Foster Care in Michigan

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Child Maltreatment & Foster Placement are Common

- 37,293 confirmed victims of child maltreatment in MI in 2016
- 15.7 per 1,000 children
- 51% were 0-5 yrs old
- 81% were victims of neglect
- 24% of physical abuse
- 3% of sexual abuse
Why Foster Care is Rarely an Ideal Solution

Often involves sudden, ‘violent’ disruption of child’s relationship with:

- his/her **primary attachment figure**
- Other family (e.g., siblings)
- Comfort of home & possessions
- Friends
- School
- Neighborhood

Removal circumstances are often **traumatic** for everyone involved
Why Foster Care is Rarely an Ideal Solution

Disrupted attachment frequently sets the stage for compromised:

- Socio-emotional, language & cognitive development
- Physical health
- Mental health
- Economic self-sufficiency
How Do We Prevent the Need for Foster Care?

Best Practices for Keeping Vulnerable Families Together
Invest in evidence-based **Home Visiting Programs**, especially those shown to reduce child maltreatment

- Child First
- Early Head Start
- Healthy Families America
- Nurse Family Partnership
- Parents as Teachers [PAT]
- SafeCare

CT’s statewide home visiting program, which uses the PAT model, found that participation in the program **reduced the likelihood of a substantiated neglect report by 22%**.
How Do We Prevent Maltreatment & Keep Families Together?

- Invest in high quality **Early Care & Education [ECE]**, especially two generation programs
- Make children in the CWS categorically eligible
- Prioritize them for enrollment
- Fund additional slots

- Chicago Parent-Child Centers participants ~half as likely to be abused/neglected by age 18 than controls (Reynolds & Robertson, 2003)

- Los Angeles County neighborhoods with higher rates of preschool enrollment & a greater supply of licensed child care relative to demand had lower rates of early child maltreatment (Klein, 2011)

- Young children reported to the CWS who attended Head Start had **93% lower odds of being placed in foster care** 18 months later than peers not receiving ECE (Klein, Fries & Emmons, 2017)
• Expand access to **drug treatment programs**

• Especially models that allow mothers & infants to remain living together and that provide parent education & child care

• **61% of infants & 41% of older children** in out-of-home care are from families with active alcohol or drug abuse (Wulczyn, Ernst & Fisher, 2011)

• Cited reason for removal of **~31%** of children placed in foster care in 2012 (AFCARS, 2012)
How Do We Improve the Experience of Foster Children While They Are in Care?
How Do We Improve the Foster Care Experience?

- Senate currently has the opportunity to bring the bipartisan Children's Assurance of Quality Foster Care Policy bills to a vote & support them
How Do We Improve the Foster Care Experience?

- Guarantee subsidized **child care for foster parents & relative caregivers** of young children – remove work & income related barriers and provide timely reimbursement
- Children whose foster parents use child care assistance less likely to experience placement disruption  
  (Meloy & Phillips, 2012)
• Screen foster parents for empathy & flexibility
• Require all foster parents/relative caregivers receive evidence-based **training on parenting traumatized children**
How Do We Help Foster Children Transition Successfully to Adulthood?
Ensure Ongoing Access to Health Care

HOMELESS
65% of youth leaving foster care need immediate housing upon release, and 22.2% experience homelessness after age 18.

NO MONEY
33.2% of foster alumni have household incomes at or below the poverty line.

IN PRISON
Foster youth are 5 to 10 times more likely to enter the juvenile justice system, and 25% are incarcerated within the first two years of emancipation.

MENTAL HEALTH
25.2% of foster alumni are diagnosed with post-traumatic stress disorder, which is nearly double the rate of U.S. war veterans.