living far away—can still hamper the implementation of the full array of Family Finding components. The specialized worker may succeed in engaging family members in the case planning process, but in order to affect the youth's outcomes, the agency staff must incorporate the family's input and wishes into its recommendations.

Many localities reported that bias against family members was a challenge, identifying it as one factor that may make workers reluctant to collaborate with a family. However, workers must balance many additional factors as they engage with families. Above all else, social workers strive to ensure the safety of the children they serve. They generally agree that multiple placement moves should be avoided as much as possible, in order to refrain from adding unneeded turbulence into children's lives. The youth being served typically have experienced childhood trauma. With their motivation to protect children, social workers are rightly apprehensive about new interventions and introducing newly found family

members to a child. Our qualitative findings show that in some cases, social workers' instincts to protect and be cautious were viewed by Family Finding workers as impeding moving a child into a new placement with relatives. The negative impact observed on internalizing behaviors at the 24-month follow-up may suggest that this degree of caution is merited, although the reliability of this impact is questionable. In any case, how decisions about placement moves are made in the context of Family Finding practice warrants further examination.

> Social worker burden may be a deterrent to learning about and fully embracing new interventions.

In addition, the multiple demands already competing for a social worker's time and attention may also be a deterrent to learning about and fully embracing new interventions. Ensuring the safety of the children on their caseload in the face of large caseloads and the pressures of court deadlines may leave workers little time to focus on anything but their primary responsibilities. However, collaboration in the context of Family Finding involves discussions and preparation for and attendance at family meetings. A significant investment in time is necessary to understand how a child may be affected by introductions to family members and how family members can support the child and the child's case plan. The important issues that Family Finding raises cannot be quickly discussed in brief hallway conversations. Social workers must be provided the time necessary for effective communication and collaboration with specialized workers.

North Carolina has no subsidized guardianship program, yet many relatives would need additional services and supports to provide a permanent home for a child. In addition, families were not adequately informed about the existence of available support, such as adoption subsidies and Temporary Assistance for Needy Families (TANF) child-only payments. Family Finding training should include detailed information about available resources and how family members can apply for them. In addition, foster parent support groups, including kinship support groups, may be valuable sources of information and assistance for family members throughout the Family Finding process.

Conclusion

As has been the case in other sites in which Family Finding has been implemented, full implementation of the model in North Carolina faced challenges. These challenges suggest that more research is needed to determine whether and how fidelity to the model can be attained, and whether consistent implementation with fidelity would result in positive impacts. Although the lack of a clear positive impact may be disappointing, this study's findings are not conclusive, particularly when reviewed in isolation from findings from other Family Finding evaluations. In addition, the vast amount of descriptive information culled from the process study greatly enhances the field's ability to describe the Family Finding model adequately and to identify its current strengths and weaknesses.

In conjunction with a number of other recent experimental evaluations, the North Carolina evaluation contributes greatly to the growing evidence base of family involvement and engagement. Together, these studies provide a framework upon which an evidence-informed conversation can begin to address the questions raised by the evaluations.

INTRODUCTION

Each year nearly 250,000 children are removed from the custody of their parents because of abuse or neglect. A recent national report on foster care rates reveals that 653,708 children and youth spent time in out-of-home care at some point during federal fiscal year 2012 (U.S. Department of Health and Human Services [U.S. DHHS], 2013). In general, children stay in foster care for a brief period of time, during which the family completes a case plan of services targeted at rehabilitation and prevention of future child maltreatment. In cases in which the safe reunification of children with their parents is not feasible, child welfare agencies—with oversight from the dependency court—bear the responsibility of securing a new permanent home or family setting for these children. In theory, as we will explain in greater detail later, one factor that may help support a successful reunification of children with their parents—or failing that, serve as a resource for the legal and/or emotional permanency to support the child's well-being—is children's connections with extended family. Unfortunately, the experiences many children have during their time in foster care can make it difficult for them to maintain these connections.

The loss of contact with relatives may be particularly common for children in non-relative foster care placements, as well as for those youth who spend long periods of time living apart from their parents. Yet non-relative placement settings and long spells in out-of-home care characterize the foster care experience for many youth. Among children in foster care at the end of 2012, 28 percent were living in relative foster homes, while 63 percent were in non-relative foster homes, group homes, institutions, and supervised independent living placements (U.S. DHHS, 2013).[1] Furthermore, 39 percent had been in the system for 18 months or more, while 9 percent had been in the system five years or more (U.S. DHHS, 2013).

Ensuring that youth have a path to permanency is critical to improving outcomes, whether that path is made possible by a supportive network of relatives or alternative or additional resources. Youth who age out of the system without either reunifying successfully with their parents or achieving permanency through adoption or guardianship are at increased risk of adverse outcomes, as we describe below. Unfortunately, the number of youth who age out of foster care is not insignificant. Over the past six years, about one in 10 young people leaving foster care—more than 23,000 in 2012—have emancipated to independence, rather than exiting to a permanent, legal family (U.S. DHHS, 2013).

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[1] The remainder was in a pre-adoptive placement or trial home visit or was classified as having run away.

Outcomes for children who do not achieve permanency

Over the past decade, both research and anecdotal evidence have revealed that many youth who age out of foster care have negative experiences and outcomes in the years immediately following their stays in foster care (Courtney et al., 2011; Pecora et al., 2005). While longitudinal data are limited, findings from the Midwest Evaluation of the Adult Functioning of Former Foster Youth (Midwest Study) indicate that former foster youth remain at risk well into their mid-twenties across a range of areas. These areas include housing, education, employment, health, receipt of public assistance, and involvement in the criminal justice system (Courtney et al., 2011).

More specifically, these youth often become homeless and/or experience housing instability (Courtney et al., 2011; George et al., 2002; Pecora et al., 2005). Youth with extended stays in foster care have typically experienced significant educational instability and lower levels of educational attainment than other youth, resulting in decreased employment options and an increased likelihood of becoming and remaining impoverished after they leave the system (Courtney et al., 2011; Pecora et al., 2005; George et al., 2002; Dworsky & Courtney, 2000). Former foster youth are also more likely than are young adults in the general population to have poor physical health and to lack health insurance (Courtney et al., 2011). Of course, not all young people who have spent time in foster care experience poor outcomes. Stable family environments (Pecora et al., 2005), less restrictive placements, and strong social networks can serve as protective factors for overall well-being of children and youth in foster care (Perry, 2006). However, due to their placement into foster care and, for many, placement changes while in foster care, maintaining strong social networks can be difficult. Therefore, since it has long been established that personal relationships and the resources they provide affect mental health positively (Berkman, 1983; Kessler and McLeod, 1985), it is not surprising that youth in foster care are more vulnerable to poor social and emotional functioning than are those who are not in foster care (Courtney et al., 2011; Pecora et al., 2005).

Importance of caring, involved adults

In recent decades, developmental and social psychologists increasingly have recognized a period of "emerging adulthood" that occurs between approximately ages 18 and 25 (Arnett, 2007, and Arnett & Tanner, 2006, as cited in Avery, 2010). This period of transition to adulthood involves cognitive, behavioral, and emotional development. Generally, it is a time when many young people remain at or return to their parents' homes or rely on parents and other supportive adults for various forms of material and emotional assistance (Furstenberg, 2010; Swartz et al., 2011). However, this "safety net" of

family support typically is unavailable to young adults aging out of the foster care system, many of whom have lost ties with members of their birth families, and all of whom have lost the formal support of the child welfare system.

Although many youth have lost connections to their biological families during their time in foster care, others frequently return to live with their birth parents or other family members for some period of time following emancipation. The limited nature of longitudinal data on this population makes it challenging to get an accurate count of how many youth return to live with family members, but the Midwest Study found that close to one in four youth (22%) lived with their birth parents at some point between exiting foster care and age 25 or 26, and close to one in three (29%) had lived with another relative (Courtney et al., 2011). Further, the majority of former foster youth felt very close (74%) or somewhat close (20%) to at least one member of their birth families, indicating that family members can and often do serve as an important emotional as well as material resource to former foster youth (Courtney et al., 2011). Research suggests that positive, regular contact with birth family members may contribute to improved social well-being and adjustment for these youth (Andersson, 2005). Thus, ensuring that supportive family relationships are available as a safety net for youth during their emerging adulthood stands as an important goal of services that promote positive relationships between a child and his or her family members and that seek commitment from adults to remain involved in a child's life.

Legislative history of family connections

The Adoption and Safe Families Act (ASFA) of 1997 (P.L. 105-89) established legal requirements for the timely achievement of permanency (especially in the form of adoption) for children who cannot return home by requiring that a permanency planning hearing be convened within a year of a child's entry into the child welfare system. Federal recognition of the importance of permanency was further codified in the Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351). In addition, both laws acknowledged the importance of ensuring the well-being of children in foster care. ASFA established not only permanency and safety, but also well-being as national goals for children in care.

In addition, in light of an increasing understanding of the importance of children's social networks within family and community settings for the development of children's positive social, psychological, and interpersonal skills and their positive self-identities (Hines, 1997), the Fostering Connections Act includes several key measures to promote connections between children and youth in foster care and their kin. Specifically, within 30 days of a child's entry into care, the state must notify the

child's adult relatives and inform them of options available for them to become involved as a placement option or resource for the child. States may also waive non-safety-related foster care licensing standards for kin, as well as claim federal reimbursement for guardianship assistance payments made to eligible kin caregivers assuming permanent legal guardianship. With the Fostering Connections Act, Congress also authorized $75 million over five years for "Family Connections" grants, allowing states, tribes, and nonprofit organizations to implement four program models designed to reconnect children with family members: intensive Family Finding, Family Group Decision-Making, residential family treatment, and kinship navigator programs.

History of the Family Finding model

During the time between the enactments of ASFA and the Fostering Connections Act, Kevin Campbell, a director at Catholic Community Services in Tacoma, Washington, and colleagues developed the Family Finding model. Over the past decade, this approach has been used most commonly to find and secure supportive family networks for youth who have lingered in the child welfare system. These are typically older youth who have lost connections to their birth family and kin networks as a result of having spent many years in foster care, although the model has also been implemented with families upon entering the child welfare system.

The model was inspired by the family-tracing techniques used by agencies such as the Red Cross since the late 1800s to find and reunite family members who had been separated by war, civil disturbance, or natural disaster. During a period of time when Campbell used similar techniques with tools such as Internet-based search services (including US Search),[2] the number of life-long connections for children in foster care in his agency's service area increased, and the number of children in non-relative care decreased. Since Campbell began training social workers in 2000, the Family Finding model has spread throughout the country and is nationally recognized as a promising approach for finding permanent homes and family connections for youth in care for whom traditional attempts at finding permanent placements has failed.

The goal of the Family Finding model is to find and engage relatives and other kin of children in foster care to provide options for legal and emotional permanency. Legal permanency may include adoption and guardianship, as well as reunification. Emotional, or relational, permanency refers to establishing a life-long connection with an adult who will unconditionally support and maintain healthy contact with the child, beyond the age of 18. The Family Finding model is comprised of six stages: 1)

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[2] US Search is a paid Internet-based search engine used to help locate people.

discovering at least 40 family members and important people in the child's life; 2) *engaging* as many family members and supportive adults as possible; 3) *planning* for the successful future of the child; 4) *making decisions* that support the legal and emotional permanency of the child; 5) *evaluating* the permanency plans developed for the child; and 6) providing *follow-up supports* to/for the child and his/her family (Campbell, 2005; 2010a, 2010b).

In addition to the intensive nature of the Family Finding model, it embodies a set of central assumptions. These include:

- All individuals have between 100 and 300 family members.
- Knowledge of the whereabouts and well-being of family members is a basic human need essential for the restoration of dignity.
- Children need a sense of belonging and unconditional love for health, growth, and development.
- Loneliness is often at the heart of suffering for children in the foster care system, as they lose contact and connection with family members over time and with multiple placement moves.
- Even the best treatment modalities will not be effective in addressing emotional and behavioral difficulties when children are suffering from loneliness. Connection is a crucial first step to healing.
- Respectful, collaborative engagement with family members is central to the successful planning for permanency and support for children whose lives have been disrupted by trauma.
- Families, not government or private agencies, take care of children best.
- Parents need connections and supports to provide adequate care for their children.
- Parents and families want the best for their children, even when factors interfere with their ability to provide it for them directly.

In 2008, Child Trends conducted an exhaustive review of existing programs and found more than 50 agencies (state, local, and private) in 22 states that were implementing or planning to implement the Family Finding model. That number has undoubtedly increased with the passage of the federal Fostering Connections legislation and subsequent Family Connection Grant announcements with intensive Family Finding designated as a priority.

Unlike many traditional child welfare approaches in which the public agency (or a contracting agency) provides services primarily to the youth, the aim of Family Finding is to develop a family-based context for supporting children's needs and ensuring their future permanency. Ideally, this supportive context will be more enduring than agency-based services, which typically end with a young person's involvement in the child welfare system. Additionally, since many former foster youth return to their

birth families upon aging out of foster care (Courtney & Dworsky, 2006), expanding and strengthening the family network beyond birth parents appears likely to benefit youth.

Prior Family Finding research

Due to the relatively recent development of the Family Finding model, published evaluation literature is limited. Evaluations of the California Permanency for Youth Project (CPYP), which merged with Kevin Campbell's Center for Family Finding and Youth Connectedness in 2010, have examined the success of the program in securing permanent connections between foster youth and caring adults, as well as explored how these connections are located, formed, and supported. Permanent adult connections are described as relationships in which the adult "consistently states and demonstrates that s/he has entered an unconditional life-long parent-like relationship with the youth [and] the youth agrees that the adult will play this role in his/her life"(California Permanency for Youth Project [CPYP], 2010, p. 4). The 2008 report covers youth outcomes for 10 counties (Contra Costa, Fresno, Humboldt, Kern, Los Angeles, Orange, Sacramento, San Francisco, San Luis Obispo, and Sonoma) from 2006 to 2008, while the 2010 report chronicles outcomes for a total of six sites (Madera, San Bernardino, Solano, and Riverside Counties, as well as Pomona and Santa Clarita in Los Angeles) from 2008 to 2009 (CPYP, 2008; 2010).

The majority of youth receiving services through the sites that were evaluated in the 2008 and 2010 studies had established permanent connections (76% and 71%, respectively). Of the 126 youth participating in the 2008 evaluation, 15 youth achieved permanency through reunification, guardianship, or adoption; 14 were in the process of establishing legal permanency with a connection; and 62 had formed a permanent connection but the adult connections were not seeking legal permanency (CPYP, 2008). By the end of the 2010 evaluation, 20 of the 110 youth participants had achieved legal permanence; 18 had a permanent connection pursuing legal permanence; and 40 had a permanent connection but were not pursuing legal permanence (CPYP, 2010). Social workers for youth with a permanent connection were asked whether that connection was a result of program participation. In response, 64 percent of social workers in the 2008 evaluation and 53 percent of social workers in the 2010 evaluation reported that the permanent connection "probably occurred because of our work with CPYP" (as opposed to "probably would have occurred anyway") (CPYP, 2008; 2010).

Neither of these evaluations compared outcomes for youth participating in CPYP Family Finding services with a control group not receiving Family Finding services. However, one county (San Bernardino) that completed its own non-experimental evaluation found that youth participating in CPYP

services were more likely to have family and friends located and contacted than were youth in a comparison group (85% versus 13%); to have a potential permanent connection identified during the course of the program (73% versus 4%); and to have an established permanent connection by the end of the program (75% versus 4%) (Wakcher, 2010).

Although the research base for Family Finding services is still developing, forthcoming evaluation results for the Family Connections grants authorized by the Fostering Connections Act of 2008 will provide critical insight into program implementation and outcomes in several sites throughout the United States. The final cross-site evaluation report was released in June 2013.[3] Given the limited extant literature on the effectiveness of Family Finding services, these evaluation findings—combined with results from a recent Child Trends evaluation—will provide critical information to strengthen the research base for the Family Finding program model (Malm et al, 2013).[4]

Evidence is also limited on the effectiveness of child welfare interventions other than Family Finding for children who are likely to age out of the foster care system (Montgomery et al., 2006). This dearth of positive findings about other programs may in part be due to the weakness of the interventions, as well as to the low numbers of youth who engaged in the services.

In contrast, program planners have been optimistic that the intensity of Family Finding services and the uniqueness of its components enable the program to achieve successful outcomes in child permanency where previous programs have failed. Additionally, since the Family Finding program does not rely solely on active participation or engagement of the youth, but rather on the activities of the Family Finding worker, program planners expect that larger numbers of youth assigned to Family Finding will receive the services than in other types of programs, facilitating the ability of an empirical study to achieve the statistical power needed to detect any positive program impacts.

PROGRAM MODEL: FAMILY FINDING IN NORTH CAROLINA

The Family Finding model that is the subject of the present report was implemented in nine counties in North Carolina. In three counties, the Family Finding program is operated by the Children's Home Society of North Carolina (CHS). In the remaining six counties, the program was operated by the Department of Social Services (DSS). After the award of grants from the Duke Endowment, the program was launched in July 2008 in the CHS counties and in January 2009 in the DSS counties. By design, all

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[3] See http://www.nrcpfc.org/grantees_public/2009/Fam%20Conn%202009%20Cross-Site%20Final%20Report%206-17-13.pdf

[4] See http://www.childtrends.org/?publications=family-finding-for-children-and-families-new-to-out-of-home-care-a-rigorous-evaluation-of-family-finding-in-san-francisco

counties focused on serving the children for whom it was hardest to find permanent placements: older youth, sibling groups, children in unstable foster care placements, and those close to aging out with no supportive connections. Each county was assigned a designated Family Finding worker responsible for implementing the Family Finding model in conjunction with the child's child welfare team. The original staffing projections assumed a caseload of five to seven children (or sibling groups) and a case length of approximately three-four months. In the CHS counties, the Family Finding workers were employed by the private agency, whereas in the DSS counties they were employed by the public agency. As previously discussed, the Family Finding model is comprised of six stages or steps, as follows:

- *Discovery.* The goal of this phase is to create more options for supporting and planning for the foster child by identifying family members and other adults who might be able to help. Family Finding workers aim to identify at least 40 family members for the child or teen. Extensive searches include conducting a comprehensive review of the case file; interviewing the child (if appropriate) in addition to family members and other supportive people; and using Internet search tools (e.g., US Search). Workers' efforts include identifying other adults who can or have in the past been a key support to the child or parents. Successful discovery is achieved when extensive knowledge is uncovered about the family. In many situations, 100 or more relatives and others connected to the child or young person may be "discovered."

- *Engagement.* The goal of this phase is to involve those who know the child best and have helped the child in the past and who have a historic and/or inherent connection to the child. Practitioners use a unique engagement strategy individualized to each case, enlisting the support of as many family members and others important to the child or family to participate in providing information helpful to the child. Practitioners may use in-person interviews, phone conversations, and written letters and e-mails with the intent of identifying the child's extended family. The engagement phase also includes identifying a group of family members and supportive adults who are appropriate and willing to participate in a meeting to plan how to keep the child safely connected to loving family members. During engagement, workers begin preparing family members and others to assist the social worker with decision-making and supporting the young person through committed relationships.

- *Planning.* The goal of this phase is to plan for the successful future of the child or young person via meetings with parents, family members, and others important to the child. Practitioners bring the identified family members and others who care about the child together to learn more about the young person's essential, life-long need for support and affection. Participants must have a voice in the process. The planning meetings include discussions about legal permanency placement arrangements, as well as about the role of relatives and other adults in the support of the caregiver and child. Equal value is placed on the need for a family for the child to live with and an enduring network of support. Challenges are identified and solutions created. Following the motto "Plans fail, our children do not," the intent is for plans to be established that ensure the child's success, allowing for challenges and problems the child (or family members) may encounter in the future.

- *Decision-making.* The goal of this phase is to have the team of adults who are connected to the child, in collaboration with the social worker, make timely decisions that provide the young person

with appropriate levels of affection and belonging that are expected to be enduring. The team involved in planning works with a sense of urgency, fully and candidly informed about the needs of the child or young person and the potential consequences of not having a safe "forever family." The team prepares to make key, informed decisions about the future of the young person, including their safety, physical and emotional well-being and belonging in a lifetime family. Teams meet with an understanding of the inadequacy of deciding on long-term placement(s) without legal permanency.

- *Evaluation.* The goal of this phase is to complete an inclusive, individualized, and unconditional plan to achieve legal and emotional permanency, as well as to develop a timeline for the plan's completion. The intent is that the team has the foresight to develop safe, stable, and lasting plans for the child. Thus, adults who are caring for the child should have adequate and lasting support, as well as vital relationships with siblings, family members and others important to the child. Key questions that team members consider include:

  o If this iteration of our plan fails, will the child remain with his/her current caregiver or return to the foster care system?
  o Have we identified and engaged an adequate level of enduring support for the child and his/her caregiver(s)?
  o Have we created an alternative plan that includes family members and other adults willing to offer their support if the initial plan does not work out?
  o Are there at least three alternative plans, should the primary plan fail?
  o Is there is a commitment that, if challenges arise that threaten the child's safety and stability, the team will reconvene?
  o Is there an appointed team member who will organize/facilitate future meetings?

- *Follow-up supports*. The goal of this phase is to plan for and access essential formal and informal supports for the child or young person and his or her family. The team actively supports children, young people, and caregivers to access services, supports, and key relationships successfully. Teams emphasize the natural and community supports that are more normative and enduring than those provided externally by government agencies. Services that require payment are considered temporary and not as a basis for life-long relationships.

Below we describe the design and methods for our evaluation of Family Finding in North Carolina.

EVALUATION DESIGN

The evaluation of Family Finding services in nine North Carolina counties involved a rigorous impact evaluation and an accompanying process study to examine outputs, outcomes, and linkages between the project components and other contextual factors. The impact evaluation involved random assignment of eligible children to a treatment or control group. The treatment group received Family Finding services in addition to traditional child welfare services, whereas the control group received traditional child welfare services only.

The sample for the impact evaluation included children who were eligible and referred for Family Finding services in the nine counties. Eligible children were in foster care, were 10 or older at the time of referral, and did not have a goal of reunification and a permanent placement had not been identified. As mentioned earlier, the counties chose to target the services to children for whom it was hardest to find permanent placements. The referral process varied slightly across the nine counties participating in the evaluation. In the DSS counties a list of eligible children was obtained by the Family Finding worker who would then contact the social worker to discuss referral of the child to Family Finding. In the CHS counties, the Family Finding worker relied on referrals from DSS social workers.

The overarching goal for Family Finding in this evaluation and in others is permanency. For populations of youth new to care, legal permanency—including guardianship, adoption, and/or reunification—is the primary goal. However, the timeline for achieving legal permanency is limited, as it must occur before youth reach the age of majority. For older youth such as those served in North Carolina, and for whom that timeline is short, the focus shifts increasingly from legal to emotional permanency, as reflected in the efforts to establish specific plans for identified kin to remain supportive connections of the youth over the long term. Therefore, the primary goal in the present evaluation pertains to emotional permanency. In addition, we hypothesized that Family Finding could affect outcomes in two additional areas: child well-being and child welfare safety (as shown in the program's logic model in Appendix A).

We were interested in examining the program's impacts across all the areas. However, these areas include an array of outcomes, and examining impacts on multiple outcomes would result in a greater likelihood of finding one or more significant impacts by chance. To address this problem, we selected one outcome measure to be the focus of a "confirmatory" analysis, and we examined additional outcomes as "exploratory," an approach recommended by Schochet (2008). For the present study, we selected "step-downs" in placement restrictiveness as the confirmatory outcome. And, since we wanted to avoid examining multiple outcomes for placement restrictiveness, we examined whether a child experienced any step-downs during the study period. In order for our outcome measure to be as broadly relevant to positive impacts on placement changes as possible, we defined step-downs to include moves not only from larger, more institutional settings to smaller, more family-like settings, but also from non-relative to relative placements.

We selected step-downs as the measure that was most salient to emotional permanency because of the unfortunate absence of a direct measure of emotional permanency. Young people interviewed as part of the study were asked how close they felt to and whether they were in contact

with various relatives and other adults, but not whether they perceived the contact to continue in the long-term. An additional drawback to the measures collected via the interview was the reduced statistical power that would have been available to detect an impact;[5] a critical characteristic of a confirmatory outcome is that the study should have sufficient statistical power to detect an impact, should one exist. Information about whether people identified as connections were committed to plans for future support/contact for the child might have been an appropriate confirmatory outcome, but data were not available for the control group.

Among the outcome measures available from the child welfare administrative data, which yielded greater statistical power due to the larger sample size, we felt that step-downs were salient to emotional permanency. We theorized that the increased connections to kin identified and engaged through Family Finding might enhance the well-being of children and youth, enabling them to achieve step-downs. For example, connection to a supportive adult might result in improved mental health and avoidance of risky behaviors, which might enable a youth in congregate care to be able to live in a family setting, or might make a relative feel more comfortable about providing a home for a youth. In addition, stepping down to a family foster home, and in particular to a relative's home, may provide an opportunity for the youth to develop permanent emotional connections with that family. In turn, the more positive environment of a family home, compared with a congregate-care setting, or of a relative's home, compared with a non-relative's home, might be expected to improve the youth's well-being further.[6]

Our expectations about the effect of Family Finding on safety and on other outcomes were less clear than for our confirmatory outcome (i.e., step-downs in placement restrictiveness). For instance, safety is a more distal outcome; we assumed that children's safety was addressed primarily through their placement into foster care. We retained it as a secondary outcome, however, because we wanted to determine whether children's safety is maintained over time and as they move to different (and less restrictive) placement settings. Placement stability was also retained as a secondary outcome. Ideally, as placements become less restrictive, placement stability (excluding moves due to step-downs) will not suffer. And lastly, we saw permanency—including case plan changes to permanency-related goals rather than long-term foster care—as a less proximal outcomes. This view was based on our perception that

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[5] Well-being was assessed for a subset of youth in the full sample. Specifically, in-person surveys of youth age 13 and older at time of referral to Family Finding were administered to capture well-being information. The smaller sample size reduces the power available to test impacts on social supports and relationships.
[6] When legal permanency is the goal, the connections to kin achieved through Family Finding would be expected to improve youth well-being, facilitating his or her transition to reunification, adoption, or guardianship. The presence of a permanent, legal family for the youth would, in turn, be expected to support the youth's well-being.

minimizing placement restrictiveness and enhancing kin relationships and social supports are steps toward permanency. We expected that other well-being measures, such as mental health, avoidance of risk behaviors, and educational outcomes, would be affected primarily indirectly through Family Finding's effects on social supports and relationships and through its effect on permanency outcomes. Thus, effects on outcomes other than step-downs in placement restrictiveness, including social supports and relationships, are examined as exploratory.

