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The Use of Adoption as an Expedient Foster Care Permanency Plan

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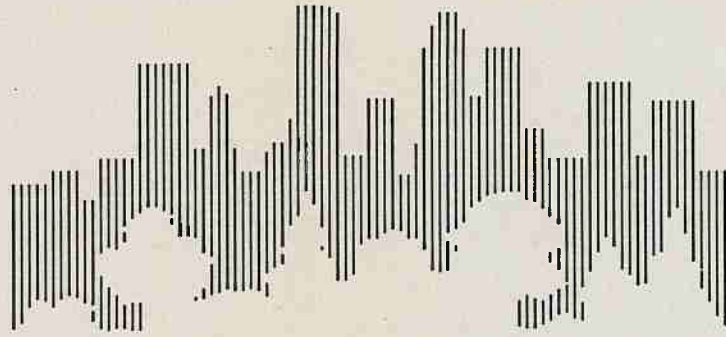
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**MASTERS IN SOCIAL WORK
THESIS**

Wendy G. Cook

**The Use of Adoption as an Expedient
Foster Care Permanency Plan**

**MSW
Thesis**

Thesis
Cook

1995

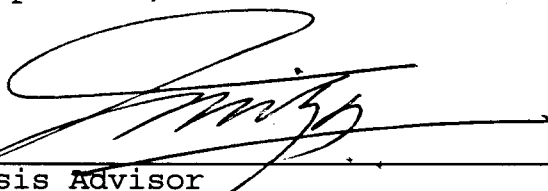
MASTER OF SOCIAL WORK
AUGSBURG COLLEGE
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CERTIFICATE OF APPROVAL


This is to certify that the Master's Thesis of
Wendy G. Cook
has been approved by the Examining Committee for the thesis
requirements for the Master of Social Work Degree.

Date of Oral Presentation: April 19, 1995

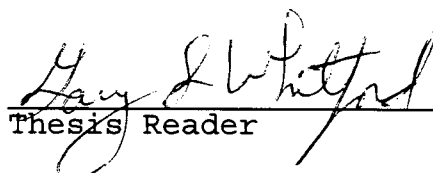
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Abstract of Thesis

The number of children in foster care continues to rise despite an emphasis on permanency planning in the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272). Adoption, one type of permanency, is identified as the plan for 15% of children in foster care throughout the U.S., according to the American Public Welfare Association. Individual states, however, may differ greatly from the national figure. This study was undertaken to assess state efforts to use adoption as a permanency plan.

Surveys of data across years 1988-1993 were sent to 51 state foster care system supervisors (each of the 50 states and the District of Columbia). Twenty-seven surveys were returned, a 53% response rate. Variables analyzed included whether foster care systems were county or state administered, worker caseload size, and the use of focused adoption programs. Survey data was incomplete for the earlier years, but by 1993 surveys indicated varied commitment to the use of adoption as a permanency plan for children in foster care. Among respondents, by 1993 foster children in New Mexico were most likely in 1993 to have adoption as their permanency plan (35%) and those in Missouri were least likely (4% in 1993). However, among foster children with adoption as their plan, those in Vermont were most likely in 1993 to attain a finalized adoption (34%), compared to those in Missouri, who were least likely (4% in 1993).

CHAPTER I

STATEMENT OF THE PROBLEM

Introduction

"I thought after eighteen months something 'permanent' was supposed to happen."

"No. Then you go to court and get an extension. It's almost automatic. After two years, if the kids are still in foster care, you have to request from the state a U.R. -- I don't know why it's called that. Requesting an extension; saying why the kids have to be in foster care longer than two years."

So much for the meaning of the title permanency planning worker. (Interview with a county foster care permanency planning worker; Armstrong, 1989, p. 64.)

Foster care is intended as temporary and short term substitute care for children unable to live with their families. The intent is for children to quickly move out of the system, into a permanent living situation. There are safeguards designed to prevent children drifting in foster care for long time periods, but permanency remains elusive for many children in foster care.

