Assessing the Needs of Children and Youth in Adoption, Foster Care, and Kinship Care and Their Families

As mentioned in the introduction, there are a number of stages to go through when implementing any new program or making significant changes to services offered — exploration and adoption of the idea, program installation, initial implementation, full operation, innovation, and sustainability. The chapter below is designed to help you in stage one, as we suggest ways to explore the needs of adoptive, foster, and kinship care families in your area, which will help you clarify if changes are needed in the family support programs you offer.

Assessing the Needs of Individual Children, Youth, and Families

Before administrators and policymakers assess the broad needs of the adoptive, foster, or kinship care families in their community, it's helpful to be sure your agency or its partners are assessing the individual needs of children, youth, and families. These individual child- and family-level assessments can contribute to your agency's overall understanding of the community's needs but also ensure that each family understands and can meet the needs of a child in its care. Below, we outline steps to assessing children's needs and ensuring that the selected families are equipped to meet the needs. Our primary goal here is not to provide a comprehensive tool to guide assessment and matching, but rather to present the issues so administrators can be sure these preliminary steps are being undertaken.

Developing a Child or Youth Assessment Report

As discussed in Chapter 1, children and youth who are or have been in foster care often have serious and ongoing disabilities and complex needs. For child welfare system staff and parents to meet those needs, they must have a current, comprehensive picture of the child's or youth's challenges and strengths.

Horwitz et al. (2000) notes challenges facing children and youth in foster care can be significant, and assessing their needs is increasingly recognized as critical:

> Current estimates of mental health problems range from 30% to 80% with 40% to 80% experiencing some chronic health problem, 43% showing growth abnormalities, and 33% having untreated health problems . . . . As the magnitude of these problems has been recognized, various professional organizations have called for thorough and ongoing assessment and treatment of health and mental health problems of children entering substitute care.

The study, which tested an assessment model in Connecticut, also found that the provision of comprehensive evaluations helped improve the scope and delivery of services.[70] Despite the need for comprehensive evaluations, Kerker and Dore (2006) found the mental health needs of children who are entering out-of-home care are rarely assessed.[71]

As your agency seeks to ensure child and family well-being, you will benefit from having a thorough report on each child in foster care that assesses their developmental needs in the physical, social, cognitive, and emotional domains, as well as their strengths and family and other history. Having an updated assessment completed before a child leaves foster care to a kinship or adoptive placement will ensure the child's parents have more accurate information about the child they will be parenting. In presenting the assessment, you can work with the family to understand the potential impact of the child's history on the family and to determine and plan for any specific ongoing support needs.

The assessment should include the child's:

- Developmental needs across multiple domains, including:
    - Physical — health status, including dental health; motor skills
    - Cognitive — intellectual development or capacity; educational needs, including school performance; speech and language function
    - Emotional — mental health; behaviors; well-being; fears; ways to comfort or support the child
    - Social — attachment history; relationships
- Strengths and interests, likes and dislikes (such as foods, activities, clothes)
- Family history
- Siblings and other birth family connections
- Community connections (schools, community groups, clubs, faith communities, etc.)
- Placement history, including number of placements, placement settings, reason for moves, other information about the placement experience
- Trauma history
- Cultural needs
- Sexual development, including any history of abuse or sexual acting out
- Attitude toward adoption or foster care

In addition to referring to medical and mental health evaluations and reports, the person conducting the assessment can find useful information from:

- Case files
- Meetings with the child's birth family and community members
- Discussions with the child's former caregivers
- Discussions with the child and individuals important to the child
- Reports or conversations from professionals who have served the child
- The child's social history, which should include information on significant events and circumstances from the child's past

Each assessment report should identify the services the child needs and has used, including which services worked and which didn't. The report can help agency staff work with parents to ensure they

can access needed and useful supports. The placing agency should share summaries of the assessment with the adoptive, foster, and kinship care parents so they know the child's status and needs, have information about how best to parent this child, and thus have the best possible chance to meet those needs.

For additional information on child assessments specific to adoption, the National Resource Center for Adoption's *Adoption Competency Curriculum, Child/Youth Assessment and Preparation* module provides an in-depth discussion of child assessments, including a detailed checklist (Handout 3) of what should be included. In its Web-based Placement Stability Toolkit, the National Resource Center on Permanency and Family Connections identifies a number of evidence-based assessment tools for foster placement, including the Behavioral and Emotional Rating Scale, Child and Adolescent Needs and Strengths — Mental Health, and the Child Behavior Checklist.

Assessing if a Family Can Meet a Child's Needs

Once staff have identified and documented a child's needs, the next step is to determine if the child's current or prospective family can meet those needs and what supports they might require to successfully parent the child. This is typically done through the assessment, preparation, pre-adoption training, and placement processes, although in some situations the assessment may not be as thorough as it should be to inform decisions about placements and needed support services, especially for emergency foster or kinship placements.

Hanna and McRoy note, with respect to adoption matching, "Using the public health model of prevention, shifting the focus of the matching process to a means of identifying stressors and plan services, may prove to be a pre-emptive step resulting in greater adoption stability and concurrently decreasing the disruption rate."[72] As your agency works to improve placement stability, permanency, and well-being for children and families, following Hanna and McRoy's three-step approach can help you achieve better outcomes:

1 Assess each child's and family's needs and strengths, including determining what the family can handle and the needs of any other children in the family

2 Identify risks and protective factors that will help the family respond to challenges and stressors based on the needs of the child

3 Identify support and services the family needs to ensure the success of the placement[73]

The National Resource Center on Permanency and Family Connections notes a number of issues shown to be related to placement stability or breakdown that can be examined during the assessment process:

- Existing kinship relationship to the child
- Parenting support
- Ability to set limits
- Match between the child's needs and the caregiver's capacities

- The child's relationship with other children and youth in the home
- The foster parents' ability to form a relationship with the birth parents[74]

In addition, the National Resource Center on Permanency and Family Connections' curriculum *Assessing Adult Relatives as Preferred Caregivers in Permanency Planning: A Competency-Based Curriculum* has extensive information about assessing relatives for placement. In particular, see Handouts 5.5 and 6.2 for checklists on assessing relatives for safety and placement potential and handout 6.1 for information on key issues facing kinship caregivers. The National Resource Center for Adoption's *Adoption Competency Curriculum, Family Assessment and Preparation* module also has information about assessing relatives for adoptive placement.

As noted above, a critical component to the matching process is ensuring that the family has the ability to meet the child's needs. Deborah Gray has developed a 16-question home study question-naire that both assesses prospective parents' own background and explores their capacity to meet children's needs. Questions related to the child include:

- Are you comfortable letting others help you with this child? Do you mind working with professionals?
- Are you able to accept lots of acting out and controlling behaviors in children as a probable scenario for the beginning of placement? For children who have trauma histories, will you be willing to get therapy, a necessary part of children's medical care?
- Will you be able to provide more structure and nurture for children who need this approach, rather than using the parenting style that most closely fits your own personality?
- What resources available in your community will help you support a child who has been neglected, abused and/or otherwise traumatized?
- What resources are available for children with learning issues through the school district?
- How will you individualize and meet the needs of this child or children?
- For what type of child do you think you would not be able to meet the needs? Can you tell me about this?[75]

Questions such as these can help ensure prospective and current parents are really ready to meet the needs of the children who will be placed with them, and provide workers with a guide to help identi-fy additional supports or connections to community programs families may need.

After a child is identified, parents will likely need child-specific training or support to increase their capacity to meet the child's specific needs. This type of training, when paired with the standard pre-placement training all prospective parents should receive, can help parents understand the particular child they will be parenting, including the child's diagnoses, needs, strengths, and other characteristics. This support and training specific to the child is an integral part of the assessment and matching process. Of course ongoing training after placement is also a valuable component of any post-placement support program.

Assessing the Needs of Adoptive, Foster, and Kinship Care Families in Your Area

The information above is about practice at the individual child and family level, which is fundamental to a State, Tribal, or Territorial agency's ability to meet their child welfare goals, and about which much more could be said. Our primary focus in this guide, however, is assessing the needs of children and youth who have been adopted or are in foster or kinship care and their families and to identify the availability and usefulness of support services. We recommend conducting a needs assessment before considering any changes to the support services provided to adoptive, foster, and kinship families in your community.

Deciding Why and How to Assess Families' Needs

Why Conduct a Needs Assessment?[i]

- To learn more about the needs of adoptive, foster, and kinship families. A good survey can supplement your own observations and experiences. It can give you detailed information from a larger and more representative group of people than you could get from anecdotes alone.

- To get a more honest and objective description of needs than people might tell you directly.

- To become aware of needs that you didn't know were important or you never knew existed.

- To make sure any services you provide are in line with the community's needs.

- To identify or understand any differences in needs or services available in different counties or regions.

- To ensure that resources aren't being wasted on services that aren't needed or valued, enabling your agency to redirect resources as needed.

In spite of what implementation science says about the importance of an exploration phase in any new program design or development, you may find people who question the need to conduct a needs assessment. Below, we outline possible objections and offer responses about why it is important to assess families' needs.

We already know what families need.

We definitely know some things about what families need, but often there is more specific information to be gathered. Perhaps your agency or another organization has done a recent survey or series of focus groups on families' needs. There is certainly general research on what adoptive, foster, and kinship families need.

Much of the time, though, the needs are not quite clear or may change over time. The research may be from a different population or for a different region of the country. No one may have done a

---

i   The information in the Why Conduct a Needs Assessment? section is adapted, with permission, from the Community Toolbox. View the original materials and additional resources at http://ctb.ku.edu/en/tablecontents/sub_section_main_1042.aspx

survey in years. The population of children and youth in care may also have changed and may have different needs than those of just a few years ago. If your foster care population has gotten smaller, perhaps those children who remain in care have more significant challenges. Some jurisdictions have seen more very young children in foster care lately, and these children may require different services than a school-aged population. Perhaps community services have been added or reduced since the last survey. You and others in your agency or elsewhere in the child welfare community may have ideas, but it's usually valuable to make sure those ideas match with the current reality facing families.