To examine program outputs, outcomes, and linkages between the project components and other contextual factors, our process study included annual site visits to each of the participating counties and the development of a Family Finding case management database to document program activities and outputs, i.e., Family Finding activities and the resulting family connections. Child Trends worked with programmers to develop a Web-based database to capture child-level information on program activities and outputs, including details on each relative discovered and engaged and on each meeting held. During the annual site visits, we conducted interviews, focus groups, and observations with DSS and CHS staff to discuss program operations, program fidelity, challenges and facilitators to program success, and the overall child welfare permanency context in which the services were provided.

Research questions

The evaluation was intended to address several research questions. As shown in Table 1, the impact study addresses one confirmatory outcome related to placement restrictiveness. In addition, the study addressed exploratory questions pertaining to the potential effects of Family Finding on permanency, well-being, and safety, as well as additional impact- and process-related questions. Furthermore, we examined whether program impacts on the outcomes differed across subgroups of children. Qualitative information obtained from site visits leads us to believe that there may be differences in outcomes for different age groups. Younger teens might fare differently than older teens. In addition, differences might be found by the type of site to which children are referred, or by the race and ethnic origin of the child. The final sample sizes dictated the degree to which subgroup analyses could be conducted, so we were not able to examine whether impacts differed by race and Hispanic origin.

Table 1. Research Questions.

Impact evaluation	Process evaluation
Confirmatory question	How is each component of the Family Finding model implemented?
Compared with similar children not receiving Family Finding services, are those assigned to receive Family Finding services more likely to step down from higher restrictive placements?	
Exploratory questions	How similar are Family Finding services to the "services as usual" received by all children?

Compared with similar children not receiving Family Finding services, are those assigned to receive Family Finding services more likely to experience:
 • positive <u>child welfare permanency</u> outcomes? Specifically, are they more likely:
    o to be placed with relatives?
    o to achieve legal permanency?
 • positive <u>safety</u> outcomes? Specifically, are they more likely:
    o to avoid re-allegations of abuse/neglect?
    o to remain free of or experience a decrease in high risk behaviors?
 • positive <u>well-being</u> outcomes? Specifically, are they more likely to:
    o experience increases in the quality and quantity of relationships and social supports?
    o to maintain or experience improvement in their mental and physical health?
    o to maintain or experience improvement in academic achievement and skills readiness for achieving self-sufficiency?
	Is the number of connections identified positively associated with child welfare and safety outcomes? In particular, are children with 40 or more discovered connections more likely than are those with fewer discovered connections to have positive outcomes?
	
	 Is the number of connected individuals who participate in meetings positively associated with child welfare and safety outcomes? In particular, are children for whom six or more connected individuals participate in meetings more likely to have positive outcomes, compared with children who have fewer connected individuals who attend meetings?

Exploratory questions regarding sub-populations	
Do program impacts across outcomes differ for children referred at ages 13 through 15, compared with impacts for those referred at ages 16 through 18? Do program impacts differ for children referred to DHS sites, compared with impacts for those referred to CHS sites?	

The process evaluation was conducted to examine whether any of the differences between treatment and control groups (or lack thereof) in the safety and permanency outcomes may be attributed to the way in which the Family Finding model was implemented and/or to any contextual factors. The process evaluation can also help explain impact findings by assessing the degree to which traditional child welfare services received by the control group children resemble the activities implemented through Family Finding. For example, a finding that "services as usual" include services similar to those included in the Family Finding model, or a finding that Family Finding services were not implemented as intended, could help explain a lack of program impacts. In addition, we were interested in knowing whether specific Family Finding activities were associated with improved outcomes for children. Family Finding workers were encouraged to identify at least 40 connections for each child and to have at least six people representing these connections participate in a meeting.

Random assignment

During the planning process, counties were selected for inclusion in the evaluation if they did not have the capacity to serve all eligible children such that random assignment would be feasible. Random assignment of cases began in June 2008 and ended in May 2011, comprising a 35-month intake period. All eligible children referred for Family Finding services as a result of the funding from the Duke Endowment were included in the evaluation. Participation in the experimental evaluation was a prerequisite for receiving the program funds. Children were eligible for Family Finding services within each of the nine counties if they were 10 to 17 years of age (at time of referral) and if they had no identified permanent placement resource and no plan for reunification. In two counties, the original eligibility criterion for age was 13 to 17; however, after experiencing a decline in the number of eligible children in the first year of operation, the age category was expanded to include children 10 to 17. Younger siblings of eligible children were also included (assigned as a sibling group) if they, too, lacked an identified permanent placement resource or plan for reunification. Each county DSS agency ran queries of all children in custody to identify those children meeting the eligibility criteria. Child social workers and their supervisors then reviewed the lists of children and referred eligible children for Family Finding services.

At the start of the evaluation, Child Trends worked with programmers to develop a Web-based database to capture child-level information on program activities and outputs, including details on each relative discovered and engaged and on each meeting held. The Family Finding database application contains a random assignment module. In order to randomly assign a child to Family Finding services, the Family Finding worker waited until two eligible children (or sibling groups) had been referred. Users within each of the nine counties implementing Family Finding then entered the names and client identification numbers for the two children (or sibling groups); the module then randomly assigned one child to the treatment group and the other to the control group. Children's identifying information is stored in encrypted format, along with their random assignment status, so that this information could be used later to request state administrative data for the children involved in the study.

Data collection methods and data sources

We obtained outcome and covariate data from several sources, including child welfare administrative data and interviews with youth who were 13 or older at the time of referral. The process evaluation components describe how implementation occurred, including any barriers and facilitators to implementation; documented factors that influenced permanency and safety outcomes; and

documented similar services to Family Finding. We used two main sources of data for the process evaluation: annual program site visits and the Family Finding case management database.

<u>Child welfare administrative data</u>

To measure the program's impact on the children's permanency and safety outcomes, we attempted to collect administrative data on all children enrolled in the evaluation. We obtained outcome data from the state automated child welfare information system (SACWIS) for children as of October 2012. (See Appendix B for detailed definitions of each outcome measure derived from the administrative data.) We worked extensively with the public agency's data department to identify measures in their SACWIS to best capture the intended outcomes. The state provided placement data that included the start and end dates of every placement for every removal episode, as well as information about the type of placement (e.g., foster family home, group home). We received variables that identified whether children were placed with relatives (not including fictive kin). The state also sent information about each child's removal episode, including dates and reasons for removal, as well as dates of discharge from the foster care system, if applicable. In addition, we received information on case goals, but these data were missing for approximately half of the youth. Using these data, we examined the outcomes shown in Table 2 below. All were measured dichotomously, with the exception of the placement stability measures, which were counts. The confirmatory outcome was a dichotomous measure, with any move from a "higher" category to a "lower" category counted as a move to a less "restrictive" (broadly defined) placement and a positive outcome. Further details about the operation of the variables can be found in Appendix B.

As is frequently true with data extracted from administrative databases, we encountered some problems with the quality of the data supplied by the state. Inconsistencies in the data, notably the data on the children's placement moves, hampered the creation of some summary variables and required us to make assumptions about how to deal with the inconsistencies. We also obtained state administrative data from the School of Social Work at the University of North Carolina (UNC). These data included many of the same variables used in Child Trends' analyses, including variables that had been cleaned by UNC.[7] Using UNC's dataset, we replicated our analyses, to determine whether results from the two versions would yield similar results. This analysis was an approach for testing the robustness of the findings to alternative assumptions on how to treat inconsistencies in the data.

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[7] Child Trends collaborated with Dr. Dean Duncan at the University of North Carolina (UNC) School of Social Work, whose department analyzes data for North Carolina Department of Social Services, and he provided Child Trends with UNC's working dataset.

Table 2. Outcome measures

Indicator	Data source
Confirmatory outcome	
Child stepped down his/her placement during foster care episode	Child welfare administrative data
Exploratory outcomes	
Permanency • Discharge to reunification • Discharge to adoption, guardianship, or reunification • Latest goal: adoption, guardianship, or reunification • Latest goal: reunification • Latest goal: adoption or guardianship with relative	Child welfare administrative data
Safety • Re-allegation of abuse or neglect following study enrollment • Substantiated re-allegation of abuse or neglect following study enrollment	Child welfare administrative data
Placement restrictiveness • Child was discharged from foster care to a relative (reunification, guardianship, or custody) • Child was discharged from foster care to a relative (reunification, guardianship, or custody) OR child was discharged from foster care and last placement setting was with a relative • Child's last placement setting in foster care (regardless of whether child was discharged from care) is/was with a relative	Child welfare administrative data
Placement stability • Re-entry into foster care, among those who were discharged from foster care (excludes re-entries occurring within one day of prior discharge) • Number of disrupted placements • Number of placements	Child welfare administrative data

Well-being
(for youth age 13+ at study enrollment)
• Behavior problems
  ○ Internalizing; clinical and borderline/clinical
  ○ Externalizing; clinical and borderline/clinical
  ○ Total behavior problems; clinical and borderline/clinical
• Whether has any children (assessed for youth ≥ age 17 at interview)
• Social support scale
• Educational attainment
• College enrollment
• Self-efficacy scale
• Current placement setting
• Assets
• Material hardships (assessed for youth ≥ age 17 at interview)
• Whether knows how to contact mother, father
• Contact with: mother, father, siblings, grandparents, other relatives, other adults
• Closeness with: mother, father, siblings, grandparents, other adults, caregivers, other children in placement
	Youth interview data, collected 12 and 24 months following study enrollment

<u>Youth interview data</u>

Data on child well-being, obtained through in-person interviews with youth, were collected for study participants who were age 13 or older at the time of referral to Family Finding.[8] The interviews assessed a wide range of measures, including education, health, mental health, and psychosocial well-being. In addition, participants were asked about their connections to family members and other caring adults, and the types of support they receive from these individuals. In-person interviews with youth were conducted one year following random assignment, and again one year after the first interview. The interview protocol was adapted from the instrument used in the Multi-site Evaluation of Foster Youth Programs (the Chafee Evaluation). A few of the modules contained sensitive issues that required computer-assisted self-interviews. In addition, one module designed to assess behavior problems, the Youth Self Report (Achenbach, 1999), was administered via a pencil-and-paper questionnaire. The survey was administered in English. The data collection occurred in the child's placement setting and lasted approximately one hour. The interviews were conducted 12 months following assignment to the evaluation (i.e., referral to Family Finding for the treatment group) and again, 12 months following the first interview (approximately 24 months following services).

Lack of response was generally due to inability to find youth, rather than youth willingness to participate in the interview. Throughout the field period, the greatest challenge was locating youth who had aged out of foster care or otherwise left custody. The most common method for finding youth was through the social worker. When the social worker could not assist, online database searches for the youth and his or her known friends and relatives were used, as well as Facebook.

<u>Program site visits</u>

Qualitative information for the process study was obtained during three annual visits between 2009 and 2011. Child Trends developed semi-structured interview and focus group guides to address the process research questions (see Appendix C.) We interviewed Family Finding and child welfare agency staff members to learn about their experiences and opinions concerning Family Finding, document implementation, and learn about the local context within which the program operates. In particular, we interviewed the staff at the Family Finding agency to gather detailed information about the Family Finding process from case referral to case closure. We also inquired about any barriers and facilitators to

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[8] Interviews were carried out from summer 2009 through May 2013. A total of 307 youth completed the round 1 interview for a final response rate of 82.7 percent of all eligible cases and a total of 285 round 2 interviews were completed for a final response rate of 77.8 percent of eligible cases.

program implementation. When possible, we conducted observations of Family Finding activities to gather additional data on program implementation.

At each of the nine local DSS county offices, we conducted focus groups with supervisors to gather information about barriers and facilitators to program implementation, public agency buy-in of the model, and services similar to Family Finding, as well as information about the Family Finding agency's relationship with the child welfare agency. We conducted focus groups with social workers who had experience with the Family Finding program, as well as those who had no prior experience. We used the groups to learn about experiences with the program (if applicable); identify any barriers or facilitators to program implementation; and gather information about opinions, values, and barriers to achieving legal and emotional permanency for children in foster care. In cases in which the public agency provided services similar to components of the model (e.g., public agencies often conduct family team meetings, to bring families together to determine a plan of action for a child), we gathered information about when these other services began in the locality, the level to which they were accessed by social workers and children, the target population for the services, and eligibility for the services. Detailed information on the number and types of site visit participants over the study period is presented in Appendix D.

Family Finding case management database

For the process study, we also used data from the Family Finding database to document Family Finding activities. Family Finding workers entered information into the database on child characteristics; number and types of family members and other kin[9] at the start of Family Finding and those discovered through Family Finding, including their relationship to the child (maternal, paternal, sibling, or other); number of two-way contacts[10] that Family Finding workers had with family members; number of family meetings, including those invited to and attending the meetings; and results of the meetings. The database also captured the duration of the Family Finding activities and the degree to which Family Finding activities were implemented. Programmatic child-level data contained in the database are only available for children (and their siblings) in the treatment group.

In designing the Web-based database for the evaluation, we consulted with Kevin Campbell and Family Finding workers to obtain their input on model components and program outputs of interest. The

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[9] Family Finding workers were instructed to add any person related to or who had a potential connection to the child into the database. In rare instances, Family Finding workers added deceased family members (typically parents or grandparents).

[10] Two-way contacts could consist of in-person visits, phone conversations, reciprocal e-mail correspondence, or letters. Family meetings were not counted as two-way contacts, but were counted separately.

database screens reflect the key components of the model, while minimizing the burden of data entry. In order to limit the amount of missing and inaccurate data in the database, we provided ongoing training and technical support for data entry, and conducted regular audits of the data to ensure the completeness and accuracy of the information that program staff entered. In addition, we extracted data from the case management system so analyses could be conducted using statistical analysis software programs.

Analytic sample

A total of 574 children underwent random assignment (see Table 3). A lack of data on placement step-downs for some children reduced our analytical sample to 532 for our confirmatory impact analysis. The analytic sample for our analyses of well-being is smaller than the analytic sample for the administrative data outcomes; 387 were eligible for the round 1 interview because they were 13 or older at time of referral to Family Finding. Of these, 305 completed a round 1 interview 12 months following referral to Family Finding and 281 completed a round 2 interview 24 months following referral and could be included in exploratory analyses of well-being outcomes.[11]

Table 3. Study sample

	Total	Treatment	Control
Underwent random assignment	574	295	279
Obtained data on key outcome[*]	532	267	265
Eligible for round 1 interview (≥ age 13 and referral to Family Finding)	387	187	200
Well-being: Obtained round 1 interview data	305	143	162
Well-being: Obtained round 2 interview data	281	132	149

[*]The confirmatory outcome was whether or not children "stepped down" their placement during the study period. See Appendix B for detailed definition of the confirmatory outcome.

Sample description

Demographic and case history characteristics, based on administrative child welfare data, are shown in Table 4. Over half of the youth in the analytical sample were male (58%). Exactly half were non-Hispanic black, while 41 percent were non-Hispanic white. Nearly eight out of ten (79%) were older than 13 at study enrollment. On average, those in the analytic sample had spent three years and four months in foster care at the time of referral to the program, and the majority (60%) were in a non-relative foster

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[11] Because of difficulties with tracking ID numbers, interview data for a few youth could not be included in the final analytical sample. Hence, the number included in analyses of round 2 interview data (281) differs from the number for whom data were collected (285).

home, although a third were in a congregate-care setting. As can be seen in Table 4, the interview sample is very similar to the full sample in terms of demographic and case history characteristics, with the obvious exception that all were 13 or older at the time of study enrollment.

Table 4. Sample characteristics (based on child welfare administrative data)

	Full sample		Interview sample		
	N	% or mean	N	% or mean	
Child disabilities	532		300		
Emotionally disturbed		17%		15%	
Mental retardation		2%		2%	
Physical disability		1%		1%	
Vision/hearing		1%		0%	**
Other diagnosed condition		15%		10%	
Child is male	532	58%	300	51%	
Child age 13 or older at study enrollment	532	79%	300	100%	***
Child race and Hispanic origin	527		297		
Non-Hispanic white		41%		40%	
Non-Hispanic black		50%		51%	
Hispanic		6%		6%	
Non-Hispanic other		3%		4%	
Mean number of removals prior to and including the initial removal during the study period	532	1.2	300	1.2	
Mean number of months in foster care prior to study enrollment	522	39.9	293	38.6	
Type of placement setting at FF referral	487		264		
Other		0%		2%	***
Parents' home		1%		0%	
Parents' home-temporary		3%		3%	
Relatives' home		4%		3%	
Non-relatives' home		26%		26%	
Non-relatives' home - emergency, specialized, therapeutic		34%		33%	
Small congregate-care setting		17%		17%	
Large congregate-care setting		15%		16%	

*:Difference between groups is statistically significant p<.10 (*), p<.05 (**), p<.01 (***)

Additional information about youths' characteristics and experiences is available for those youth who participated in the interviews one year following study enrollment, as shown in Table 5. The

demographic characteristics are similar to those identified from the child welfare administrative data, with half of the youth being male, and about a third white, about half black, and about one in 10 Hispanic. About one in four had learning disabilities (26%). In addition, the vast majority had spent at least some time living in a group home or residential center (86%), and nearly one in three have had more than one spell of foster care (32%). A substantial share of youth also had parents who died; 13 percent of youth knew that their mother was dead, and 11 percent knew their father was dead. Only 61 percent knew that both parents were alive. (Some youth did not know whether one or both parents were alive.) Some of these circumstances and experiences may have arisen in the year following study enrollment. Still, the relatively high percentages of youth whose parents had died, who had spent time in congregate-care settings, who had multiple spells in foster care, and who had run away while in care make it seem likely that many in the population of interest were vulnerable and had experienced challenging circumstances above and beyond their histories of maltreatment.

Table 5. Characteristics of youth referred to Family Finding at age 13 and older, one and two years following study enrollment (based on interview data)

	12 months past baseline		24 months past baseline	
	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
Male	305	50%	281	48%
Age (mean)	305	16.5	281	17.5
Race	304		281	
White		34%		34%
Black		51%		54%
Other		16%		12%
Hispanic	305	10%	281	6%
Mother is known to be deceased*	303	13%	279	11%
Father is known to be deceased*	303	11%	278	12%
Both parents are known to be living*	304	61%	279	63%
Representative from school/health professional ever told youth he/she had a learning disability	304	26%	281	23%
Youth was ever previously in a group home/residential center*	162	86%	266	68%
Youth ever previously ran away*	304	42%	281	44%
Youth ever previously exited and then re-entered foster care*	303	32%	278	30%

*Note that data were collected one and two years post baseline, so it is possible that these incidents occurred after enrollment into the study.

Analysis methods

All data for the impact analyses, with the exception of the indicators that identify the child's experimental group status and the child's start date of services, were derived from administrative data provided from the state child welfare agency and from the youth interview data. Though limited demographic data and information on the children's placement histories were collected in the Family Finding database, these were available only for the treatment group, so we relied completely on the administrative and interview data for the impact analyses to avoid any bias in our analyses.

To estimate program impacts, we carried out intent-to-treat analyses (ITT),[12] that is, we examined the permanency and safety, placement restrictiveness and stability, and well-being outcomes for children assigned to the Family Finding intervention and compared these outcomes to those for children assigned to receive services as usual (i.e., the control group designation). This means that even if children were assigned to receive the Family Finding intervention, but did not do so for any reason, the child was retained in the treatment group. Fortuitously, we found very little evidence of random assignment contamination—specifically, cross-overs occurred only for three children.

We started with bivariate analyses, for which we compared the percentages of children in the treatment and control groups who experienced each outcome. In testing for the statistical significance of each pair of differences, we used robust standard errors that adjusted for the clustering of children in counties. Differences that are statistically significant are not likely to have occurred due to chance, but rather due to the impact of the program.

With a sufficiently large sample, randomly assigning children to receive the Family Finding intervention or services as usual should result in treatment and control groups of children that are statistically equivalent on characteristics that might affect outcomes of interest. This equivalence of the two groups is what allows one to infer with a high degree of certainty that the intervention, and not some other factor, is responsible for any observed differences in outcomes between the treatment and control groups. Differences that occur by chance can be controlled in multivariate models (although the groups may differ on factors for which data are not available). As shown in Table 6, with some exceptions, [13] random assignment appears to have been effective in producing groups with similar

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[12] ITT analyses are frequently used because they maintain the statistical similarities of the treatment and control group, thus maintaining our ability to attribute causality for any observed impacts on outcomes to assignment to the intervention.

[13] One difference of interest is the percentage of children in a non-relative home—specialized, emergency, or therapeutic setting—at time of referral to Family Finding (38% of control children, compared with 29% of treatment children).

characteristics. Therefore, we calculated two sets of regression models for the permanency and safety outcomes: [14] a bivariate set of models with no controls, and a set of models that controlled for characteristics that were found to be statistically significantly different for the treatment and control groups.[15] For the sample of youth 13 and older at referral, the treatment and control groups were similar on background characteristics with one notable exception. Treatment group members were more likely than were control group members to have a mother who died (18% compared with 9%).[16] Therefore, multivariate regression models testing for program impacts on well-being outcomes controlled for whether or not the youth's mother was alive and whether or not the youth's father was alive.

The regression models also improve on the descriptive analyses by accounting for the "nesting" of children not only in counties, but also in sibling groups. Additionally, the models for placement stability account for the length of time, since the longer a child is in foster care, the greater the number of placements, given a constant "rate" of placement changes over time. Because a single, confirmatory outcome is the focus of this study, no correction is necessary to the statistical significance of the impact on step-downs that would otherwise be required in examining impacts on multiple outcomes.

We also carried out analyses to test whether program impacts on child welfare and safety outcomes differed for subgroups of children, based on age at referral (13 or older versus younger than 13) and based on type of site (DSS versus CHS sites.) To test for subgroup impacts, we estimated models with interaction terms that allow the effect of assignment to Family Finding to vary depending on child age at referral and on type of site. Additionally, we estimated a separate set of models for subpopulations of children defined by age and type of site. Both sets of models control for the mean county differences in outcome rates. The difference between the two sets is that the first is constrained so that the same mean agency rates for each outcome being examined are assumed for all children, whereas the second set of models allows for different mean county differences in outcome rates for each subgroup. Readers may want to interpret these findings with caution. Because random assignment

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[14] Logistic regression models were estimated for all binary outcomes; Poisson models were estimated for the placement stability models in which the outcome was the number of placements; and ordinary least squares models were estimated for interval-level outcomes.

[15] For models using child welfare administrative data, these included being 13 or older at referral, being white, having entered foster care due to child behavior problems, having entered foster care due to inadequate housing, and placement in a non-relative, therapeutic foster home at the time of referral. For models using the interview data, these included having a mother and/or father who had died.

[16] All differences cited within the text are statistically significant at the 90 percent level of confidence.

was not stratified by age, some researchers may not consider the well-being analyses to be strictly experimental.

Table 6. Characteristics of children, by experimental group membership

	N	Treatment %	Control %	
Child disabilities	532			
Emotionally disturbed		19%	17%	
Mental retardation		3%	2%	
Physical disability		1%	1%	
Vision/hearing		1%	1%	*
Other diagnosed condition		13%	15%	
Child is male	532	59%	58%	
Child over age 13 at study enrollment	532	74%	79%	*
Child race and Hispanic origin	527			
Non-Hispanic white		37%	41%	*
Non-Hispanic black		54%	50%	
Hispanic		5%	6%	
Non-Hispanic other		4%	3%	
Mean number of removals prior to and including the initial removal during the study period	532	1.2	1.2	
Time in foster care prior to study enrollment	522	41.4	39.9	
Discharged from foster care (excludes discharges followed by re-entry into care on the following day)	532	63%	62%	
Mean length of foster care episode (months)				
Among all children	522	61.9	62.3	
Among children discharged from care	329	60.3	59.7	
Among children not discharged from care	198	64.5	66.8	
Type of placement setting at Family Finding referral	487			
Other		0%	0%	
Parent home		0%	1%	
Parent home-temporary		3%	3%	
Relative home		4%	4%	
Non-relative home		28%	26%	
Non-relative home - emergency, specialized, therapeutic		29%	34%	**
Small congregate-care setting		19%	17%	
Large congregate-care setting		16%	15%	

*: p<.10 (*), p<.05 (**), p<.01 (***)

As part of the process evaluation, to explore the association of program outputs with outcomes, we carried out bivariate analyses using data on the treatment group only. Specifically, we compared child welfare outcomes for those youth who had 40 or more connections identified with outcomes for youth who had fewer connections identified. Additionally, we compared outcomes for youth who had at least six family members who interacted with the Family Finding worker, with outcomes for youth who had fewer connections with interactions.

OUTCOME FINDINGS

Below, we first present the findings related to the impact of the intervention on our confirmatory child welfare outcome and other exploratory child welfare outcomes. Following this discussion, we present our findings on child well-being captured through in-person interviews with children 13 and older at the time of referral to Family Finding.

Confirmatory outcome

In Table 7, we present descriptive findings about the outcomes of interest compared for the treatment and control groups. Children who received Family Finding services were no more likely than were control group children to experience a step-down in their placement during the study period.[17] This was true both in the descriptive analyses (shown in Table 7) as well as in the regression analyses (not shown).

