

A stable and loving relationship with a primary caregiver is critical for healthy infant development. Many infants in the child welfare system (CWS) lack these consistent relationships. Before they are placed out of home, many of these infants have already been exposed to multiple adverse conditions, including neglect, abuse, and domestic violence. Although placement out of the home keeps the infant safe from these conditions, the new placement and caregiver constitute another disruption during a developmental period when attachments are critical. Long stays in foster care may exacerbate this placement instability and jeopardize the consistency of a loving caregiver. Moreover, there is concern that some children, especially those of a particular racial/ethnic origin or those with special health care needs, may be less likely than other children to find a permanent home, or may have to wait longer for it.<sup>2,3</sup>

#### Purpose of the Brief

Congress recognized the need for a stable home in passing the Adoption and Safe Families Act of 1997 (ASFA). This law includes guidelines and incentives for states to enhance the safety, well-being, and placement permanency of children in foster care by promoting adoption when reunification cannot be accomplished safely and expeditiously. 4-6 ASFA contains two key provisions that aim to reduce time spent in foster care and promote legal permanency. The first provision, referred to as "fast track," allows states to bypass efforts to reunify families with egregious situations; it emphasizes the importance of adoption when foster children cannot be safely returned to their families of origin. The second provision, referred as "15 of 22," requires the termination of parental rights when children are in foster care 15 of the previous 22 months. ASFA also decreased from 18 to 12 months the time in foster care necessary for making permanency decisions.<sup>7</sup>

Since the enactment of ASFA, the number of adoptions from foster care has increased by 57%, from 31,000 to nearly 49,000. Nevertheless, this new number represents only about 37% of those waiting to be adopted.<sup>7,8</sup> Studies at the time of the enactment of ASFA and before have shown that infants are more likely than

older children to be adopted; nevertheless, many questions are still unanswered regarding the characteristics of infants who are adopted, their families of origin, their adoptive families, and their well-being once they reach the school system. This research brief examines adoption among infants involved in investigations of child maltreatment and addresses the following questions:

- What percentage of infants who are involved with the CWS and who are potentially eligible for adoption are adopted? What are their characteristics and the characteristics of their families of origin?
- What is the length of time between an infant's first out-of-home placement and placement with the adoptive family?
- What are the developmental needs of adopted children?
- What are the characteristics of adoptive families?

# National Sample of Children Involved in Allegations of Maltreatment

This research brief uses data from the National Survey of Child and Adolescent Well-Being (NSCAW) to describe adoption among infants involved with the CWS. NSCAW is a national longitudinal study of the well-being of 5,501 children aged 14 years or younger who had contact with the CWS within a 15-month period starting October 1999.<sup>9</sup>

This research brief focuses on 962 children who were infants when they first became involved in investigations for abuse or neglect and whose caregiver participated at the 5- to- 6-year follow-up. The data used here were collected between 1999 and 2007 and drawn from standardized measures of child development, as well as from interviews of caregivers and caseworkers for all children who were 12 months or younger at baseline in the NSCAW child protective services sample.

Children's development was assessed with several measures. Children were classified as having a problem if they had very low scores on a given measure at the 5-to 6-year follow-up, which means 2 standard deviations

below the mean for cognitive measures or a score in the clinical range (64 or more) on any scale (Internalizing, Externalizing, or Total) for behavioral or emotional problems. The following measures were used: The Kaufman Brief Intelligence Test measures cognitive skills such as expressive vocabulary, definitions, ability to perceive relationships, and ability to complete analogies. 10 The Preschool Language Scale-3 (for children up to 6 years, 11 months, old) measures expressive and receptive language skills. 11 The Woodcock-Johnson III Tests of Cognitive Abilities measure basic reading skills, reading comprehension, arithmetic computation, and math reasoning. 12 The Social Skills Rating System measures caregiver and teacher perception of the social skills of children. <sup>13</sup> The Child Behavior Checklist (CBCL) and the Teacher's Report Form (TRF) measure children's social competencies and problem behaviors as reported by caregivers (CBCL) and teacher (TRF). 14

Children were classified as having a special health care need if, on the basis of the caregiver's report, at any point in the study they had a chronic health condition or matched any of the disability categories listed in the Individuals with Disabilities Act.<sup>15</sup>

### **Characteristics of Children in the Sample**

Approximately 50% of the infants reported to CWS for maltreatment were male. White children made up the largest group (43.3%), followed by Black (30.1%) and Hispanic (20.8%). Almost half (49%) of children were identified at some point in the study as having special health care needs.