We'd like to make changes now.

It may seem difficult, but it's almost always worth stopping and assessing needs before you get started. Implementation science has demonstrated the value of an exploration phase before undertaking system change. If you do a needs assessment, you can feel more comfortable knowing that what you want to do meets a real need. Given how busy you and your colleagues are, it is important to ensure that you are prioritizing your efforts on the activities that are most needed.

Tribal Needs Assessments

In a presentation at the 2013 National Indian Child Welfare Association conference, Mercedes Garcia from the Pascua Yacui tribe and Kathryn Ford of the Center for Court Innovation discussed conducting needs assessment in child welfare. They explained that, in addition to gathering information about what services to provide, needs assessments can:

- Serve as outreach to the community and let people know what you're doing

- Build stakeholder interest and support

- Strengthen collaboration among different partners and agencies if you get them involved during the assessment process

- Identify resources in the community (Pascua Yaqui developed a 400-page list of resources during their assessment process.)

Garcia and Ford also noted that it may be important to involve tribal elders in both planning and implementation of any needs assessments. Elders can make valuable contributions to the assessment planning phase and help build support for the process.

Garcia and Ford also noted that careful thought should be given to who gathers the information when seeking input from tribal members. They explained that it typically helps ensure more active and engaged participation if members of the tribe conduct the focus groups or interviews. But they also noted that, depending on sensitivity of the subject matter and the size of the tribe, participants may actually feel more comfortable expressing themselves if an independent person or organization is in charge of information gathering.

We don't have the time to do a survey.

The actual amount of time involved in conducting a needs assessment can vary a great deal. The type of needs assessment we recommend shouldn't take too long. You can adapt our sample survey (on page 32); set it up online; conduct outreach to adoptive, foster, and kinship families; and probably get responses within a few weeks.

If you have a choice, you may want to survey more people, with additional questions, in different ways. Doing only an online survey is faster, but may not reach some of the people who most need support. There are many different degrees of comprehensiveness you can choose. But any surveying is almost always better than no surveying at all. It's likely that whatever time you can afford will be well worth it.

> " It's a myth that most people are surveyed all the time. More often, we survey too little or don't act on what we discovered in our assessments.

Since resources to provide support services are limited, can you afford *not* to find out about community needs before you offer services?

People will be bothered since they have already been surveyed so much.

More often, the opposite is true. In fact, most people are rarely asked about what they think about needs or services. People often feel honored when they are seen as an expert or when their input is requested, especially if it could potentially help their child or other children in the community.

It's a myth that most people are surveyed all the time. More often, we survey too little or don't act on what we discovered in our assessments. As we know from implementation science, data-driven decision-making is critical to success.

Implementation of Your Needs Assessment

As part of your exploration phase, we recommend conducting a needs assessment survey and, when possible, several in-person focus groups. The survey enables you to reach a wide audience relatively easily and tends to have low implementation costs, especially if you do mostly online surveys and invite people to participate primarily through email. Focus groups are more time-intensive, but can add detail and nuance to the information you gather through the surveys.

Designing a Survey

We have developed a sample needs assessment survey for States, Tribes, and Territories to use to assess their community's needs. (See pages 32 to 48.) Our survey is adapted from a number of existing surveys that have been used for years in the adoption community, and was tested by adoptive parents. We encourage you to use the tool, adapt it as you see fit, or design your own survey. (Please note that your agency may have rules for gathering input or guidelines requiring that review boards approve any surveys you use. Be sure to check internal guidelines before you start any data collection.) If you design your own survey, we suggest getting input from experienced parent and youth leaders. Their input should help shape a better survey, and will also start a strong partnership likely to help you generate a better response rate.

Choosing How to Assess Families' Needs

There are a number of ways to assess families' needs, including in-person or phone interviews, paper or online surveys, focus groups, listening sessions, public forms, data analysis, and more. A few of the more common options are:[i]

- **Using existing data** —You might use agency placement data or Adoption and Foster Care Analysis and Reporting System (AFCARS) data to start your needs assessment. You can also look for information others have gathered (such as previous surveys conducted by foster and adoptive family support organizations in your community).

- **Listening sessions and public forums** — Listening sessions are forums you can use to learn about the community's perspectives on local issues and options. They are generally fairly small, with specific questions asked of participants. Public forums tend to be both larger in number of participants and broader in scope than listening sessions. They are gatherings where attendees discuss important issues at a well-publicized location and time.

- **Interviews and focus groups** — These are less formal than forums, and are conducted with either individuals or small groups (usually fewer than 10, and sometimes may include as few as two or three people.) They generally include specific questions, but allow room for moving in different directions, depending on what the participants want to discuss. Open-ended questions (those which demand something more than a simple answer), follow-ups to interesting points, and a relaxed atmosphere that encourages people to open up are all part of most assessment interviews and focus groups.

- **Surveys** — There are several different kinds of surveys, any or all of which could be used as part of a community assessment.

....

i   This list of items is adapted, with permission, from the Community Toolbox. View the entire list at http://ctb.ku.edu/en/tablecontents/sub_section_main_1019.aspx

Whether you are adapting this survey tool or creating one from scratch, the following tips will help create an easy-to-use instrument that garners the most responses:

- **Make sure the survey is user friendly:**
  - Allow the survey to be anonymous and explicitly reassure families the survey is anonymous. Avoid asking questions that would allow you to know the families' identities. Some of the questions asked are very personal, and families may be reluctant to share honest information about the challenges they face, especially with a state or tribal agency.
  - Use multiple choice questions whenever possible. Participants are less likely to complete a survey that requires them to write in answers for each question. These questions are also significantly easier for you to tabulate when you're compiling results.

- Don't use abbreviations or acronyms. Everyone may not know that MFT means marriage and family therapist or FASD means fetal alcohol spectrum disorder.

- Avoid jargon. Parents may not know the difference between an adoption disruption or dissolution or be familiar with either word. Use phrases like "ending the adoption" instead.

- Give participants an "Other" option to many questions. When participants can't answer a question using the choices you provided, they may get frustrated. By including an "Other" option, you allow participants to answer every question.

- Include a final open-ended question that allows participants to share comments about the topic you are asking about. This allows participants a chance to share relevant information that may not have been addressed in the survey.

- Thank participants for taking the time to provide input.

- **Keep the survey as short as you can —** Make sure that participants can complete it in no more than 15 to 20 minutes. Have several parents do a test run of the survey and see how long it takes them. Multiple-choice questions make surveys faster to complete, but you may need to eliminate some questions if the test runs show that it takes too long to complete the survey. If you're trying to shorten the survey, look critically at each question: Is it asking something you will be able to use when you design a support program? Or is it just something of interest to you? You may have to make some tough choices and prioritize the questions.

- **Provide multiple ways to complete the survey —** Many people will prefer an online survey they can complete at home and on their own time. Others won't be comfortable using a computer and may need a paper copy. If you get your data only from those who use an online survey, you may miss out on the needs of those who are less comfortable with computers or have no Internet access. This population may have significantly different needs than those who are regularly online.

- **Make it easy or rewarding to respond:**

  - If you're sending paper copies, include a stamped and addressed reply envelope or a fax number for returning the completed surveys.

  - Distribute paper copies of the survey at a support group meeting or foster care or adoption events and ask parents to fill them out by the end of the event or meeting.

  - Provide incentives if possible. For example, you might enter every participant's name in a drawing for a small prize (such as a $25 gift card to a local store). Since you want the survey to be anonymous, this can be a bit tricky, but it's still possible. For online surveys, you can provide respondents' with two links — one to complete the survey and a separate one to provide their name and contact information for the drawing. You can have the link for the drawing on the final page of the survey so they don't get it until the survey is complete. If you are using paper surveys, you could have a support staff member enter names separately from the data on the survey. Be careful with whatever you do or it could compromise anonymity or the perception of anonymity.

  - Avoid busy times of the year for parents. August and early September when children are returning to school and around the holidays in November and December can be difficult times for parents to respond to additional requests for information. Families can also be busy at the end of the school year or around Mother's Day or Father's Day.

- **Test your survey** — It's important to try out your survey before you use it. Identify five to 10 parents who are willing to take a trial run of the survey; ask them to think about the following questions as they complete the survey:

  - How long did it take you to do the survey? Is it too long?

  - Are there any questions you found particularly difficult to answer? Do you have suggestions for making those questions easier to answer?

  - Are there questions you wish we had asked?

  - Do you have any other comments on the survey?

  - Do you feel the survey allows you to properly express your needs? If not, what might make it better?

As part of your trial, you should look at the answers you receive as well. Are the answers you received the type you expect? Are people misunderstanding any of the questions or the answer choices? Will you be able to tabulate the answers fairly easily?

After your tests and your internal analysis, you can make changes in the survey. If you make many significant changes or your test group had a lot of trouble with the survey, you may want to test the revised version with another group of parents.

A State Examines Its Post-Adoption Support

In 2012, the Washington State Auditor's Office conducted a survey to determine to what extent the needs of families who adopt from foster care are being met. The survey was part of an ongoing effort in which the auditor's office conducts independent, comprehensive performance audits of state and local governments. For its examination of adoption support, the office also reviewed literature on post-adoption needs and services and studied similar states' post-adoption programs. The auditors also examined the process of negotiating adoption assistance benefits.

To conduct the survey on service needs, the office selected a statistical random sample of the more than 9,000 families who were receiving adoption assistance benefits during fiscal year 2012. Of the 1,686 individuals sampled, 750 completed the survey. Released in February 2014, key survey findings include:

- Most families' needs are being met, but 29 percent of families expressed an unmet need.

