



PATTERNS OF FOSTER CARE PLACEMENT AND FAMILY REUNIFICATION FOLLOWING CHILD MALTREATMENT INVESTIGATIONS

Overview

Some child protective services investigations result in children being placed in foster care to ensure their safety. Family reunification refers to the process of returning children to their family of origin after some time spent in foster care or another out-of-home placement. This research brief examines reunification over the course of three years following a child protective services report. The research brief identifies characteristics of children and families reunified, those who remained reunified at the end of the study, and maltreatment re-reports among children reunified with their families. This analysis is based on longitudinal survey data from the second cohort of the National Survey of Child and Adolescent Well-Being (NSCAW II), which is linked to administrative data from the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS).

Key Findings

1. A quarter of all children who were the subject of child maltreatment investigations in 2008 and 2009 (24.6 percent) were placed out-of-home at some point during the 3 years that followed their maltreatment report.
2. Of the children placed out-of-home, half achieved permanency within the study's 3-year time horizon. Of those children, nearly three quarters (73.3 percent) reached permanency through reunification.
3. Among children who were reunified, 82.7 percent remained reunified at the end of the study. Approximately a quarter (24.6 percent) of reunified children were re-reported to child protective services with an allegation involving maltreatment by a family member.
4. Families who remained reunified were more likely to have received domestic violence services, parent counseling, and family preservation services. However, after accounting for other factors, only family counseling services remained significantly associated with the likelihood of reunification. Children whose families received family counseling were twice as likely to reunify as children in families that did not receive family counseling.
5. Among children who were reunified, those with a maltreatment re-report after out-of-home placement were more likely to have an initial substantiated report, have a primary caregiver with a history of abuse and neglect, and experience more time out-of-home than those without another report. Children were less likely to have a maltreatment re-report if they received a medical exam and other non-intensive family services.

This research was conducted under contract to ASPE by researchers at RTI International. Authors include Cecilia Casanueva, Chelsea Burfeind, and Stephen Tueller. The findings and conclusions of this report are those of the author(s) and do not necessarily represent the views of ASPE or HHS.

Background

Many children removed from their homes after a report of maltreatment will ultimately be reunified with their biological families. Yet there is no clear understanding of which children and families are at risk for unsuccessful reunification experiences. For children who are placed out-of-home, reunification success may depend upon the availability of services to both the biological parents and the children. These services include support for parents experiencing stress, domestic violence services, counseling, and substance abuse treatment, as well as services to address the needs of children with health, mental health, educational, developmental, and/or substance abuse issues. After a child returns to his or her family of origin, reunification success might depend on the availability of post-reunification services for both the biological parents and the child.

The analyses presented in this research brief use data from the NSCAW II (Ringeisen et al., 2011), which is a nationally representative longitudinal survey of children who were investigated by child protective services for maltreatment. The sample design includes oversampling of children in out-of-home placement and undersampling of cases not receiving services.¹ NSCAW II data were supplemented by linking the information with administrative data regarding child abuse and neglect reports (NCANDS) and foster care placements (AFCARS). The analyses examine the characteristics of children and families who are reunified compared to those who have not been reunified. The analyses further explore the services that are associated with successful and unsuccessful reunification. The analyses focus on children placed out-of-home at any point during the 3 years after the NSCAW II study began. These analyses include children placed with kin caregivers, traditional foster parent care, and group/home or residential treatment.

Characteristics and Out-of-Home Placement Patterns Following Investigations of Child Maltreatment

Relatively few children are placed in foster care following investigations of child maltreatment. Many children who spend time in foster care are successfully reunified with their families. Children who spend time in foster care are younger and more likely to be from minority groups than the entire U.S. population.

- **Out-of-Home Placement.** 24.6 percent of children investigated for maltreatment were placed out-of-home at some point during the following three years. Of the children placed out-of-home at any point during the study and later reunified, 82.7 percent had a successful reunification.
- **Characteristics of Children Placed in Foster Care.**
 - Slightly more than half of the children placed out-of-home were boys (51.8 percent).
 - Approximately a quarter of children placed out-of-home (26.7 percent) were aged between 0 and 2 years, 21.5 percent were aged between 3 and 5 years, 22.5 percent were aged between 6 and 10 years, and 29.4 percent were aged 11 years and older.