The Adoption Assistance and Child Welfare Act of 1980

(P.L. 96-272)

The U.S. Congress passed P.L. 96-272, the Adoption Assistance and Child Welfare Act, in 1980. It revised Titles IV-B and IV-E of the Social Security Act to emphasize family preservation and thereby reduce the need for out-of-home care. States are now required to have a specific plan for reducing the number of children in foster care. Families are to be offered comprehensive services in an attempt to, within two years, either return children to their birthparents or designate alternate plans for

their permanent care. Permanent care can include long term foster care, guardianship or adoption.

This mandate affects increasing numbers of children and families nationwide. In 1992, there were approximately 442,000 children in foster care, up from 340,000 in 1988. The 1994 estimate of children in foster care was 500,000. This reflects an increase in both the number of children entering foster care for the first time, and children re-entering the system after a failed reunification (Jost, 1991, p. 708).

The majority have a case plan goal of returning to their birth family. Others plan to live in a kinship (relative) or other foster home, either under rights of guardianship or as standard foster care, until emancipation. The American Public Welfare Association (APWA) estimates that in 1990 15% of U.S. children in foster care (approximately 75,000 kids) had adoption identified as their permanency plan, and 24% with such plans finalized adoptions (Committee on Ways and Means, U.S. House of Representatives 1994, pp. 653, 657).

No one of these goals is "right" or "best" for all children in foster care; right or best depends on the individual child, family and community. The common component is the concept of expedient permanency, defined as a permanent living situation within two years, because children need consistent and secure parenting for healthy development. It is widely accepted that removing children from their birth family is traumatic, and subsequent multiple, extended temporary foster care placements compound the trauma. Such trauma interrupts the basic foundation for self-esteem and forming relationships. The operative principle of expedient permanency is that within two years of first contact with the foster care system children will be in a nurturing home with committed parents where they will live for the remainder of their childhood.

Current Permanency Planning Status

Current child welfare laws and policies therefore have four components. First, front line family preservation programs work at preventing the removal of children. Failing that, secondary reunification efforts strive to make the home safe for the children to return to in less than two years. For others, however, even though the home will never be safe enough to live in, there are cultural bonds or significant family ties that the child may wish to keep legally intact, and a third component, long term single foster care placement or guardianship, is appropriate. Finally, adoption is considered the best option only for children whose birth family is unlikely to ever be able to care for them appropriately.

Planning for permanency is important. Children who drift in foster care and age out of the system are likely to experience several detrimental effects. In 1989 Westat, Inc. conducted a study of federally authorized independent living programs for children who age out of foster care. It revealed that 2/3 of 18 year-olds emancipated from foster care did not have a high school diploma or GED, 38% had been diagnosed as emotionally disturbed; 17% abused drugs; 9% had medical problems; and 17% of the girls were pregnant (Committee on Ways and Means, U.S. House of Representatives, 1994, p. 614).

This is a sobering picture. To avoid these alarming results, children need stability and parents committed to the long haul -- in other words, permanency. Adoption is an appropriate type of permanency for many children in foster care.

The Adoption Permanency Plan Option

Birth families are valued as the basic unit of society and there is great reluctance to allow interference in the private home domain. Poorly functioning families are offered repeated opportunities to improve. However, it is also recognized that children have only one childhood and abusive or neglectful parenting damages their development into healthy adults. APWA reported that in 1990 by far the majority of

children in foster care were there to protect them from abuse or neglect (50% of the foster care population) or because their parents were unable to care for them (21%) (Committee on Ways and Means, U.S. House of Representatives, 1994, p. 651.)

Despite the preference of P.L. 96-272 to reunify families, reunification often does not occur, or children reunified with their families repeatedly re-enter foster care. The National Black Child Development Institute in 1989 studied black children in foster care in five cities -- Detroit, Houston, Miami, New York and Seattle. Barriers to reunification, sometimes multiple barriers for one family, were identified among families with reunification as the permanency goal but whose children remained in foster care. It found that lack of cooperation from the parent was the foremost barrier (46% of cases). Thirty percent of cases cited parental drug addiction, 20% of parents' whereabouts were unknown, 15% of parents were reportedly mentally unstable, and 10% cited alcoholic parents (Committee on Ways and Means, U.S. House of Representatives, 1994, p. 653). It is for these children that adoption is advocated.