- The biggest gaps in services were for families raising children with diagnosed disabilities. Of these families, 57 percent had an unmet need.

- One of the largest unmet needs was for family counseling. Other unmet needs included information on services and parenting, support groups, and child care or after-school care for children who need special supervision.

To learn more about the survey and the rest of the performance audit, read *The Experiences and Perspectives of Washington Families who Adopted Children from Care*.

Adapting the Sample Survey

If you want to tailor our sample survey to your community, please consider the following:

- **Use language that parents in your State, Territory, or Tribe are most familiar with** — If your subsidized guardianship program is called "KinGAP," use that term along with a description the first time you use it. If your agency uses the phrase "transfer of legal custody" rather than guardianship, use "transfer of legal custody" in your survey. Rather than saying "local department of social services" in question 19 of our sample survey, use the name of your child welfare agency.

- **Ask specific questions about the services you offer** — You might want to add a question about any specific programs you offer. For example, in our sample survey's section on "Services Used and Rating of Helpfulness," you might want to ask if respondents are aware of specific support programs and what they think of their effectiveness.

- **Make sure the geographic section fits your area** — If you provide services by county, list each county in the sample survey in question 40. Or if it fits better for your community, list a number of regions they can choose from. Your ultimate goal is to be sure the responses work for how your State, Territory, or Tribe is organized by any geographic divisions.

Conducting the Survey

A key element in conducting the survey is to determine how many responses you'll want and from which groups of people. The answers to those questions will help you decide how to administer the survey.

The first step is to define the population you plan to serve: Will it just be adoptive parents? Just foster parents? Will it include parents who adopted only from foster care or any parent who has adopted? If you are serving kinship providers, are you serving only those within the formal foster care system, those where child protection was involved, or anyone raising a relative's child?

Once you've decided on the general population to survey, you can think about how big a group that is. Do you have 10,000 foster parents in your state? Do you have 5,000 parents who adopted from foster care? If your population is 5,000, how many survey responses will you want to get in order to have reliable results? There is no set amount but you want to be sure you get enough responses to make your data useful. Response rates are more important when the study's purpose is to measure effects or make generalizations to a larger population, and less important if the purpose is to gain insight.

Acceptable response rates vary by how the survey is administered:

- Mail — 50% is adequate, 60% good, 70% very good
- Phone — 80% good
- Email — 40% average, 50% good, 60% very good
- Online — 30% average
- In-person — 80–85% good[76]

Even if you have lower response rates than this, you likely still have valuable insight.

Of course, it's not just about numbers. You want your survey respondents to be representative of the community you hope to serve, so you want to ensure diversity of respondents. Diversity has a wide variety of components to consider:

- Racial and ethnic background, tribal enrollment or affiliation
- Type of parent (adoptive, foster, or kinship; different types of adoption)
- Family size and make-up (those parenting one child; those with sibling groups or multiple children, adopted, foster, and birth; single parents; lesbian and gay parents)
- Time since placement (new parents; those who have been parenting for years)
- Age of children and youth in the family
- Income
- Geography (urban, rural, suburban; from all over the State, Tribe, or Territory)

Obviously, you'll need to decide how to reach those you plan to survey and eventually serve. Some potential avenues for reaching diverse groups of parents include:

- Adoption and foster care agencies
- Social media sites used by adoptive, foster, and kinship families
- Community-based agencies around the state or tribal area; those serving specific racial or ethnic groups may help you reach a more diverse audience
- Schools, early childhood education programs, and after-school programs
- Parent support groups
- Foster and adoptive parent associations
- Conferences and trainings on disabilities, mental health, or adoption or foster care issues
- Mailing to all (or a random sample of) families who receive adoption assistance or foster care payments

It's important to think about ways to reach families who are not already connected to the services you offer. These families may be doing fine and not need services, but they could also be especially isolated and have a different perspective to share than those who are already connected to the adoption or foster care community. The best way to reach these individuals may be through mailings to families who receive adoption assistance, foster care, or kinship care benefits. Or you may want to partner with child-placing agencies, and have them reach out to families they have placed children with. If you know certain neighborhoods have large numbers of adoptive, foster, or kinship families, you could also do flyers or targeted ads but this can get expensive and may have poor response.

> " You want your survey respondents to be representative of the community you hope to serve, so you want to ensure diversity of respondents.

As your responses come in, you'll want to check if you are hearing from the entire community. If your responses aren't representative, you may want to conduct additional outreach to the popula-

tions you are missing. For example, if your state has a significant Latino population but the demographic results of your survey don't reflect responses from Latino families, perhaps you need to offer the survey in Spanish or to partner with Latino community organizations or churches to conduct targeted outreach. If you're not hearing from grandparent caregivers, you may find you need to use a paper survey for this population. You might also want to reach out to the local Council on Aging or similar groups to find grandparent caregivers. Some populations may even need a phone or in-person survey rather than either a paper or online survey.

Below are some tips to help you when you conduct outreach for your survey:

- **Partner with others to get the word out:**
  - Ask leaders of family support organizations such as parent groups or foster care associations to help distribute the survey. When the survey comes from someone they are familiar with and trust, participants are more likely to complete the survey.
  - Ask your local foster care and adoption agencies to share the survey with the parents they have served. This is a good way to reach parents who may not be connected with existing support programs.
  - Post links to an online survey on any web sites, social media sites, or blogs used by parents in your area. This may reach families who don't participate in in-person events. If you are doing outreach a number of ways, you should probably include a note on the survey that parents should complete it only one time.
- **Be personal and persistent:**
  - Whether you're sending the survey by email or mail, personalize the request (e.g., "Dear Ms. Forrest" rather than "Dear Parent") if you can. Personalization has been shown to increase response rates.
  - Send reminders. For an email request, wait at least a week before sending the reminder. For a mailed request, wait at least two or three weeks. Limit the number of reminders to two.
  - Keep your cover letter or email request brief and to the point. Let them know you are doing the survey to assess the needs of adoptive, foster, and kinship care families in the community, and to design services to better meet those needs.

Tabulating Survey Results

The easiest way to tabulate your results is to use software that does it for you. Online survey tools like surveymonkey.com and surveygizmo.com are great options, and can provide both summary and detail data that makes it easy to identify themes and trends. Programs like this also allow you to analyze subsets of your data — for example, data subsets might show that many parents in the urban areas have access to services while those in the rural communities have little to choose from.

If you don't use a survey tool that tabulates automatically, you can track responses in Excel or even more sophisticated data analysis software like SPSS (Statistical Product and Service Solutions). If you're using Excel or similar software, you can enter each survey individually and design a summary worksheet, or hand tally responses and use the software to chart or analyze themes.

Have at least one person read through any open-ended questions and look for themes. You can come up with themes or categories for each open-ended answer and then count the number of people who gave a response in each category or theme.

You may find that responses lead to new questions. For example: Why are so many people reporting that counseling is harmful? Why don't families know about a service we already offer? Why is transportation so often listed as a barrier? If this is the case, a focus group may help you get some answers and a deeper understanding of what's happening.

Gathering Other Data Through Focus Groups

In addition to a survey, if you have the time, we recommend conducting a few focus groups — both with adoptive, foster, and kinship parents and with older youth in adoption, foster care, or kinship care. If a survey is too much to take on right now, these focus groups can even be a substitute. You'll have input from far fewer people, but it's still a good way to get detailed information from the families in your community.

Following are some of the steps necessary to conducting effective focus groups.[i]

Prepare Your Questions

The most important step is deciding what you'd like to ask. You may want to base questions on things you learned from survey results you received. For example, if it seemed that people weren't using a service you offer, you might ask why. If a number of barriers have come up, you can ask for more details about them. Below are some sample questions that might serve as a starting point for you. Make sure participants know you are asking both about informal supports, such as support from other parents or youth in similar situations, and more formal services such as counseling or therapy. It can be helpful to start with easier questions to help participants get warmed up before asking about very personal or complicated situations.

Sample Focus Group Questions for Parents

1 What are the top three challenges facing your adoptive, foster, or kinship family as you attempt to meet your child's needs?

2 What types of support or services have you used in the community?

3 Which support or services have been most helpful to your family? Why?

4 What support or services did you use that were not helpful? Why weren't they of use to your family?

5 What support or services have you needed but not been able to access?

6 What barriers kept you from using those services?

i   This section is adapted, with permission, from the Community Toolbox at http://ctb.ku.edu/en/tablecontents/sub_section_main_1018.aspx

Sample Focus Group Questions for Youth

1 What are the three best things about your adoptive, foster, or kinship family?

2 What are the top three challenges facing you as a foster child, adoptee, or child in kinship placement?

3 What do you think would best help you face those challenges? Why?

4 What do you wish your adoptive, foster, or kinship care parent knew? How would that make a difference for you?

5 Are there programs or services that you think would help you or your whole family?

6 Are there things that get in the way of your asking for help? What are they?

7 Do you have connections with other children and youth in adoption, foster care, or kinship care? Do you think connecting with youth in similar families would be of use to you? If so, why?

Find a Good Facilitator or Facilitators

This is not a small matter — your facilitator will determine the success of your group. Your best choice is someone who:

- Has experience facilitating focus groups

- Knows something about the topic

- Will relate well to the focus group participants

- Will work together with you to give you the outcomes you want

- Doesn't have too large a stake in the outcome (and might therefore steer the conversation)

Each focus group should be led by someone the parents or youth are comfortable with and who is also knowledgeable about existing services offered by the State, Territory, or Tribe. The facilitator must also be skilled at encouraging participation and ensuring the conversation stays on track and isn't dominated by just a few participants. A great option is to have a parent or youth partner with a professional to facilitate the focus groups. Another good option is a parent or youth who is also a professional in the field. As noted earlier, in tribal (or small) communities, planners should discuss whether the facilitator should be a member of the community or an outsider and determine which is the best choice for their community.

