U.S. Foster Care: A Flawed Solution That Leads To More Long-Term Problems?

By Deb Stone

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Studies show that abused or neglected children placed in foster care face lifelong challenges greater than children who remain with their families.

In rural Oregon, an 11-year-old girl wearing a pair of plastic sandals walked 13 miles to a local tavern and convinced a man she didn’t know to drive her two and a half hours north to Long Beach, Wash. She was sick of foster care. She wanted to go home.

A 2011 survey reported that 13 percent of all foster children run away at least once, and another 9 percent abandon their foster homes to live with friends. When 22 percent of any child population flees the system which adults have provided to keep them safe, something is wrong. These youth may have insights the rest of us fail to see. Studies show foster care is a highway to health problems, homelessness, early pregnancy, arrest, incarceration, and sex trafficking. And those are the lucky kids. Foster care alumni are five times more likely to commit suicide and eight times more likely to be hospitalized for a serious psychiatric disorder.

Then again, decades of research show that childhood maltreatment interrupts healthy emotional, behavioral, and cognitive development, so we can chalk up the poor outcomes to abuse that occurred before these children were rescued, right? Maybe not.

In 1983 I was a 23-year-old single mother living in poverty. My twin sons and I survived the first five months on welfare and food stamps. For the next several years, I lived in bad neighborhoods, drove cars that constantly broke down, and perpetuated my relationship with an abusive partner partly because at the end of each month when money ran out, I could count on him for money to buy diapers or to get my electricity turned back on. I lived in
apartments with cockroaches and a house where the floor was so rotten it wasn’t safe to stand in the shower. We ate off-brand macaroni and cheese (4/$1) and drank Kool-Aid (8/$1) supplemented with milk, cereal, cheese, and grape juice from the USDA Supplemental Nutrition Program for Woman, Infants, and Children (WIC).

I got a job, then a better job, and paycheck by paycheck I built a life for the three of us. I received daycare assistance, but slowly earned enough to render myself ineligible, teetering on the edge of poverty. I made mistakes—dated the wrong men, managed income poorly, and on free nights, went out to party. The difference between me and so many other single mothers was that I averted any catastrophes that could draw the attention of child welfare authorities: a toddler’s suspicious fall, an arrest for driving under the influence, or my partner’s fists battering my body the way they had before I was pregnant.

I wasn’t better than other mothers. I was luckier. I didn’t end up an alcoholic or drug addict, so I never had the compulsion to trade my food stamps for alcohol or drugs. I’ve never had chronic mental health problems, so I was able to get out of bed every day and take care of my kids. I kept the men I dated away from my young sons. I had the intellectual capacity and the social ability to perform well on the job, so I was hired by the Social Security Administration, which provided good health insurance. When the boys were 6, I met (and later married) a man who lifted me into a life of plenty. He had steady employment which, combined with mine, allowed me to fill my gas tank and pay the electric bill on time.

In 1992, when I had been married for two years, a relative’s children were at risk of being taken into foster care. My husband and I agreed to become a licensed foster home for the State of Oregon. The relative’s three children came to live with us. A year later, Children’s Services Division asked us to take our first non-relative foster child, a 10-year-old boy who had been in 17 foster homes. It should have raised a question in my head: 17 foster homes? What was wrong with all the certified foster parents who couldn’t keep this boy? I didn’t ask. I believed in the system with the zeal of a reborn Christian trying to save souls with a bullhorn on a Seattle street corner. I felt indignant that his mom hadn’t gotten her life together. I was the good mother. She was the bad mother. That was that.

Many people believe, as I did in 1992, that child welfare workers rescue children from homes where they are being beaten, burned, starved, and sexually violated, and place them in loving homes where they can grow and thrive. Some do. Yet the single most common factor in families whose children are placed in foster care is not cruelty or rage or sexual perversion; it is poverty. In 2012, about 16 million children in the U.S. lived below the poverty line. Child abuse and neglect occur across all racial, socioeconomic, religious, and cultural lines, yet most children who enter foster care are from impoverished homes. (In the last nineteen years, I recall just two cases in which a parent did not qualify for a court-appointed attorney.) Three quarters of the children who come into foster care have suffered neglect. One in 11 has been sexually abused. One in six, the victim of physical abuse.

The little girl—let’s call her Cali—who fled with a stranger to Long Beach could have ended up dead, but she didn’t. She recently said, “I never felt afraid. I knew I could take care of myself.” She was 10 years old when she first came to live in our home. She and her siblings were camping in a tent with their mom who was pregnant with her fifth child. Mom was hauled to jail on a warrant for unpaid traffic citations, and the children came into care. Eighty-pound Cali arrived with a skirt rolled up in one pocket of her jeans and a shirt rolled up in the other. Everything about her seemed older, from her confident posture to her budding breasts and sassy talk. As I offered her a hug before bedtime, she said, “Call 503-655-8331 and see if my mom is going to be recogged.”