¹ To account for oversampling of out-of-home children, all estimates presented are based on weighted data. Though the weighted percents are small, the raw sample for types of living arrangements includes sufficient sample size to detect potential associations with reunification.

- A quarter of children were Black, 41.5 percent White, 26 percent Hispanic, and 7 percent were identified as being another race or multiracial.
- **Permanency.** Of the children placed out-of-home, half of them achieved permanency within the study's 3-year time horizon. Of those children, most of them reached permanency through reunification (73.3 percent).
- **Characteristics of Children Reunified.** There were no significant differences between children reunified and those who were not reunified by a child's gender, age, race or ethnicity, or the type of maltreatment report. Children with behavioral, cognitive, and/or developmental problems and those with a primary caregiver with intellectual impairments were less likely to be reunified. Children from families with a history of domestic violence, and those from families with high stress were more likely to be reunified.

The percentage of children reunified decreased as the time in out-of-home care increased. Only approximately a quarter (26.1 percent) of children placed out-of-home for 25 months or more were reunified, compared to 53.7 percent among children in out-of-home care for 6 months to 1 year, and 47.2 percent among children in out-of-home care for 13 to 24 months. These results remained after accounting for other variables (for a list of variables that were included in multivariate analyses, see the Methodological Appendix of this research brief).

Services Associated with Initial Reunification

Children living in out-of-home care and their families receive a variety of services through the child welfare system. The type of services received differed between children who were reunified with their families of origin and those who remained in out-of-home care. In comparison to the children who were not reunified, the caseworkers were more likely to report that reunified children's families received parent counseling (41.9 percent compared to 25.0 percent), family counseling (23.7 percent compared to 12.0 percent), parental substance abuse treatment (26.0 percent compared to 16.5 percent), parent training (35.8 percent compared to 23.3 percent), and domestic violence services (11.5 percent compared to 6.0 percent). After accounting for child and family characteristics, placement history, maltreatment characteristics, and types of services received, only family counseling services remained significantly associated with the likelihood of reunification. Children living in families who received family counseling were two times more likely to reunify than children whose caseworkers did not report that the family received counseling.

Characteristics and Services Associated with Successful Reunification

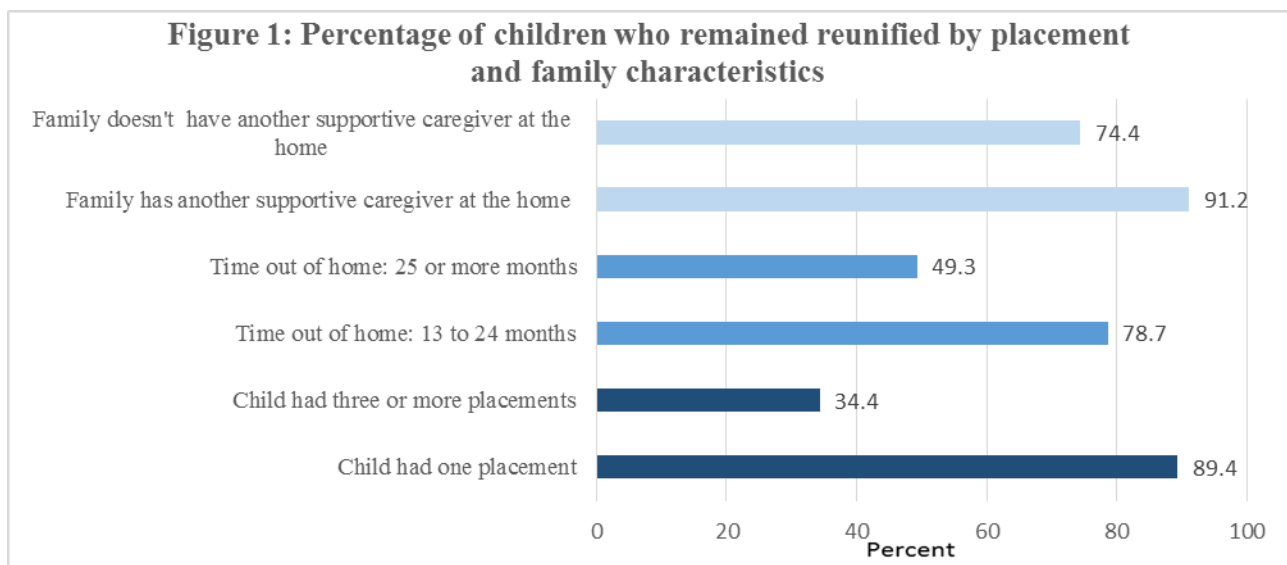
Child characteristics. More than 80 percent of children who were reunified remained in their parents' care through the end of the study. Boys were more likely to remain reunified than girls. Young children aged between 0 and 2 years were more likely to remain reunified when compared to children of all other ages (see Table 1 in the Methodological Appendix of this research brief).