> **When working with youth, it's particularly important to find someone who knows how to engage youth without talking down to them.**

When working with youth, it's particularly important to find someone who knows how to engage youth without talking down to them. We highly recommend using an experienced youth facilitator or co-facilitator. Make sure the facilitator avoids the use of jargon or acronyms, which may not be familiar to the youth participants.

Find a Note Taker

Having a note taker is a small but essential point that is often neglected. You want to make sure people's ideas don't get lost and that someone is writing down what is said. If you can't find someone, you can record the session and take notes from the recording. This will take more time after the focus group, but you will have a more complete, accurate, and permanent record.

Decide Whom to Invite

Ideally, those invited should be a representative sample of those whose opinions you are concerned about. In general, focus groups work best with eight to 12 participants. As with the survey, you'll want to be sure that you get participation from across your State, Territory, or Tribe, and that participants are diverse in terms of race, ethnic background, experience with adoption or foster care or kinship care, where they live, and other characteristics. You may want to run several different groups in different locations, to include more people, and to get the diversity you need.

For the youth focus group, it's really important to identify youth participants with a wide range of abilities and experiences. Too often only the highest-achieving youth are included, which does not allow for the full scope of experience and input.

Decide About Incentives

Many organizations offer incentives for focus groups to encourage participation. You should consider whether this can help increase attendance. You might get enough participants just because they care deeply about the topic, but you might need to offer an incentive. If you can't afford a stipend, you could offer food and drink, small gift cards to local café or coffee shop, public recognition, something to take home, or a later training opportunity. A great way to encourage parents to attend is to provide free child care during the session.

Decide on the Meeting Particulars

You'll need to determine the following:

- What day?
- What place?
- What time?
- How long?
- How many groups?

Make your decisions about logistics in a way that makes it easy for participants to attend. If you have more than one session, maybe hold one in the evening and another during lunch. Be sure that the location is accessible and is either near public transportation or has ample free parking. Ideally, each group would have between eight and 10 participants and will last about one and a half to two hours.

After Holding the Focus Groups: Look at the Data

If you made an audio recording, make a transcript. If not, make a written summary from the group notes. But in any case, look closely at the information you have collected. Ask yourself:

- What patterns emerge?
- What are the common themes?
- What new questions arise?
- What conclusions seem true?
- If you plan to hold any future focus groups or conduct other data collection: Do I need to make any changes to my questions or data collection methods?

It's best to have more than one person review the data since each person's perspective is likely to be a bit different. You can each look for themes, and highlight which items seem most important. After your review, you can meet to compare your interpretations and conclusions.

You should share a summary of results with your participants. This can be a great way to thank them for their participation and to help them know they were heard. Sharing results is just one step in building a partnership with the parents and youth who will be served by any programs or services you offer.

Planning and Implementation

Once you have conducted your survey and focus groups (or whatever needs assessment you have chosen), you need to review and interpret your results. Whenever possible, have a team of people look over the results and discuss your findings. It may take more than one meeting to draw conclusions about what families' needs are and then a few more discussions to identify how best to meet those needs — both in terms of services and how to implement and sustain those services. The next three chapters of this guide should be useful resources as you move forward with planning and

implementation of any new or expanded services. The final chapter deals expressly with factors to help with successful implementation of any new programs or services.

One note of caution: We know of one community that held focus groups about adoption support needs. Focus group members spent a lot of time talking about the need for mental health services. In response, the agency shifted money from an existing program to create a new mental health program. Families were very upset about the change — they hadn't talked about the existing program much during the focus group because it was already in place and met their needs. They had identified *an additional need*, but never wanted the old program to go away. A great way to avoid problems like this is to check with either focus group participants or key community leaders before implementing significant changes.

> **Share a summary of results with your participants. This can be a great way to thank them for their participation and to help them know they were heard.**

Assessing Families' Need for Support in Adoptive, Foster, and Kinship Placements

The survey below is for adoptive, foster, and kinship care parents to complete to provide information States, Territories, and Tribes can use to determine what services families would need to meet the needs of their children and family. Parents should fill out the survey based on the needs of their family, taking into consideration all of their adopted children or children in foster or kinship care.

This survey adapts questions used in other needs assessments including the following:

- The 2003 and 2004 adoptive parent surveys by AdoptUSKids; the 2004 AdoptUSKids survey used questions based on studies reported in James A. Rosenthal and Victor K. Groze, *Special-Needs Adoption: A Study of Intact Families* (New York: Praeger, 1992)

- A 2004 survey designed by Susan Egbert for the Utah Adoption Council

- A 2000 adoptive parent telephone interview created by Trudy Festinger of New York University

- Assessment tools reported in Thom Reilly and Laura Platz, "Characteristics and Challenges of Families Who Adopt Children with Special Needs: An Empirical Study," *Children and Youth Services Review*, 25 (2003): 781–803, and Thom Reilly and Laura Platz, "Post-Adoption Service Needs of Families with Special Needs Children: Use, Helpfulness, and Unmet Needs," *Journal of Social Service Research*, 30 (2004): 51-67

PLACEMENT INFORMATION

1. How many children (under 18) are currently living with you? _____

   a. Of those, how many are:
   In foster placement: _____
   Adopted: _____
   In an informal kinship placement (not currently in foster care): _____
   In a formal guardianship placement: _____
   Birth, step, or other children in the household: _____

   b. Of the adopted children and children in formal foster care, how many are biologically related to you? (That is, how many children do you have in a formal kinship care placement?): _____

2. How many children currently living with you are in each of the following age groups?
   Of those, how many are adopted children or children in foster or kinship care?
   (Please write the number of children you have in each age group next to that age group.)

	Number of all children in your household	Number who are adopted or in foster or kinship care
Less than 1 year old		
From 1 to 3 years old		
From 4 to 7 years old		
From 8 to 12 years old		
From 13 to 15 years old		
Older than 15		

3. Do you have any adopted children or children for whom you have permanent guardianship who are under 18 but are in residential treatment or another out-of-placement setting?
   ❑ Yes   ❑ No

4. How long have you been an adoptive, foster, or kinship care parent?

   ❑   Less than 6 months
   ❑   From 6 months to 1 year
   ❑   From 1 to 3 years
   ❑   From 3 to 6 years
   ❑   More than 6 years

5. Are any of your children part of a sibling group placed together?   ❑ Yes   ❑ No

6. Are you parenting any children who are of a different race or ethnic background than you and (if you have one) your spouse or partner?   ❑ Yes   ❑ No

7. If you have adopted, what type of adoptions have you completed? *(Check all that apply.)*

❑ From foster care
❑ Private domestic
❑ International

CHILD'S OR CHILDREN'S NEEDS

8. Do any of your adopted children or children in foster or kinship care have any of the following issues? If so, please rate the issue as mild, moderate, or severe. If you have only one adopted child or child in foster or kinship care, check only one box in each row. If you have more than one adopted child or child in foster or kinship care, you can check each box that applies (for example, if you have three children and one has a moderate physical disability and one has mild disability, you would check "At least one child has a mild version of this issue" and "At least one child has a moderate version of this issue").

	None of my children has this issue	At least one child has a mild version of this issue	At least one child has a moderate version of this issue	At least one child has a severe version of this issue
Physical health problem				
Physical disability				
Neurological problem (autism spectrum disorder, Down syndrome, fetal alcohol spectrum disorder, etc.)				
Learning disability				
Emotional problem (reactive attachment disorder, oppositional defiant disorder, bipolar disorder, post-traumatic stress disorder, etc.)				

	None of my children has this issue	**At least one child has a mild version of this issue**	**At least one child has a moderate version of this issue**	**At least one child has a severe version of this issue**
Behavioral problem (cruelty to animals, lying, hyperactivity, stealing, sexually acts out, etc.)				
Other problem (*please list*)				

9. If you have at least one adopted child, do any of your adopted children have negative feelings about being adopted?

   ❑ N/A
   ❑ Yes
   ❑ No
   ❑ Sometimes

10. If you have at least one child in foster care, do any of your children in foster care have negative feelings about being in foster care?

   ❑ N/A
   ❑ Yes
   ❑ No
   ❑ Sometimes

RELATIONSHIP BETWEEN YOU AND YOUR ADOPTED CHILDREN OR CHILDREN IN FOSTER OR KINSHIP CARE

The following questions are about the relationship between any children you are parenting through adoption, foster care, or kinship care. Please check the response that best reflects your experience. If you have multiple children and they have different experiences, pick the answer that best represents your entire household.

11. Have you experienced any of the following concerns related to any children you are parenting though adoption, foster care, or kinship care? *(Check all that apply.)*

   ❑ At least one of my adopted children or children in foster or kinship care does not respect me.

   ❑ I have significant trouble trusting at least one of my adopted children or children in foster or kinship care.

   ❑ I have significant trouble communicating effectively with at least one of my adopted children or children in foster or kinship care.

   ❑ I have more than one child, and the children have significant difficulty getting along with one another.

   ❑ I have birth, step, or other children in the home, and there is significant tension between these children and at least one adopted child or child in foster or kinship care.

   ❑ I have birth, step, or other children in the home, and I feel I give them less time or attention than I should due to the complex needs of at least one adopted child or child in foster or kinship care.

12. Overall, would you describe the impact of parenting children through adoption, foster care, or kinship care on your family?

   ❑ Mostly positive
   ❑ Positive and negative — about equal
   ❑ Mostly negative

WHAT ISSUES OR PROBLEMS WOULD YOU LIKE TO ADDRESS?

13. In general, do any of the children you are parenting through adoption, foster care, or kinship care have significant difficulties in the following areas? If you have multiple children through adoption, foster care, or kinship care, please consider all of the children together when choosing your answer.