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Her mother had been arrested so many times, Cali knew the phone number of the jail. She wanted to know if her mother would be released on her own recognizance. I thought, “This little girl needs a mom.”

Courts have long held that parents have a fundamental right to raise their children as they see fit, and that social and cultural norms for attention, affection, supervision, and discipline vary widely. The intersection of the rights of parents with the child’s rights to safety, permanency, and well-being is at the heart of every child welfare case.

The Child Abuse Prevention and Treatment Act (CAPTA) defines child abuse as “any recent act or failure to act on the part of a parent or caregiver, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm.” It’s easy to say that children who are beaten or sexually abused should be removed from those situations, but what of the child left napping in the car while the mother runs into the mini-mart? Or the school counselor who reports that a child has chronic head lice and never brings a snack? What about the mother who loses her temper at the park?

In the U.S. a child is abused or neglected every 47 seconds. In 2012, there were more than 3.3 million reports of child abuse. Of those, child welfare agencies confirmed 678,810 cases of abuse or neglect, and in each of them the huge engine of child welfare revved up its motors to respond.

Every year, roughly the same number of children enter and exit foster care, keeping the annual census around 400,000 children at any given time. In 2012, children entering foster care numbered 254,162, while 241,254 left. The child welfare industry employs more than one million adults to serve foster children and their families at an annual cost of $15 to $20 billion. In a 2014 book about the broken foster care system, To the End of June: The Intimate Life of American Foster Care, author Cris Beam writes, “And yet nobody—not the kids, not the foster or biological parents, not the social workers, the administrators, the politicians, the policy experts—think the system is working.”

The 1997 Adoption and Safe Families Act (AFSA) requires child welfare agencies to make reasonable efforts to help the birth parents remedy safety concerns, yet only 11 percent of federal child welfare dollars are earmarked to prevent children from coming into foster care. This means the majority of support is available only after a child is removed from his or her family.

In Oct. 25, 1992, my husband and I had completed 24 hours of foster parenting training, undergone a background check, and had a home visit with a social worker before receiving our certificate of approval. I was required to complete 10 hours of annual training but could meet those requirements with self-monitored activities such as videos or books. Most states average about 25 hours of in-service training, but Minnesota requires only six.

A 2004 study of foster homes in New Mexico, Oklahoma, and Oregon reported that the average foster provider’s length of service was less than eight months. The National Center for Youth Law found that there is little research for the efficacy of foster parent training. Many foster parents are unprepared or ill-equipped to deal with the challenging needs of children whose early deprivation or abuse has resulted in complex psychological, medical, and educational needs. This can lead to high turnover rates that make it difficult to have highly qualified, well-trained adults available to provide foster care.

Foster providers are responsible for our nation’s most vulnerable children, yet the Adoption and Foster Care Analysis and Reporting System (AFCARS) collects only basic demographic information such as age, race, and marital status of foster parents. Just 56 percent of foster parents have a high school education and almost half of foster parents are unmarried. Foster families have more children than typical homes, with a high proportion of homes having five or more children. In other words, abused and neglected children live in foster homes with adults who have less education, less disposable income, and a higher child-to-adult ratio than most American families.
The foster care certificate my husband and I received states, “The maximum safe capacity for this home is four children.” I had five children at the time our first foster child arrived. That quickly grew to seven, then eight, and sometimes nine. For most of the next 20 years, we had eight children living in our home. It was a chaotic and enriching life. I learned about fetal alcohol syndrome and prenatal drug affects, signs of tobacco use and huffing aerosols, sexually reactive behavior and reactive attachment disorders. I documented behaviors and incidents, advocated for Individual Education Plans (IEPs), and drove kids to counseling and parent visits, Boy Scouts, soccer, dance, and horseback riding lessons.

We treated foster children as if they were our own, yet many of them never felt as if they were. In a non-foster family, you may not have rules prohibiting children from sitting on adults’ laps or cuddling up in the parents’ bed to watch Saturday morning cartoons. You probably don’t have a nursery monitor and motion sensor set up in your school-age child’s bedroom. You’re unlikely to have alarms on the bedroom doors. Yet those strategies were necessary to keep everyone safe given the needs of the children we welcomed into our home.

I knew our kids wanted to go home but I didn’t fully understand the stress they experienced at the separation from their biological parents and family home. I didn’t recognize the small losses a child could grieve: the tree they loved to climb, the field where they rode bikes, and the neighbors they knew they could count on. I understood they missed their stuffed animals and pets, but didn’t grasp the intangibles such as the smell of their home or the texture of their own blankets in bed. At our house, new foster children often came without clothes, so they were given sometimes new, sometimes hand-me-downs. They were the new kids in class, the ones not invited to sleepovers and birthday parties. These many small losses can bury a child who’s already waist-deep in depression and loss as they move from foster home to foster home, never feeling at home.