Exploratory child welfare permanency and safety outcomes

No impacts were found among any of the exploratory child welfare permanency and safety outcomes examined. This was true both in the descriptive analyses (shown in Table 7) as well as in the regression analyses (not shown).

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[17] The ability, i.e., power to detect differences between the two groups is determined by several factors. Specifically, sample size, the size of the difference between the outcome for the treatment and control groups, the variability of an outcome, and general prevalence can affect whether or not differences are detected. The smallest statistically significant impact we could likely have detected, given that 40 percent of the control group stepped down, would have been 38 percentage points (i.e., a minimum of 78% of the treatment group would had to have stepped down). Our power to detect a difference of this size would have been .80. In other words, in 80 percent of studies involving samples of this size and design, a difference between 40 percent and 78 percent would have reflected a true impact and not just a difference that occurred by chance.

Table 7. Outcomes of children, by experimental group membership

		Treatment	Control
	N	%	%
Confirmatory outcome			
Child stepped down his/her placement during foster care episode	532	43%	40%
Exploratory outcomes			
<u>Permanency</u>			
Discharge to reunification	531	7%	6%
Discharge to adoption, guardianship, or reunification	531	23%	23%
Latest goal: adoption, guardianship, or reunification	257	42%	42%
Latest goal: reunification	238	15%	17%
Latest goal: adoption or guardianship with relative	257	23%	18%
<u>Safety</u>			
Re-allegation of abuse or neglect following study enrollment	521	14%	17%
Substantiated re-allegation of abuse or neglect following study enrollment	521	2%	5%
<u>Placement restrictiveness</u>			
Child was discharged from foster care to a relative (reunification, guardianship, or custody)	531	12%	11%
Child was discharged from foster care to a relative (reunification, guardianship, or custody) OR child was discharged from foster care and last placement setting was with a relative	531	22%	21%
Child's last placement setting in foster care (regardless of whether child has discharged from care) is/was with a relative	499	26%	24%
<u>Placement stability</u>			
Among those who discharged from foster care, % that re-entered (excludes re-entries occurring within 1 day of prior discharge)	334	6%	5%
Mean number of placements (excluding placement changes that represent moves toward permanency)	532	2.6	2.7
Mean number of placements	532	3.2	3.2

*: Difference between treatment and control group is statistically significant p<.10 (*), p<.05 (**), p<.01 (***)

Exploratory child well-being outcomes

Because the group of children for whom well-being was assessed is a subset of all children enrolled in the study, our power to detect impacts on well-being was reduced. Furthermore, impacts on well-being were likely not directly related to the intervention, compared with impacts on child welfare outcomes, which we see as more proximal. More distal outcomes are likely to show smaller impacts than those that are more proximal.

We identified a few statistically significant differences between the treatment and control groups, based on data from the youth interviews (see Table 13 in Appendix E). First, 12 months following

random assignment, those in the treatment group were more likely than were those in the control group to live with kin or adoptive/biological parents as their current placement setting (30% compared with 20%, p<.10), and were also less likely to live in a non-kin foster home (40% compared with 54%, p<.05). By 24 months following random assignment, overall, a smaller share of youth was living in a non-kin foster home than was the case 12 months previously, and a larger share was living independently or with a roommate or significant other. This finding is not surprising, given that 57 percent of youth were 18 or older two years following random assignment; thus, many had exited foster care. This pattern continued to hold two years following random assignment, that is, youth in the treatment group were less likely to be living in a non-kin foster home than were control group youth (26% compared with 37%, p<.10). However, there were no longer any statistically significant differences for the treatment and control groups in the other types of placement settings.

We also found some potential impacts on contact with relatives. Specifically, 12 months following random assignment, a larger share of those in the treatment than in the control group had contact (though less than monthly) with at least one sibling (10% compared with 6%); had monthly or more frequent contact with at least one grandparent (47% compared with 37%); and had monthly or more frequent contact with at least one other relative (47% compared with 33%). Among those still in foster care at the time of the interview, a larger share of young people in the treatment group reported being close to at least one other child in the household (64% compared with 54%). However, 24 months following random assignment, these differences appeared to dissipate. A smaller share of treatment group youth had monthly or more frequent contact with at least one parent two years following random assignment (8% compared with 13%). However, this finding was explained in multivariate models by the larger share of treatment group youth who had a parent who died.

One finding about behavior problems favored the control group. Specifically, although those in the treatment and control groups did not show different rates of behavior problems at the first interview, a larger share of the those in the treatment group exhibited a clinical level of internalizing behavior problems at the second interview than did those in the control group (16% compared with 6%). This difference persisted even in the multivariate models that controlled for the higher share of youth in the treatment group who had a parent who died. Overall, regardless of experimental group membership, the percentage of youth with a clinical level of internalizing behavior problems remained unchanged between 12 and 24 months following random assignment.

A further finding, dealing with educational attainment, favored the treatment group: by the second interview, a slightly larger share of treatment group youth had achieved a general equivalency

degree than had those in the control group (8% compared with 5%). However, the share of treatment and control group youth with a high school diploma did not differ significantly. Not surprisingly, due to older ages of participants at the second interview, the share of youth (regardless of experimental assignment) with neither a high school diploma nor a general equivalency degree had declined. By wave two, the vast majority of youth—82 percent—continued to lack both credentials, but not all of those interviewed had reached age 18 by that time.

No impacts were found among any of the other exploratory well-being outcomes examined. These outcomes included: whether the young person had children; enjoyed social support; was enrolled in college; showed self-efficacy; had assets; experienced material hardships; knew how to contact each parent; had contact with the mother, father, or adults other than those noted above; or felt close to the mother, father, siblings, grandparents, other adults, or caregivers.

In sum, we did identify some significant impacts in the area of well-being, and all but one of these differences favored the treatment group. Some of the favorable impacts observed 12 months following random assignment had dissipated a year later. It is important to keep in mind that these findings should be interpreted with caution. Recall that the greater the number of outcomes that are examined, the greater the likelihood of finding a statistically significant impact merely by chance. Therefore, impacts on these exploratory outcomes warrant further research to determine whether the findings are robust.

Outcomes by type of site

To provide some context prior to reporting findings on impacts by type of site, we first review the characteristics of the children served in the two types of sites, as well as outcomes achieved in aggregate for treatment and control group children.[18] Children served in the two types of sites had similar demographic and case history characteristics, with some exceptions.[19] Specifically, compared with CHS children, a larger share of DSS children were 13 or older (83% versus 68%, p<.05). Further, a smaller share of DSS children had been removed due to parental death (2% versus 9%, p<.01). The two types of sites also achieved comparable child welfare and safety outcomes for treatment and control group children in aggregate.

Impacts on the confirmatory outcome (placement step-down) did not differ for CHS and DSS counties. Similarly, for most exploratory outcomes, no differences in impacts were found based on the

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[18] In three counties, the Family Finding program is operated by the Children's Home Society of North Carolina (CHS); in the remaining six counties, the program is operated by the Department of Social Services (DSS).
[19] See Table 2 in the Appendix for a comparison of child characteristics across DSS and CHS counties.

type of site. However, we did find some evidence that impacts on safety may differ for CHS versus DSS counties. In DSS sites only, treatment group children were half as likely as were control group children to have had a subsequent maltreatment report following enrollment in the study (OR=.51, p<.10). In addition, in DSS sites only, treatment group children were far less likely to have a subsequent substantiated maltreatment allegation (OR=.08, p<.10).[20] Note however that, overall, subsequent maltreatment reports were not common (16% of all youth in DSS sites and 14% of all youth in CHS sites; see Figure 1 for descriptive findings by experimental assignment group in DSS sites) and substantiated reports were especially rare (4% in DSS sites and 3% in CHS sites; see Figure 2 for descriptive findings by experimental assignment group in DSS sites).

Figure 1. Re-allegation of abuse and neglect by experimental assignment group, in DSS

Difference statistically significant at p<.05.

Figure 2. Substantiated re-allegation of abuse and neglect by experimental assignment group, in DSS sites

Difference statistically significant at p<.10.
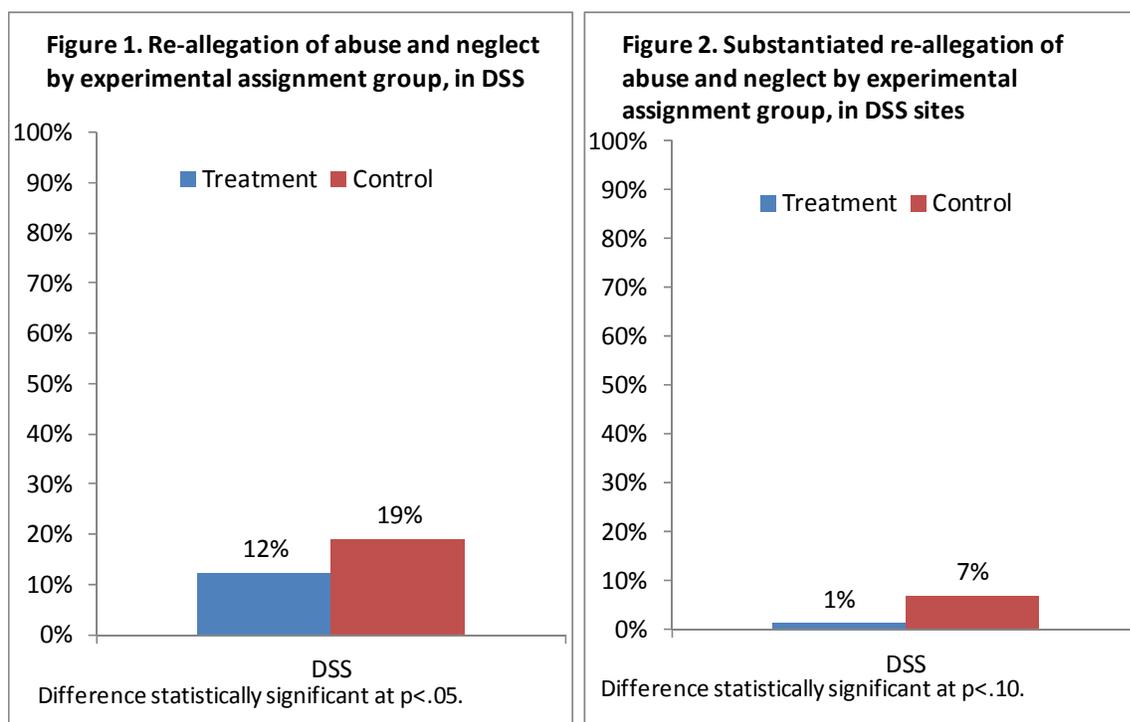
In interpreting these findings, it is important to note that our power to detect impacts was greater in the DSS sites than in the CHS sites, due to the larger sample size (N = 379 in DSS sites; N = 153 in CHS sites).[21] In fact, we had hoped to be able to examine site-specific impacts, but we determined that the sample sizes of individual sites were too small to carry out such an analysis.

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[20] These findings are based on the models run for the subgroup of DSS sites. Models with interaction terms for experimental group membership and type of site returned similar results.

[21] Readers may wonder how it is possible that an impact was detected in one subgroup but not in the full sample, when the power to detect impacts should be greater with the larger sample size of the full sample. In fact, the direction of the difference in safety outcomes favored the control group children in the CHS sample, rather than the treatment group. However, the size of the differences in CHS safety outcomes for treatment versus control group children—given the sample size—was too small to infer that it did not occur due to chance. Examining the

A few words on the use of maltreatment reports as an outcome indicator are in order. It is impossible to know the degree to which actual incidents of maltreatment are reported. If an increase in maltreatment reports represents not an increase in the actual occurrence of maltreatment, but rather an increase in the likelihood that maltreatment is reported, then an increase in maltreatment reports could be considered a positive finding. This result could occur with the implementation of an intervention due to an increased surveillance effect. That is, if families have more contact with program providers, then there are more opportunities for program providers to detect and report maltreatment. On the other hand, a reduction in maltreatment reports could also constitute a positive finding if it corresponds to a decrease in the actual occurrence of maltreatment. We had hypothesized that Family Finding might reduce actual maltreatment by strengthening the family network. In sum, the substantive significance of impacts on child maltreatment reports can be difficult to interpret. Nevertheless, we have included this information here because no other data on maltreatment were available.

Differences in impacts by child age

Impacts on the confirmatory outcome did not differ by child age; this was true for most exploratory outcomes, as well. However, we did find some evidence that impacts on placement stability may differ by child age. First, it is important to note that separate models (one for children referred to Family Finding prior to age 13, and one for those referred at 13 or older) showed no impacts on placement stability. However, a single model (using an interaction term) showed a positive impact on placement stability for the younger children. Specifically, for children referred prior to age 13, the rate of placement changes for those in the treatment group was about half that of those in the control group (IRR = .53).[22] Additionally, the rate of disrupted placements for those in treatment group was about a third that for those in the control group (IRR = .34).

Replication of analyses of impacts on child welfare and safety outcomes

We replicated all the impact analyses to the degree possible with data that had already been cleaned by UNC. While we did identify some trivial differences, findings pertaining to impacts were consistent with the analyses we carried out using data we ourselves had cleaned. We were not surprised to see some differences in the data, due to differences in the timing of the extract of the raw data and/or to

full sample masked the differing directions of the impacts (though statistically not significant in CHS counties) in the two types of counties.

[22] We used a Poisson model to calculate the incident rate ratio (IRR), which is appropriate for count data. The incident rate ratio provides information about the relative rate of some outcome for one group, compared with the rate for another group.

decisions made in the creation of specific variables. Overall, the replication provides some support that the robustness of the findings is not subject to different decisions about how the data should have been cleaned.

PROCESS STUDY: IMPLEMENTATION FINDINGS

Program components

Throughout the evaluation, the Family Finding model was implemented by a Family Finding worker, who, while not a case-carrying worker, conducted the Family Finding activities with between five and seven cases (siblings were considered one case) at any given time. Below we describe how each of the Family Finding components was implemented.[23] We also present information on the duration of Family Finding services.

Discovery

During the discovery phase, the Family Finding workers used a variety of methods to attempt to discover at least 40 family members or other adult supports for each child. The first step was to initiate a meeting with the child's social worker to provide introductions, explain the purpose of the Family Finding services, gather preliminary information about the child, and schedule a review of the child's case file. During this time, the Family Finding worker gathered information about the child's functioning (including the child's strengths and needs), known relatives and other adults, the current permanency goal, safety concerns, family history, and current and past foster placements. The goal of the meeting was to gather information about the current status of the child and the case, and to learn about the agency's relationship with the family to help the Family Finding worker determine the best direction in which to proceed. The Family Finding workers attempted to complete this meeting with the social worker within two weeks of assignment to the program, to maintain a sense of urgency regarding the case. Table 8 shows the number of family connections known at the beginning of the case per child,[24] the number newly discovered as a result of Family Finding, and the total number of family connections known by the end of the study period for all cases and by county type. For each category, Table 8 below

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[23] While described by the program developer as a six-step model, during our process study we learned that several components appear to have been merged during program implementation. Our organization of this section of the report reflects the information obtained during the process study—both during annual site visits and through the collection of child-level data in the web-based case management system.

[24] These connections were referred to in the Family Finding database as baseline connections, and were discovered as a result of the first conversation with the child's caseworker to determine whom the agency knew about already. Any persons found subsequently were considered new discoveries.

displays the percentage of children with fewer than 10 connections, the percentage with 10 to 25 connections, the percentage with 26 to 39 connections, and the percentage with 40 or more connections.

Table 8. Distribution of children served, by number of family connections at start of Family Finding and found during Family Finding

	Total	Type of site		
	(n=295)	CHS (n=90)	DSS (n=205)	
# of connections at start of Family Finding				
Fewer than 10	75%	70%	77%	
10 to 25	25%	30%	23%	
26 to 39	0%	0%	0%	
40 or more	0%	0%	0%	
# of connections discovered during Family Finding				
Fewer than 10	24%	8%	32%	***
10 to 25	26%	14%	32%	**
26 to 39	17%	21%	15%	
40 or more	33%	57%	22%	***
# of total connections known at end of Family Finding				
Fewer than 10	17%	6%	22%	***
10 to 25	23%	10%	29%	***
26 to 39	14%	9%	17%	*
40 or more	46%	76%	33%	***

*: $p<.10$(*), $p<.05$(**), $p<.001$(***)

For a majority of cases (75%), nine connections or fewer were known at the start of the case. On average, seven family connections were already known for each child at the beginning of the Family Finding case, and 34 new family connections were discovered during Family Finding. After the Family Finding services were initiated, in a third of the cases, Family Finding workers found at least 40 connections. On average, a total of 41 family connections were identified for each case (including baseline and discovered connections). The largest number of connections found for a child was 142. More than half (54%) of total connections discovered for each child were maternal family members, about a third (32%) were paternal family members, 12 percent had some other type of relationship to the child,[25] and 2 percent were full siblings.[26] It took an average of 34 days from random assignment for Family Finding workers to make a new discovery.

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[25] Other connections included those who were not related to the child but potentially could play a supportive role in the child's life.

[26] While 2 percent may seem like a small number of sibling connections, it should be noted that of children who had sibling connections, 83 percent were already in contact with at least one of their siblings.

Children with CHS workers tended to have a larger number of new family connections identified than did those with DSS workers; more than half (57%) had at least 40 relatives discovered, compared with 22 percent of children with DSS workers. Notably, 78 percent of children with CHS workers had more than 26 new relatives discovered, compared with 37 percent of children with DSS workers. Also, when compared to DSS children, those with CHS workers had a larger share of connections discovered with relationships other than maternal, paternal, or sibling. The distribution of total connections discovered throughout the case by type of connection (maternal, paternal, sibling, and other) was similar across the two types of sites.

The Family Finding workers performed an extensive review of the child's case file[27] to learn more about the child, piece together a picture of what was known about the child's family, and identify individuals in the child's past and current network who could serve as life-long supports or placement resources. The Family Finding workers typically reviewed the child's entire case history,[28] beginning with his or her entry into foster care, and then documented names, contact information, or other key information[29] that could assist in locating all individuals. All case notes and related court documents were a part of the case file review. This component of the model proved to be crucial, as it provided key contextual information about the family. Some Family Finding workers also found it useful to begin gathering information for a family tree to present to the family for the engagement phase. The case file also provided clues and possible links to information for the Family Finding workers to use in further searches for unknown relatives. At times, Family Finding workers found it useful to return to the case file after conducting other discovery

> **Diligent Search**
>
> Description: An exercise that involves searching for the whereabouts of relatives and others important to the child using Internet and administrative-based search tools.
>
> Observation summary: A Family Finding worker with experience in genealogy begins the diligent search process by using these skills. The Family Finding worker seeks out deceased relatives first in most cases, reviewing obituaries and death certificates. Finding out where family members are buried often leads to churches that family members attend. From that point, the Family Finding worker moves from the deceased relatives to their children. Who are they? Where do they live? Automated county birth and death records, court calendars, and Departments of Corrections and Motor Vehicle Web sites are all used to identify relatives. Other Internet search sites (e.g., Accurint, white pages) are utilized once the Family Finding worker starts to find living relatives.

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[27]The state does not have a state automated child welfare information system (SACWIS), so each county had its own case management systems. Some counties had electronic systems, whereas others kept case files in paper format only.

[28] In some instances, children's case records were older and stored in off-storage locations. There were some difficulties accessing these files in a timely manner. In these cases, the coordinators would proceed with all portions of the case file made readily available.

[29] Other information could include Social Security numbers, dates of birth, indicators of the individual's relationship to the child, and past contacts with the child.

methods to find additional clues, to do more digging in the file in case they reached dead ends, or to check for information that may have been missed during the first review.

If deemed appropriate by the social worker, the Family Finding worker met with the child to introduce the services and gather information on persons connected to the child. The social worker was often present during the first interaction to facilitate relationship building with the Family Finding worker. The Family Finding workers tried to manage the children's expectations and were careful not to mention the word "placement" or make promises about any outcomes. During the meeting, they allowed the children

<table>
<tr><td>Mobility Mapping (Connectedness Mapping)</td></tr>
</table>

<u>Description</u>: A tool used to document current and former living arrangements and the relationships from those arrangements. It involves gathering information in a non-threatening, structured manner that contributes to a personal, informative interview and builds rapport between the worker and the child. See more information here: http://familyfinding.org/uploaded_files/fck/files/Child_Trends-2011_12_01_RB_FamilyFindingTips.pdf.

<u>Observation summary</u>: A Family Finding worker conducted mobility mapping with a 15-year old foster youth in a small conference room at the county DSS building. Drawing on flipchart-size paper, the engaging, talkative youth identified numerous family and other adult connections that he would and would not like to pursue during the 30-minute exercise. Though not usually the case, this was the first meeting between the Family Finding worker and youth. The newness of the relationship did not appear to affect the extent to which the youth was open and willing to provide information about the different relatives he had lived with over the years, as well as the former and current foster care and group home placement providers.

to identify persons important to them and give names of those with whom they were interested in reconnecting, as well as the people they wanted to avoid. A variety of exercises were used during the initial interview with children to gather information. These exercises included mobility mapping (see text box), motivational interviewing, genograms, eco maps[30], and family trees.

Family members became a useful resource in identifying relatives who otherwise could have been difficult to find. In addition, family members helped confirm the names and contact information of other relatives. The Family Finding workers reported that the relatives often wanted to talk to other family members first before sharing their contact information. In addition, some Family Finding workers asked family members to draw a family tree (for both the maternal and paternal sides); this helped to facilitate the sharing of family history and information.

The Family Finding workers used different methods to begin their searches, drawing on their differing skill sets or backgrounds. For example, some had expertise in genealogy, whereas others could use their contacts gained through prior experience in the local social services system. During the discovery phase, the Family Finding workers maintained contact with the social workers, partly to

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[30] Similar to genograms, eco maps are graphical representations of all the systems (school, family, work, etc.) in a child's life. The map depicts the strength or type of relationships in the child's life, as well as the influence of systems on the child.

provide updates, but also to gather feedback on whom to contact versus whom to ignore.[31] The Family

Finding workers varied in the level of contact with the social workers, but generally kept ongoing contact

to ensure that they respected the boundaries of the case.

The Family Finding workers utilized several Web-based search tools to find contact information

for individuals identified during the case file review or during discussions with children.[32] One such tool

was *US Search,* but Family Finding workers reported that its high cost and frequently outdated data

made it less helpful than *Accurint*, another online search tool*.* In addition, Family Finding workers

generally agreed that the information available in *US Search* could be gathered from other sources. The

Family Finding workers typically used paid sites as a last resort. For international searches, Family

Finding workers sometimes contacted a country's embassy.[33]

Table 9 details the average number of connections discovered per child using various methods.

The methods yielding the highest average number of connections per child were engaging maternal

relatives, Internet searches, and case file reviews. Talking with the child's parents and using government

databases yielded the lowest average number of connections.

Table 9. Average number of family connections found per child, by discovery method†

	Total	Type of site		
	(n=295)	CHS (n=90)	DSS (n=205)	
Total using any method	41	62	32	***
Talking with maternal relative	11	23	5	***
Internet search	10	6	11	***
Case file review	9	9	9	
Talking with paternal relative	7	15	3	***
Talking with the child	6	7	2	***
Talking with social worker	5	8	3	***
Talking with mother	4	8	1	***
Federal/state/local government database	3	<1	4	***
Talking with father	1	1	1	

*: p<.10(*), p<.05(**), p<.001(***)
†Categories are not mutually exclusive.

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[31] If the caseworker or therapist determined that a relative would be harmful or not appropriate to contact, he or she would request that the Family Finding worker not contact this person.

[32] Tools included Accurint (also referred to as LexisNexis), whitepages.com, child abuse/neglect registry, findagrave.com, Facebook, MySpace, TANF services database, voter registration, tax records, criminal record checks, Ancestry.com, obituaries, birth and death records, food stamps records, Medicaid, child support, and motor vehicle records.

[33] Find Families in Mexico, a nonprofit created to assist persons looking for families in Mexico, was also mentioned as a helpful resource.

The relative success of each method for finding family members differed for children in CHS and DSS sites. The most successful approaches for children in CHS sites included speaking with relatives and engaging the child and parents, whereas for children in DSS sites, methods that were relatively more successful included conducting Internet searches, reviewing case files, speaking with maternal relatives, and using government databases. Overall, however, children in CHS and DSS sites had a similar average number of connections identified through case file reviews.

Program implementation varied somewhat across counties. Family Finding workers employed by DSS had easier access to social workers than did those employed by CHS, because they were usually housed in the same office with the children's social workers. This arrangement provided opportunities for building relationships with the social workers. Some of the DSS Family Finding workers were former public agency employees and had earlier relationships with the staff. Compared with CHS Family Finding workers, DSS Family Finding workers could more easily resolve issues with social workers, particularly in receiving return calls or feedback, simply by walking to the social worker's desk. In addition, CHS Family Finding workers lacked access to any automated child welfare case management systems available in the counties they served, whereas DSS Family Finding workers were allowed to access these systems. However, all of the Family Finding workers received access to the full hard-copy file. DSS Family Finding workers had the benefit of attending team meetings and being more integrated in day-to-day practice, which also helped bridge and connect them with the children's social workers. With diligent searches, the DSS Family Finding workers had access to a greater variety of government databases, such as food stamp records and child abuse registries. CHS Family Finding workers seemed to rely more heavily on free Internet searches and the children and families themselves. In CHS counties, Family Finding workers prepared *Adoption Chronicles* videos, which featured interviews with the children speaking in their own words about their likes and dislikes, and their wants for an adoptive family.[34] These videos were shared at family meetings.

Site-visit respondents identified several challenges to implementing the discovery phase of the model.

- *Reluctant families*. Some relatives were hesitant to give out contact information about other family members; in such cases, Family Finding workers asked them to pass along the Family Finding worker's contact information in case the other family members were willing to contact the Family Finding worker.