Number of Placements. The number of placements experienced by a child in out-of-home care was inversely associated with remaining reunified. Among children with three or more placements, only 34.4 percent remained reunified, far fewer than the 89.4 percent of children who remained reunified after experiencing a single placement. The percentage of children who remain reunified also decreased as the time in out-of-home care increased. Only approximately

half (49.3 percent) of reunified children placed out-of-home for 25 months or more remain reunified. These results were evident when other variables were taken into account.

Family characteristics. Two family characteristics were significantly associated with children remaining reunified. Families with a second supportive caregiver (such as a second parent, a grandparent, or other relative) as reported by caseworkers were more likely to remain reunified than families without that support. In contrast, families in which the primary caregiver had a recent history of arrest at the time of the initial report were less likely to remain reunified (for a list of variables that were included in multivariate analyses, see Figure 1 of this research brief).

Types of Services. The types of services received differed between children who remain reunified with their families of origin and those with a failed reunification. In comparison to the children with a failed reunification, the caseworkers were more likely to report that the children who remain reunified received family preservation services, domestic violence services, and parent counseling (see Table 1 in the Methodological Appendix to this research brief).



Subsequent Maltreatment Reports

Just under a quarter (24.6 percent) of children had a maltreatment re-report with an allegation involving a family member sometime after their original out-of-home placement, primarily following reunification or during trial home visits. Girls were less likely than boys to experience a maltreatment re-report.

According to data reported by the children's caseworkers, the children who were reunified at any point and who had a maltreatment re-report after out-of-home placement, were more likely to have an initial substantiated report, have a primary caregiver with a history of abuse and neglect, and experience more time placed out-of-home compared to those without another maltreatment report. Children were less likely to have a maltreatment re-report if they received a medical exam and other non-intensive family services. These results were evident when other variables were taken into account (see Table 2 in the Methodological Appendix).

Although girls were less likely to experience a maltreatment report, those who did had maltreatment re-reports approximately 60 percent more quickly than boys. Children who had a primary caregiver with a history of abuse and neglect were not only more likely to have a re-report, but had a re-report twice as quickly as children with a primary caregiver without such

history. Having the initial report substantiated was also associated with faster re-reports (see Table 3 in the Methodological Appendix).

Implications

The principle that every child deserves a permanent home has guided child welfare practice and policy for the last several decades. As our understanding of children's developmental needs for permanency has improved (Miller & Gorski, 2000), federal child welfare legislation has repeatedly strengthened efforts to reduce instability for children in foster care and increase the rate and speed with which they either returned home or were placed in permanent alternatives. These efforts have included attempts to establish and improve services to prevent the need for foster care (e.g., the Family Preservation and Support Services Program Act of 1993, P.L. 105-66 and subsequent reauthorizations), as well as steps to strengthen adoption and kinship care as permanent alternatives when families of origin cannot be stabilized safely. The Adoption and Safe Families Act of 1997 (ASFA, P.L. 105-89) and the Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351) were prominent in promoting permanency. ASFA shortened the time frame for dispositional hearings from 18 to 12 months and eliminated continuation in foster care on a long-term basis as a permanency planning option, thereby prioritizing reunification, adoption, legal guardianship, and relative care. Beginning in 1999, the annual number of children who were discharged from foster care in the United States rose, precipitating a decline in U.S. foster care rosters from 567,000 to approximately 400,000. However, beginning in September 30, 2015, the caseload started to rise again to nearly 428,000 children (U.S. Department of Health and Human Services, 2015).

According to the most recent AFCARS data, reunification was the case plan goal for more than half (55 percent) of all children in foster care. More than half (51 percent) of the children who exited foster care during fiscal year 2015 returned to a parent or principal caregiver (U.S. Department of Health and Human Services, 2015).