	None of the time	Some of the time	Most of the time	All of the time
At home (including with your other children)				
In school				
In the community (for example, at church, in clubs or community centers, in the neighborhood)				
With peers				
Other (*please list*)				

14. Additional comments about issues you'd like to address:

OTHER SUPPORT AVAILABLE TO YOU

15. Do you have health insurance (private or public) that meets your child or children's needs in the following areas?

	Doesn't meet our needs at all	Partially meets our needs	Meets our needs
Medical needs			
Mental health needs			
Behavioral needs			
Dental needs			

16. Does your insurance allow you access to providers who are adoption or foster care competent?

   ❑ Yes   ❑ No   ❑ Sometimes

17. Please rate the amount of support you get from your personal support system (meaning your support from family, friends, spouse/partner, neighbors, faith community, etc.).

   ❑   I have no personal support system.
   ❑   I get a little help from a personal support system.
   ❑   I get some help from a personal support system.
   ❑   I get a lot of help from a personal support system.

SERVICES USED AND RATING OF HELPFULNESS

The following questions are designed to determine if you are using any family support services now and how you feel about those services.

18. Please rate the overall quantity of post-placement support available to you.

0	1	2	3	4	5	6

No support available   A great deal of support available

19. If you received any support for your adopted children or children in foster or kinship care, please check the sources of support that were most important to your family.

   ❑   Local department of social services
   ❑   State/tribal department of social services
   ❑   Parent support group/association
   ❑   Private adoption or foster care placing agency
   ❑   Community mental health agency (not adoption or foster care specific)
   ❑   Private adoption or foster care support organization
   ❑   Other (please list) _____

20. Please rate your level of overall satisfaction with the availability and accessibility of post-placement support services.

0	1	2	3	4	5	6

Not at all satisfied   Very satisfied

21. If you did receive any post-placement services, rate the overall effectiveness of those support services.

0	1	2	3	4	5	6

Not at all effective   Very effective

Please explain your rating above.

22. Please mark whether you have needed or used any of the following services for adoptive, foster, and kinship care families. If you needed it but didn't use it, please choose whether it was not available or if you didn't choose to use it. If you did use the service, please rate the service as helpful, neutral, or harmful.

	Didn't need or use	Needed service but it wasn't available	Needed service but didn't use it	If you *did use* the service, please rate it:		
				Service was *helpful*	Service was neutral (*didn't help and didn't hurt*)	Service was *harmful*
In-person support group for parents						
Online support group for parents						
Support group for child						
Social or play group for adoptive, foster, or kinship care families						
Case management (professional help to enable you to identify goals and access services)						
Guidance or information from your adoption, foster care, or kinship care worker						
Advice or support from experienced adoptive, foster, or kinship care parent(s)						

	Didn't need or use	Needed service but it wasn't available	Needed service but didn't use it	If you *did use* the service, please rate it:		
				Service was *helpful*	Service was neutral (*didn't help and didn't hurt*)	Service was *harmful*
Counseling for child						
Counseling for family						
Marriage or family therapy						
Day treatment (mental health treatment for your child during the day at specialized location)						
Residential treatment or psychiatric facility						
Other out-of-home placement (like treatment foster care placement)						
Psychological assessment or evaluation						
Crisis counseling						
Other support during a crisis						
Mentor for parents						
Mentor for child						
Academic tutor						
Special education information and access						
Other school supports						
Behavioral specialist						
Assistance with day care						
Respite care during the day (informal or formal care that provides parents a break)						
Respite care that includes an overnight stay						
Respite care during a crisis						
Training on adoption, foster care, or kinship care issues						

	Didn't need or use	Needed service but it wasn't available	Needed service but didn't use it	If you *did use* the service, please rate it:		
				Service was *helpful*	Service was neutral (*didn't help and didn't hurt*)	Service was *harmful*
Training on disabilities or challenges your child has or might have had						
Websites with adoption resources						
Newsletters or articles on child welfare issues or disabilities or mental health or behavioral challenges						
Resources related to your child's race or culture						
Information about community resources						
Special equipment for the home						
Medical care for your child's disability						
Legal services related to foster care, kinship care, or adoption						
Parent retreat						
Family retreat (children included)						
Monthly payments (adoption assistance or subsidy, foster care payments, kinship care support, or guardianship assistance)						
Assistance with search or reunion						
Assistance to address birth family connections or relationships						

	Didn't need or use	Needed service but it wasn't available	Needed service but didn't use it	If you *did use* the service, please rate it:		
				Service was *helpful*	Service was neutral (*didn't help and didn't hurt*)	Service was *harmful*
Other (*please list*)						

23. Among all the services listed below (whether provided or not), which did you *need* the most for your family? (*Please check no more than five.*)

❑ In-person support group for parents
❑ Online support group for parents
❑ Support group for child
❑ Social or play group for adoptive, foster, or kinship care families
❑ Case management (professional help to enable you to identify goals and access services)
❑ Guidance or information from your adoption, foster care, or kinship care worker
❑ Advice or support from experienced adoptive, foster, or kinship care parent
❑ Counseling for child
❑ Counseling for family
❑ Marriage or family therapy
❑ Day treatment (mental health treatment for your child during the day at specialized location)
❑ Residential treatment or psychiatric facility
❑ Other out-of-home placement (like treatment foster care placement)
❑ Psychological assessment or evaluation
❑ Crisis counseling
❑ Other support during a crisis
❑ Mentor for parents
❑ Mentor for child
❑ Academic tutor
❑ Special education information and access
❑ Other school supports
❑ Behavioral specialist
❑ Assistance with day care
❑ Respite care during the day (informal or formal care that provides parents a break)
❑ Respite care that includes an overnight stay
❑ Respite care during a crisis
❑ Training on adoption, foster care, or kinship care issues
❑ Training on disabilities or challenges your child has or might have had
❑ Websites with adoption resources

- ❑ Newsletters or articles on child welfare issues or disabilities or mental health or behavioral challenges
- ❑ Resources related to your child's race or culture
- ❑ Information about community resources
- ❑ Special equipment for the home
- ❑ Medical care for disability
- ❑ Legal services related to foster care, kinship care, or adoption
- ❑ Parent retreat
- ❑ Family retreat (children included)
- ❑ Monthly payments (adoption assistance or subsidy, foster care payments, kinship care support, or guardianship assistance)
- ❑ Assistance with search or reunion
- ❑ Assistance to address birth family connections or relationships
- ❑ Other *(please list)*: _____

24. Among all the services you used, which were the most helpful for your family?
    (Please check no more than five.)

- ❑ In-person support group for parents
- ❑ Online support group for parents
- ❑ Support group for child
- ❑ Social or play group for adoptive, foster, or kinship care families
- ❑ Case management (professional help to enable you to identify goals and access services)
- ❑ Guidance or information from your adoption, foster care, or kinship care worker
- ❑ Advice or support from experienced adoptive, foster, or kinship care parent
- ❑ Counseling for child
- ❑ Counseling for family
- ❑ Marriage or family therapy
- ❑ Day treatment (mental health treatment for your child during the day at specialized location)
- ❑ Residential treatment or psychiatric facility
- ❑ Other out-of-home placement (like treatment foster care placement)
- ❑ Psychological assessment or evaluation
- ❑ Crisis counseling
- ❑ Other support during a crisis
- ❑ Mentor for parents
- ❑ Mentor for child
- ❑ Academic tutor
- ❑ Special education information and access
- ❑ Other school supports
- ❑ Behavioral specialist
- ❑ Assistance with day care
- ❑ Respite care during the day (informal or formal care that provides parents a break)

- ❏ Respite care that includes an overnight stay
- ❏ Respite care during a crisis
- ☐ Training on adoption, foster care, or kinship care issues
- ❏ Training on disabilities or challenges your child has or might have had
- ☐ Websites with adoption resources
- ❏ Newsletters or articles on child welfare issues or disabilities or mental health or behavioral challenges
- ❏ Resources related to your child's race or culture
- ❏ Information about community resources
- ❏ Special equipment for the home
- ❏ Medical care for disability
- ❏ Legal services related to foster care, kinship care, or adoption
- ❏ Parent retreat
- ❏ Family retreat (children included)
- ☐ Monthly payments (adoption assistance or subsidy, foster care payments, kinship care support, or guardianship assistance)
- ❏ Assistance with search or reunion
- ❏ Assistance to address birth family connections or relationships
- ❏ Other *(please list)*: _____

25. If you used services that were not helpful, why do you think they were not helpful? *(Check all that apply.)*

- ❏ The provider was not experienced with adoption, foster care, or kinship care.
- ❏ Providers were not effective or skilled.
- ❏ My child wouldn't cooperate.
- ❏ My spouse or partner wouldn't cooperate.
- ❏ Other members of my family wouldn't cooperate.
- ❏ I was not able to put what I learned to use in my family.
- ❏ The strategies or suggestions I received did not work.
- ❏ I did not follow through and try the strategies or suggestions provided.
- ❏ I was not able to continue using the service long enough for it to help.
- ❏ My child's issues were too difficult for the service provider to handle or understand.
- ❏ Other *(please explain)*: _____

26. When seeking assistance, did you encounter any of the following barriers?

- ❏ None — no barrier encountered
- ❏ Afraid or embarrassed to ask for help
- ❏ Could not find needed services
- ❏ Cost was too high
- ❏ Services were not offered at convenient times/days
- ❏ Eligibility problems
- ❏ Language barriers

- ❑ Number of hours or sessions allowed was not enough
- ❑ Crisis services weren't available
- ❑ Providers didn't accept Medicaid
- ❑ Providers didn't understand adoption, foster care, or kinship care issues
- ❑ Providers were not experienced in how to help people who have experienced trauma
- ❑ Providers were not qualified
- ❑ Providers didn't understand or respect my family's or child's race/culture
- ❑ Providers were unable to accommodate my or my spouse's/partner's disability
- ❑ Services were too far away from where we live
- ❑ Child would not participate or cooperate
- ❑ Time required for service was more than we could manage
- ❑ Transportation problems or couldn't get there
- ❑ Couldn't access residential treatment without child protection order
- ❑ Insurance wouldn't cover enough services
- ❑ My child's needs are so special that I couldn't find the right services
- ❑ Wait for services was too long
- ❑ Other barriers encountered *(please list)*: _____