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[34] Since the evaluation's target population was children in foster care for long periods of time, adoption was the typical permanency goal. However, not every child recorded an *Adoption Chronicles* video. When the videos were first introduced, they were specifically used to aid adoption recruitment, but were later expanded and adapted to be used for Family Finding services.

- *Lost connections for children in foster care for long periods*. Some children who had been in the system for many years could not remember the names and contact information of their relatives. Also, social workers may not have been diligent in documenting family names, in particular those of paternal family members, when the child first entered foster care. Social workers may not have been able to obtain information about a child's relatives because of families' frequent reluctance to provide it when a child first enters custody. Because the Family Finding workers begin the discovery phase with the case file review, some Family Finding workers and social workers felt that a lack of baseline information in the case file made discovery a challenge.

- *Paternity not established*. Many of the Family Finding workers commented on the difficulty locating paternal family members if the father was unknown. Case notes on fathers were not as detailed in the past, so information in the file typically only included maternal relatives. In addition, mothers were not always forthcoming about information concerning the paternal side of families, which also made discovery difficult.

- *Older youth resistance.* Many of the Family Finding workers noted that older youth who had been in foster care for extended periods of time were more resistant to Family Finding services than were youth who had more recently entered care. Some youth were apprehensive about reconnecting with families that had been disengaged for a long period of time. Others had undergone therapy to break ties with their family, and had trouble reversing that process.

- *Searching out-of-state.* Many of the Family Finding workers cited the limitations of state-based search tools, such as state DMV records, food stamp records, and the local child abuse and neglect registry, in finding out-of-state relatives. This was particularly challenging in those localities that had more transient populations.

- *Social worker bias.* Some Family Finding workers reported that social workers may have resisted exploring one side of a child's family, due to worker biases against the family, or negative family histories. The Family Finding workers aimed to locate any family members or any adults with a relationship to the family, but social workers' opinions about appropriateness of connections between youth and particular family members (or particular branches of a family) sometimes hindered discovery.

Engagement

After the discovery phase was initiated, the Family Finding workers began contacting people identified as connections to ascertain their current or past relationship with the child and to explore their interest in attending a meeting to discuss the child's needs. During the first contact, the Family Finding workers explained the purpose of the services, and attempted to answer any questions, without revealing confidential case information. The Family Finding workers tried to underscore the urgency of the case, stressing that the child was in need of family supports, that foster care was meant to be temporary, and that the child needed unconditional love and acceptance.

The Family Finding workers also used the engagement phase to begin discussions about relatives' interests in serving as life-long supports or placement resources for the child. To not overwhelm relatives at the initial engagement stage, Family Finding workers stressed the importance of keeping initial conversations general and not focusing on any particular action, but instead on explaining that a related child was in foster care and needed help. Frequently, the Family Finding workers served as a listening ear to relatives who were frustrated about prior experiences with the child's parents and/or the child, as well as with the agency. They also provided some material support such as help with transportation to meetings, coordinating birthday parties, and attending family reunions/cookouts.

On average, for each child, it took 52 days to begin engaging family members and on average, the Family Finding workers engaged with five persons per child. Engagement with maternal family members was more common than was engagement with paternal family members; on average, Family Finding workers engaged with three maternal family members versus two paternal family members per child. Among family members contacted successfully by the Family Finding workers, there were 12 interactions (e.g., back-and-forth communication between the relative and Family Finding worker) per child, on average.

Across identified family members, it took an average of 63 days for each child in CHS sites and 47 days for each child in DSS sites for the worker to begin engaging family members. On average, CHS workers engaged with nine people per child, while DSS workers engaged with four. Workers in both county types engaged most frequently with maternal family members. The average number of interactions that a Family Finding worker had per child was 21 for CHS workers, and eight for DSS workers.

During the engagement phase, the Family Finding workers attempted to contact all potential connections for the child. This sometimes included individuals with criminal or child abuse histories, as these persons could often provide information on other relatives, even if it was not appropriate for the child to connect with that person. In some instances, Family Finding workers were able to run criminal background checks to assess appropriateness of a family member as a contact. The decision for the Family Finding workers to seek contact with such persons was usually made on a case-by-case basis.

The Family Finding workers mentioned that it was useful to begin with older relatives who were knowledgeable about the family history and appeared to be the "gatekeepers" to the family. Identifying such influential leaders within each family early often helped facilitate and speed up the process, according to Family Finding workers. While Family Finding workers attempted to contact all persons they had located, they tended to concentrate more on those who responded to their inquiries.

Initial contacts were usually conducted by phone or by mailed letters. All Family Finding workers agreed that in-person communication was the best method of contacting relatives, though not always feasible. In more rural areas, Family Finding workers reported that initial contact involved visiting the homes of relatives who might be potential contacts for the child. The workers commented that in-person visits were helpful in gathering more information about the family in a setting that was comfortable for the relative. There were numerous occasions in which the Family Finding workers traveled to coordinate family meetings in another state. CHS Family Finding workers seemed to have more flexibility than did DSS Family Finding workers in visiting relatives out of state.

In some instances, the Family Finding workers continued attempting to contact unresponsive relatives until they felt an adequate number of relatives had responded. In other instances, if an adequate number of persons were readily available, workers would stop attempting engagement and move on to the meeting and planning phase of the model. The Family Finding workers commented that when they encountered relatives who did not respond after multiple (typically three) attempts, they usually moved on to someone else. However, if they failed to engage anyone in the family, they would increase their effort to contact non-responsive relatives.

For the most part, social workers were not involved in engaging relatives during this phase of the model. However, in some instances, Family Finding workers benefitted from existing relationships that the social worker may have had with relatives and they conducted in-person contacts together. In other cases, the Family Finding worker contacted relatives alone, in order to maintain neutrality and disassociate themselves from the child welfare agency. Such independent contact was useful when families harbored negative feelings about the agency. Regardless of the level of involvement, all of the Family Finding workers agreed on the importance of keeping the social worker apprised of progress contacting relatives as a way to facilitate ongoing communication with the family and the worker after the Family Finding case ended. In addition, the Family Finding workers checked with the social workers to make sure that engaging with anyone they discovered was appropriate.

Child involvement during the engagement phase varied considerably across cases. Some children were given information about how their cases were progressing at each step in the process, including the fact that the agency was seeking family members and engagement efforts were underway. In other cases, the children were less involved and not told of the process until the social worker and the therapist deemed it appropriate, or until relatives had committed to an ongoing relationship with the child.

As noted previously, the children were given the opportunity to identify family members with whom they did not want contact. In all cases, the Family Finding workers consulted with and gained approval from the child's social worker and—in some cases the therapist—before initiating contact between children and relatives. Decisions on family and child contact depended on a number factors that could include the child's age, mental capacity, or length of time in foster care, as well as any criminal history of the relatives.

Site-visit respondents identified several challenges to implementing the engagement phase of the model.

- *Reluctant families.* Family Finding workers in all counties noted that relatives were sometimes hesitant to engage for a variety of reasons. Many families had multigenerational and frequently negative involvement with the child welfare agency, and many did not want the agency involved in their lives. Some relatives preferred to wait until the child aged out of the child welfare system before they became involved to avoid interaction with the agency. Some families had previously been told that the children had been adopted and were unaware the child was still in foster care. Other relatives were hesitant to get involved because they did not want to re-engage with the child's birth parents, even after the agency assured them that the birth parents' rights were terminated and the parent was no longer involved. They worried about how the birth parents would feel about the relative's participation.

- *Child resentment*. Some children expressed frustration that relatives had not attempted to maintain contact or reconnect with them. Some relatives worried about the children having ill feelings towards them for not being involved previously.

- *Out-of-state relatives.* Engaging out-of-state relatives presented a challenge since funding and timing made it difficult to appeal to them in person or for them to attend family meetings. Some relatives did not fully understand how they could serve as a support to the child if they were not living nearby and did not see the value in long-distance contact, such as writing letters to the child.

- *Resistance from child welfare professionals.* In some instances, therapists and social workers were cited as barriers to engagement. They sometimes disagreed about whom in the family the Family Finding worker should contact. Also, the therapists and social workers sometimes delayed the process of contacting relatives or commented that the Family Finding process was "moving too fast." Sometimes therapists wanted to approve the Family Finding worker's activities at every phase and be involved in making such decisions as whom to contact and when. This situation delayed the Family Finding process and did not mesh well with the short-term goals of the intervention.

Planning and Decision-Making

During the planning and decision-making process, the Family Finding workers held meetings with family members with whom they had engaged successfully. The goal of the meetings was to identify three viable plans to support the child. On average, one family meeting was held per child. An average of six individuals with family connections per child were invited to any meetings held on behalf

of the child, and an average of three actually attended at least one meeting. An average of three individuals with maternal connections to the child were invited to any meetings and one attended; an average of two paternal family members per child were invited to any meetings and one attended; and an average of one person who was an "other" type of connection was invited to any meetings. Twelve percent of all connected individuals per child were ever invited to any meeting, and six percent of such individuals attended at least one meeting. The average time to the first meeting after random assignment, averaged across meetings per child, was 3.5 months.[35] On average, eight family members per child were invited to at least one meeting, and an average of five attended at least one meeting in CHS counties, whereas an average of six family members per child were invited to at least one meeting and two attended in DSS counties (see Table 10).

In CHS counties, an average of 12 percent of all connections per child were invited to at least one meeting and 7 percent of all connections attended at least one meeting. The average time to the first meeting held after random assignment was four months. In DSS counties, an average of 12 percent of all connections per child were invited to at least one meeting and 5 percent attended at least one meeting. The average time to the first meeting was three months.

The Family Finding worker attempted to convene two meetings; the first to identify the child's needs and the second to make decisions related to his/her legal and emotional permanency. The meetings tended to be held at DSS/CHS offices, or at a family member's home. Flexibility was important when scheduling the meetings, which were often held on weekends. Other important people in the child's life, such as guardians *ad litem*, teachers, or preachers, were also invited to the meetings.

Table 10. Average number of family members per child invited to at least one meeting and average number attending at least one meeting

	Total	Type of site		
	(n=295)	CHS (n=90)	DSS (n=205)	
Family members invited	6	8	6	**
Maternal members	3	4	3	*
Paternal members	2	2	2	
Full siblings	<1	<1	<1	
Other connections	1	1	1	*
Family members attending	3	5	2	***
Maternal members	1	3	1	***
Paternal members	1	1	1	*
Full siblings	<1	<1	<1	
Other connections	<1	1	<1	

p<.10(*), p<.05(**), p<.001(***)

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[35] The median time to the first meeting was 43 days.

The first meeting, the Blended Perspective Meeting, was typically held a few weeks after the initial contact between the Family Finding worker and the family. The Family Finding worker welcomed the participants and inquired individually about why each came to the meeting. If the primary social worker was present, he/she shared some basic information about the child (such as current status in the system, strengths, and hobbies) and the Family Finding worker then facilitated a discussion about the needs of the child and whether or not the needs were being met. The Family Finding worker also shared the child's mobility mapping exercise, if one was completed. Another common exercise was a Connect-o-Gram or Connectedness Map, in which the participants identified and visually depicted who is currently in the child's life to assess the child's level of loneliness. Some Family Finding workers used the time to complete or fill in any gaps in the child's family tree.

During the second meeting, commonly referred to as a Network for Life meeting or decision-making meeting, the unmet needs statement was reviewed and plans were developed to facilitate achievement of emotional and legal permanency for the child. The discussion focused on how the family could be a support for the child, while the Family Finding worker cautioned family members not to commit to more than they could handle. The family then made a plan for how the commitments would be put in place, usually developing a primary plan and frequently one or more fallback plans, should the other plan(s) fail. Some Family Finding workers pushed for three to six alternate plans. In other counties, the Family Finding workers did not report many cases in which alternate plans were made. If any family members were interested in being a placement for the child, the social worker completed the necessary background information checks to determine the feasibility of such a placement. Initially, some Family Finding workers reported using a Network for Life Meeting form to document the names and contact information of those who had agreed to serve on a life-long supportive team for the child, the plans developed, the action steps for enacting each plan, and the timeframe for completing the action steps. However, as the program moved forward, the Family Finding workers only reported summarizing the notes from the meeting and providing the team and child's social worker a copy. Figure 3 shows the percentage of children for whom specific activities were included in the plans agreed upon by family members.[36]

Table 11 shows the percentage distribution of children served, by the number of family members who committed to family plans. Sixty-three percent of the children served had at least one

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[36] The question in the Family Finding database that asked if any family member committed to supporting the child was added to the database several months after the start of the evaluation, so this information is unknown for 42 cases.

placement resource per child. Seventy-five percent of the children served by CHS workers had family members commit to ongoing contact after the Family Finding case ended, whereas 57 percent of children in DSS counties had family members commit to ongoing contact. On average, one person per child agreed to be a placement resource in both county types.

Figure 3. Percentage of children for whom various types of plans were made

	Regular Communication	Occasional Visits	Regular Day Visits	Occassional Communication	Occassional Financial/Material Support	Regular Overnight Visits	No Plans
Total, n=253	49%	26%	24%	23%	13%	12%	40%
CHS counties, n=79	70% ***	24%	32% **	23%	10%	6% *	25% ***
DSS counties, n=174	40%	26%	20%	23%	15%	14%	47%

: Difference between CHS and DSS sites is statistically significant (: p<.10, **: p<.05, ***: p<.01)
Note: Family connections could agree to more than one type of plan.

Table 11. Distribution of children served, by number of connections committed to plans

| | Total (n=253) | Type of site | | |
		CHS counties (n=79)	DSS counties (n=174)	
1 to 3 connections	32%	29%	33%	
4 to 6 connections	21%	25%	18%	
7 or more connections	10%	20%	6%	***
No plans developed†	37%	25%	43%	***

p<.10(*), p<.05(**), p<.001(***)

†There is a slight discrepancy in the percentages of children for whom no plan was developed, because the database field for the number of connections committed to the plan sometimes indicated a family member agreeing to a plan when the database field for the type of plans made for a specific child for that same child indicated that no plans had been developed.

A notable difference between CHS and DSS implementation pertains to the use of a third meeting in the DSS counties. If necessary, a third meeting—the Family Finding Road Map meeting—was typically scheduled for two to three weeks after the Network for Life Meeting. The purpose of this meeting was to obtain updates from the team on progress with the action steps and to address any challenges that the team had faced in completing the action steps. In one DSS county, a Family Finding Road Map Meeting form was used to document whether team membership and leaders had been identified, discussions around the timeline, problems encountered and solutions identified, and the progress made towards each plan and adjustments to timeframes as necessary. In two other DSS counties, a Family Finding Final Meeting Survey was completed at the last meeting. The form, developed by the state, was used to document the number and types of relatives known at baseline, discovered and contacted during service delivery, and still involved in the child's life. The team members, including family members and professionals, then collaboratively completed a series of questions that assessed whether the child's safety/risk, medical, emotional, and academic well-being had remained stable, improved, or declined since the start of Family Finding services. The form also noted the presence of legal and emotional permanency plans at the start of Family Finding, as well as at the closing of Family Finding services.

The Family Finding workers reported difficulty in getting to and implementing the planning and decision-making stage and cited a combination of reasons, including:

- *Difficulty scheduling meetings.* Family Finding workers reported that distance between relatives and the Family Finding worker made it difficult to coordinate planning meetings. Transportation costs presented a barrier for some families.

- *Family dynamics.* Some family members did get along very well, and some had heated arguments during the meetings if they did not agree on the plans for the child. Some Family Finding workers

noted that they tried to have separate meetings with individuals from different sides of the family when it was clear that there was tension. In addition, the workers occasionally used trained, neutral facilitators to moderate the planning meeting.

- *Lack of follow-through.* Relatives not showing up for meetings or not following through on action steps developed during the meetings was identified as an additional barrier.

Evaluation and Follow-Up Support

Although program developers describe the model as having separate "evaluation" and "follow-up supports" components, respondents did not describe or implement these components. On average, a Family Finding case lasted five months. The Family Finding workers usually minimized their involvement at the end of a case, transitioning the responsibility for continued family involvement to the family and social worker. By the end of the planning meeting, family members were encouraged to contact the child's social worker about future concerns. For example, the Family Finding worker in one county completed her formal role after the decision-making meeting, but often called the family leader and social worker once a month for three to four months to encourage connectedness. In another county, the Family Finding worker mentioned providing informal follow-up for youth who had aged out of care, as they no longer have primary social workers.

It is evident that two of the model components—evaluation and follow-up supports—are less understood and therefore, not fully (and in some counties not even partially) implemented. As Family Finding workers stepped back after completing discovery, engagement, and planning and decision-making components, the remaining model components fell largely to the social worker handling the case to complete. Unfortunately, the Family Finding workers noted that these components of the model were not as well articulated during training sessions, and ultimately were not well understood by either the Family Finding staff or the social workers expected to follow through on these activities.

Similarities of services received by children in the control group and in the treatment group

In addition to barriers or facilitators to the implementation of Family Finding, the degree to which the services received by children receiving traditional child welfare services is similar to the Family Finding services may help explain the presence or absence of program impacts. For example, if workers and agencies are engaging in Family Finding strategies as a matter of course outside of the Family Finding program, one would expect to see treatment and control group children achieve similar outcomes. During site visits, social workers reported that, while some children received services that would be considered somewhat similar to Family Finding outside of the Family Finding program, these services and activities are not as intense or thorough as those performed by the Family Finding workers. Both

treatment and control group children received services outside of the Family Finding intervention that were similar to three of the six components of the Family Finding model: discovery, engagement, and planning/decision-making.

Discovery and Engagement

Social workers reported that diligent searches are conducted on all cases upon entry into the system. However, these searches are limited primarily to searching for the whereabouts of biological parents and other immediate relatives. Social workers are able to make diligent search referrals for other children on their caseloads, but they are responsible for any follow-up with identified family members. In one county, site-visit participants noted a program similar to Family Finding in which social workers were provided access to online search tools. Access to these search tools was reported as a reason for the declining numbers of youth referred for Family Finding in this particular county.

While the 2008 Fostering Connections federal legislation requiring states to notify relatives of children placed in out-of-home care (see earlier discussion, page 3) has likely affected states' engagement with relatives; in North Carolina, county-level implementation of the requirement[37] occurred late in the study period. In addition, given the legislative timeframes (i.e., notification within 30 days after a child enters custody), it seems unlikely that this new relative outreach practice would have significantly affected the target population of children who had been in out-of-home care an average of 40 months prior to referral to Family Finding. (See Table 4).

Planning and Decision-Making

Several planning team meetings are held during the course of a case. A Team Decision Making meeting is held for all cases prior to a child coming into custody. These meetings are also conducted each time a child changes placements and can be convened at any other time as necessary to reevaluate the needs of a child and develop a plan to meet those needs. Child and Family Team meetings are held 30, 60, and 90 days after a child enters foster care, and every six months thereafter. If the child or teen is receiving mental health services, Medicaid standards dictate that these meetings occur monthly. Any person involved with the case is invited to these meetings, which can include birth family members, foster parents, therapists, school representatives, guardians *ad litem*, or other concerned individuals, such as ministers, neighbors, or substance abuse counselors. Families are encouraged to invite people they have identified as supports in their lives. Permanency Planning Action Team meetings, or treatment team

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[37] Primary social workers mail out relative notification letters including a "relative interest" form which asks if the relative is willing to have contact with or be a placement for the youth. The letters are sent out within 30 days of a child coming into custody.

meetings, are also held every three months to review the youth's case plan, and are usually only attended by professionals involved in the case.

Association of program outputs with youth outcomes

We were interested to know whether the total number of family connections (discovered) was associated with the likelihood that children would experience positive outcomes, and similarly, whether the number of discovered family members who interacted with the Family Finding worker was associated with positive outcomes.[38] Such an analysis is non-experimental, because it can only be carried out with children who received Family Finding services. Using the administrative data, we

Figure 4. Percentage of children who stepped down their placement during their foster care episode, by number of connectison and by number of connections that had interactions

Note: ***: p < .01, **: p < .05, *: p < .10

found that most outcomes do not appear to differ by the number of family members connected to a child who interacted with the Family Finding worker, with a few exceptions. Specifically, the percentage of children who had a step down in their placement was larger for children who had at least 40 connections than it was for those who had fewer total connections identified (49% compared with 38%; see Figure 4). Similarly, the percentage stepping down in their placement was larger for children who had at least six family members who interacted with the Family Finding worker, compared with those who had fewer family members who interacted with the Family Finding worker (56% compared with 37%).

Having 40 or more discovered connections and six or more connections with interactions was also associated with children exiting foster care to adoption, reunification, or guardianship, but in a way that did not favor a positive outcome. Specifically, 17 percent of children with 40 or more discovered connections discharged to permanency, compared with 25 percent of those with fewer connections. Additionally, 15 percent of children who had six or more family members who interacted with the

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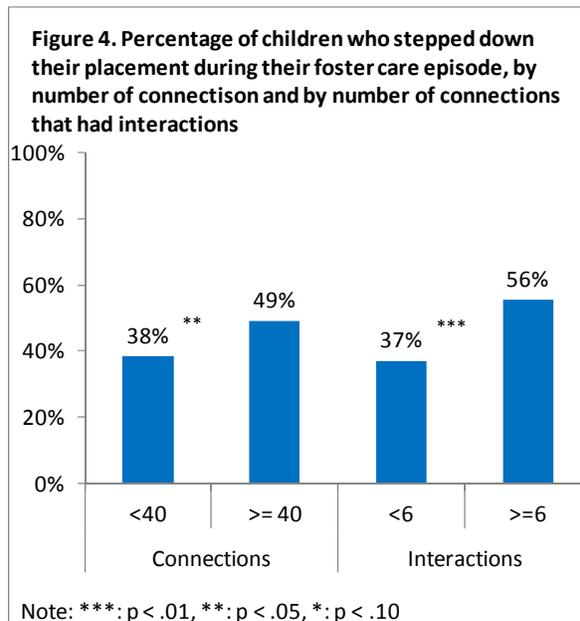
[38] As described earlier, the model emphasizes discovering a minimum of 40 family members as a key component. Additionally, during training sessions of Family Finding workers, Kevin Campbell, one of the model developers, cites engaging with at least six family connections as another important element of the model. Detailed information on the number and types of family connections discovered and engaged is provided in the next section of this report which describes the study's implementation findings.

Family Finding worker were discharged to permanency, compared with 25 percent of those with fewer family members having interactions (see Figure 5).

We recognized that it was possible that the number of connections discovered, and/or the number of family members who had interacted with the Family Finding worker might be associated with outcomes, but that perhaps the "tipping points" of 40 (for total connections discovered) and six (for connections with interactions) that had been defined a priori might not be appropriate. As a check, we divided children roughly into quartiles (that is, four groups of similar sizes) according to the number of connections and the number of connections with interactions. We then examined the percentage of each subgroup group of children who achieved a desirable outcome, as shown in Appendix D. Findings suggest that, in fact, there may not be a clear tipping point for the number of connections and interactions that might matter for the outcome of stepping down. The biggest difference in the percentages of children achieving a step-down in their placement occurred between the two lowest quartiles (49% of those with 18 to 39 total connections stepped down, versus 27% of those with fewer than 18 connections; 45% of those with one to five interactions stepped down, compared

Figure 5. Percentage of children who discharged to adoption, guardianship, or reunification, by number of connections and by number of connections that had interactions

Note: ***: $p < .01$, **: $p < .05$, *: $p < .10$

with 205 of those with no interactions) rather than between the second and third quartiles (which represent the predefined breaks of 40 or more connections and six or more interactions).
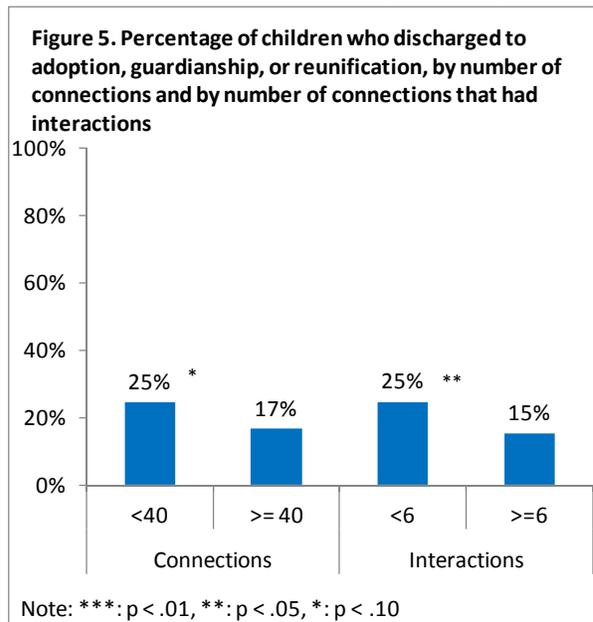
Outcomes for all youth served

Although we found no statistically significant differences in step-down placement movement between the treatment and control groups, we were interested in finding out whether there was movement from more restrictive settings to less restrictive settings within the entire study sample. If many or most children already achieve positive outcomes in the absence of an intervention, then it can be difficult for an intervention to improve on those outcomes. This possibility is important to consider, because the program impact is measured as the improvement in outcomes *above and beyond* what is achieved through services as usual.