APWA, by studying state Title IV-B child welfare plans, determined that although adoption is not as high in priority as preventive, support and foster care services, states are interested in increasing adoption placements (Libner & Goertz, 1990, p.8). Pierce notes that "although adoption of [children in foster care] has increased, we can and must do better" (1992, p. 62). He suggests seven principles to consider when reforming child welfare laws, including initiation of public program quality standards and public-private collaborations.

Procedurally there are four stages in using adoption as a permanency plan. First, children for whom adoption is an appropriate plan must be identified. Identification early in the child's foster care experience is best. Second, the court must terminate the biological parents' right to parent the child. Third, an adoptive family must be found that is a good match for the best interests of the child. Fourth, post-adoption services provide supports and resources to help prevent adoption disruption.

Summary

The research herein attempts to study the commitment of states to invest in adoption as a permanency plan for children in foster care and the effect on adoption rates. Presently only 15% of children in foster care have adoption identified as their permanency plan. Adoption is an appropriate plan for many others, as evidenced by children re-entering foster care after reunification fails and the multiple difficulties experienced by children who age out of foster care into independent living arrangements. A correlation between investment in adoption and decreased numbers of long term foster children could suggest strategies for revising foster care policies and practices.

CHAPTER II

LITERATURE REVIEW

Introduction

The intent of permanency planning is to promote the best possible development of each child by ensuring the implementation of an individualized, well-thought out and appropriate plan, keeping to a minimum time spent in foster care. When using adoption as a permanency plan, human and procedural factors must be understood and considered.

Theoretical Framework

To do this, permanency planning crosses several paradigms, including systems, psychosocial, and social learning theories. Each contains concepts that pertain to various aspects of permanency plans, such as integration of human, environmental and institutional units into a holistic system, the development of identity for a child in foster care, and the effect of the foster care experience itself in teaching about family, relationships and people.

Ecological theory fittingly frames the ideology of permanency planning by focusing on the interactions and adaptations of foster system participants and their environments (Howe, 1983). In child welfare practice, many assessments of strengths, needs and what is realistic are made. Many people and environments interact and adapt in this process. A caseworker makes an assessment that a child has needs which are not being met in the home environment, and s/he enters the foster care system. The child, his/her family, the foster family, foster system personnel, court personnel, and possibly medical personnel all interact, influenced by personalities, official policies, unofficial practices and available resources. Children adapt to foster families, and vice versa; foster families and birth families adapt to each other when establishing visitation schedules; and workers adapt ideal plans to reality and availability.

Tools for the Literature Review

Obviously there are many elements to permanency planning. Research of the literature on these elements was initiated by computer index searches. The InfoTrac database for the General Periodicals Index searched the subject keywords "adoption assistance and child welfare act," "adoption economic aspects," "adoption services," and "permanency plan." This index covered years 1991 - 1994. Another computer database, SilverPlatter 3.11, searched Social Work Abstracts for the period 1977 - September 1994. Subject keywords used in the search included "child welfare services," "foster care," "permanency plan," and "adoption services." Social Work Research and Abstracts was searched manually under the keyword "permanency planning," encompassing years 1990-1994.

Reunification Assessment Matrix

Identifying children in foster care who are unlikely to successfully reunify with their birth families is key to the expedient use of adoption as a permanency plan. Katz and Robinson (1991) devised a matrix for the early identification of these children. "It is to be used for children age eight and under, who are already in foster care, and who have no known relative or nonoffending parent to whom they can be discharged" (p. 348).

The matrix consists of two categories of conditions. The first category of five conditions are considered sufficiently severe so as to make reunification unlikely if even one condition is present. Examples include a parent who has seriously harmed another child through abuse or neglect and no significant change has occurred, a parent who has severe mental illness which is not responsive to treatment, and financial dependency on illegal drugs, prostitution and street life. Category two lists 16 conditions, any two of which in combination make reunification unlikely. These conditions include a chronic pattern of abuse or severe neglect, parental drug addiction

or alcoholism, a pattern of spousal domestic violence, and the parents have abandoned the child.