Previous research has examined some factors that are associated with successful reunifications, including child characteristics, placement history, and service receipt. Older children were less likely to be reunified or reach permanency (Becker, Jordan, & Larsen, 2007; Courtney, 1994; Harris & Courtney, 2003; Wells & Guo, 1999), and Black children were less likely to reunify than White and Hispanic children (Connell, Katz, Saunders, & Tebes, 2006; McDonald, Poertner, & Jennings, 2007; Romney, Litrownik, Newton, & Lau, 2006; Rosenberg & Robinson, 2004; Wells & Guo, 1999). In addition, children with health and/or mental health problems were less likely to be reunified (Becker et al., 2007; Connell et al., 2006; Koh & Testa, 2008; Landsverk, Davis, Ganger, Newton, & Johnson, 1996; Potter & Klein-Rothschild, 2002; Romney et al., 2006; Rosenberg & Robinson, 2004). The number of placements has also been associated with the risk of failed permanent placements (Fisher, Burraston, & Pears, 2005).

This research brief used linked data from the NSCAW II, AFCARS, and NCANDS to examine reunification among children who were placed out-of-home across a 3-year period. Unlike prior research, this study did not find differences by child age regarding the likelihood of reunification; however, young children were more likely to remain reunified than older children. Consistent with prior research, children with behavioral, cognitive, and/or developmental problems were less likely to be reunified. Similar to prior research, this study also found more placements were inversely associated with remaining reunified.

Research regarding reunification has reported that service delivery is key to assuring that the children are returned to a safe environment that can be maintained after reunification. Studies have found that the most effective interventions focus on parent–child interactions (i.e., cognitive-behavioral or family therapy) (Kolko, 1996), skill building, and have a multi-systemic focus (Chaffin et al., 2004; Corcoran, 2000). In line with these findings, this study found that reunification was positively associated with receiving family counseling services. Remaining reunified was associated with receiving family preservation services, domestic violence services, and parent counseling. The NSCAW II does not provide any information about the theoretical orientation or evidence-based content of services received. It is encouraging, though, that the caseworkers’ identifications of several types of services for children and families were associated with positive permanency outcomes.

The findings of this study are consistent with federal child welfare outcome indicators that were identified as positively related to achieving reunification goals. Balancing child safety with the desire for family reunification is challenging for child welfare agencies and caseworkers. Reunified children with subsequent maltreatment reports have a higher risk of additional out-of-home placements, putting such a child at double risk because both maltreatment and placement are known sources of child trauma (Lieberman & Knorr, 2007; van der Kolk, 2005). The results of this analysis may help child welfare managers identify factors that can prevent re-reports, facilitate discussions about strategies to prevent out-of-home re-entry, and provide an understanding of services and placement experiences that influence successful reunification outcomes.

Methodological Appendix

The National Survey of Child and Adolescent Well-Being II

NSCAW is a longitudinal survey with two nationally representative samples, intended to answer a range of fundamental questions about the functioning, service needs, and service use of children who come in contact with the child welfare system (CWS). NSCAW is sponsored by the Office of Planning, Research, and Evaluation within the U.S. Department of Health and Human Services' Administration for Children and Families. This study uses data from the second NSCAW cohort (i.e., NSCAW II).

The NSCAW II cohort included 5,872 children ranging in age from birth to 17.5 years at the time of sampling. The children were sampled from child welfare investigations that were closed between February 2008 and April 2009 in 83 counties nationwide. The cohort included substantiated and unsubstantiated investigations of abuse or neglect, as well as children and families who received or did not receive services. Infants and children in out-of-home placement were oversampled to ensure adequate representation of high-risk groups. This sample design—with oversampling of infants and children in out-of-home placement and undersampling of cases not receiving services to ensure appropriate representation among subgroups—allows in-depth analyses of subgroups of special interest (e.g., young children, adolescents in foster care). The sample design also provides national estimates for the entire population of children and families entering the system. Infants were oversampled to ensure that there were sufficient numbers of cases to assess the outcomes of child maltreatment and services, including out-of-home placements, regarding early childhood development.