Figure 6. Distribution of all children (treatment and control groups) by placement settings, for start and end (24 months) of study period
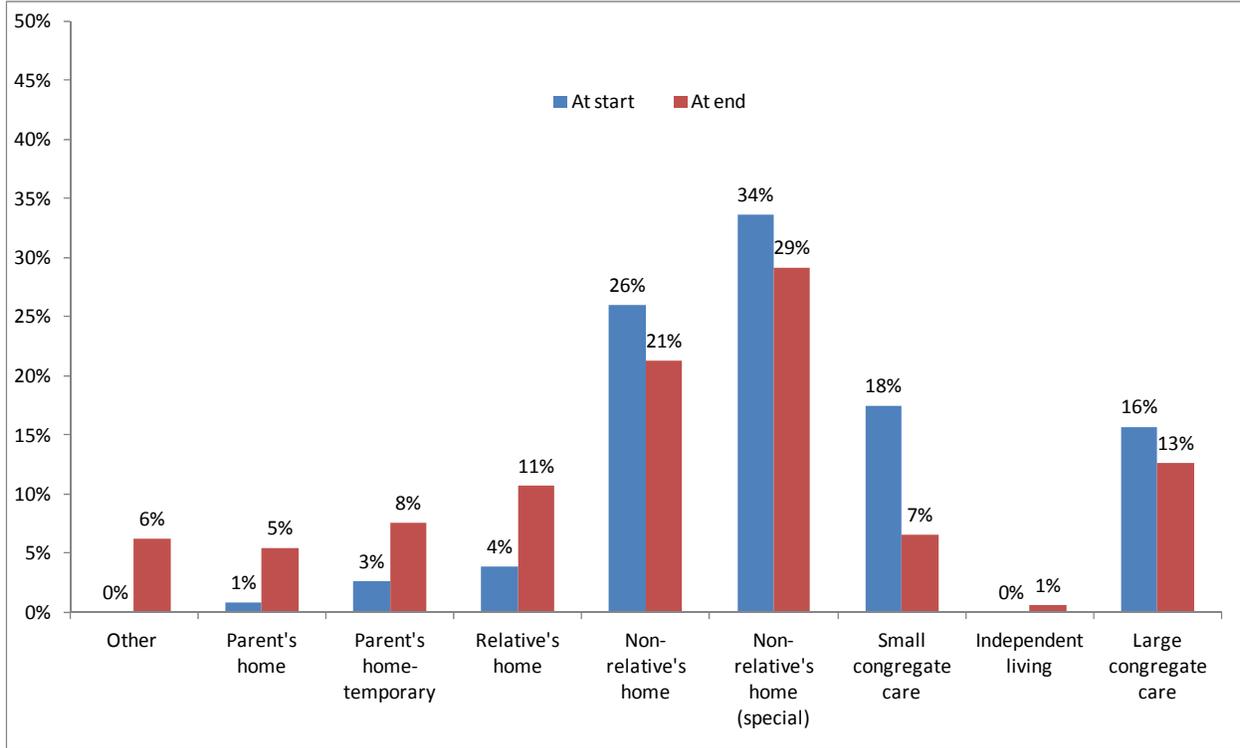
Figure 6 shows the distribution of all children by their last placement setting in foster care, separately for the start and for end of the study period. For youth no longer in foster care, Figure 6 indicates the last placement setting prior to exiting care. Because the administrative data were current as of October 2012, and because youth were randomly assigned between June 2008 and May 2011, the length of the time between random assignment and information on the last placement setting ranges from five months to slightly more than four years. We have combined the treatment and control group children because the patterns—when examined separately—are very similar. The bars on the left pertain to less restrictive placements (with the exception of the left-most bar representing "other" types of placements that cannot be categorized easily), with more restrictive placements represented farther to the right on the horizontal axis. In general, across the nine North Carolina counties included in this study, larger percentages of children were in less restrictive placements at the end of the study period than at the beginning. Despite the movement toward less restrictive settings, substantial shares of children remained in congregate-care settings and/or were living with non-relatives at the end of the study period.

Further information on how the population as a whole fared by the end of the study period can be gleaned from the youth interview data. These data provide a richer picture about the characteristics

and circumstances of youth in (or who had been in) foster care than do the child welfare administrative data (see Appendix F). The few differences between the treatment and control groups are discussed in the above section summarizing outcome findings. Behavior problems were not uncommon for young people in this sample; 33 percent had a borderline or clinical level, and 19 percent had a clinical level of problems. One year following study enrollment, nearly half of the youth were living in a non-kin foster home (47%), one in four was living with kin (whether in foster care or not) or adoptive or biological parents (25%) and one in four was living in a group home or residential center (20%).

The majority of those interviewed know how to contact their mother (62%) and a substantial share know how to contact their father (40%). The interview collected information on the share of youth with no contact, less than monthly contract, or monthly or more frequent contact with various relatives and other adults; it also collected information on youths' closeness with these individuals (see Figure 7). At the 12-month follow-up, sizeable portions of respondents reported having at least monthly contact with their mother (42%), father (21%), any siblings (among those with siblings, 80%), any grandparents (42%), any other relative (40%), and other adults (94%). Furthermore, the percentages of youth reporting being close with various relatives and adults were similar to the percentages reporting being in contact.[39]

Overall facilitators and challenges

Our process evaluation work led to a greater understanding of overall program and contextual factors that likely influenced how Family Finding impacts children's outcomes. While several barriers and facilitators were relevant to the implementation of specific program components (described earlier), here we describe challenges and facilitators relevant to the overall program, as well as ways in which agency context may have affected implementation. Because programmatic factors pertain to the specific ways in which Family Finding services were delivered, they, in turn, would be expected to affect client outcomes. However, the programmatic factors likely had a spillover effect by affecting general agency practices more broadly; this, in turn, could affect outcomes of all children, not just those served by Family Finding. For example, training sessions on Family Finding were provided not only to Family Finding staff, but to other groups of agency staff as well.

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[39] Specifically, 42 percent reported being close with their mother, 22 percent with their father, 90 percent with at least one siblings (among those with siblings), 46 percent with any grandparents, 98 percent with at least one other adult, 58 percent with at least one other child in the household (among those in foster care), and 90 percent with caregivers (among those in foster care).

Figure 7. Percentage of youth age 13 and older at study enrollment who feel very/somewhat close to various relatives and who have >= monthly contact with various relatives, 12 and 24 months following enrollment
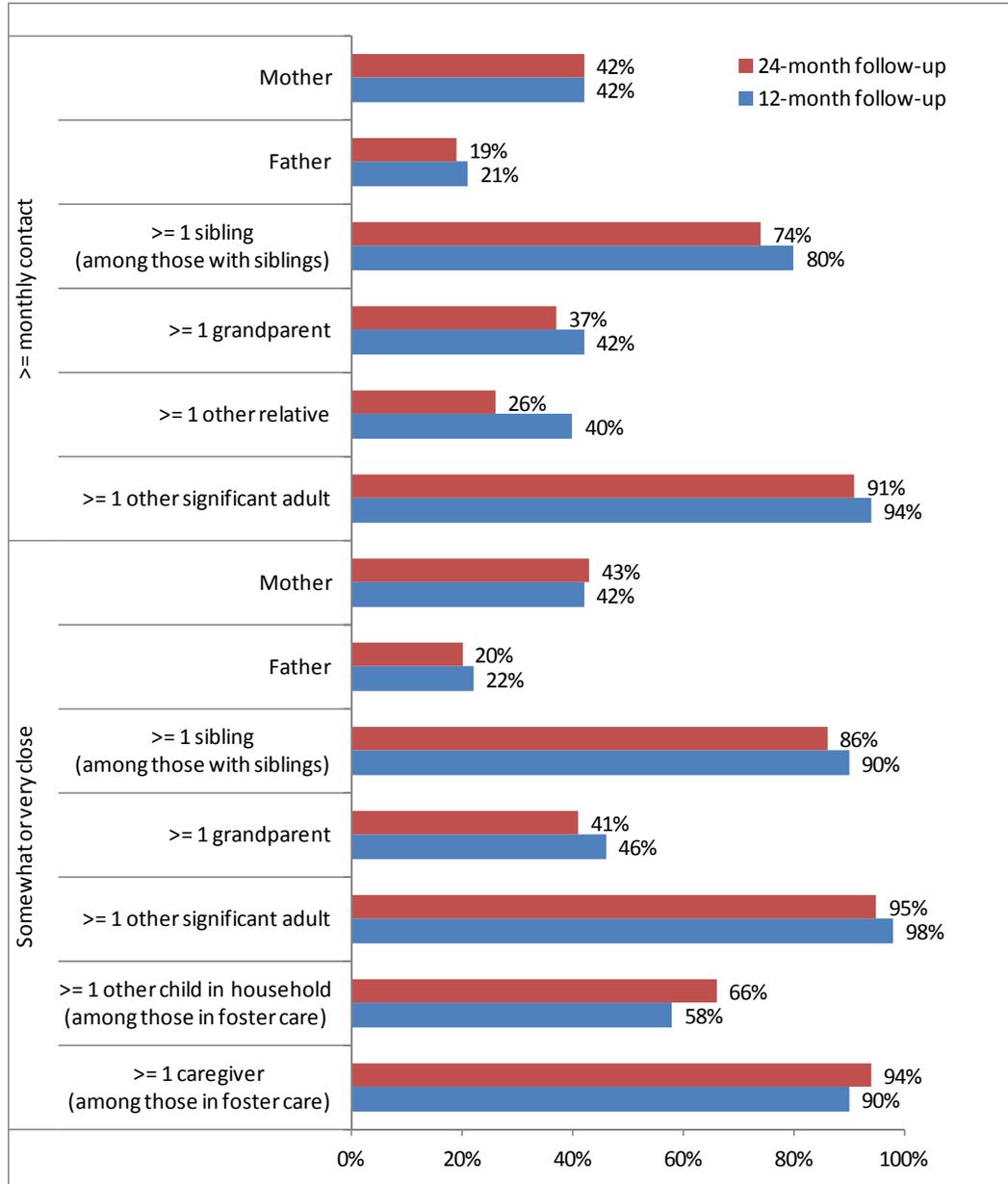
Given that the barriers and facilitators can affect either the delivery of the intervention in particular, or the services provided to all children more generally, these factors have the potential to help explain the presence or absence of program impacts. Barriers to the implementation of Family Finding could reduce the intervention's ability to affect outcomes positively for treatment group children, minimizing the program impact (i.e., minimizing the difference in outcomes between treatment and control group children), whereas program facilitators may do the opposite. Spillover effects could also reduce a program impact by, in effect, making the services received by treatment and

control group children more similar. For example, placement with relatives is a particular goal for the Family Finding intervention, so one would hope to see a larger share of treatment group children moving in with relatives (and/or into less restrictive placements). However, if public agency workers, judges, or other advocates are in some way biased against placing children with relatives, such placements could be difficult to achieve for any children in foster care. Such a contextual barrier may mean that even when workers strive for placements with relatives, as ideally is the case with Family Finding, they may not be able to succeed. Thus, even if a contextual barrier is equally present for all children, it may have the effect of reducing a program impact by negating the extra efforts aimed at achieving that outcome through the intervention.

Below we describe the overall programmatic and contextual facilitators and challenges to implementing Family Finding services.[40] Facilitators included:

- *Designated Family Finding worker.* Having a designated staff member implement Family Finding was reported to be more effective than having the social worker take on the work, because the Family Finding worker could specialize in and focus solely on the duties, something that social workers felt unable to do with their caseloads. Social workers reported that the Family Finding worker represented a neutral party and had an easier time engaging families because relatives were not always willing to share information with social workers.

- *Family Finding practices.* Family Finding workers felt that the family-centered approach of Family Finding facilitated the process of helping the child because it empowered relatives to advocate for themselves and the child. The workers also reported that because the process focused on more than just legal permanency, relatives were able to make other types of commitments to the child, such as occasional visits, cards, or presents.

- *Family Finding worker characteristics.* Social workers spoke very highly of the Family Finding workers, and found it especially helpful that several Family Finding workers had prior child welfare social work experience. The Family Finding workers' experience assisted them in working successfully with families to identify and communicate the needs of the child and engage the family in the process of developing plans that supported the children's legal and emotional permanency. Family Finding workers were described as organized, good communicators, dedicated, engaging, persistent, respectful, and empathetic to the needs of the families. In the DSS counties, workers and administrators emphasized the importance for Family Finding workers to possess strong clinical skills to help the children and families involved in Family Finding deal with the emotions that are often brought to the surface during the process, such as grief and loss.

- *Communication.* Family Finding workers and social workers repeatedly stressed the importance of a good relationship and ongoing communication with the entire child welfare team. Both parties agreed that the process ran more smoothly when the Family Finding worker consulted with the social worker before making major decisions about Family Finding services. Having the Family

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[40] All information presented was obtained during our annual site visits to each of the participating counties. Interviews, focus groups, and staff observations were conducted during each of the site visits.

Finding workers and social workers in the same office or building was also reported as facilitating good relationships.

- *Staff training.* Training on Family Finding was integral for not only the Family Finding workers, but also for agency staff. Family Finding workers reported that they began providing training for agency staff during the first year of implementation to better educate them on how the Family Finding process worked and why it was important. Not only was this effort seen as a way to increase the visibility of the program among agency staff, but it also helped create buy-in among social workers.

Challenges included:
- *Buy-in.* Overall, Family Finding staff reported that a major barrier to full implementation was lack of buy-in from the parties involved with Family Finding, be they professional team members, children, parents, or extended family. In an effort to protect the children on their caseloads, social workers were at times seen as being fearful of and reluctant to engage family members in the child's case. The Family Finding philosophy also represented a new way of thinking for many social workers, and some Family Finding workers did not feel that social workers understood the need for urgency that accompanied the approach. While differing across jurisdictions, the courts and guardians *ad litem* showed some resistance to Family Finding as well, and did not always support the plans developed. Often it was reported that it was the children themselves who did not see the value of building life-long connections with family members; this was especially the case for older youth and teens. Parents were reluctant to share information on their families with the Family Finding worker, and extended family members who engaged initially would frequently "drop out" of the process.

- *Child behaviors.* Respondents reported that many youth in foster care have certain characteristics and exhibit behaviors that make it harder to achieve permanency for them. Placements often disrupt due to violent, aggressive, sexualized behaviors. Other youth are harder to place because of their age, mental or physical health problems, or substance abuse issues. Social workers expressed their frustration that there are not always appropriate supports, such as therapists or mentors, to help the youth remain stable in their placement.

- *Difficulty securing placements with relatives.* Many family members who were interested in being placement options for children either did not want to go through or could not pass the foster care licensing process, or could not afford to care for the child without financial assistance. In some situations, family members expressed interest in contacting the youth after he or she aged out of care to avoid being involved with the child welfare agency.

- *Evaluation.* The fact that the program was undergoing a random assignment evaluation also presented a challenge for some staff. Site-visit respondents reported inadequate preparation and communication prior to starting the program. They also mentioned being frustrated when the children they believed were the most in need of the service were assigned to the control group. This lack of familiarity and understanding may have affected their willingness to refer children for the services.

- *Agency culture.* During the study period, the implementation of Family Finding services marked a shift in culture towards more family involvement. In one county, social workers were suspicious of any private provider staff performing non-mandated services like Family Finding. In another county,

the Family Finding worker did not feel supported by the administration, and felt this led to less buy-in of the program and lower numbers of referrals.

- *Dynamics between court-related personnel and social workers.* Many of the site-visit participants expressed frustration over the difference in mindset between guardians *ad litem* and the agency. It was felt that guardians *ad litem* frequently focus solely on the child, rather than considering the importance of the child's family context. Some workers attributed the guardians' *ad litem* attitudes to a lack of social work training, as well as to having a "middle-class standard" for families. While views varied about whether guardians *ad litem* were supportive of Family Finding efforts, workers all noted that courts value the opinions of these professionals highly, which could affect permanency decisions involving placements with relatives.

- *Workload.* Some social workers reported that their caseloads prevent them from meeting all the various requirements of their job effectively. After the Family Finding workers complete discovery, engagement, and planning (i.e., family meetings) activities, collaboration with the social worker handling the case becomes central to continuing to support family members' contact with the child and ensuring that their plans are carried out. Workers' perceptions of having to take on additional duties may affect the likelihood that plans developed by the family are supported after the Family Finding worker's role ebbs.

SUMMARY AND DISCUSSION

Over the past decade, federal and state legislation has encouraged, and, in some cases, required child welfare agencies to use relative search and engagement techniques, including Family Finding. Government and private funding has also been available to facilitate the implementation of these types of interventions. Such strategies have become popular due to an increasing shift toward placing children with relatives, and in light of anecdotal evidence and non-experimental evaluations of Family Finding showing that children who had been in out-of-home care for several years and who had lost contact with family members were reconnecting and finding permanent homes with their relatives.

The present evaluation yields some evidence that is consistent with the expectations of practitioners and program developers about how Family Finding works, but also some evidence that is not. Our evaluation finds that the intended population was referred for the intervention. Also, Family Finding workers did succeed in identifying and engaging relatives and kin of youth in North Carolina. The intervention, as implemented, increased the numbers of family connections discovered and engaged and resulted in plans developed for family members' continuing contact and support for the children. On average, 34 newly discovered family members were found for each child served. In addition, 63 percent of children served had at least one family member commit to ongoing contact with the child. However, the evaluation failed to find evidence that Family Finding has a positive impact on improving permanency for youth, as measured in this study by youths' stepping down to less restrictive placement settings. We did find some positive impacts on exploratory outcomes pertaining to youths' contact and

closeness with relatives and fictive kin, but we also found one negative impact (on internalizing behavior problems 24 months following random assignment). We found no other impacts among exploratory permanency, safety, or well-being outcomes for the full sample of youth. In particular, we found no differences in the level of social support[41] between the treatment and control groups.

In considering the findings from this evaluation, several limitations of the study are important to highlight. As noted in our discussion of the finding about internalizing behavior problems, we lack baseline information on well-being because interviews were only carried out at 12 and 24 months following random assignment, and not at the time of random assignment. The process of random assignment should have made the control and treatment groups statistically equivalent, but the possibility remains that well-being may have differed across the two groups at baseline, simply by chance. In other words, differences in well-being at baseline, rather than one group's receipt of the intervention, might explain differences in observed outcomes 12 and 24 months. Accordingly, the lack of baseline data limits our ability to infer that the intervention alone was responsible for differences between the treatment and control groups. We also experienced some challenges with data quality. Inconsistencies in the data, notably the data on the children's placement moves, hampered the creation of some summary variables and required us to make assumptions about how to deal with the inconsistencies. In addition, data on case goals were missing for many children. The sample size may also have presented a limitation. It is unclear whether some differences that trended toward favoring the treatment group might have achieved statistical significance if the sample size were larger; however, it is very possible that those non-significant differences may have occurred simply due to chance and would not have reflected actual impacts even with a larger sample size.

For the most part, the Family Finding intervention served the intended population. In general, the study population was disconnected from their family members, though perhaps to a lesser degree than agency staff presumed. Although we do not have information on connectedness at the time of study enrollment, at the time of the 12-month interview, three out of four youth in the entire sample (regardless of treatment group membership) were not living with kin. In addition, for those youth whose parents were living, 60 percent had contact with either parent less than monthly (or not at all). Well

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[41] Social support was assessed via an index based on responses to the following questions: "How many different people… 1) can you count on to invite you to go out and do things? 2) can you talk to about money matters like budgeting or money problems? 3) give you useful advice about important things in life? 4) give you help when you need transportation? 5) can you go to when you need someone to listen to your problems when you're feeling low? 6) can you go to when you need help with small favors? 7) would lend you money in an emergency?" Since responses for some questions tended to be higher than for others, numbers were standardized prior to summing the values into an index score.

over half (58%) reported less than monthly contact with any grandparents—or no contact at all. Perhaps indicative of the disconnectedness of the youth population, we found a substantial share of the study participants reported parents who had died (13% with deceased mothers, 11% with deceased fathers) and only six in 10 knew both of their parents were alive. It seems probable that youth in foster care known to be disconnected from their extended family members were more likely than were other youth in foster care to have a parent who had died. Without a living parent, information about the youth being in foster care or any updates to his or her placement may not be communicated to extended family members, likely increasing the isolation and disconnection from family.

Impacts on the exploratory well-being outcomes included the following: first, at 12 months post assignment, those in the treatment group were more likely to live with kin or adoptive/biological parents, but were less likely than those in the control group to live in a non-relative foster home. At 24 months post assignment, those in the treatment group continued to be less likely than were those in the control group to live in a non-relative foster home, but no other differences in placement settings were apparent. The program also had some potential impacts on contact with relatives. Specifically, a larger share of the treatment than the control group had contact (though less than monthly) with at least one sibling, monthly or more frequent contact with at least one grandparent, and monthly or more frequent contact with at least one other relative. Among those still in foster care at the time of the interview, a larger share of the treatment group reported being close to at least one other child in the household. By 24 months post assignment, however, most of these impacts had dissipated. Additionally, we found one impact at 24 months that favored the control group: specifically, those in the treatment group were more likely than were those in the control group to have a clinical level of internalizing behavior problems.

Although the program did not demonstrate the desired positive impacts, we found little evidence of negative impacts on youth well-being. In qualitative interviews, social workers and therapists voiced concerns that the Family Finding process might exacerbate youth behavior problems if the process of reconnecting with family members caused youth to revisit difficult circumstances or relationships from their past, or if it disrupted the stability of their situations. One finding about exploratory outcomes was consistent with this concern that the Family Finding process might be emotionally stressful for youth.

Results from the youth interviews at 12 months post random assignment indicate no differences in internalizing and externalizing behaviors between those in the experimental groups; however, we did find that treatment group members were more likely to have a clinical level of internalizing behavior problems than were control group members 24 months following random assignment. Because we lack baseline data on behavior problems, we could not explore whether the experimental groups differed by chance in their levels of behavior problems at random assignment or not. A larger share of the treatment group than of the control group had a parent who had died, but differences in the level of internalizing problems persisted even when controlling for whether or not that was the case.

We also found some evidence of positive impacts for specific subgroups of the sample. Evidence indicated that that the program may have improved safety outcomes in DSS counties and placement changes for younger youth. In DSS counties only, we found the likelihood of re-allegation of maltreatment, as well as of substantiated re-allegation of maltreatment, to be lower for those in the treatment group than for those in the control group. Also, for children referred prior to age 13, we found some evidence that those in the treatment group experienced fewer placement changes than did those in the control group.[42]

Despite some evidence of positive effects on closeness and contact with relatives and on the placement settings at

> Readers may be curious about why we identified a difference in the placement setting for youth who were interviewed (i.e., treatment youth were more likely than control youth to be living with a relative or parent), yet no impact was found on improvements in the restrictiveness of youths' placements based on administrative data. The two outcomes pertain to different constructs assessed for different populations using different methods.
> - Interview data were assessed for those 13 and older at the time of study enrollment, whereas administrative data were collected for all youth, regardless of age. Interview data pertained to the placement setting at the time of interview (12 and 24 months following random assignment), regardless of whether the youth was still in foster care; administrative data on placement step-downs pertained to placements while in foster care.
> - The mode of data collection may affect the measures as well. Youth know where they are living at the time of the interview; our guess is that the administrative data could be less accurate since those data relied on a second party to 1) have knowledge of the youth's placement setting and 2) remember to enter it accurately into the data system.
> - Lastly, the constructs are defined differently. The administrative data assessed whether a youth moved from one placement setting to another following study enrollment while in foster care, counting a move from a non-relative's to a relative's home or a move from a congregate-care setting to a family setting as a positive outcome. In contrast, the interview data assessed whether youth were living with a biological or adoptive parent or a relative at the time of the interview, versus in some other setting. We suspect that many youth who emancipate without permanency do, in fact, move back in with relatives or parents, something that cannot be assessed with administrative data and that may be partially captured in the interview data.

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[42] We did not look at subgroup impacts on well-being outcomes due to the already-reduced sample sizes (i.e., well-being was only assessed for youth referred at age 13 or older).

the time of the interview, and the possible positive impacts for subgroups, it is important to keep in mind that this evaluation identified no program impacts on the confirmatory outcome: stepping down the restrictiveness of youths' placements.[43] Evidence of impacts on exploratory well-being outcomes, and subgroup impacts on safety and permanency, should be interpreted with caution. Even in a randomized controlled trial, it is possible—though unlikely—that a statistically significant impact occurred simply due to chance rather than as a result of the intervention, and the larger the number of outcomes that are examined, the greater the likelihood of identifying a statistically significant impact that occurred as a result of chance. For this reason, our study focused on a single, confirmatory outcome that we selected a priori. Because of the large number of exploratory outcomes examined in the present study, it is possible that at least some of the impacts on exploratory outcomes may have occurred solely due to chance. Further investigation and replication is needed to determine the robustness of the findings.

Several factors might explain the failure of the evaluation to identify a positive impact:

1. Incomplete or inconsistent implementation. As has been found in Child Trends' evaluations of Family Finding in other sites, the children served in North Carolina generally did not receive the full complement of services.[44] In particular, two components—evaluating permanency plans and providing follow-up supports—were not implemented by the Family Finding workers in a systematic way. Several factors, which are not mutually exclusive, might explain why this was the case.

First, we identified barriers to implementation that were outside of the Family Finding worker's control. North Carolina's program, similar to other Family Finding programs, has a specialized worker design. By design, the Family Finding worker must rely heavily on collaboration with the social worker handling the case, especially with regard to implementing the last two components of the model—evaluation and follow-up supports. The Family Finding workers spent an average of five months conducting activities that resulted in one or more family meetings occurring and during which plans were developed. After this stage in the process, Family Finding requires the child's social worker to take responsibility for maintaining the child-family connections that had been initiated and moving ahead with permanency plans. However, this did not appear to occur with any regularity.

Another barrier may have been the lack of a subsidized guardianship program. The last two components of the model are the steps in the process most reliant on available resources for relatives to

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[43] A two-tailed test was used for all significance tests.
[44] Malm, K., Allen, T., McKlindon, A., Vandivere, S. (2013). *Family Finding for Children and Families New to Out-of-Home Care: A Rigorous Evaluation of Family Finding in San Francisco.* Child Trends. Washington, D.C.

increase their capacity to provide for a child or sibling group; and a subsidized guardianship program could have helped connect relatives to financial and other supportive resources.

A second possible explanation could be that at the time of the evaluation, the six-step Family Finding model may not have been developed completely so that it could be carried out fully. Although the program developer's descriptions of the Family Finding model include six components, or steps, the training and consultation provided did not articulate the two final steps in the model clearly. DSS social workers and supervisory staff in the nine counties received general training on Family Finding; yet they received no specific, standardized training on how to implement the remaining steps of the model, nor training or consultation on how to work with the Family Finding workers to ensure that progress continued. Training and guidance cannot be developed until a model is developed fully, though this is not the only possible explanation for why these two steps were not carried out. However, the difficulties in implementing the last two components in other sites we evaluated make us suspect that the lack of a fully operationalized model could have been a cause of the incomplete implementation.