According to caseworkers' reports, about two thirds (63.9%) of children reported came to the CWS's attention because of neglect. Failure of a caregiver to provide for the child was reported for 34.9%; failure to supervise the child, for 29.0%; physical abuse, for 19.2%; and emotional, moral/legal, or educational abuse, or abandonment, for 4.8%. About 10.5% were reported for reasons other than abuse or neglect (e.g., for mental health or domestic violence services). Slightly more than one third (38.7%) of these maltreatment cases were *substantiated*, meaning CWS decided that the allegations of maltreatment were valid.

Of the children who were infants at the time of the CWS investigation, 37.4% were placed out of the home at some point in their lives; 18.4% had one placement; 8.8%, two placements; and 10.2%, three or more placements. Black children, Hispanic children, and children from other race/ethnicity groups were

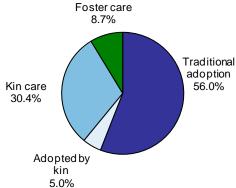
significantly more likely to be placed outside the home than White children. These findings were true even when we took into account whether or not children had special health care needs, the type of maltreatment, and the original caregiver's use of alcohol, use of drugs, poor parenting skills, and mental health problems. Of those infants placed outside the home, 17.0% were found at the final NSCAW follow-up to be reunified with their birth parents.

For this brief, the children placed out of the home and not reunified with their original parents (28.3% of all infants in the CWS) were considered potentially eligible for adoption.

# Characteristics of the Adopted Children and Their Families of Origin

Of the children potentially eligible for adoption, 56.0% were adopted by the 5- to 6-year follow-up, an additional 5.0% were adopted by kin, 30.4% were in kin care, and 8.7% were in foster care (Figure 1). At the time of the index investigation, many of the infants who were later adopted had a prior report of maltreatment (58.2%); the majority of these investigations were substantiated (73.6%). Caseworkers reported that the level of harm was severe for 38.3% of the children, while the level of risk was severe for 59.7%.

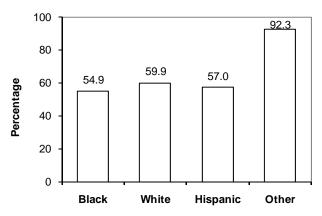
Figure 1. Placement at 5-year to 6-year follow-up of children potentially eligible for adoption.



Among children adopted, 58.7% were female. Among Black, White, and Hispanic children potentially eligible for adoption, more than half from each group were adopted (Figure 2). As seen in the figure, more than 90% of children classified as "Other" were adopted, but this was a small group, and differences in adoption by race/ethnicity were not statistically significant. At one or more points during the study period, 70.7% of adopted children had been reported by a caregiver to have special health care needs. No significant differences by sex or by special health care need were

observed between children potentially eligible for adoption and those adopted.

Figure 2. Percentage of children adopted for each race/ethnicity group.



The reports provided by caseworkers about the original primary caregiver showed that 55.7% were misusing drugs. In each of the following areas, at least half of the caregivers were reported to have problems: serious mental health conditions, poor parenting skills, and a history of having being abused or neglected during childhood. Caseworkers reported that services were provided or arranged for 80.8% of the original families, with caregivers who were using drugs being as likely to have services provided or arranged for them (89.3%) as those who were not using drugs (72.1%).