In 2012, almost 200,000 children were in non-relative or “stranger” foster care. A child’s first placement is often whichever home has an empty bed, which may not be the best placement for the child because it was chosen for availability rather than the child’s unique needs. So children bounce from home to home when their needs are too challenging for the current foster providers or when their behavior conflicts with the needs of other children.

Frequent moves adversely affect a child’s ability to trust adults and form healthy attachments. My first foster son said he’d been in foster homes that were Christian, Catholic, Jehovah’s Witness, Mormon, and agnostic. Every set of parents he’d lived with had different ideas about what mattered. Situations that create such cognitive dissonance would be stressful for anyone, but for children who are expected to conform to adult value systems, it accentuates the distress of being separated from their known world. It’s one more way to feel you don’t belong.

Foster care is intended as a temporary safe haven for children who are abused and neglected, yet the wheels of such a bureaucracy turn slowly. On average, a foster child spends 23 months in care, often living in multiple foster homes. Nearly 20 percent of foster children experience 10 or more placements. And how long do they wait for their parents to get it together or for the courts to decide they are out of chances? In 2012, nearly 36,000 foster children had been waiting more than three years to return home or to be adopted, and 24,000 had been waiting more than five years.

Then there is the question of safety in foster homes. Data reported by the states to the federal government show that less than one percent of children are abused in foster care. Studies suggest the number is far greater.
A 2010 Casey Family study of adult alumni in Washington and Oregon found that one in three former foster children reported being abused by an adult in the foster home. A lawsuit filed in April 2014 on behalf of a young Washington woman alleged that after being born to drug-affected, mentally ill parents and removed from an unsanitary home at the age of 4, she endured years of sexual abuse in two separate foster homes. Both foster fathers and one foster brother were convicted of sexual assault.

When a parent is unable to meet a child’s needs, the child can understand that this was one adult’s problem, and they can learn to trust other safe adults. However, when adult after adult is unable to meet a child’s needs, children internalize the failure as their own, and generalize a lack of trust to all adults. In worst case scenarios, they learn not to trust anyone.

Foster children are given psychotropic medications 12 times as frequently as other low-income children living with their biological families. The Casey Family study showed they experience Post Traumatic Stress Disorder (PTSD) at twice the rate of Iraqi war veterans. Despite their increased need for health services, nearly 33 percent of adult foster care alumni surveyed had no health insurance. By the age of 25, 81 percent of all male foster care alumni had been arrested once, and 35 percent had been incarcerated. Adults who had been in foster care as children suffered worse prognoses than their peers in almost all domains (foster care/general population):

- PTSD: 25% / 4.5%
- Depression: 24.3% / 10.6%
- Anxiety: 43% / 5.1%
- Addiction/alcoholism: 11.1% / 2.5%
- Males convicted of a crime: 60% / 10%
- Homeless for more than one day: 22% / 2%

These differences between foster children and children in the general population cannot be explained solely by the maltreatment that occurred prior to foster placement. The largest studies undertaken (in 2006, 2007, and 2008) found that with the exception of the most severe cases of abuse, even comparably maltreated children who remained at home fared better than maltreated children placed in foster care.

The Casey Family study also found that 65 percent of all foster children have been in seven or more schools. Twice as many repeat a grade. Of those who graduate high school, two percent of former foster children achieve a Bachelor's Degree, compared to 20 percent of adults who were never in care. These academic shortfalls affect employment and earning power, decreasing their ability to provide for their children—one more cog in the wheel that perpetuates generational poverty and neglect.

When I conjure the image of 250,000 children entering and 245,000 leaving care each year, it feels like a nightmare involving a huge self-perpetuating machine. For 20 years, I have worked as part of that machine, so I recognize its value. But over the course of any given decade, that machine processes almost 2.5 million children who have been taken from their families and rehomed, often repeatedly. Many of those children's lives may be forever affected not only by the early maltreatment they experienced, but also as a by-product of our intervention.

Anyone who has worked in child welfare for long can’t help but have an underlying sense of anxiety about the possibility that a child will be seriously harmed under their watch. An estimated 1564 children died from abuse in 2012. Thirty states reported that of those fatalities, 8.5 percent involved families that had received preservation
services (assistance in the home), and 2.2 percent involved children who had returned home from foster care. Neglect was involved in 70 percent of child fatalities.