27. Since you began parenting children through adoption, foster care, or kinship care, have you experienced what you would consider a crisis related to your child (or children)? ❑ Yes ❑ No

28. If yes, did you get any services or support that helped?
    (Please check those you believe were most helpful.)

    - ❑ Support from my placing agency or my placing social worker
    - ❑ Support from a mental health provider
    - ❑ Support from another adoptive, foster, or kinship care parent
    - ❑ Support from a medical professional
    - ❑ Support from a hospital
    - ❑ Support from a crisis-response team
    - ❑ Respite care
    - ❑ Other *(please list)*: _____

29. If yes, what services did you need that you could not access? *(List services.)*

    - ❑ Support from my placing agency or my placing social worker
    - ❑ Support from a mental health provider
    - ❑ Support from another adoptive, foster, or kinship care parent
    - ❑ Support from a medical professional
    - ❑ Support from a hospital
    - ❑ Support from a crisis-response team
    - ❑ Respite care
    - ❑ Other *(please list)*: _____

30. Have you ever thought about ending a placement of one of your adopted children or children in foster or kinship care? (For foster placements, that means ending a placement before you or the agency planned to — not a planned transition home or to adoption or another placement.)

❑ Yes   ❑ No

31. Are you currently considering ending the placement of an adopted child or a child in foster or kinship care?

❑ Yes   ❑ No

32. If you answered yes to either question 30 or 31, how long after the placement happened did you consider disruption?

❑   Less than 6 months
❑   From 6 months to 1 year
❑   From 1 to 3 years
❑   From 3 to 6 years
❑   More than 6 years

33. When you considered ending the placement, were any of the following reasons a very important, somewhat important, or not important reason for you to consider ending the placement?

	Very important	Somewhat important	Not important
Child did not get along with other children in the family			
Child's medical problems			
Financial reasons			
Other family problems not associated with child			
Child's behavior			
Child was a danger to other family members			
A professional serving our family told me we should			
Child was acting out sexually			
Child did not want to be with the family			
We were poorly prepared or trained			
We did not have sufficient or accurate information about the child's history			
Other reason (*please list*)			

34. If you did consider ending the placement, did you get any services that helped preserve the placement?

- ❑ No, I didn't get any services that helped.
- ❑ I received services but they weren't helpful.
- ❑ The following services were helpful *(check up to five services you believe were most helpful)*:
  - ❍ In-person support group for parents
  - ❍ Online support group for parents
  - ❍ Support group for child
  - ❍ Case management (professional help to enable you to identify goals and access services)
  - ❍ Guidance or information from your adoption, foster care, or kinship care worker
  - ❍ Advice or support from experienced adoptive, foster, or kinship care parent
  - ❍ Counseling for child
  - ❍ Counseling for family
  - ❍ Marriage or family therapy
  - ❍ Day treatment (mental health treatment for your child during the day at specialized location)
  - ❍ Residential treatment or psychiatric facility
  - ❍ Other out-of-home placement (like treatment foster care placement)
  - ❍ Psychological assessment or evaluation
  - ❍ Crisis counseling
  - ❍ Other support during a crisis
  - ❍ Mentor for parents
  - ❍ Mentor for child
  - ❍ Academic tutor
  - ❍ Special education information and access
  - ❍ Other school supports
  - ❍ Behavioral specialist
  - ❍ Assistance with day care
  - ❍ Respite care during the day (informal or formal care that provides parents a break)
  - ❍ Respite care that includes an overnight stay
  - ❍ Respite care during a crisis
  - ❍ Training on adoption, foster care, or kinship care issues
  - ❍ Training on disabilities or challenges your child has or might have had
  - ❍ Special equipment for the home
  - ❍ Medical care for disability
  - ❍ Legal services related to foster care, kinship care, or adoption
  - ❍ Parent retreat
  - ❍ Family retreat (children included)
  - ❍ Monthly payments (adoption assistance or subsidy, foster care payments, kinship care support, or guardianship assistance)
  - ❍ Assistance to address birth family connections or relationships
  - ❍ Other *(please list)*: _____

35. What else should we know about support services for adopted children and children in foster or kinship care?

DEMOGRAPHICS

36. What is your gender?

   ❑ Male
   ❑ Female

37. What is your marital status?

   ❑ Single
   ❑ Married
   ❑ In a domestic partnership
   ❑ Other: _____

38. What is your age?

   ❑ Under 21
   ❑ 21–30
   ❑ 31–40
   ❑ 41–50
   ❑ 51–60
   ❑ 61–70
   ❑ 71 or older

39. What is your yearly taxable household income (not counting adoption assistance, foster care, or guardianship assistance benefits)?

   ❑ Under $30,000
   ❑ $30,000 – $50,000
   ❑ $50,000 – $75,000
   ❑ Over $75,000

40. What county do you live in? _____

41. Would you describe the community you live in as:

   ❑ Urban
   ❑ Suburban
   ❑ Rural

ENDNOTES

1   Dean L. Fixsen, Karen A. Blase, Rob Horner, and George Sugai, "Readiness for Change." *Scaling-up Brief*, 3 (2009), accessed November 9, 2014, http://fpg.unc.edu/sites/fpg.unc.edu/files/resources/reports-and-policy-briefs/SISEP-Brief3-ReadinessForChange-02-2009.pdf

2   Administration for Children, Youth and Families, Children's Bureau, Fact Sheet: Child and Family Services Reviews, accessed April 24, 2013, www.acf.hhs.gov/programs/cb/resource/cfsr-fact-sheet

3   National Conference of State Legislatures, "State Progress Toward Child Welfare Improvement: Findings from Fiscal Years 2007 and 2008 of the Child and Family Services Reviews" (2010), accessed April 26, 2013, www.ncsl.org/documents/cyf/progress_cw_improvement.pdf

4   Children's Bureau, "52 Program Improvement Plans: Strategies for Improving Child Welfare Services and Outcomes" (2012), accessed April 26, 2013, www.acf.hhs.gov/sites/default/files/cb/52_program_improvement_plans.pdf

5   U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, Funding Opportunity Announcement for AdoptUSKids, HHS-2012-ACF-ACYF-CQ-0269 (2012), accessed April 24, 2013, www.acf.hhs.gov/grants/open/foa/view/HHS-2012-ACF-ACYF-CQ-0269/html (The diligent recruitment requirement listed here are just a portion of the requirements. The full list can be found at www.acf.hhs.gov/sites/default/files/cb/52_program_improvement_plans.pdf)

6   Ruth G. McRoy and AdoptUSKids Research Team, "Barriers and Success Factors in Adoptions from Foster Care: Perspectives of Families and Staff" (2007), AdoptUSKids.

7   Raquel Ellis, "Achieving Successful Adoptions: Voices of Prospective and Current Adoptive Parents from the Wendy's Wonderful Kids Evaluation" (2011).

8   Casey Family Services, "An Approach to Post-Adoption Services: A White Paper" (2002).

9   Child Welfare Information Gateway, "Postadoption Services: Bulletin for Professionals" (2012).

10 Jeffrey J. Haugaard, Alison M. Moed, and Natalie M. West, "Adoption of Children with Developmental Disabilities," *Adoption Quarterly*, 3 (2000), 81-92.

11 Rosemary J. Avery, "Identifying Obstacles to Adoption in New York State's Out-of-Home Care System," *Child Welfare*, 78 (1999): 653–671.

12 Jason Brown and Peter Calder, "Concept Mapping the Needs of Foster Parents," *Child Welfare*, 79 (2000): 729-746.

13 National Resource Center on Permanency and Family Connections, "A Web-based Placement Stability Toolkit," accessed November 9, 2014, www.nccwe.org/toolkits/placement-stability/

14 Denise Goodman and Frank Steinfield, "Building Successful Resource Families: A Guide for Public Agencies" (2012), The Annie E. Casey Foundation, accessed August 1, 2014, www.aecf.org/resources/building-successful-resource-families/

15 Mary E. Hansen, "The Value of Adoption" (2006), accessed August 1, 2014, w.american.edu/cas/economics/repec/amu/workingpapers/1506.pdf

16 Richard P. Barth, Chung Kwon Lee, Judith Wildfire, and Shenyang Guo, "A Comparison of the Governmental Costs of Long-Term Foster Care and Adoption, *Social Service Review*. 80 (2006): 127–158.

17 Peter J. Pecora, "Why Should Child Welfare Focus on Promoting Placement Stability?" *Child Welfare 360: Promoting Placement Stability* (2010), The Center for Advanced Studies in Child Welfare, University of Minnesota: 5.

18 Patricia Chamberlain and Katie Lewis, "Preventing Placement Disruptions in Foster Care: A Research-Based Approach," *Child Welfare 360: Promoting Placement Stability* (2010), The Center for Advanced Studies in Child Welfare, University of Minnesota: 19–20.

19 Substance Abuse and Mental Health Services Administration, "Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings" (2012), accessed November 9, 2014, www.samhsa.gov/data/sites/default/files/Revised2k11NSDUHSummNatFindings/Revised2k11NSDUHSummNatFindings/NSDUHresults2011.pdf

20   Substance Abuse and Mental Health Services Administration, "Fetal Alcohol Spectrum Disorders among Native Americans" (2007), accessed August 7, 2014, www.fasdcenter.samhsa.gov/documents/WYNK_Native_American_Teal.pdf

21   Joseph Spinazzola, Mandy Habib, Angel Knoverek, Joshua Arvidson, Jan Nisenbaum, Robert Wentworth, Hilary Hodgdon, Andrew Pond, and Cassandra Kisiel, "The Heart of the Matter: Complex Trauma in Child Welfare," *Child Welfare 360: Trauma-Informed Child Welfare Practice* (2013), The Center for Advanced Studies in Child Welfare, University of Minnesota.