2. A positive impact exists but is too small to detect given the parameters of the study. For example, it may be that the effect was too small to be detected given the sample size. Alternatively, but not likely, the possibility exists that the program did have a positive impact but it was not detected simply due to chance. Also, sometimes the quality of the data can affect a study's ability to detect an impact. For example, data on case goals were missing for a substantial share of children. However, the fact that we were able to replicate our findings using data cleaned and coded by UNC would seem to lessen the likelihood that poor data quality explains the lack of program impacts, although it is true that the UNC and Child Trends' datasets were derived from the same original source (i.e., North Carolina's SACWIS data).

3. Inclusion of older youth such that not enough time was available for impacts to occur before the youth aged out of foster care. At the time of study enrollment, four in ten (40%) youth in the study sample were 15 or older, as were about half (51%) all of the youth interviewed. About one in five of all youth (21%), and over one in four (27%), were 17 or older. Most youth in North Carolina age out of foster care at 18, so many youth in our sample had a year or less in which to achieve positive child welfare outcomes.

4. It is difficult to improve upon outcomes achieved under services-as-usual. This could occur for several possible reasons that are not necessarily mutually exclusive: 1) if the intervention is no more effective than services as usual, 2) if services as usual are similar to the intervention, and/or 3) if positive outcomes are common through receipt of services as usual. These possibilities are important to consider

in an experimental evaluation, because the program impact is measured as the improvement in outcomes above and beyond what is achieved through services as usual. In general, across the nine North Carolina counties included in this study, larger percentages of children were in less restrictive placements at the end of the study period than at the beginning. Yet despite the movement toward less restrictive settings, substantial shares of children remained in congregate-care settings (20%) and/or were living with non-relatives (50%) at the end of the study period, suggesting room for improvement in outcomes.

5. Flawed hypotheses about how program activities and outputs affect youth outcomes within the population served. Sometimes program developers or researchers are mistaken in their hypotheses about one or more causal linkages between program activities and outcomes. If program activities do not affect the outcomes of interest in the way expected—or if the outcomes sought are simply not easy to change or achieve—an impact may not be observed. One of the rationales for specialized relative search and engagement is the expectation that methodically identifying and engaging a wide array of extended family members will increase the chances for children and youth to live with relatives and achieve permanency. This approach is in contrast what typically occurs at public child welfare agencies, where social workers often take a narrow view of family and assess only one or two easily identified relatives. The training that Family Finding workers received guided them to discover at least 40 family members and to interact with or engage six family members in the Family Finding activities. Our non-experimental analysis yielded conflicting results about whether achieving these targeted outputs was associated with improved child welfare outcomes. Discovery and engagement of the targeted numbers of family members were associated with a greater likelihood of a step-down to a less restrictive placement, but with a *lower* likelihood of exiting to adoption, reunification, or guardianship. In sum, it is not clear exactly how or whether identifying and engaging a specific number of relatives affects youth outcomes.

It is difficult to know which of the five factors described above might explain the lack of impacts observed, but a careful integration and consideration of findings from the present evaluation with those from evaluations of family finding in other sites could shed light on this question. Below we discuss the study's implications for future research and evaluation of family engagement interventions that will inform development and replication of Family Finding intervention programs.

Implications

As is the case in other interventions administered by a specialized worker, the Family Finding worker faced challenges aplenty in attempting to incorporate the specialized or "non-mandated" work into the overall public agency case process. Collaboration between the specialized worker and child's social worker is central to the success of these types of interventions. Further, when the desired outcome involves a change in child welfare outcomes, such as the youths' placement setting or a legal permanency arrangement, the specialized worker and the child's social worker are not the only decision makers involved. Engaging family members in the case-planning process can be empowering for the relatives, yet daunting for the agency staff tasked with collaborating and incorporating the family's input and wishes. In addition to the child's social worker, the worker's supervisor, the Court Appointed Special Advocate or guardian ad litem, the child's attorney, the agency's attorney, and the judge can weigh in on the placement change decision. Although training on Family Finding and implementation of other kinship-focused initiatives may infuse the agency with a "family friendly" culture, case-specific factors— including logistical challenges such as family members living far away—can still hamper the implementation of the full array of Family Finding components.

Whereas many localities reported that bias against family members was a challenge, social workers must balance other factors as they engage with families. Above all else, social workers want to ensure the safety of the children they serve. Multiple placement moves are to be avoided as much as possible, and the youth being served often have experienced childhood trauma. Social workers are rightly apprehensive about new interventions and introducing newly found family members to a child. Our qualitative findings show that in some cases, social workers' instincts to protect and be cautious were viewed by Family Finding workers as impeding moving a child into a new placement with relatives. Recall that we identified a negative impact on one exploratory measure at the 24-month follow up interview: internalizing behaviors. This finding is consistent with the social workers' concerns, but it is not clear whether some alternative explanation exists that might explain this negative impact. For example, we lack baseline data on internalizing problems, and it is possible that systematic differences might have existed between the experimental groups at baseline.[45] Further examination is warranted into how decisions about placement moves are made in the context of Family Finding practice.

Social worker burden may also be a deterrent to learning about and fully embracing new interventions. Large caseloads and pressure to meet court deadlines, while still ensuring the safety of

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[45] The difference between the two groups at 12 months favored the control group, but did not achieve statistical significance.

the children on their caseload, can mean workers focus intensely on their primary responsibilities. Specialized interventions such as Family Finding can only be successful when social workers and Family Finding workers work together toward a common goal. However, collaboration in the context of Family Finding means discussions and preparation for and attendance at family meetings in the interest of understanding how a child may be affected by introductions to family members and how family members can support the child and the child's case plan. The important issues that Family Finding raises cannot be quickly discussed in brief hallway conversations or emails. Thus, social workers must be provided the time necessary for effective communication and collaboration with specialized workers.

As noted earlier, there was no subsidized guardianship program in North Carolina during the study period. For many relatives in the state, services and supports would be necessary to provide a permanent home for a child. In addition, the existence of other supports (e.g., TANF child-only payments, adoption subsidies) was not adequately communicated to family members. Family Finding training should include detailed information about these supports and clear steps on how family members can apply for them. In addition, foster parent support groups, including kinship support groups, may be valuable resources for family members throughout the Family Finding process.

As has been the case in other sites in which Family Finding has been implemented, there were challenges to full implementation of the model. The challenges suggest that more research is needed to determine whether and how fidelity to the model can be attained. Specifically, the child's social worker must be engaged fully in the services, and the continuity of services after Family Finding case closure should be ensured. In addition, as family search and engagement practice continues to evolve, program developers and implementers, together with researchers, should examine further the linkages between the desired program outputs and permanency outcomes for the children and families served.

Conclusions

The lack of a clear, positive impact in the present evaluation may be disappointing not only to those who have embraced the promise of family support and engagement strategies, but also to anyone who cares about positive outcomes for youth in foster care. However, this study's findings are not conclusive, particularly when reviewed in isolation from findings from other Family Finding evaluations. In addition, the vast amount of descriptive information culled from the process study, a rare component of experimental evaluations, greatly enhances the field's ability to describe the Family Finding model adequately and identify its current strengths and weaknesses.

In conjunction with a number of other recent experimental evaluations, the North Carolina evaluation contributes greatly to the growing evidence base of family involvement and engagement. Together, they provide a framework upon which an evidence-informed conversation can begin to address the questions raised by the evaluations. Further research is necessary to determine the circumstances under which staff time and effort would be spent more effectively if shifted from expanding the number of family connections identified to supporting existing relationships between foster children and already discovered family members. Child welfare agency workers face many competing demands, so it is critical to know which efforts are most effective in various circumstances in achieving positive outcomes for children and youth. When considered in conjunction with findings from other Family Finding evaluations, the findings here raise important future research and evaluation questions for Family Finding programs, as well as for other programs implemented in child welfare service systems. In particular, can specific program components and elements, if implemented with fidelity, result in a youth moving into less restrictive placements, including the homes of relatives? Further, are there certain contextual characteristics that are not amenable to the effective implementation of this type of intervention? These are among the questions that should be the focus of the next generation of evaluations of Family Finding and other family search and engagement interventions.

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APPENDIX

Appendix A: Logic Model

Family Finding Logic Model

Resources/ Inputs	Implementation Activities	Outputs	Short-Term Family Setting Outcomes	Interim Family Setting Outcomes	Well-Being Outcomes

Problem:

Many children age out of the foster care system each year without a home or sense of connection to family

- Trained Family Finding staff
- Funding
- Referrals to Family Finding program
- Agency/ organizational support for Family Finding program model
- Ongoing technical assistance & coaching for trained staff
- Buy-in from key systems partners, such as the courts

Discover → Identification of at least 40 family members/adults who have known the child in the past → Increase number of known family connections

Engage → Engagement of (#) identified individuals who know the child best → Children have increased knowledge of family history

Plan → (#) meetings with parents, family members, & other key individuals important to the child

Decide → Decisions made for emotional & legal permanency of the child → Children have increased sense of connectedness & belonging

Evaluate → Development of emotional & legal permanency plans for the child

Support → Development of plan for providing follow-up services & supports

(Re-)establish a relationship between children and one or more adults with known family connection

Interim Family Setting Outcomes:

Increase number of children with permanent, legal placements with family members

Increase number of children in less-restrictive placement settings

Increase number of children with meaningful, enduring connections with family that will support them across life span

Reduce number of children experiencing maltreatment

Well-Being Outcomes:

- Children maintain physical & mental health
- Increase in children's knowledge & skills/readiness to attain self-sufficiency
  - educational readiness
  - employment readiness
- Increase in children's social & interpersonal skills
- Decrease in children's high risk behaviors

Contextual factors
Current family & peer supports (material, social, & emotional); Local service system; Job market; Child characteristics (including presenting problems and placement history); Legal system (including laws defining adulthood)

Appendix B: Outcome variables

Outcome variables from administrative data

- Child stepped down his/her placement during foster care episode: This variable was based on the variable Living_Arrangement_Type_Code from the North Carolina administrative data. It was coded dichotomously. If a child made any move from a higher level placement to a lower level placement during the study period, the child was coded as having stepped down his or her placement. The placements were categorized as follows, based on the value of the placement setting field in the administrative data. (Moves to several placement types were disregarded in the creation of this variable, including placements where Living_ Arrangement_Type_Code= 59 (Childrens Camp), 76 (Runaway), 98 (Respite), and 99 (Other).)
    1. Parents' home: Living_Arrangement_Type_Code=50
    2. Parents' home – temporary: Living_Arrangement_Type_Code=75 (Trial home visit)
    3. Relative's home: Living_ Arrangement_Type_Code=66 (Adoptive Home (Relative)),52 (Home of Relative),71 (Family Foster Home, Relative)
    4. Relative's home – specialized: Living_ Arrangement_Type_Code=73 (Specialized Family Foster Home, Relative)
    5. Non-relative's home: Living_ Arrangement_Type_Code=65 (Adoptive Home (Non-relative)), 67 (Adoptive Home (Foster Home)), 51 (Home of Legal Guardian), or 56 (Family Foster Care Home)
    6. Non-relative's home – emergency, specialized or therapeutic: Living_ Arrangement_Type_Code=60 (Specialized Family Foster Care Home (DSS)), 53 (Therapeutic Home (MH/DD/SAS), or 70 (Emergency Shelter)
    7. Small congregate-care setting: Living_ Arrangement_Type_Code=55 (Residential School), 68 (Maternity Home), 57 (Small Group Home (Residential)), 58 (Small Group Home (Treatment
    8. Independent living: Living_ Arrangement_Type_Code=64 (Independent Living Arrangement)
    9. Large congregate-care setting: Living_ Arrangement_Type_Code=61 (Large Group Facility (Residential)), 62 (Large Group Facility (Treatment)), 63 (Hospital), 54 (Dept of Juvenile Justice & Del Prevention), 69 (Jail, Lock-up, Detention Facility)

- Discharge to reunification: Coded as 1 if placement_auth_term_reason_code=1 (Reunification with Parents or Primary Caretakers), else coded as 0 if placement_auth_term_reason_code had some other value.

- Discharge to adoption, guardianship, or reunification: Coded as 1 if placement_auth_term_reason_code = 1 (Reunification with Parents or Primary Caretakers), 2 (Guardianship with a Relative), or 3 (Adoption); else coded as 0 if placement_auth_term_reason_code had some other value.

- Last goal: Note that the data on case goals seemed particularly incomplete and problematic in the administrative data. For example, approximately half the sample had no information on case goals, and many children had more than one case goal listed. For children who had more than one goal listed with the same date, it was impossible to tell if multiple goals were in the system because some were primary versus alternate goals (and if so, it was impossible to distinguish which was the primary goal), or whether the worker had failed to enter the data correctly (for example, perhaps

date fields were not updated.) In some cases, we were able to code youth for the summary variables below. For example, youth with the pair of goals "Family reunification" and "Prevention" could be coded as reunification. But in other cases, where the goals appeared to be contradictory (for example, having goals of "Custody with non-removal Parent or Relative" and "Emancipated"), we set the outcome variable to missing.

> Latest goal: adoption, guardianship, or reunification: Coded as 1 if the latest entry for field plan_goal was 'Adoption','Family Reunification','Prevention',or 'Guardianship with Relative'; else coded as 0 if plan_goal had some other value.

> Latest goal: reunification: Coded as 1 if the latest entry for field plan_goal was 'Family Reunification','Prevention'; else coded as 0 if plan_goal had some other value.

> Latest goal: adoption or guardianship with relative: Coded as 1 if the latest entry for field plan_goal was 'Custody with non-removal Parent or Relative', 'Family Reunification', 'Guardianship with Relative', or 'Prevention'; else coded as 0 if plan_goal had some other value.

- Re-allegation of abuse or neglect following study enrollment: Coded as 1 if the date in the field Initial_Report_Date was after the date of random assignment into the study; else coded as 0.

- Substantiated re-allegation of abuse or neglect following study enrollment: Coded as 1 if the date in the field Initial_Report_Date was after the date of random assignment into the study and the field type_found_code = 1 (Abuse Substantiated), 2 (Neglect Substantiated), 2S (Serious Neglect Substantiated), 3 (Abuse and Neglect Substantiated), 3S (Abuse and Serious Neglect Substantiated), or 4 (Dependency Substantiated); else coded as 0 (including values for type_found_code of 0 (Unsubstantiated), 5 (Services Needed), 6 (Services Recommended), 7 (Services Not Recommended), and 8 (Services Provided, Child Protective Services No Longer Needed).

- Child was discharged from foster care to a relative (reunification, guardianship, or custody): Coded as 1 if placement_auth_term_reason_code=1 (Reunification with Parents or Primary Caretakers), 2 (Guardianship with a Relative), or 5 (Custody with non-removal Parent or Relative); else coded as 0 if placement_auth_term_reason_code had some other value.

- Child was discharged from foster care to a relative (reunification, guardianship, or custody) OR child was discharged from foster care and last placement setting was with a relative: Coded as 1 if the outcome above is coded as 1, OR if the latest value of living_arrangement_type_code=50 (Home of Parent(s)), 52 (Home of Relative), 66 (Adoptive Home (Relative)), 71 (Family Foster Home, Relative), or 75 (Trial Home Visit); else coded as 0.

- Child's last placement setting in foster care (regardless of whether child has discharged from care) is/was with a relative: coded as 1 if the latest value of living_arrangement_type_code=50 (Home of Parent(s)), 52 (Home of Relative), 66 (Adoptive Home (Relative)), 71 (Family Foster Home, Relative), or 75 (Trial Home Visit); else coded as 0.

- Re-entry into foster care, among those who discharged from foster care (excludes re-entries occurring within 1 day of prior discharge): Coded as 1 if the date for Placement_Auth_Begin_Date is after the date of random assignment into the study, and the date for placement_auth_begin_date is more than one day after the date for the prior placement_auth_termination_date.

- Number of disrupted placements: Potential moves were identified by comparing the date in the field Living_Arrangement_Begin_Date and examining whether it was after the date of random assignment into the study. We used the following rules in creating this variable. 1) We counted a placement change if a move occurred, but there was no progress toward permanency (indicated in the administrative data where permanency_indicator_code ='2'); 2) we counted a placement change if the begin date for the placement occurred after the study enrollment date; 3) We did not count a placement change if it was the case that the move represented coming back into care from running away or going into or out of respite care or camp; 4) We did count a move if placement start date was first day of the month and occurred exactly one month after prior placement and the setting type was the same as prior setting type, based on our assumption that such records represented duplicate entries for the same placement change.

- Number of placements: To assess placement changes, we used the same rules as for disrupted placements above, with the exception that we also counted placement changes that represented moves toward permanency.

Outcome variables from interview data

- Behavior problems: Scores were calculated for internalizing, externalizing, and total behavior problems. For each of these, two dichotomous measures were created, one indicating whether the youth had a clinical level of problems, and the other using a lower threshold indicating whether the youth had a borderline or clinical level of problems. Scores are based on the Youth Self Report (YSR), a member of the Child Behavior Checklist family of instruments designed to assess behavioral/emotional problems. Responses to individual items were entered into the Assessment Data Manager (ADM) system, proprietary software used under license from The Research Center for Children, Youth & Families, a nonprofit corporation of the University of Vermont College of Medicine (Achenbach, 2010). Summary scores for the Youth Self Report behavior problem measures were automatically calculated by the ADM software; we then exported the summary scores and merged them with the youth interview data.

- Whether has any children (assessed for youth ≥ age 17 at interview): Youth were asked "Do you have any children?"

- Social support scale: Youth were asked: "How many different people… 1) can you count on to invite you to go out and do things, 2) can you talk to about money matters like budgeting or money problems, 3) give you useful advice about important things in life, 4) give you help when you need transportation, 5) can you go to when you need someone to listen to your problems when you're feeling low, 6) can you go to when you need help with small favors, [and] 7) would lend you money in an emergency?" Youths responses were standardized and summed to create a scale score.

- Educational attainment: These categories were based on youth responses to the questions: "Do you have a high school diploma or GED?" and "Which do you have, a diploma or a GED?"

- College enrollment: This measure was based on a youth response to the question "What grade in school {are you currently attending/did you last attend}?" of "1st year college" or "2nd year college."

- Self-efficacy scale: Youth were asked: "How prepared do you feel… 1) to live on your own, 2) to get a job, 3) to manage your money, 4) to prepare a meal, 5) to maintain your personal appearance, 6) to obtain health information, 7) to do housekeeping, 8) to obtain housing, 9) to get to places you have to go, 10) in educational planning, or developing educational goals for yourself and a plan to achieve them, 11) to look for a job, 12) to keep a job, 13) to handle an emergency, 14) to obtain community resources, 15) in interpersonal skills, or effectively communicating and interacting with others, 16) in dealing with legal problems, 17) in problem solving, [and] 18) in parenting skills?" Youths' responses of "very prepared," "somewhat prepared," "not very well prepared," or "not at all prepared" were coded as 1 to 5 (with 1 being "very prepared") and responses were summed with a total possible score ranging from 18 to 72. If 5 or more items were missing, a summary score was not calculated. If at least one but fewer than five items were missing, the summary score was weighted. A subscale for employment self-efficacy was also created using the 2nd, 11th, and 12th items for a possible range of 3 to 12.

- Current placement setting: Youth were asked, "Which of the following best describes where you live right now? Would you say… (and then response options were provided.) We grouped the response options as follows:
  - Non-kin foster home: 3. With my foster parent(s) who are not related to me
  - Home of kin, including adoptive or biological parents: 1. With relatives who are also my foster parents, 2. With relatives who are not my foster parents , 9. With my biological parent(s) , and 10. With my adoptive parent(s)
  - Group home/residential placement: 5. In a group home or residential facility
  - Independent/living with roommate or significant other: 6. On my own (alone), 7. In shared housing with a friend or roommate, and 8. With my spouse, partner, or boyfriend, or girlfriend
  - All else: 4. With a friend's family (not foster care), 11. At a homeless shelter or emergency housing, 12. Homeless, 13. Something else, and 14. In jail or detention.

- Assets: These categories were based on youth responses to the questions, "Do you have a checking or debit account?" And "Do you have a savings account?"

- Material hardships (assessed for youth ≥ age 17 at interview): Youth answered questions about three types of hardships; three corresponding dichotomous measures were created. Next, a summary variable was created such that if any of the dichotomous measures equaled 1 (i.e., any type of hardship was experienced), the overall dichotomous hardship variable was coded as 1. First youth were asked, "In the past 12 months, have you… 1) panhandled or begged money from strangers, 2) made money by recycling cans, bottles, or other items, 3) sold blood or plasma, 4) sold or pawned any personal possessions?" If any responses were yes, a summary variable was coded as 1, else 0.

  Youth not in foster care nor living with biological or adoptive parents were asked, "In the past 12 months, [did/were] you ever… 1) get food or borrow money for food from friends or relatives, 2) get emergency food from a church, a food pantry, or food bank, and 3) eat any meals at a soup kitchen, 4) hungry but didn't eat because you couldn't afford enough food?" If any responses were yes, a summary variable was coded as 1, else 0.

  Youth not in foster care nor living with biological or adoptive parents reported whether in the last 12 months… 1) they couldn't pay their rent or mortgage on time, 2) they were ever evicted or ever had to move out of a place because they couldn't pay to stay there, 3) the gas or electricity was

ever turned off because they couldn't pay the bill, 4) they never had a landline because they couldn't afford it, and 5) they have ever been without phone service – either cell phone or landline – because they could not pay the bill. If any of these were true, a summary variable was coded as 1, else 0.

- <u>Whether knows how to contact mother, father</u>: These measures are based on youth responses to the question, "Do you know how to contact your biological mother?" and "Do you know how to contact your biological father?" which were asked only if the youth answered the prior question indicating that the parent was still living.

- <u>Contact with: mother, father, siblings, grandparents, other relatives, other adults</u>: If the youth reported the mother to be living, he/she was asked: "Do you have any contact with your biological mother, either in-person visits, phone calls, letters, texting or emails?" and "About how often do you have any contact with your biological mother, either in-person visits, phone calls, letters, texting or emails? Would you say less than once a month, once or twice a month, about once a week, several times a week, or every day?" A similar series of questions was asked about the youth's father (if reported to be living).
  The youth was also asked whether he/she had any siblings (including biological, half or step), and if so how many sisters and how many brothers. Additionally the youth was asked, "Are there other members of your biological family such as aunts, uncles, or cousins that you see, talk to or get a letter from?" and "Outside of your relatives and foster family, are there any other adults in your life who are important to you?"
  For each sibling, the youth first reported whether the sibling was living in the same residence as the youth. If not, the youth was asked: About how often do you have any contact with [name of sibling], either in-person visits, phone calls, letters, texting or emails?" Similar questions about the frequency of contact were asked about each of the youth's grandparents, about the other relatives (in the aggregate rather than individually), and individually about other non-relative adults important to the youth.

- <u>Closeness with: mother, father, siblings, grandparents, other adults, caregivers, other children in placement</u>: If the mother was not deceased, the youth was asked, "Thinking about your mother, would you say that you feel very close, somewhat close, not very close, or not at all close to her?" Similar questions were asked regarding each sibling, each grandparent, and about each of the other non-relative adults that the youth reported having contact with. Youth who were in foster care at the time of the survey were also asked: "Some people feel close to their foster parents, others don't feel close at all. Thinking about your foster parents, would you say that you feel very close, somewhat close, not very close, or not at all close to them?" and "Some people feel close to the other kids in their home, others don't feel close at all. Thinking about your present foster brothers and sisters, would you say that you feel very close, somewhat close, not very close, or not at all close to them?" Those in foster care and living in congregate-care settings were asked: "Some people feel close to an adult in their group home, others don't feel close at all. Thinking about the adults that work at your group home, would you say that you feel very close, somewhat close, not very close, or not at all close to those adults?" and "Some people feel close to other kids in group care, others don't feel close at all. Thinking about the other kids in your group home, would you say that you feel very close, somewhat close, not very close, or not at all close to those kids?" Questions about closeness were not asked about grandparents if the youth reported no contact with any grandparents. However, questions about closeness were asked regarding the other types of individuals, even if the youth reported no contact.

Appendix C: Semi-structured interview and focus group guides

Family Finding Worker Interview

INTRODUCTION

Thank you very much for agreeing to meet with me today. I'm _____ and this is _____ from Child Trends, an organization in Washington, DC that performs research to improve programs and services for children and youth. Child Trends has been contracted to evaluate the Family Finding or [insert local name] services here in [insert local area] and in several other areas across the country. Our evaluation will seek to explore the impact of these services on child welfare outcomes and child well-being. As part of the evaluation we are conducting site visits to better understand the operation of the Family Finding or [insert local name] services in different locations around the country, and the local context within which the program operates.

You will notice that we are taking notes and recording our conversation so that we can accurately report your opinions, but your responses will not be linked with your name in any way -- everything will be anonymous. We will use the recording to fill in our written notes, but then the recording will be destroyed. If at any time you would like to say something that you do not want to be recorded, just say so and we will turn off the recorder.

I want to reiterate that what you say will be kept confidential. We will be writing reports to our various funders on what we learn from all of our site visits, but we will not be discussing specific programs and we will never identify who has said what.

Do you have any questions for us before we begin?

 [If Family Finding services are used in front end, use the term "foster children and youth". If services are used in the back end, use the term "foster youth"]

BACKGROUND

First, I'd like to ask you some questions about your background.

1. How long have you been a family finding worker or [insert local title]?
    Probes:

    - What interested you in applying for this position?
    - Were you hired specifically for this position or were you already an agency employee?
    - Can you describe your child welfare experience prior to your current position?

CASELOAD AND REFERRAL PROCESS

Now, I'd like to ask you some questions about the referral process and your caseload.