In-person interviews or assessments were conducted with children, parents, and nonparent adult caregivers (e.g., foster parents, kin caregivers, group home caregivers), and investigative and services caseworkers. A paper or Web-based survey was administered to the child's teacher. Baseline data collection was completed between April 2008 and September 2009. During Wave 2, the children and families were re-interviewed approximately 18 months after the end of the NSCAW II index investigation. The NSCAW II cohort of children who were aged approximately 2 months to 17.5 years at baseline ranged in age from 16 months to 19 years at Wave 2. Data collection for Wave 2 began in October 2009 and was completed in January 2011. The Wave 2 weighted response rates were 82.8 percent for children, 86.3 percent for caregivers, and 93.9 percent for caseworkers. During Wave 3, the children and families were re-interviewed approximately 36 months after the end of the NSCAW II index investigation. The NSCAW II cohort of children who were aged approximately 2 months to 17.5 years old at baseline ranged in age from 34 months to 20 years at Wave 3. Data collection for Wave 3 began in June 2011 and was completed in December 2012. The Wave 3 weighted response rates were 80.2 percent for children, 82.6 percent for caregivers, and 93.7 percent for caseworkers.

All analyses were calculated from weighted data that linked the NSCAW II baseline, AFCARS, NCANDS, Wave 2 and Wave 3 data. Analysis controlled for multiple variables, including child, family, maltreatment report, and placement characteristics, as well as an indicator of children's emotional or behavioral, cognitive, or developmental problems.

The reunification variable contains data regarding all children who were in out-of-home care after the investigation, even briefly. The children were classified as having been reunified if there was at least one reunification attempt with the biological parents for any amount of time—even if they had a subsequent placement in out-of-home care. An analysis was conducted of the characteristics of children who were reunified among all children placed out-of-home across the

study. The analysis controlled for children’s gender; age; race or ethnicity; behavioral, emotional, cognitive, and/or developmental problems; the type of index maltreatment; substantiation; and setting at baseline. The analysis also controlled for the number of placements, the length of placement, a family’s risk factors reported by a caseworker at baseline, the reunification plan, the types of services received by children and the family at baseline, and reunification services reported by caseworker that were provided at any time during the study.

The data for Exhibit 1 were calculated from follow-up data. The successful first reunification variable identifies the children who were in out-of-home care after the investigation—even if only for a brief time—and who were reunified with the biological parents and did not had a subsequent placement in out-home-care. These outcome variables were derived using data from Wave 3, Wave 2, Wave 1, across wave, and administration data files. If data were missing from the Wave 3 file, then the most recent data from the other sources were used. Hence, missingness on the outcomes (which was rare) was not because of missingness at Wave 3. An analysis of the characteristics of children who remain reunified among all children reunified across the study is presented in Appendix Table 1.

Appendix Table 1: Logistic regression model of successful reunification—NSCAW II

Predictors	Successful Reunification			p Value
	OR	95 percent Confidence Interval		
Child				
Gender (<i>ref. Male</i>)	0.3	0.1	0.8	.0180
Age (<i>ref. 0–2 years</i>)				
3–5 years	0.4	0.2	0.8	.0110
6–10 years	0.2	0.2	0.9	.0020
11+ years	0.1	0.0	0.2	.0000
Race or ethnicity (<i>ref. White</i>)				
Black	1.3	0.7	2.5	.4640
Hispanic	2.8	1.2	6.5	.0140
Other	1.8	0.8	3.8	.1410
CWS case				
Maltreatment re-report after placement (<i>ref. no</i>)	0.7	0.4	1.4	.7060
Length of placement (<i>ref. fewer than 6 months</i>)				
6 to 12 months	1.2	0.6	2.5	.5430
13 to 24 months	1.7	0.7	4.4	.2570
25 or more months	0.4	0.1	1.0	.0530
Number of placements (<i>ref. 1</i>)				
2	0.6	0.2	1.4	.2410
3	0.03	0.01	0.08	.0000
Risk factors (<i>ref. no</i>)				
Primary caregiver has recent history of arrest	0.5	0.0	0.9	.0310
Another supportive caregiver at home	4.3	1.7	10.9	.0020
Services (<i>ref. no</i>)				
Parents counseling	2.2	1.0	5.0	.0570
Substance abuse treatment for parent	0.5	0.2	1.0	.0490
Parenting training	0.2	0.1	0.4	.0000
Domestic violence services	5.1	1.1	23.4	.0340
Family preservation services	2.8	1.3	6.2	.0100

Note: The model controls for child behavioral, cognitive, and/or developmental problems at baseline; services received by children and families; index report substantiation; index report type of maltreatment; maltreatment re-reports after out-of-home placement of children; the number of out-of-home placements; and the amount of time out-of-home. The model also controls for family and child risk factors reported by a caseworker (e.g., any previous report of maltreatment; child has major special needs; caregiver has serious mental health problems; caregiver has a history of arrest; caregiver has intellectual impairments; caregiver has a history of abuse and neglect; poor parenting skills; active domestic violence; high stress; low social support; family has troubles paying basic necessities; and there is another supportive caregiver at the home).