22   Spinazzola et al., "The Heart of the Matter."

23   Carol Lewis, Jill Beckwith, Kristine Fortin, and Amy Goldberg, "Fostering Health: Health Care for Children and Youth in Foster Care," *Medicine & Health/Rhode Island*, 94 (2011): 200-202.

24   Lewis et al., "Fostering Health."

25   Bonnie D. Kerker and Martha Morrison Dore, "Mental Health Needs and Treatment of Foster Youth: Barriers and Opportunities," *American Journal of Orthopsychiatry*, 76 (2006): 138-147.

26   Aubryn C. Stahmer, Laurel K. Leslie, Michael Hurlburt, Richard P. Barth, Mary Bruce Webb, John A. Landsverk, and Jinjin Zhang, "Developmental and Behavioral Needs and Service Use for Young Children in Child Welfare," *Pediatrics*, 116 (2005): 891-900.

27   Mirjam Oosterman, Carlo Schuengel, N. Wim Slot, Ruud A.R. Bullens, and Theo A.H. Doreleijers, "Disruptions in Foster Care: A Review and Meta-Analysis," *Children and Youth Services Review*. 29 (2007): 53–76.

28   Rae R. Newton, Alan J. Litrownik, and John A. Landsverk, "Children and Youth in Foster Care: Disentangling the Relationship between Problem Behaviors and Number of Placements," *Child Abuse & Neglect*, 24 (2000): 1363–1374.

29   David M. Rubin, Amanda O'Reilly, Xianqun Luan, and A. Russell Localio, "The Impact of Placement Stability on Behavioral Well-Being for Children in Foster Care, *Pediatrics*, 119 (2007): 336–44.

30   Matthew D. Bramlett, Laura F. Radel, and Stephen J. Blumberg, "The Health and Well-Being of Adopted Children," *Pediatrics*, 119 (2007): S54–S60.

31   Doris M. Houston and Laurie Kramer, "Meeting the Long-Term Needs of Families Who Adopt Children out of Foster Care: A Three-Year Follow-Up Study, *Child Welfare*, 87 (2008): 145–170.

32   Susan L. Smith, "Keeping the Promise: The Critical Need for Post-Adoption Services to Enable Children and Families to Succeed" (2010), Donaldson Adoption Institute, accessed April 24, 2013, http://adoptioninstitute.org/old/publications/2010_10_20_KeepingThePromise.pdf

33   Robin Harwood, Xin Feng, and Stella Yu, "Preadoption Adversities and Postadoption Mediators of Mental Health and School Outcomes Among International, Foster, and Private Adoptees in the United States," *Journal of Family Psychology*, 27 (2013): 409–420.

34   Susan L. Smith, "Keeping the Promise: The Case for Adoption Support and Preservation" (2014), Donaldson Adoption Institute, accessed August 19, 2014, http://adoptioninstitute.org/wordpress/wp-content/uploads/2014/05/Keeping-the-Promise-Case-for-ASAP1.pdf

35   National Working Group on Foster Care and Education, "Research Highlights on Education and Foster Care" (2011).

36   Deborah N. Silverstein and Sharon Kaplan, "Lifelong Issues in Adoption" (1988), accessed April 24, 2013, www.adopting.org/silveroze/html/lifelong_issues_in_adoption.html

37   Susan L. Smith, Jeanne A. Howard, and Alan D. Monroe, "Issues Underlying Behavior Problems in At-Risk Adopted Children," *Children and Youth Services Review*, 22 (2000): 539–562.

38   National Resource Center on Permanency and Family Connections, Handout 6.1, "Assessing Adult Relatives as Preferred Caregivers in Permanency Planning: A Competency-Based Curriculum" (2002), accessed November 9, 2014, www.hunter.cuny.edu/socwork/nrcfcpp/downloads/assessing-adult-relatives-as-preferred-caregivers.pdf

39   Scott D. Ryan and Blace Nalavany, "Adopted Children: Who Do They Turn to for Help and Why?" *Adoption Quarterly*, 7 (2003): 29–52.

40   Kim Stevens, "Post-Adoption Needs Survey Offers Direction for Continued Advocacy Efforts," Adoptalk (2011), North American Council on Adoptable Children, accessed May 17, 2013, www.nacac.org/adoptalk/postadoptionsurvey.html

41   Thom Reilly and Laura Platz, "Characteristics and Challenges of Families Who Adopt Children with Special Needs: An Empirical Study," *Children and Youth Services Review*, 25 (2003): 781–803.

42   James A. Rosenthal and Victor K. Groze, "A Longitudinal Study of Special-Needs Adoptive Families," *Child Welfare*, 73 (1994): 689–706.

43   Denise Anderson, "Post-Adoption Services: Needs of the Family," *Journal of Family Social Work*, 9 (2005): 19–33.

44   Deena McMahon, "Self-Care: Barriers and Basics for Foster/Adoptive Parents," *Adoptalk* (2005), North American Council on Adoptable Children, accessed May 16, 2013, www.nacac.org/adoptalk/selfcare.html

45   Thom Reilly and Laura Platz, "Post-Adoption Service Needs of Families with Special Needs Children: Use, Helpfulness, and Unmet Needs," *Journal of Social Service Research*, 30 (2004): 51–67.

46   Trudy Festinger, "After Adoption: Dissolution or Permanence? *Child Welfare*, 81 (2002): 515–533.

47   Anne Atkinson and Patricia Gonet, "Strengthening Adoption Practice, Listening to Adoptive Families," *Child Welfare*, 86 (2007): 87–104.

48   Harwood, "Preadoption Adversities."

49   National Resource Center on Permanency and Family Connections, "A Web-based Placement Stability Toolkit."

50   Susan Vig, Susan Chinitz, and Lisa Shulman, "Young Children in Foster Care: Multiple Vulnerabilities and Complex Service Needs," *Infants & Young Children*, 18 (2005): 147–160.

51   Dick Sobsey, "Children with Disabilities in Child Welfare," [handout from a May 7, 2013 presentation at the University of Minnesota], accessed May 16, 2013, http://cascw.umn.edu/wp-content/uploads/2013/05/Sobsey.pdf

52   National Resource Center for Tribes, "Tribal Child Welfare Practice Findings," accessed August 7, 2014, www.nrc4tribes.org/Tribal-Child-Welfare-Practice-Findings.cfm

53   Kristine N. Piescher, Melissa Schmidt, and Traci LaLiberte, "Evidence-Based Practice in Foster Parent Training and Support: Implications for Treatment Foster Care Providers" (2008), Center for Advanced Studies at the University of Minnesota, accessed August 19, 2014, http://cascw.umn.edu/wp-content/uploads/2013/12/EBPFPTrainingSupportComplete.pdf

54   Gary S. Cuddeback, "Kinship Family Foster Care: A Methodological and Substantive Synthesis of Research," *Children and Youth Services Review*, 26 (2004): 623–639.

55   Susan L. Smith and Jeanne A. Howard, "We Never Thought It Would Be Like This: Presenting Problems of Troubled Adoptive Families," in *Promoting Successful Adoptions*. (Thousand Oaks, CA: Sage Publications, 1999).

56   Patrick Leung and Stephen Erich, " Family Functioning of Adoptive Children with Special Needs: Implications of Familial Supports and Child Characteristics," *Children and Youth Services Review*, 24 (2002): 799–816.

57   Susan L. Smith and Institute Staff, "A Family for Life: The Vital Need to Achieve Permanency for Children in Care: A Policy Perspective from the Donaldson Adoption Institute" (2013), accessed August 18, 2014, http://adoptioninstitute.org/wordpress/wp-content/uploads/2014/01/2013_04_FamilyForLife.pdf

58   Houston and Kramer, "Meeting the Long-Term Needs."

59   Casey Family Services, "An Approach to Post-Adoption Services."

60   Diane L. Zosky, Jeanne A. Howard, Susan L. Smith, Anne M. Howard, and Kristal H. Shelvin, "Investing in Adoptive Families: What Adoptive Families Tell Us Regarding the Benefits of Adoption Preservation Services," *Adoption Quarterly*, 8 (2005): 1–23.

61 Child Welfare Information Gateway, "Post-Legal Adoption Services for Children with Special Needs and Their Families; Challenges and Lessons Learned" (2005), accessed May 1, 2013, www.childwelfare.gov/pubs/h-postlegal/index.cfm

62 Ryan and Nalavany, "Adopted Children: Who Do They Turn to for Help and Why?"

63 Scott D. Ryan, Nina Nelson, and Carl F. Siebert, "Examining the Facilitators and Barriers Faced by Adoptive Professionals Delivering Post-Placement Services," *Children and Youth Services Review*, 31 (2009): 584–593.

64 Houston and Kramer, "Meeting the Long-Term Needs."

65 Susan L. Smith and Jeanne A. Howard, "No Longer All Alone in the Twilight Zone: Support Groups for Children and Parents" in *Promoting Successful Adoptions: Practice with Troubled Families*. (Thousand Oaks, CA Sage Publications, 1999).

66 Pamela Clark, Sally Thigpen, and Amy Moeller Yates, "Integrate the Older/Special Needs Adoptive Child into the Family," *Journal of Marital and Family Therapy*, 32 (2006): 181–194.

67 William Turner and Geraldine Macdonald, "Treatment Foster Care for Improving Outcomes in Children and Young People: A Systematic Review. *Research on Social Work Practice*, 21 (2011): 501–527.

68 Wes Crum, "Foster Parent Parenting Characteristics That Lead to Increased Placement Stability or Disruption," *Child and Youth Services Review*, 32 (2010): 185–190.