2. At what point in a case is it assigned to you?

3. Can you describe how a case becomes a part of (is referred to) your caseload?

4. Are there any characteristics of the children you serve that make it particularly difficult to achieve permanency for them?

If yes, probe:

- What are they?
- What strategies have you (or someone else at the agency) used to try to overcome these barriers?
- Which strategies were effective in assisting these children in achieving permanency which ones were not effective?

5. I**f Using Front End Approach**: Are there any characteristics of the parents you serve that make it particularly difficult to achieve permanency for their children?

If yes, probe:

- What are they?
- What strategies have you (or someone else at the agency) used to try to overcome these barriers?
- Which strategies were effective in assisting these children in achieving permanency which ones were not effective?

6. **If Using Back End Approach**: Are the children who have been and are currently on your caseload the same as what you had expected? (e.g. age, background, placement history, etc.) Why or why not?

7. **If Using Front End Approach**: Are the families who have been and are currently on your caseload the same as what you had expected? Why or why not?

8. Do you feel that the number of children on your caseload is an appropriate number? Why or why not?

9. On average, how long do you "carry" a case?

- Does the case length differ from what you originally expected or planned? If so, why do you think this has occurred?

10. Have you had any problems with getting cases or maintaining a full caseload?

- What types of problems have you encountered?
- What, if anything, has been done to address these barriers?

11. How do you manage your caseload both in terms of time as well as adding new cases or closing out cases?

FAMILY FINDING ACTIVITIES

I am now going to focus on your responsibilities as a [insert local title], starting from the very beginning of a case and going through to when your work with the case ends.

12. Once a child is assigned to your caseload, what do you do first?

13. Do you have contact with the child's primary caseworker?

- When does this contact occur?

- What occurs during this initial contact?

Discovery

14. What happens after the initial contact with the caseworker?

15. [If respondent does not mention this earlier] Is reviewing the case file part of your responsibilities?

- How often does this happen?
- Do you have full access to the file or only portions?

16. What are you trying to accomplish through the case review?

- What types of information are you looking for in the file?
- Why is that information important?
- Do you use a case review form to document information you find during your review of a case file?

17. After the initial review, do you ever go back to the case record? Why or why not?

18. Do you ask the (**If Using Front End Approach**: family) (**If Using Back End Approach**: child(ren)) directly about relatives, kin, or other people that play or have played a significant role in their lives? Why or why not?

19. How many people are you typically able to identify as connections or potential life-long connections for the (**If Using Front End Approach**: family) (**If Using Back End Approach**: child)?

20. How do you find or attempt to find the whereabouts of those who you have identified as connections or potential life-long connections for a (**If Using Front End Approach**: family) (**If Using Back End Approach**: child)?

- What types of search tools do you use? (e.g. US Search, Accurint, Yellow pages, obituaries, etc)
- Do you conduct the internet searches yourself?
  (**If no**)Who performs the searches? How do you retrieve the results?

21. How many individuals are typically found using these search efforts? Do you think the search efforts have been worthwhile? Why or why not?

22. Have you experienced any challenges in searching for and identifying relatives, kin or other caring adults for a child?

If yes, probe:

- What challenges have you experienced?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

Engagement

23. Can you explain what your responsibilities are in terms of engaging relatives and other connections.

24. Do you attempt to engage all individuals that you identify in the discovery stage?

    If no, probe:

    - Why not?
    - How many individuals do you typically <u>engage</u> for each child? Are there guidelines you try to follow?
    - If it varies by child, what are the characteristics of children that guide your practice?

25. How do you contact these people initially? (e.g. phone or letter)

26. What is the general goal of that first contact?

27. I**f Using Back End Approach**: Do you inform the child of your efforts? Why or why not?

    - Do you inform the child before you initiate your efforts? Why or why not?
    - Do you inform the child of your progress? Why or why not?

28. Have you experienced any challenges or barriers in engaging individuals to serve as support network (**If Using Back End Approach**: and/or a placement resource for a child)? (e.g. lack of resources to foster connections, resistance from court personnel, foster children, primary caseworkers, child's current caregiver, or relatives or involvement that dwindles overtime)

    If yes, probe:

    - What challenges have you experienced?
    - What have you (or someone else at the agency) done to try to overcome these challenges or problems?
    - Which strategies were effective in resolving the problems and which ones were not effective?

Planning

29. What happens after you have engaged a number of relatives or other supportive adults?

30. Are you routinely involved in any <u>formal agency-run</u> planning meetings? Why or why not?

    Probes:

    - Who facilitates these meetings?
    - [Regardless of whether respondent is involved in agency planning meetings, ASK:] Does the agency utilize a particular approach to their planning meetings—for example, FGDM, TDM, family unity, etc.)?
    - What is the general goal of these planning meetings?

- [If respondent is involved in agency planning meetings], what are you asked to contribute to the meeting?
- Are you generally pleased with your level of involvement in agency-run meetings?

31. Do <u>you</u> coordinate any meetings with the relatives and other adult supports who have been discovered and engaged? Why or why not?

    Probes:

- How many meetings are typically held for each child?
- How many family members attend the meetings (in-person or via phone)?
- Outside of family members, who else is usually invited to these meetings?
- How many of these individuals usually attend the meetings?
- Is there an "official" approach used in convening these meetings? (e.g. FGDM, TDM, etc.)
- What is the general goal of these planning meetings?
- What types of things are discussed during these meetings?
- Have you experienced any challenges in convening these meetings? (e.g. lack of resources to assist those not in the area to attend the meetings, keeping the discussions on track, lack of skills needed to facilitate the meeting, etc.)

    If yes, probe:

- What challenges have you experienced?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

Decisionmaking

32. How do you and the planning team come to decisions regarding the child's emotional and legal permanency (**If Using the Front End Approach**: and how the family will secure a life-long supportive network)?

- Do these decisions typically include a primary plan as well as back-up plans?
- Do you document the decisions made during the team meetings on a form? **(Interviewer: request a copy of this form if one is used)**

33. **If Using Back End Approach**: How are decisions made regarding a child's need for a life-long supportive network versus (perhaps immediate or long-term legal) placement needs?

    Probes:

- Is one given a higher priority than the other? Why or why not?
- How and when might you (or the facilitator of the meetings) intervene when an agreement cannot be reached?

34. Have you and the planning teams experienced any challenges making decisions about a child's emotional and legal permanency (**If Using the Front End Approach**: and how the family will secure a life-long supportive network)?

> **If yes, probe:**

- What challenges have you experienced?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

Evaluation

35. How do you and the teams evaluate the plan created for the legal and emotional permanency of a child (**If Using the Front End Approach**: and a life-long supportive network for the family)?

> Probes:

- Do you and the team explore whether you have identified and engaged an adequate number of people to ensure the success of the plan?
- Do you and the team explore whether the failure of your plan would result in the child remaining or returning to the foster care system?
- Do you and the team explore whether the plan includes individuals who are willing to offer their support if the plan is unsuccessful?
- Is there a form that you and the team use to facilitate the evaluation process? **(Interviewer: request a copy of this form if one is used)**

36. Is a timeline typically developed for completion of the plan?

37. How individualized is the plan?

38. Have you and/or the team experienced any challenges with evaluating the plan for a child's emotional and legal permanency (**If Using the Front End Approach**: and a life-long supportive network for the family)?

> **If yes, probe:**

- What challenges have you experienced?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

Follow Up Support

39. How well do you feel the teams provide ongoing support to the child and (**If Using Back End Approach:** caregiver) (**If Using the Front End Approach**: parent)?

40. Is there an emphasis on providing informal supports rather than supports that require payment? Why or why not?

> **If yes, probe**:

- Please give examples of informal supports and supports requiring payments that you or the team have provided.

41. Have you and/or the team experienced any challenges with actively supporting the child and (**If Using Back End Approach:** caregiver) (**If Using the Front End Approach**: and parent) in accessing services and supports as needed? (e.g. grief and loss feelings surface after placement, child lacks skills needed to maintain positive relationships, lack of resources in the community)

> **If yes, probe:**

- What challenges have you experienced?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

42. Does the level of intensity in terms of your involvement on a case change over time?

43. How do you know when your involvement in a case should end?

Probes:

- What are the conditions for "closing" a family finding case?
- Are there other reasons why you may close out a case?

WORKING WITH PRIMARY CASEWORKER

Now, I'd like to ask you some questions about your interactions with primary caseworkers.

44. How closely do you work with the primary caseworkers while providing Family Finding (or [insert local title]) services?

- Does this vary based on the activity being performed? (**If yes**) How so?
- Does this vary based on the caseworker? (**If yes**) How so?
- Does this vary based on the needs of the child? (**If yes**) How so?

45. Is case information routinely shared between you and the primary caseworker (e.g. case updates)?

- How is this done?
- If the primary caseworker changes, how is information passed to new worker?

46. Have you experienced any challenges working with or communicating with primary caseworkers?

> **If yes, probe:**

- What are they?

- What strategies have you (or someone else at the agency) used to try to overcome these barriers?
- Which strategies were effective in assisting these children in achieving permanency which ones were not effective?

DOCUMENTATION OF SERVICES

Now, I'd like to ask you some questions about how you document your work.

47. What types of documentation do you complete during your work? (e.g. documenting contacts made and progress towards and completion of activities)

- What types of contacts do you document? (e.g. phone, in-person and e-mail)
- In what format do you document your work (manual forms, automated database)?
- How often do you enter information?
- Do you document your case activities into the case record? (**If yes**) How so?
- **If private agency worker, probe**: Do you have access to automated child welfare system? (**If not**) Why not?

SUPERVISION

Now, I'd like to ask you some questions about the supervision and support you receive.

48. How often do you meet with or speak with your supervisor?

49. Is there a regularly established time or do you meet on an as-needed basis?

If on as-needed basis, probe:

- Who usually initiates these meetings?
- What kinds of situations would result in your requesting a meeting?

50. Do you feel that the amount of supervision you receive is adequate?

OTHER RESPONSIBLITIES

51. Do you have other duties outside of your role as a [insert local title]?

If yes, probe:

- What other duties do you have?
- How much time during a given week do you spend on these other duties?
- Do you have any difficulty balancing these additional duties with your responsibilities as a Family Finding (or [insert local title]) worker?

   (**If yes**) Could you tell me more about that?

TRAINING

Now, I'd like to ask you a little bit about your training.

52. What, if any, formal training did you receive on the Family Finding model and how to implement Family Finding (or [insert local title]) services <u>before</u> you were assigned a caseload of children?

- Who conducted the training?
- How long was the training?

If reported receiving no or limited training, **probe**:

- Why do you think your training has been limited?
- Have you expressed a concern about this to anyone at your agency?
    - o (**If yes**) Who did you express this concern to? What was their response?

- Are there any particular components of the model that are less clear?
    - o (**If yes**) Have you received any additional training/assistance to assist you in understanding this/these components?

53. Did you receive training on any other models or interventions to prepare you for your role <u>before</u> you were assigned a caseload? (e.g. 3-5-7 grief and loss model, other permanency interventions, etc.)

54. What, if any, additional training have you received from your agency <u>since</u> being assigned a caseload?

Probes:

- Who conducted the training(s)?
- How long was the training(s)?
- What was/were the topic(s) of the training(s)?

OPINIONS

55. In general, how do you think Family Finding or [insert local name] services are different from the permanency services foster children/youth receive from traditional caseworkers?

56. In your opinion, have there been barriers (that you have not yet mentioned) to the success of the Family Finding (or [insert local name]) services overall?

- What about child welfare agency practices or procedures?

57. In your opinion, what have been the greatest facilitators of the Family Finding (or [insert local name]) services?

58. Are there particular elements or components of the model that you believe are critical for it to succeed?

59. Is there anything else you would like to share about your experience as a [insert local title] worker?

We've come to the end of the interview. Thank you so much for your time today. The information you provided will be an important part of our evaluation.

Family Finding Supervisor

INTRODUCTION

Thank you very much for agreeing to meet with me today. I'm _____ and this is _____ from Child Trends, an organization in Washington, DC that performs research to improve programs and services for children and youth. Child Trends has been contracted to evaluate the Family Finding or [insert local name] services here in [insert local area] and in several other areas across the country. Our evaluation will seek to explore the impact of these services on child welfare outcomes and child well-being. As part of the evaluation we are conducting site visits to better understand the operation of the Family Finding or [insert local name] services in different locations around the country, and the local context within which the program operates.

You will notice that we are taking notes and recording our conversation so that we can accurately report your opinions, but your responses will not be linked with your name in any way -- everything will be anonymous. We will use the recording to fill in our written notes, but then the recording will be destroyed. If at any time you would like to say something that you do not want to be recorded, just say so and we will turn off the recorder.

I want to reiterate that what you say will be kept confidential. We will be writing reports to our various funders on what we learn from all of our site visits, but we will not be discussing specific programs and we will never identify who has said what.

Do you have any questions for us before we begin?

[If Family Finding services are used in front end, use the term "foster children and youth". If services are used in the back end, use the term "foster youth"]

BACKGROUND

First, I'd like to ask you some questions about your background.

1. How long have you been a family finding supervisor or [insert local title]?

    Probes:

    - What interested you in applying for this position?
    - Were you hired specifically for this position or were you already an agency employee?
    - Can you describe your child welfare experience prior to your current position?

CASELOAD AND REFERRAL PROCESS

Now, I'd like to ask you some questions about the referral process and your caseload.

2. At what point in a case is it assigned to you?

3. Can you describe how a case becomes a part of (is referred to) the Family Finding worker's [or local agency's name for worker] caseload?

4. Are there any characteristics of the children on the Family Finding worker's caseload that make it particularly difficult to achieve permanency for them?

If yes, probe:

- What are they?
- What strategies have you (or someone else at the agency) used to try to overcome these barriers?
- Which strategies were effective in assisting these children in achieving permanency which ones were not effective?

5. I**f Using Front End Approach**: Are there any characteristics of the parents on the Family Finding worker's caseload that make it particularly difficult to achieve permanency for their children?

If yes, probe:

- What are they?
- What strategies have you (or someone else at the agency) used to try to overcome these barriers?
- Which strategies were effective in assisting these children in achieving permanency which ones were not effective?

6. **If Using Back End Approach**: Are the children who have been and are currently on the Family Finding worker's caseload the same as what you had expected? (e.g. age, background, placement history, etc.) Why or why not?

7. **If Using Front End Approach**: Are the families who have been and are currently on the Family Finding worker's caseload the same as what you had expected? Why or why not?

8. Do you feel that the number of children on the caseloads is an appropriate number? Why or why not?

9. On average, how long do Family Finding workers "carry" a case?

- Does the case length differ from what you originally expected or planned? If so, why do you think this has occurred?

10. Have workers' had any problems with getting cases or maintaining a full caseload?

- What types of problems have they encountered?
- What, if anything, has been done to address these barriers?

11. How does the Family Finding worker manage their caseload both in terms of time as well as adding new cases or closing out cases?

FAMILY FINDING ACTIVITIES

I am now going to focus on the Family Finding worker's responsibilities starting from the very beginning of a case and going through to when the Family Finding work with the case ends.

12. Once a child is assigned to the Family Finding worker's caseload, what is done first?

13. Does the Family Finding worker have contact with the child's primary caseworker?

- When does this contact occur?
- What occurs during this initial contact?
- Do you, as the supervisor, also have contact with the caseworker—why or why not? In what situations might this occur?

Discovery

14. What happens after the initial contact with the caseworker?

15. [If respondent does not mention this earlier] Is reviewing the case file part of the Family Finding worker's responsibilities?

- How often does this happen?
- Do you have full access to the file or only portions?

16. What are they trying to accomplish through the case review?

- What types of information are you looking for in the file?
- Why is that information important?
- Do you use a case review form to document information you find during your review of a case file?

17. After the initial review, does the Family Finding worker ever go back to the case record? Why or why not?

18. Does the Family Finding worker ask the (**If Using Front End Approach**: family) (**If Using Back End Approach**: child(ren)) directly about relatives, kin, or other people that play or have played a significant role in their lives? Why or why not?

19. How many people are they typically able to identify as connections or potential life-long connections for the (**If Using Front End Approach**: family) (**If Using Back End Approach**: child)?

20. How does the Family Finding worker find or attempt to find the whereabouts of those who you have identified as connections or potential life-long connections for a (**If Using Front End Approach**: family) (**If Using Back End Approach**: child)?

- What types of search tools are used? (e.g. US Search, Accurint, Yellow pages, obituaries, etc)
- Who conducts the internet searches?

21. How many individuals are typically found using these search efforts? Do you think the search efforts have been worthwhile? Why or why not?

22. Have there been challenges in searching for and identifying relatives, kin or other caring adults for a child?

If yes, probe:

- What challenges?

- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

Engagement

23. Can you explain what the Family Finding worker's responsibilities are in terms of engaging relatives and other connections.

24. Does the Family Finding worker attempt to engage all individuals identified in the discovery stage?

   If no, probe:

- Why not?
- How many individuals are typically <u>engaged</u> for each child? Are there guidelines to follow?
- If it varies by child, what are the characteristics of children that guide your practice?

25. How are the people contacted initially? (e.g. phone or letter)

26. What is the general goal of that first contact?

27. **If Using Back End Approach**: Is the child informed of these efforts? Why or why not?

- Is the child informed before efforts are initiated? Why or why not?
- Is the child informed of progress? Why or why not?

28. Have there been any challenges or barriers in engaging individuals to serve as a support network (**If Using Back End Approach**: and/or a placement resource for a child)? (e.g. lack of resources to foster connections, resistance from court personnel, foster children, primary caseworkers, child's current caregiver, or relatives or involvement that dwindles overtime)

   If yes, probe:

- What challenges?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

Planning

29. What happens after a number of relatives or other supportive adults are engaged?

30. Are you or the Family Finding worker routinely involved in any <u>formal agency-run</u> planning meetings? Why or why not?

   Probes:

- Who facilitates these meetings?
- [Regardless of whether respondent is involved in agency planning meetings, ask:] Does the agency utilize a particular approach to their planning meetings—for example, FGDM, TDM, family unity, etc.)?
- What is the general goal of these planning meetings?
- [If respondent or Family Finding worker is involved in agency planning meetings, ask:] What are you or the Family Finding worker asked to contribute to the meeting?
- Are you generally pleased with your and the Family Finding worker's level of involvement in agency-run meetings?

31. Does the Family Finding worker coordinate any meetings with the relatives and other adult supports who have been discovered and engaged? Why or why not?

   Probes:

- How many meetings are typically held for each child?
- How many family members attend the meetings (in-person or via phone)?
- Outside of family members, who else is usually invited to these meetings?
- How many of these other individuals usually attend the meetings?
- Is there an "official" approach used in convening these meetings? (e.g. FGDM, TDM, etc.)
- What is the general goal of these planning meetings?
- What types of things are discussed during these meetings?
- Has the Family Finding worker experienced any challenges in convening these meetings? (e.g. lack of resources to assist those not in the area to attend the meetings, keeping the discussions on track, lack of skills needed to facilitate the meeting, etc.)

   If yes, probe:

- What challenges have they experienced?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- c.. Which strategies were effective in resolving the problems and which ones were not effective?

Decisionmaking

32. How does the Family Finding worker and the planning team come to decisions regarding the child's emotional and legal permanency (**If Using the Front End Approach**: and how the family will secure a life-long supportive network)?

- Do these decisions typically include a primary plan as well as back-up plans?
- Do you document the decisions made during the team meetings on a form? **(Interviewer: request a copy of this form if one is used)**

33. **If Using Back End Approach**: How are decisions made regarding a child's need for a life-long supportive network versus (perhaps immediate or long-term legal) placement needs?

Probes:

- Is one given a higher priority than the other? Why or why not?
- How and when might you (or the facilitator of the meetings) intervene when an agreement cannot be reached?

34. Have the Family Finding worker and the planning teams experienced any challenges making decisions about a child's emotional and legal permanency (**If Using the Front End Approach**: and how the family will secure a life-long supportive network)?

   If yes, probe:

- What challenges have they experienced?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

Evaluation

35. How does the Family Finding worker and the teams evaluate the plan created for the legal and emotional permanency of a child (**If Using the Front End Approach**: and a life-long supportive network for the family)?

   Probes:

- Do they explore whether an adequate number of people have been identified and engaged to ensure the success of the plan?
- Do they explore whether the failure of the plan would result in the child remaining or returning to the foster care system?
- Do they explore whether the plan includes individuals who are willing to offer their support if the plan is unsuccessful?
- Is there a form or forms used to facilitate the evaluation process? **(Interviewer: request a copy of this form if one is used)**

36. Is a timeline typically developed for completion of the plan?

37. How individualized is the plan?

38. Have the Family Finding worker and/or the team experienced any challenges with evaluating the plan for a child's emotional and legal permanency (**If Using the Front End Approach**: and a life-long supportive network for the family)?

   If yes, probe:

- What challenges have they experienced?
- What have you (or someone else at the agency) done to try to overcome these challenges or problems?
- Which strategies were effective in resolving the problems and which ones were not effective?

Follow Up Support

39. How well do you feel the teams provide ongoing support to the child and (**If Using Back End Approach:** caregiver)(**If Using the Front End Approach**: parent)?

40. Is there an emphasis on providing informal supports rather than supports that require payment? Why or why not?

   If yes, probe:

   - Please give examples of informal supports and supports requiring payments.

41. Have the Family Finding worker and/or the team experienced any challenges with actively supporting the child and (**If Using Back End Approach:** caregiver) (**If Using the Front End Approach**: and parent) in accessing services and supports as needed? (e.g. grief and loss feelings surface after placement, child lacks skills needed to maintain positive relationships, lack of resources in the community, etc.)

   If yes, probe:

   - What challenges have they experienced?
   - What have you (or someone else at the agency) done to try to overcome these challenges or problems?
   - Which strategies were effective in resolving the problems and which ones were not effective?

42. Does the level of intensity in terms of your involvement on a case change over time?

43. How do you know when the Family Finding worker's involvement in a case should end?

   Probes:

   - What are the conditions for "closing" a family finding case?
   - Are there other reasons why you may close out a case?

WORKING WITH PRIMARY CASEWORKER

Now, I'd like to ask you some questions about the Family Finding worker's interactions with the primary caseworker.

44. How closely does the Family Finding worker work with the primary caseworkers while providing Family Finding (or [insert local title]) services?

   - Does this vary based on the activity being performed? (**If yes**) How so?
   - Does this vary based on the caseworker? (**If yes**) How so?
   - Does this vary based on the needs of the child? (**If yes**) How so?

45. Is case information routinely shared between the Family Finding worker and the primary caseworker (e.g. case updates)?

- How is this done?
- If the primary caseworker changes, how is information passed to the new worker?

46. Has the Family Finding worker experienced any challenges working with or communicating with primary caseworkers?

   If yes, probe:

- What are they?
- What strategies have you (or someone else at the agency) used to try to overcome these barriers?
- Which strategies were effective in assisting these children in achieving permanency which ones were not effective?

DOCUMENTATION OF SERVICES

Now, I'd like to ask you some questions about how the Family Finding worker documents his/her work.

47. What types of documentation is the Family Finding worker expected to complete? (e.g. to document contacts made and progress towards and completion of activities)

   Probes:

- What types of contacts is the Family Finding worker expected to document? (e.g. phone, in-person and e-mail)
- In what format (manual forms, automated database)?
- How often should they enter information?
- Are they expected to document their case activities in the case record? (**If yes**) How so?
- **If private agency worker, probe**: Do your workers have access to the automated child welfare system? (**If not**) Why not?

SUPERVISION

Now, I'd like to ask you some questions about supervision and support.

48. How often do you meet with or speak with the family finding or [insert local title] worker?

49. Is there a regularly established time or do you meet on an as-needed basis?

   If on as-needed basis, probe:

- Who usually initiates these meetings?
- What kinds of situations would result in your requesting a meeting?

50. How knowledgeable do you feel you are about the Family Finding model?

51. Other than you, is there anyone else that the [insert local title] worker receives consultation or support from to perform his/her duties?

   If yes, probe:

- Who else do they speak to?
- What kinds of situations would result in them requesting consultation or support from this/these person/people?

52. Do you feel management is supportive of the work of you and your workers? Why or why not?

OTHER RESPONSIBLITIES

53. Do you have other duties outside of your role as a [insert local title] supervisor?

   If yes, probe:

- What other duties do you have?
- How much time during a given week do you spend on these other duties?
- Do you have any difficulty balancing these additional duties with your responsibilities as supervisor to the Family Finding (or [insert local title]) worker?

TRAINING

Now, I'd like to ask you a little bit about your training.

54. What, if any, formal training did you receive on the Family Finding model and how to implement Family Finding (or [insert local title]) services <u>before</u> you were assigned a caseload of children?

   Probes:

- Who conducted the training?
- How long was the training?

If reported receiving no or limited training, **probe**:

- Why do you think your training has been limited?
- Have you expressed a concern about this to anyone at your agency?
     (**If yes**) Who did you express this concern to? What was their response?

- Are there any particular components of the model that are less clear?
     (**If yes**) What are these components? Have you received any additional training/assistance to assist you in understanding this/these components?

55. Did you receive training on any other models or interventions to prepare you for your role <u>before</u> you were assigned a caseload? (e.g. 3-5-7 grief and loss model, other permanency interventions, etc.)

56. What, if any, ongoing training have you received from your agency related to Family Finding?

OPINIONS

57. In general, how do you think Family Finding (or [insert local name]) services are different from the permanency services foster children/youth receive from traditional caseworkers?

58. Have there been any changes in agency policies or practices that are the result of your agency's implementation of Family Finding (or [insert local title]) services?

59. In your opinion, have there been barriers (that you have not yet mentioned) to the success of the Family Finding (or [insert local title]) services overall?

60. In your opinion, what have been the greatest facilitators of the Family Finding (or [insert local title]) services?

61. Are there particular elements or components of the model that you believe are critical for it to succeed?

62. Is there anything else you would like to share about your experience as a [insert local title] supervisor?

We've come to the end of the interview. Thank you so much for your time today. The information you provided will be an important part of our evaluation.