# Time Interval Between an Infant's Initial Out-of-Home Placement and Adoptive Placement

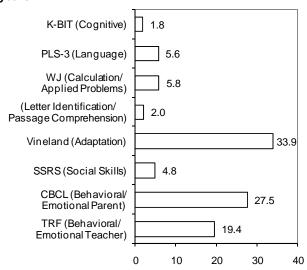
More than a third of children (39.7%) were placed with their adoptive families when they were between zero and 6 months of age; 27.7% were placed with their adoptive families between 7 and 12 months of age. Many infants were placed with their adoptive parents for several months before their adoption was legally formalized. If this period of waiting for legal formality is excluded, 70.3% waited 12 months or less before being placed with an adoptive family. Another 14.4% were placed with their adoptive parents immediately. No differences by sex, race/ethnicity, or special health care need were observed in the percentage of infants who waited 12 or less months for adoptive placement.

# **Developmental Needs of Children Adopted During** the Study

Among children who were infants at the time of their CWS investigations and adopted over the course of the study, a small percentage had a very low score on one of the cognitive or language assessments completed when they were 5 to 6 years old. Figure 3 shows that 5% or

fewer of adopted children had a very low score on measures of intelligence, language skills, or academic achievement. Only a small percentage had social skills problems (4.8%), but a third (33.9%) had problems meeting their daily-living needs (e.g., dressing, toileting, helping himself or herself when thirsty, blowing his or her nose, putting toys or clothes away, using a telephone, using coins). More than a quarter had clinically relevant emotional or behavioral problems as reported by parents; 19.4%, as reported by teachers.

Figure 3. Percentages of adopted children with extremely low scores on developmental assessments at 5 to 6 years.



Note: Extremely low scores correspond with 2 standard deviations below the mean for all measures, except the CBCL and TRF, that have a clinical range defined as total scores at or above 64. K-BIT = Kaufman Brief Intelligence Test; PLS-3 = Preschool Language Scale-3; WJ = Woodcock-Johnson III Tests of Cognitive Abilities; Vineland = Vineland Adaptive Scales; SSRS = Social Skills Rating System; CBCL = Child Behavior Checklist; TRF = Teacher's Report Form.

No significant differences by the sex of child or race/ethnicity were observed in the percentage of adopted children with very low scores on cognitive measures or with clinical scores for emotional or behavioral problems.

#### **Characteristics of the Adoptive Families**

At the time of the final follow-up interview, when adopted children were between 5 and 6 years old, almost two thirds of caregivers (63.4%) were married. The majority of the adoptive primary caregivers were female (98.8%) and older than 34 years old (95.3%). In terms of race/ethnicity, 54.8% were White, 26.9% were Black, and 14.2% were Hispanic. Almost half had more than a high school education (44.1%); 32.0% worked full time. Half of the adoptive families were living above

200% of the federal poverty level, 37.5% lived between 100% and 200% of the federal poverty level, and 10.3% lived beneath the poverty level. More than half of children (53.4%) were living in families with two adults, while 22.8% were living in families with three or more adults and 23.9% were living in families with one adult. Most of the families had either one child (32.8%) or two children (24.1%). Another 15.9% had three children, and 27.2% had four or more children.

# **Key Findings**

- Among maltreated infants in need of adoption, 56.0% were adopted by 5 to 6 years of age; an additional 5.0% were adopted by kin.
- More than 80% of children waited less than 12 months to be placed with their adoptive parents, although legal adoption was often not yet finalized.
- No significant differences due to a child's sex, race/ethnicity, or special health care needs were observed in the percentage of children adopted or in average length of time to adoption.
- The original caregivers of adopted children had high rates of drug abuse, mental health problems, and poor parenting skills.
- Only a small percentage of adopted children had a very low score in any of the cognitive or language assessments completed when the children were entering school.
- About a third of adopted children had problems with functional daily-living skills, and a quarter had behavioral or emotional problems.
- The main caregivers of adopted children are female, most of them being older than 34 years. Most children were living in households with two or more adults and one or two children. A small percentage of these families lived beneath the federal poverty level, but more than a third lived between 100% and 200% of the federal poverty level.