A re-report was defined as the second, third, or subsequent report that alleges that a child has been maltreated and that receives an investigation or assessment by child protective services

regardless of the disposition.² To be counted as a re-report, a minimum of 1 week after out-of-home placement was required. Re-reports that the alleged perpetrator was not a parent (or a parent figure such as a mother’s partner) were not counted. Some re-reports occurred during trial home visits, but other re-reports occurred after reunification. Information about re-reports was obtained from caseworker interviews at 18 and 36 months follow up, and from NCANDS data. Caseworkers were asked to describe up to 10 re-reports, including the date of re-report, status and outcome of the investigation, the type of abuse, the alleged perpetrator, where the abuse or neglect was alleged to have occurred, and placement decision after the investigation. A caseworker interview was not pursued when a child had a closed case after the baseline interview and a caregiver reported that no further contact or service was received from the CWS (because they no longer had a caseworker). Additionally, when a child becomes 18 years old, he or she is not reportable to child protective services. The findings of an analysis of the characteristics of children who had a re-report of maltreatment among all children reunified across the study is presented in Appendix Table 3.

Appendix Table 2: Logistic regression model of re-reports among children reunified—NSCAW II

Predictors	Re-reports			
	OR	95 percent Confidence Interval		<i>p</i> Value
Child				
Gender (<i>ref. Male</i>)	0.5	0.3	0.9	.0240
CWS case				
Baseline Report Substantiated (<i>ref. no</i>)	2.2	1.3	3.7	.0050
<i>Length of placement (ref. fewer than 6 months)</i>				
6 to 12 months	2.6	1.0	6.7	.0490
13 to 24 months	2.1	1.0	4.8	.0630
25 or more months	7.3	2.0	26.0	.0020
Risk factors (<i>ref. no</i>)				
History of abuse neglect of primary caregiver	2.9	1.4	6.1	.0040
Services (<i>ref. no</i>)				
Medical exam	0.4	0.2	0.8	.0120
Other non-intensive family services	0.5	0.2	1.0	.0480

Note: The model controls for child age; child race; child behavioral, cognitive, and/or developmental problems at baseline; services received by child and family; index report type of maltreatment; maltreatment re-reports after out-of-home placement of the child; and the number of out-of-home placements. The model also controls for family and child risk factors reported by a caseworker (e.g., any previous report of maltreatment; child has major special needs; caregiver has serious mental health problems; caregiver has a history of arrest; caregiver has intellectual impairments; poor parenting skills; active domestic violence; high stress; low social support; family has troubles paying basic necessities; and there is another supportive caregiver at the home).

A survival analysis was completed regarding the speed of re-reports among children reunified across the study. The results of the analysis are presented in Appendix Table 4.

² The definition of “re-report” used here follows previous publications on re-reports (Connell, Bergeron, Katz, Saunders, & Tebes, 2007; Fluke, Shusterman, Hollinshead, & Yuan, 2008; Lipien & Forthofer, 2004).
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Appendix Table 3: Survival analysis model of re-reports among children reunified—NSCAW II

Predictors	Estimate	<i>p</i> Value	Hazard Ratio	95 percent Confidence Interval	
Child					
Gender (<i>ref. Male</i>)	0.443	.0200	1.6	1.0	2.1
CWS case					
Baseline Report Substantiated (<i>ref. no</i>)	0.475	.0240	1.6	1.0	2.3
Placement					
<i>Length of placement (ref. Fewer than 6 months)</i>					
6 to 12 months	0.859	.0740	2.362	0.137	4.586
13 to 24 months	0.548	.1500	1.729	0.439	3.019
25 or more months	1.102	.0210	3.011	0.183	5.839
<i>Number of placements (ref. 1)</i>					
2	0.428	.1860	1.5	0.6	2.5
3	0.736	.0450	2.1	0.6	3.6
Risk factors (ref. no)					
History of abuse neglect of primary caregiver	0.750	.0130	2.1	0.9	3.7

Note: The model controls for child gender; child race; child behavioral, cognitive, and/or developmental problems at baseline; services received by child and family; index report substantiation; index report type of maltreatment; the number of out-of-home placements; and the amount of time out-of-home. The model also controls for family and child risk factors reported by a caseworker (e.g., any previous report of maltreatment; caregiver has serious mental health problems; caregiver has a history of arrest; poor parenting skills; active domestic violence; high stress; family has troubles paying basic necessities; and there is another supportive caregiver at the home).