Family Finding Administrator Interview

Thank you very much for agreeing to meet with me today. I'm _____ and this is _____ from Child Trends, an organization in Washington, DC that performs research to improve programs and services for children and youth. Child Trends has been contracted to evaluate the Family Finding or [insert local name] services here in [insert local area] and in several other areas across the country. Our evaluation will seek to explore the impact of these services on child welfare outcomes and child well-being. As part of the evaluation we are conducting site visits to better understand the operation of the Family Finding or [insert local name] services in different locations around the country, and the local context within which the program operates.

You will notice that we are taking notes and recording our conversation so that we can accurately report your opinions, but your responses will not be linked with your name in any way -- everything will be anonymous. We will use the recording to fill in our written notes, but then the recording will be destroyed. If at any time you would like to say something that you do not want to be recorded, just say so and we will turn off the recorder.

I want to reiterate that what you say will be kept confidential. We will be writing reports to our various funders on what we learn from all of our site visits, but we will not be discussing specific programs and we will never identify who has said what.

Do you have any questions for us before we begin?

[If Family Finding services are used in front end, use the term "foster children and youth". If services are used in the back end, use the term "foster youth"]

BACKGROUND INFORMATION

First, I'd like to ask you a little about your background.

1. How long have you been with [name of agency]?

2. What is your involvement in the Family Finding or [insert local title] program?

   - Do you supervise any of the Family Finding workers?

FAMILY FINDING SERVICES

Now, I'd like to ask you some questions about the Family Finding or [insert local title] services that are provided at your agency.

3. When did the agency first implement Family Finding?

4. Why did the agency implement Family Finding?

5. What types of children were targeted to receive Family Finding? Has the type of children targeted changed over time?

6. What, if any, kinds of barriers or problems has the Family Finding program experienced? How were the barriers resolved?

7. Are there components of the model that are particularly challenging to implement?

    (**If yes)** What are they? What makes them challenging?

8. Do you think that the [insert local title] supervisors and workers received the training that they need to implement the Family Finding model? What types of training have they received? Are there plans for continued training?

9. Are there any services similar to Family Finding that are provided by your agency (or provided under subcontract with a private agency)?

    Probe: Are these services targeted to the same type of children as the Family Finding services?

RELATIONSHIP WITH PUBLIC AGENCY

Now, I'm going to ask you some questions about your relationship with the public child welfare agency (*or the other units within the public child welfare agency, if the Family Finding program is housed in the public agency*).

10. Can you describe the current relationship between the Family Finding or [insert local title] services at your agency and the public child welfare agency (*or the other units within the public child welfare agency, if the Family Finding program is housed in the public agency*)?

11. How does the relationship impact the work of the Family Finding or [insert local title] program?

12. Have there been any changes in the public agency's policies or practices that are the result of your agency's implementation of Family Finding or [insert local name] services?

OPINIONS

13. In general, how do you think Family Finding or [insert local name] services are different from the permanency services foster children/youth receive from traditional caseworkers?

14. In your opinion, have there been barriers (that you have not yet mentioned) to the success of the Family Finding services overall?

    • What about child welfare agency practices or procedures?

15. In your opinion, what have been the greatest facilitators of the Family Finding or [insert local name] services?

16. Are there particular elements or components of the model that you believe are critical for it to succeed?

17. Is there anything else you would like to share about your experience about your work with the Family Finding or [insert local name] program?

We've come to the end of the interview. Thank you so much for your time today. The information you provided will be an important part of our evaluation.

Community Stakeholder Interview

INTRODUCTION

Thank you very much for agreeing to meet with me today. I'm _____ and this is _____ from Child Trends, an organization in Washington, DC that performs research to improve programs and services for children and youth. Child Trends has been contracted to evaluate the Family Finding or [insert local name] services here in [insert local area] and in several other areas across the country. Our evaluation will seek to explore the impact of these services on child welfare outcomes and child well-being. As part of the evaluation we are conducting site visits to better understand the operation of the Family Finding or [insert local name] services in different locations around the country, and the local context within which the program operates.

You will notice that we are taking notes and recording our conversation so that we can accurately report your opinions, but your responses will not be linked with your name in any way -- everything will be anonymous. We will use the recording to fill in our written notes, but then the recording will be destroyed. If at any time you would like to say something that you do not want to be recorded, just say so and we will turn off the recorder.

I want to reiterate that what you say will be kept confidential. We will be writing reports to our various funders on what we learn from all of our site visits, but we will not be discussing specific programs and we will never identify who has said what.

Do you have any questions for us before we begin?

[If Family Finding services are used in front end, use the term "foster children and youth". If services are used in the back end, use the term "foster youth"]

BACKGROUND INFORMATION

First, I'd like to ask you some background questions.

1. Could you tell me about your current position (or role in the community) in the organization?

   Probes:

   - How long have you been in this position (or played this role in the community)?
   - I**f Service Provider**: Could you tell me about the services that your agency offers?

2. Could you tell me a little about your (or your agency's) relationship with the local child welfare agency?
   Probe:

   - How long have you (or your agency) had a relationship with the local child welfare agency?

PERMANENCY SERVICES

Now, I'd like to ask you some questions about permanency for foster children/youth and the services offered in your community that support permanency efforts.

3. How well do you believe the local child welfare agency does in achieving permanency for foster children/youth?
   Probes:

   - What barriers or challenges does the child welfare agency face in achieving legal permanency for foster children/youth?
   - How do you feel the child welfare agency could improve their efforts in this area?

4. **If Service Provider**: Does your agency provide any services to foster children/youth? If so, what types of services? To what groups of foster children?

5. Are there other services in your local community that assist caseworkers with serving foster children/youth?

6. In your opinion, how important is it that foster children/youth achieve emotional permanency or have a life-long supportive network?

   Probes:

   - What barriers or challenges does the child welfare agency face in achieving emotional permanency for foster children/youth?
   - How do you feel the child welfare agency can improve their efforts in this area?

7. Is there anything that community representatives like yourself can do to support the agency in their efforts to serve foster children/youth?

FAMILY FINDING SERVICES

Now, I'd like to ask you some questions about the Family Finding (or [insert local title]) services in your area.

8. How familiar are you with the Family Finding (or [insert local title]) services in your area? (*If not familiar, Interviewer can review each of the 6 Family Finding "Implementation Activities" from logic model*)

   If familiar, probe:

   - How did you learn about these services?
   - What are your impressions of the services?
   - Have you played a role in any Family Finding (or [insert local title]) services (e.g. served on a permanency team, agreed to serve as a life-long connection for a child, etc)?

If Yes, probe:

- How successful were these services in achieving legal and emotional permanency for the child(ren)?
- What, if any, barriers or challenges were faced in achieving legal and emotional permanency for child(ren)?
- Were these barriers or challenges addressed? (**If yes**) Who addressed them? How were they addressed?

9. As far as you know, are there services that are similar to Family Finding (or [insert local title]) in your area?

- (**If yes**) What are they? How are they similar?

We've come to the end of the interview. Thank you so much for your time today. The information you provided will be an important part of our evaluation.

Referring Caseworker Focus Group

INTRODUCTION

Thank you very much for agreeing to meet with me today. I'm _____ and this is _____ from Child Trends, an organization in Washington, DC that performs research to improve programs and services for children and youth. Child Trends has been contracted to evaluate the Family Finding or [insert local name] services here in [insert local area] and in several other areas across the country. Our evaluation will seek to explore the impact of these services on child welfare outcomes and child well-being. As part of the evaluation we are conducting site visits to better understand the operation of the Family Finding or [insert local name] services in different locations around the country, and the local context within which the program operates.

We have asked you to participate in this focus group to understand your experiences and opinions concerning permanency planning for foster children and youth and to find out your impressions of the Family Finding (or [insert local name]) services and any experiences you have had with these services.

I will be your facilitator for this session and _____ will be taking notes. We are taking notes and recording the session so that we can accurately report your opinions, but your responses will not be linked with your name in any way -- everything will be anonymous. No one from the child welfare agency or the Family Finding (or [insert local name]) unit/program will know who said what in this meeting. We **strongly request** that you and all other focus group participants not discuss what is said in this group today with others outside of the group. However, we cannot guarantee that all focus group participants will adhere to our request. We will use the recording to fill in our written notes, but then the recording will be destroyed. If at any time you would like to say something that you do not want to be recorded, just say so and we will turn off the recorder.

I'm not sure how many of you have participated in a focus group before, but let me give a brief overview of how this will work. As the facilitator, I will be asking questions, but I want the interaction to flow among you – let's have lots of open discussion. I encourage you to talk to and ask questions of each other. There may be times when I need to interrupt the conversation -- either to ask you to clarify something you may have said or to move the discussion on to another topic. Most people say they really enjoy participating in these groups, so we hope that you have fun.

I want to reiterate that what you say will be kept confidential. We will be writing reports to our various funders on what we learn from all of our site visits, but we will not be discussing specific programs and we will never identify who has said what.

Again, we are very pleased to have you here today, and we thank you for your time and your opinions.

Do you have any questions for us before we begin?

[If Family Finding services are used in front end, use the term "foster children and youth". If services are used in the back end, use the term "foster youth"]

Let's start by going around the room and giving your names and job positions. Tell us how long you've been in your position.

FAMILY FINDING SERVICES

Now, I'd like to ask you some questions about the Family Finding (or [insert local title]) services in your area.

1. How familiar are you all with the Family Finding (or [insert local title]) services that are offered at your agency? (*If some or all are not familiar, Interviewer can briefly review the Family Finding model*)

    For those who are unfamiliar, probe:

    *   Now that you've gotten a sense of what these services are about, what are your impressions of these services?
    *   Would you refer children on your caseload to receive these services? (**If no**) Why not?

    For those who are familiar, probe:

    *   How did you learn about these services?
    *   What are your impressions of the services?

2. Has anyone here ever referred a child to receive these services before?

    If yes, probe:

    *   Could you tell me about your experience? How were you involved in the services?
    *   Could you tell me about the child's experience?
    *   Did the services result in securing a supportive network for your child and/or a permanent placement for a child?
    *   What, if any, barriers or challenges were faced in achieving legal and emotional permanency for child(ren)? Were these barriers or challenges addressed? (**If yes**) Who addressed them? How were they addressed?

PERMANENCY SERVICES

Now, I'd like to ask you some questions about permanency for foster children/youth and the services offered in your community that support permanency efforts.

3. How important is it that foster children/youth on your caseload achieve emotional permanency or secure a life-long supportive network?

4. What types of services do you provide the foster children/youth on your caseload to assist them in securing such a network?

5. Are there services in your local community that assist with securing such a network for foster children/youth?

6. How important is it that the foster children/youth on your caseload achieve legal permanency?

7. What types of services do you provide the foster children/youth on your caseload to assist them in achieving legal permanency?

8. Are there any services that you perform that are similar to Family Finding (or [insert local name]) services? (e.g. case record reviews, internet searches, convening permanency planning meetings, etc)

9. Are there services in your local community that assist you with achieving permanency for foster children/youth?
   - Are any of them similar to Family Finding (or [insert local name]) services?

   If yes, probe:

   - What are they?
   - Do you regularly refer foster children/youth to receive these services?

BARRIERS AND FACILITATORS TO PERMANENCY

Now, I'd like to ask you some questions about barriers and facilitators to achieving permanency for the foster children/youth on your caseloads.

10. Have you experienced barriers or challenges to achieving legal and emotional permanency for foster children/youth on your caseload?
    If yes, probe:

    - What strategies have you (or someone else at the agency) used to try to overcome these barriers?
    - Which strategies were effective in assisting these children in achieving permanency which ones were not effective?

11. Are there any characteristics of the foster children/youth you serve that make it particularly difficult to achieve permanency for them?
    If yes, probe:

    - What are they?
    - What strategies have you (or someone else at the agency) used to try to overcome these barriers?

    - Which strategies were effective in working with these parents and which ones were not effective?

12. In your opinion, what have been the greatest facilitators of achieving permanency for foster children/youth?

We've come to the end of the focus group. Thank you so much for your time today. The information you provided will be an important part of our evaluation.

Appendix D. Among treatment group children, percentage achieving various outcomes, by number of connections and number of connections that had interactions

Table 12. Among treatment group children, percentage achieving various outcomes, by number of connections and number of connections that had interactions

	Total # of connections					# connections with interactions				
	0-17	18-39	40-57	58-142		0	1-5	6-8	9-24	
Total: Percent distribution	25%	29%	21%	25%		23%	37%	16%	24%	
Total: N	(74)	(86)	(62)	(73)		(68)	(109)	(46)	(72)	
Confirmatory outcome										
Child stepped down his/her placement during foster care episode	27%	49%	45%	53%	**	20%	45%	59%	54%	***
Exploratory outcomes										
Permanency										
Discharge to reunification	4%	9%	8%	3%		4%	8%	4%	6%	
Discharge to adoption, guardianship, or reunification	33%	26%	23%	11%	**	33%	26%	20%	13%	**
Latest goal: adoption, guardianship, or reunification	33%	37%	54%	40%		35%	44%	46%	40%	
Latest goal: reunification	11%	9%	29%	15%	*	14%	8%	31%	16%	
Latest goal: adoption or guardianship with relative	17%	18%	31%	26%		26%	12%	42%	22%	**
Safety										
Re-allegation of abuse or neglect following study enrollment	11%	13%	20%	14%		9%	17%	9%	18%	
Substantiated re-allegation of abuse or neglect following study enrollment	0%	2%	2%	4%		0%	2%	2%	4%	
Placement restrictiveness										
Child was discharged from foster care to a relative (reunification, guardianship, or custody)	14%	24%	22%	22%		15%	23%	26%	18%	
Child was discharged from foster care to a relative (reunification, guardianship, or custody) OR child was discharged from foster care and last placement setting was with a relative	7%	14%	12%	13%		9%	12%	11%	13%	
Child's last placement setting in foster care (regardless of whether child has discharged from care) is/was with a relative	17%	31%	23%	33%		21%	24%	36%	28%	
Placement stability										
Among those who discharged from foster care, % that re-entered	1%	5%	5%	3%		3%	5%	2%	3%	
> 2 placement changes (excluding moves toward permanency)	37%	45%	43%	51%		30%	46%	43%	56%	**
> 2 placement changes	42%	54%	50%	56%		38%	50%	52%	62%	*

*: p<.10 (*), p<.05 (**), p<.01 (***)

Appendix E: Site visit participants

Number and Types of Site Visit Participants

	Children's Home Society	DSS	Total
Family Finding Workers	5	13	18
Family Finding Supervisor	3	13	16
Administrator	5	12	17
Social Worker with Family Finding Experience	18	60	78
Social Worker with **no** Family Finding Experience	24	56	80
Casework Supervisor	10	6	16
Community Stakeholder*	17	16	33
Observations	11	4	15
FF Consultant	-	3	3
Total	93	183	276

* Community stakeholders included court personnel, therapists, and other service providers.

Appendix F. Characteristics of youth >= age 13 at study enrollment, by experimental group assignment (based on interview data)

Table 13. Well-being outcomes at 12 and 24 months following study enrollment among youth >= age 13 at enrollment, by experimental group assignment

	12 month follow-up				24 month follow-up			
	N	Total	Treat-ment	Control	N	Total	Treat-ment	Control
Behavior problems	283				271			
Internalizing: Borderline or clinical level		27%	29%	25%		20%	24%	17%
Internalizing: Clinical level		13%	14%	11%		10%	16%	6% ***
Externalizing: Borderline or clinical level		39%	41%	40%		28% ††	28%	27%
Externalizing: Clinical level		23%	29%	18%		20%	24%	17%
Total problems: Borderline or clinical level		33%	36%	32%		24% †	27%	22%
Total problems: Clinical level		19%	22%	17%		14%	16%	13%
Youth has any children	82	17%	20%	15%	141	18%	23%	14%
Standardized social support scale score	279	0.1	0.1	0.0	266	-0.1	-0.3	0.2
Educational attainment	304				280			
High school diploma		5%	4%	6%		11% †	11%	12%
General equivalency degree		4%	5%	3%		6%	8%	5% **
Neither high school diploma nor GED		91%	91%	91%		82% ††	81%	83%
Ever enrolled in college	296	6%	6%	7%	274	11%	13%	10%
Ever placed in a special education program	303	28%	32%	24%	278	29%	29%	29%
Representative from school/health professional ever told youth he/she had a learning disability	304	26%	31%	22%	281	23%	26%	20%
Mean total self-efficacy scale (range 18-72)	303	29.4	29.0	29.8	278	28.4	27.9	28.8
Self-efficacy employment subscale (range 3-12)	303	43.1	4.2	4.4	277	4.2	4.1	4.3
Youth ever previously in a group home/residential center	162	86%	83%	90%	266	68% †††	72%	64% *

*: Difference between treatment and control group is statistically significant, p<.10 (*), p<.05 (**), p<.01 (***)   106

†: Difference between total group for 12- and 24-month follow-up is statistically significant, p<.10 (†), p<.05 (††), p<.01 (†††)

		12 month follow-up				24 month follow-up		
	N	Total	Treat-ment	Control	N	Total	Treat-ment	Control
Ever previously ran away	304	42%	45%	39%	281	44%	47%	42%
Ever previously exited and then re-entered foster care	303	32%	36%	29%	278	30%	31%	29%
Current placement setting	304				281			
Non-kin foster home		47%	40%	54% **		32% †††	26%	37% *
With kin or adoptive/biological parents		25%	30%	20% *		34% †	38%	30%
Group home/residential		20%	22%	18%		16%	17%	15%
Independent or with roommate or significant other		5%	4%	6%		13% ††	15%	11%
Other		2%	3%	1%		6%	4%	7%
Assets								
Has checking account	302	19%	20%	17%	279	29% ††	27%	31%
Has savings account	300	25%	28%	22% **	275	31%	35%	28%
Has checking or savings account	300	31%	30%	33%	275	38%	39%	37%
Material hardships								
Begged, sold plasma, sold recyclables for money, or pawned possessions (Age 18+ only)	82	23%	27%	20%	143	35%	42%	28%
Borrowed money for food, went to food pantry/soup kitchen for food or went hungry (Age 18+ only & not in foster care & not living with bio/adoptive parents)	27	37%	50%	18% *	63	32%	27%	36%
Did not pay rent/was evicted, or did not pay utility/phone bill (Age 18+ only & not in foster care & not living with bio/adoptive parents)	--	--	--	--	24	50%	58%	42%
Number of parents known to be living	304				279			
Parents deceased and/or don't know if living		10%	14%	6% *		9%	15%	5% **

*: Difference between treatment and control group is statistically significant, p<.10 (*), p<.05 (**), p<.01 (***)   107
†: Difference between total group for 12- and 24-month follow-up is statistically significant, p<.10 (†), p<.05 (††), p<.01 (†††)

| | 12 month follow-up | | | | | 24 month follow-up | | | |
	N	Total	Treat-ment	Control		N	Total	Treat-ment	Control	
Youth knows 1 parent is living		30%	27%	31%			28%	3%	26%	
Youth knows both parents are living		61%	58%	63%			63%	55%	69%	**
Whether youth knows how to contact mother	303					279				
Mother is known to be deceased		13%	18%	9%	**		11%	15%	9%	
Knows how to contact mother		62%	59%	65%			63%	64%	62%	
Doesn't know whether mother is alive or how to contact		24%	23%	26%			25%	22%	29%	
Whether youth knows how to contact father	303					278				
Father is known to be deceased		11%	13%	9%			12%	16%	8%	*
Knows how to contact father		40%	39%	40%			39%	37%	41%	
Doesn't know whether father is alive or how to contact		49%	47%	50%			49%	47%	51%	
Whether youth knows how to contact parents	303					278				
Parents deceased/not known whether living		27%	30%	25%			28%	29%	27%	
Knows how to contact 1 parent but not both		43%	42%	43%			42%	40%	43%	
Knows how to contact both parents		30%	28%	31%			30%	30%	30%	
Youth contact with parents	303					278				
No contact with parents or parents deceased		39%	42%	36%			41%	43%	38%	
Contact with 1 or more parents but < monthly		10%	7%	12%			8%	5%	11%	
Contact with 1 parent >= monthly		40%	39%	42%			41%	44%	38%	
Contact with >=1 parent >= monthly		12%	13%	11%			10%	8%	13%	**
Youth contact with mother	303					279				
Mother is not living		13%	18%	9%	**		11%	15%	9%	
Don't know if mother is living, or no contact		36%	32%	39%			40%	35%	44%	
Spoke and had any other contact > six months ago, or don't know when last spoke/had any other contact		2%	1%	2%	*		0% ††	0%	0%	

*: Difference between treatment and control group is statistically significant, p<.10 (*), p<.05 (**), p<.01 (***)   108
†: Difference between total group for 12- and 24-month follow-up is statistically significant, p<.10 (†), p<.05 (††), p<.01 (†††)

	N	Total	Treat-ment	Control	N	Total	Treat-ment	Control
		12 month follow-up				24 month follow-up		
Spoke/had other contact <= six months ago		50%	49%	50%		49%	50%	48%
Youth contact with father	303				278			
Father is not living		11%	13%	9%		12%	16%	8% *
Don't know if father is living, or no contact		60%	58%	61%		59%	59%	59%
Spoke and had any other contact > six months ago, or don't know when last spoke/had any other contact		1%	2%	0%		2%	1%	3% *
Spoke or had other contact <= six months ago		28%	28%	27%		27%	24%	30%
Contact with mother	303				279			
Don't know if mother is living or no contact		49%	51%	47%		51%	50%	52%
Contact with mother < monthly		9%	6%	12% *		6%	6%	7%
Contact with mother monthly or more than monthly		42%	43%	41%		42%	44%	41%
Contact with father	303				278			
Don't know if father is living or no contact with father		71%	72%	70%		71%	75%	67%
Contact with father < monthly		8%	7%	8%		10%	9%	11%
Contact with father monthly or more than monthly		21%	21%	22%		19%	16%	22%
Youth contact with siblings	286				262			
No contact with any siblings		12%	11%	13%		16%	16%	15%
Contact with at least one sibling but < monthly		8%	10%	6% *		11%	9%	12%
Contact with at least one sibling ≥ monthly		80%	79%	81%		74%	75%	73%
Youth contact with grandparents	300				278			
No contact with any grandparents		49%	45%	53%		56%	56%	56%
Contact with at least one grandparent but < monthly		9%	9%	9%		7%	5%	9%
Contact with at least one grandparent ≥ monthly		42%	47%	37% **		37%	38%	35%
Youth contact with other relatives	303				279			
No contact with any other relatives		53%	48%	57%		68% †††	66%	69%

*: Difference between treatment and control group is statistically significant, p<.10 (*), p<.05 (**), p<.01 (***)
†: Difference between total group for 12- and 24-month follow-up is statistically significant, p<.10 (†), p<.05 (††), p<.01 (†††)

	N	Total	Treat-ment	Control	N	Total	Treat-ment	Control
		12 month follow-up				**24 month follow-up**		
Contact with at least 1 other relative but < monthly		8%	5%	10%		6%	5%	7%
Contact with at least 1 other relative ≥ monthly		40%	47%	33% **		26% ††	28%	23%
Youth contact with other adults	161				127			
No contact with any other adults		2%	3%	1%		4%	5%	3%
Contact with at least 1 other adult but < monthly		4%	4%	3%		6%	7%	4%
Contact with at least 1 other adult ≥monthly		94%	93%	95%		91%	87%	93%
Youth closeness with mother	303				279			
Don't know if mother is living, mother is deceased		49%	51%	47%		51%	50%	52%
Not close with mother		10%	7%	12%		5%	6%	5%
Close with mother		42%	42%	41%		43%	44%	43%
Youth closeness with father	303				278			
Don't know if father is living, father is deceased		71%	72%	70%		71%	75%	67%
Not close with father		7%	6%	7%		9%	8%	10%
Close with father		22%	23%	22%		20%	17%	23%
Youth closeness with siblings	286				263			
Not close with any siblings		10%	7%	12%		14%	15%	13%
Close with any siblings		90%	93%	88%		86%	85%	87%
Youth closeness with grandparents	302				279			
No contact with any grandparents		90%	44%	52%		55% †††	56%	54%
Not close with any grandparents		5%	4%	6%		4%	1%	7% **
Close with at least one grandparent		46%	52%	42% *		41%	43%	39%
Closeness with other adults	161				127			
No contact with other adults		2%	3%	1%		4%	5%	3%
Not close with any other adults		1%	1%	0%		1%	0%	1%

*: Difference between treatment and control group is statistically significant, p<.10 (*), p<.05 (**), p<.01 (***)   110

†: Difference between total group for 12- and 24-month follow-up is statistically significant, p<.10 (†), p<.05 (††), p<.01 (†††)

	12 month follow-up				24 month follow-up			
	N	Total	Treat-ment	Control	N	Total	Treat-ment	Control
Close with at least 1 other adult		98%	96%	99%		95%	93%	95%
Foster youth closeness to caregivers	216				137			
Not close to caregivers		10%	9%	10%		6%	7%	5%
Close to caregivers		90%	91%	90%		94%	93%	95%
Foster youth closeness to other children in placement	216				137			
Does not live with any other children		21%	21%	21%		23%	16%	28% *
Not close with any other children live with		20%	15%	25%		12%	14%	10%
Close with at least 1 other child lives with		58%	64%	54% *		66%	71%	62%
Foster youth closeness to individuals in household	216							
Not close to foster parents or other children		8%	7%	8%	137			
Close to foster parents or other children, but not both		16%	12%	19%		3%	3%	3%
Close to foster parents and other children		76%	81%	73%		12%	14%	11%

*: Difference between treatment and control group is statistically significant, p<.10 (*), p<.05 (**), p<.01 (***)   111
†: Difference between total group for 12- and 24-month follow-up is statistically significant, p<.10 (†), p<.05 (††), p<.01 (†††)