69 Piescher, Schmidt, and LaLiberte, " Evidence-Based Practice in Foster Parent Training and Support."

70 Sarah McCue Horwitz, Pamela Owens, and Mark D. Simms, "Specialized Assessments for Children in Foster Care," *Pediatrics*, 106 (2000): 59–66.

71 Kerker and Dore, "Mental Health Needs and Treatment of Foster Youth."

72 Michele D. Hanna and Ruth G. McRoy, "Innovative Practice Approaches to Matching in Adoption," *Journal of Public Child Welfare*, 5 (2011): 45–66.

73 Hanna and McRoy, "Innovative Practice Approaches."

74 National Resource Center on Permanency and Family Connections, "A Web-based Placement Stability Toolkit."

75 Deborah D. Gray, "Attachment-Readiness and Capabilities of Prospective Adoptive Parents" (2007), accessed April 15, 2013, www.prweb.com/prfiles/2007/10/03/200386/NurturingAdoptionsAttachment.doc

76 University of Texas at Austin, "Instruction Assessment Resources," accessed May 28, 2013, www.utexas.edu/academic/ctl/assessment/iar/teaching/gather/method/survey-Response.php

77 Center for Adoption Support and Education, "7 Core Issues in Adoption," accessed July 1, 2014, www.adoptionsupport.org/res/indexcoreb.php

78 David Brodzinsky, "A Need to Know: Enhancing Adoption Competence among Mental Health Professionals" (2013), The Donald Adoption Institute.

79 Brodzinsky, "A Need to Know."

80 National Resource Center for Tribes, "Tribal Child Welfare Practice Findings."

81 National Resource Center for Tribes, "Tribal Child Welfare Practice Findings."

82 Maryann Roebuck, "The Strength-Based Approach: Philosophy and Principles for Practice" (2007) accessed July 3, 2014, www.maryannroebuck.files.wordpress.com/2011/11/strength-based-approach.pdf

83 Children's Bureau Express, "Direct Service and Organizational Competence Strategies" (2009), accessed August 5, 2014, https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=109&sectionid=2&articleid=2710

84 Kristi Hill, "Seminole Tribe of Florida Family Services Department: A System of Care Approach," [handout from a presentation at the annual conference of the National Indian Child Welfare Association, Fort Lauderdale, Florida, April 13–16, 2014].

85 National Resource Center for Tribes, "Tribal Child Welfare Practice Findings."

86   National Resource Center for Tribes, "Findings from a National Needs Assessment of American Indian/Alaska Native Child Welfare Programs: Executive Summary" (2011), accessed August 7, 2014, www.nrc4tribes.org/files/NRCT%20Needs%20Assessment%20Findings_Exec%20Summary_APPROVED.pdf

87   National Resource Center for Tribes, "Findings from a National Needs Assessment."

88   Rob Geen, "Foster Children Placed with Relatives Often Receive Less Government Help," *New Federalism: Issues and Options for States* (2003), The Urban Institute, accessed August 1, 2014, www.urban.org/publications/310774.html

89   Susan L. Smith, "Supporting and Preserving Adoptive Families: Profiles of Publicly Funded Post-Adoption Services" (2014), The Donald Adoption Institute, accessed June 27, 2014, http://adoptioninstitute.org/wordpress/wp-content/uploads/2014/04/Supporting-and-Preserving-Families.pdf

90   Smith, "Supporting and Preserving Adoptive Families."

91   Child Welfare Information Gateway, "Adoption Assistance by State," accessed June 18, 2014, www.childwelfare.gov/topics/adoption/adopt-assistance/

92   National Resource Center for Adoption, "Adoption Support and Preservation Services: A Continuing Public Interest" (2012), accessed February 7, 2015, http://spaulding.org/wp-content/uploads/2014/09/ASAP-A-Continuing-Public-Interest-2014.pdf

93   U.S. Department of Health and Human Services and James Bell Associates, "Implementation Resource Guide for Social Service Programs: An Introduction to Evidence-Based Programming" (2010), accessed August 15, 2014, https://hmrf.acf.hhs.gov/HMRFTA_Grantee_Portal/?linkServID=6E48E0C8-F0C1-69E8-384688A255EFBF99&showMeta=2&ext=.pdf

94   Ryan, Nelson, and Siebert, "Examining the Facilitators and Barriers."

95   Dennis J. Braziel, "A Model for Public-Private Child Welfare Partnerships" (2001), Annie E. Casey Foundation. accessed August 19, 2014, www.aecf.org/m/pdf/aecf-F2Fmodelforpublicprivatechildwelfarepartnership-2001.pdf

96   U.S. Department of Health and Human Services and James Bell Associates, "Implementation Resource Guide."

97   Center for the Study of Social Policy, "Community Partnerships Offer a Means for Changing Frontline Child Welfare Practice. *Safekeeping* (2005), accessed August 13, 2014, www.cssp.org/publications/child-welfare/community-partnerships-for-the-protection-of-children/safekeeping-spring-2005.pdf

98   U.S. Department of Health and Human Services and James Bell Associates, "Implementation Resource Guide."

99   North Carolina Division of Social Services, "Treat Them Like Gold: A Best Practice Guide to Partnering with Resource Families" (2009), accessed August 13, 2014, www.ncdhhs.gov/dss/publications/docs/Partnering_with_Resource_Families.pdf

100 Fixsen, Blase, Horner, and Sugai, "Readiness for Change."

101 Child Welfare Information Gateway, "Tips for Implementation of Evidence-Based Practice," accessed February 7, 2015, www.childwelfare.gov/topics/management/practice-improvement/evidence/implementing/tips/

102 Karen Blase, "Bringing the Message Home: The Role of Fidelity in Quality Improvement Efforts" [handout for January 9, 2008 webinar].

103 Karen Blase, Pat Devin, and Melissa Van Dyke, "System and Practice Change Through an Implementation Lens," [slides for a presentation to Children's Bureau Intensive On-Site T/TA Workgroup, October 28, 2009].

104 Dean Fixsen and Karen Blase, "Implementation: The Missing Link between Research and Practice," *Implementation Brief*, 1 (2009), The National Implementation Research Network, accessed August 21, 2014, http://nirn.fpg.unc.edu/sites/nirn.fpg.unc.edu/files/resources/NIRN-ImplementationBrief-01-2009.pdf

105 U.S. Department of Health and Human Services and James Bell Associates, "Implementation Resource Guide."

106 Allison J. R. Metz, Karen Blase, and Lillian Bowie, "Implementing Evidence-Based Practices: Six 'Drivers' of Success," *Research-to-Results Brief*, (2007).

107 Annie E. Casey Foundation, "Family to Family Tools for Rebuilding Foster Care: Lessons Learned" (2001), accessed August 29, 2014, www.aecf.org/m/resourcedoc/aecf-F2FLessonsLearned-2001.pdf

108 U.S. Department of Health and Human Services and James Bell Associates, "Implementation Resource Guide."

109 Abby Bandurraga and Terry Cross, "The Impact of Culturally Responsive Interventions on Positive Culturally Identity and Resilience with Urban AI/AN Young People" [presentation at the annual conference of the National Indian Child Welfare Association, Fort Lauderdale, April 13–16, 2014].

110 U.S. Department of Health and Human Services and James Bell Associates, "Implementation Resource Guide."

111 Administration for Children and Families, "Information Memorandum: Establishing and Maintaining Continuous Quality Improvement (CQI) Systems in State Child Welfare Agencies" (2012), accessed September 12, 2014, www.acf.hhs.gov/sites/default/files/cb/im1207.pdf

112 Smith, "Supporting and Preserving Adoptive Families."

113 Information is this section is gathered from profiled programs as well as the following sources: Kerry DeVooght, Megan Fletcher, Brigitte Vaughn, and Hope Cooper, "Federal, State, and Local Spending to Address Child Abuse and Neglect in SFYs 2008 and 2010" (2012); Child Welfare Information Gateway. "Postadoption Services: Bulletin for Professionals" (2012); Kay Casey and Maia Hurley, "Supporting Kinship Care: Research and Strategies to Promote and Fund Placement with Relatives" (2009); Children's Bureau. "Annual Report to Congress on State Child Welfare Expenditures Reported on the CFS-01" (2012); Susan L. Smith, "Supporting and Preserving Adoptive Families: Profiles of Publicly Funded Post-Adoption Services," (2014).

114 Children's Bureau. "Annual Report to Congress on State Child Welfare Expenditures Reported on the CFS-01" (2012), accessed August 28, 2014. www.acf.hhs.gov/sites/default/files/cb/cfs_101_report_to_congress_for_2012.pdf

115 Children's Bureau, "Annual Report to Congress on State Child Welfare Expenditures."

116 National Resource Center for Tribes, "Findings from a National Needs Assessment."

117 Smith, "Supporting and Preserving Adoptive Families."

118 National Resource Center for Tribes, "Findings from a National Needs Assessment."

119 U.S. Department of Health and Human Services, July 11, 2013 State Director Letter, accessed August 26, 2014, http://medicaid.gov/Federal-Policy-Guidance/Downloads/SMD-13-07-11.pdf

120 Brooke Lehmann, Jocelyn Guyer, and Kate Lewandowski, "Child Welfare and the Affordable Care Act: Key Provisions for Foster Care Children and Youth" (2012), accessed August 27, 2014, http://ccf.georgetown.edu/wp-content/uploads/2012/07/Child-Welfare-and-the-ACA.pdf

121 Smith, "Supporting and Preserving Adoptive Families."

122 Casey and Hurley, "Supporting Kinship Care."

123 U.S. Department of Health and Human Services. July 11, 2013 State Director Letter.

124 Gregory A. Aarons and Lawrence Palinkas, "Implementation of Evidence-Based Practice in Child Welfare: Service Provider Perspectives," *Administration and Policy in Mental Health and Mental Health Services Research*, 34 (2007): 411–419.