Many years ago I was involved in a case where a child was removed from the home of a mentally ill parent. A safety net with multiple community providers was put in place when the child returned home. Within months, the mother’s condition deteriorated, and the child was killed. To face the crime-scene photographs knowing you had recommended the child return home is the kind of horror that you never forget. The sense of responsibility never fully recedes, so it is with great unease that I ask the next question: How many child injuries—or even deaths—are we willing to risk to reduce how many kids we place in foster care?

When I read Jeannette Walls’ memoir The Glass Castle, I couldn’t help but wonder if Walls and her siblings would have been better off in foster care. The book never dips into sentimentality or trite answers. Instead, after reading the story of a tumultuous and neglect-ridden childhood, I came away with questions: Can familial love mitigate poverty and chaos? Did the relationships Walls and her siblings forged with their parents have value despite the pain the parents’ choices caused? Did the neglect the Walls children experienced contribute to their strengths as well as their struggles? A memoir is a collection of moments contrived to tell a story, and in that way, the book is an incomplete picture of what the children experienced. Even so, I wonder if families like theirs that stayed intact despite appalling circumstances have something to teach us. What might be gained if 11 percent of the federal funding went to foster care and 89 percent of the child welfare dollars were made available for services to support children in their own families?

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In time, I learned to appreciate the strengths the birth parents brought to my foster and adoptive children’s lives. Our points of view and priorities were often different but I saw what the birth parents meant to their children. The way one parent encouraged her child to trust us. The way another mom scooped her puking boy up in her arms, and wiped his mouth with a wet cloth. The way the children’s eyes lit up when they saw their mother’s car coming down the driveway. I stopped judging birth parents through my black and white lens, and strove to see them through the eyes of their child.

In the most egregious cases (where a child has been subjected to extreme cruelty or the parents have caused injury or death of another child) it’s appropriate for legal proceedings to relieve agencies of their duty to help parents. In those cases, children should not be subjected to further risk. But what of the middle-of-the-road cases where parents are unfit, and yet placement in foster care seems to compound the trauma of an already mistreated child? The parent who is cognitively too impaired to read her babies cues, yet is a loving and attentive woman? The man whose misdemeanor acts repeatedly land him in jail, rendering him intermittently available to parent?

I am not the lone voice in the wilderness. Statute and policy changes over the last decade have reduced the number of children in foster care by 20 percent. Some states are striving to include “differential response”—the ability to engage a family’s strengths, and provide supports to mitigate their weaknesses, while the children remain at home. Differential response promises more flexibility in responding to abuse and neglect reports, a less adversarial relationship with parents, and a commitment to better understand the family issues underlying the reports of maltreatment. In 2012 almost half of the children who left foster care returned to their families after less than one year. Could these children have remained home while their parents received the help they needed? Would they have been at least as safe as they were in foster care? The AFGARS Report states that 122,173 children were reunified.
with their families in 2012. How might we have better identified those families likely to succeed, perhaps reducing the need for out-of-home care?

When children are removed from homes where they are being abused or neglected, and placed in safe homes with well-trained providers, they are free from immediate harm. Should we breathe a sigh of relief? Is it enough to have accomplished the short-term safety of a child at the expense of long-term outcomes?

Just nine states “quickly and safely return foster children home to their biological families when possible.” It’s clear that safe, well-trained foster homes are the best type of homes when children must enter foster care. But some evidence suggests that even good homes with well-trained providers contribute to adverse long term outcomes. In my experience, although the children I fostered made many positive gains in personal, educational, and social development, their transitions into adulthood were consistent with other foster alumni who struggle with drug abuse, mental health disorders, incarceration, early pregnancy, and homelessness.

Cali and I lost touch after she left our home at age 12, couch surfing for a while before moving in with her birthmother’s ex-boyfriend. Her mother was in jail for the umpteenth time. By age 16, Cali got a job, an apartment, and took in her younger brother, who was 10. I met her again when she was 25. She had just finished raising her brother while caring for her own two small children. Cali’s mother, her mother’s ex-boyfriend, her sister, and her brother were all in prison.

“The only reason I know anything about being a mom,” Cali said, “is because of the two years I spent in your home.”

I did a decent job with many challenging children. Still, many of them would be considered alumni with negative outcomes: arrests, convictions, early pregnancies, unemployment, lack of health care, psychiatric hospitalizations, chronic physical ailments, and mental health disorders. When I think about them, I don’t see failure. I admire their ability to take responsibility for their actions, strong work ethic, kindness toward animals, children, and the elderly, a strong sense of humor, sociability, perseverance, and hopefulness. Can I claim that my care instilled these qualities?

Would the children I love have had better outcomes if they had remained in their original homes with attachments to the world they knew? Would the parents have been more successful if the state had provided intensive resources while the children remained at home? When I started out, I was certain our foster children were better off in our home.

Nearly two decades later, I feel less sure.

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