# What Do These Finding Mean?

Infants and toddlers are the largest cohort of children involved with the CWS. Infants who are younger than 12 months of age account for the largest percentage among all age groups of children reported for child maltreatment. More than one third of the infants described in this brief have had some history of out-of-home placement by the time they enter school. Among the infants described in this brief, it was determined that 28.3% were, at some point in the study, eligible for

adoption. So, for a substantial number of infants reported to CWS for maltreatment, adoption may be a particularly important outcome.

Over the course of 5 to 6 years, 56.0% of the infants in need of adoption found a final adoptive home, while 5.0% were adopted by kin. This rate of adoption is higher than the national estimate for children of all ages who are potentially eligible for adoption in the CWS (37% adopted; U.S. General Accounting Office, 2002). Nevertheless, these figures show that, even among infants, rates of adoption are insufficient. Many infants with a history of out-of-home placement experienced several placements over the 5 to 6 years. Thirty-nine percent of children determined to be eligible for adoption were still awaiting permanent placement or adoption by 5 to 6 years of age. Many of these children were living with kin caregivers.

Some children were at more risk to be placed outside the home than others, but no significant differences existed for subsequent adoption rates. Specifically, this brief found that children in a racial/ethnic minority were more likely to be placed out of home than children who were White; however, no evidence emerged that children in a racial/ethnic minority, once placed outside the home, were any less likely to be adopted than children who were White. Children with special health care needs were also no less likely to be adopted than those without such needs.

More than 80% of adopted infants waited less than 12 months to be placed in their adoptive homes. This finding is very promising, given young children's critical need for a stable and loving relationship with a primary caregiver and the need to avoid disruptions in their care during a developmental period when attachments are critical.

Many of the children adopted came from families with a variety of stressors at the time of the baseline maltreatment investigation. Many biological caregivers had histories of drug misuse, alcohol misuse, mental health problems, poor parenting skills, low social support, or severe difficulties in providing for their family's basic needs. In adoptive homes, children were typically being cared for by mothers 35 years old or older; most children were living with married couples or in families with at least two adults. Although half of the adoptive families were not living in poverty, it is concerning that 10.3% of adoptive families were living beneath the federal poverty level and more than a third (37.5 %) were between 100% and 200% of the poverty

level. Although a minority of adoptive families lived beneath the poverty level, insufficient financial resources could be especially problematic for their children: new adoptive families often must help a child recover from a history of maltreatment and therefore must attain appropriate services for behavioral and emotional problems or for adaptation problems.

Of particular concern are the adopted children showing developmental problems at school entry. On the positive side, in the cognitive and language area only a small percentage of adopted children had very low scores. In fact, the percentage of adopted children with cognitive or language problems was within what is observed among the general population of children 6 to 11 years old. In contrast, as reported by caregivers, a third of adopted children have problems with daily-living skills, and a quarter have emotional or behavioral problems. These rates are substantially higher than the percentage in the general population (8% in the clinical range).

Adoption is a salient outcome for many children reported to the CWS for maltreatment in infancy. Many of these children become eligible for adoption, and more than half of these children are adopted within 5 to 6 years after the index maltreatment investigation. Despite the substantial number adopted, however, many still reside in a nonpermanent living situation 5 to 6 years after CWS investigation. Among those adopted, although most reside in homes with ample financial resources, an important minority do not. The availability of support services and resources for adoptive families is crucial, particularly for addressing emotional and behavioral problems. Adoption support services and resources can only help facilitate all adoption-eligible children's healthy development and overall well-being.

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#### National Survey of Child and Adolescent Well-Being Research Brief

Available at: National Data Archive on Child Abuse and Neglect (NDACAN), Cornell University, ndacan@cornell.edu

Administration for Children and Families (ACF, OPRE) http://www.acf.hhs.gov/programs/opre/abuse\_neglect/nscaw/

This is the 14th in a series of NSCAW research briefs focused on children who have come in contact with the child welfare system. Additional research briefs focus on the characteristics of children in foster care, the provision of services to children and their families, the prevalence of special health care needs, use of early intervention services, caseworker judgment in the substantiation process, and multiple outcomes for infants followed from CWS initial contact to school entry.