References

- Becker, M. A., Jordan, N., & Larsen, R. (2007). Predictors of successful permanency planning and length of stay in foster care: The role of race, diagnosis and place of residence. *Children and Youth Services Review*, 29(8), 1102-1113. doi: <http://dx.doi.org/10.1016/j.childyouth.2007.04.009>
- Chaffin, M., Silovsky, J. F., Funderburk, B., Valle, L. A., Brestan, E. V., Balachova, T., . . . Bonner, B. L. (2004). Parent-child interaction therapy with physically abusive parents: Efficacy for reducing future abuse reports. *Journal of Consulting and Clinical Psychology*, 72(3), 500–510. doi: 10.1037/0022-006X.72.3.5002004-95166-013 [pii]
- Connell, C. M., Katz, K. H., Saunders, L., & Tebes, J. K. (2006). Leaving foster care--the influence of child and case characteristics on foster care exit rates. *Children and Youth Services Review*, 28, 780–798.
- Corcoran, J. (2000). Family interventions with child physical abuse and neglect: A critical review. *Children and Youth Services Review*, 22(7), 563-591.
- Courtney, M. E. (1994). Factors associated with the reunification of foster children with their families. *Social Service Review*, 69, 226–241.
- Fisher, P. A., Burraston, B., & Pears, K. (2005). The early intervention foster care program: Permanent placement outcomes from a randomized trial. *Child Maltreatment*, 10(1), 61-71.
- Harris, M. S., & Courtney, M. E. (2003). The interaction of race, ethnicity, and family structure with respect to the timing of family reunification. *Children and Youth Services Review*, 25(5/6), 409–429.
- Koh, E., & Testa, M. F. (2008). Propensity score matching of children in kinship and non-kinship foster care: Do permanency outcomes still differ? *Social Work Research*, 32, 105–116.
- Kolko, D. J. (1996). Individual cognitive behavioral treatment and family therapy for physically abused children and their offending parents: A comparison of clinical outcomes. *Child Maltreatment*, 1(4), 322-342.
- Landsverk, J., Davis, J., Ganger, W., Newton, R., & Johnson, I. (1996). Impact of children psychosocial functioning on reunification from out-of-home placement. *Children and Youth Services Review*, 18(4/5), 447–462.
- Lieberman, A. F., & Knorr, K. (2007). The impact of trauma: A developmental framework for infancy and early childhood. *Psychiatric Annals*, 37(6), 416-422.
- McDonald, T. P., Poertner, J., & Jennings, M. A. (2007). Permanency for Children in Foster Care. *Journal of Social Service Research*, 33(4), 45-56. doi: 10.1300/J079v33n04_04
- Miller, P., & Gorski, P. (2000). Developmental issues for young children in foster care. *Pediatrics*, 106(5), 1145-1150.
- Potter, C. C., & Klein-Rothschild, S. (2002). Getting home on time: Predicting timely permanence for young children. *Child Welfare*, 81(2), 123–150.
- Romney, S. C., Litrownik, A. J., Newton, R. R., & Lau, A. (2006). The relationship between child disability and living arrangement in child welfare. *Child Welfare*, 85(6), 965.
- Rosenberg, S. A., & Robinson, C. C. (2004). Out-of-home placement for young children with developmental and medical conditions. *Children and Youth Services Review*, 26(8), 711-723.
- U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau. (2015, July 12). The AFCARS (Adoption and Foster Care Reporting System) Report #22. from <http://www.acf.hhs.gov/programs/cb/resource/afcars-report-22>
- van der Kolk, B. A. (2005). Developmental trauma disorder. *Psychiatric Annals*, 35(5), 401-408.
- Wells, K., & Guo, S. Y. (1999). Reunification and reentry of foster children. *Children and Youth Services Review*, 21(4), 273–294.