Over several years of extensive use, the matrix has been found to be extremely (95) accurate. However, it is important to assess that this matrix is unbiased. There was no report regarding the accuracy of broad applications, including urban, suburban and rural family settings, and diverse cultural settings.

Designation of Adoption as the Permanency Plan

If reunification is not probable, a different permanency must be planned. One body of literature studied the designation of adoption as the permanency plan. Miller, Fein, Bishop, Stilwell & Murray (1984) researched the importance of worker attention and time to developing a permanency plan, including adoption, for kids in foster care. Persevering caseworker efforts were crucial to overcoming systems and case-related barriers which stymied development of plans. Working with a project group of 55 children in Connecticut, within two years 51 of them had permanency plans. Thirty of the 51 plans were for adoption. (The remaining four had recently experienced disrupted placements and revised plans were not yet developed.)

Katz (1990) showed that even for a sample of children most at risk for foster care drift, permanency in a timely fashion was possible. The subject project combined ten components: reduced social worker caseloads, early case planning, intensive services to parents, contracting with parents, emphasis on parental visiting, a two-pronged casework approach considering reunification and adoption simultaneously, foster-adoptive placements, open adoptions, a combined foster and adoption administration department, and private legal representation for project staff. Thirty of 39 children ultimately assigned to the project achieved permanency within the 20 months of the study. Twenty-eight of the 30 permanency placements were adoptions.

More recently, using a sample of 404 child welfare cases in Clark County, Nevada, Albers, Reilly and Rittner (1993) researched factors affecting permanency

planning. Of the 404 children, 243 had been in foster care less than three consecutive years; the remaining 161 had spent three or more years in foster care. Adoption was the plan for 129 of the 161 children (80.2) in care over three years. Clearly, this study indicated field support for adoption as a permanency plan option.

Factors Affecting Adoption Rates

Having a plan of adoption is not sufficient in and of itself, however; an adoptive placement must be found, then finalized. This process is often lengthy.

Seaberg and Tolley (1986) conducted national research on dozens of factors that predict how long children stay in foster care. The sample consisted of 3950 foster care cases. Among their results, Seaberg and Tolley identified provision of adoption services as a factor that actually lengthened time in foster care. Foster children with adoption as their permanency plan are often older, minority, disabled, in a sibling group, or have other so-called "hard to place" characteristics. On the other hand, a caseworker with a social work education background contributed to a shorter time in foster care. It is not clear from this study whether assigning such a caseworker to a child receiving adoption services would accelerate the adoption rate. Other research focusing on caseworkers has found that reducing caseloads increases adoption rates (Stein, Callaghan, McGee and Douglas, 1990).

Avery and Mont (1992) studied the effect of medical and maintenance subsidies in New York on the rate of adoption placements for 2577 kids in foster care. They found that subsidies affected the rate only for children with mental disabilities. For those with physical or no disabilities, it was personal characteristics that were important, such as age, race, sex and sibling group status. Structural system factors were also significant, including number of social workers, pool size of prospective adoptive parents, and private vs. public agencies.

Innovative Programs That Increase Adoption Placements

Other literature considered innovative programs nationwide that aimed to increase the rate of foster system adoptions. In a study of a Fresno County, California court program appointing volunteer, minority advocates to work with minority families, Abramson (1991) found that the rate of adoption for abused and neglected kids increased when the families accessed advocate services. Abramson studied a sample of 28 advocate program families (including 60 children) and a comparison group of 28 families (including 62 children) who did not use an advocate. Of the program group, five children had been adopted and six more had adoption as their permanency plan during the first 18 months of the program. In the comparison group, there were no adoptions either completed or planned.

Another innovative program found that for children in foster care with disabilities special recruitment efforts can succeed in finding adoptive placements. According to a 1990 study in Virginia by Wimmer and Richardson, there are many obstacles to placing children with developmental disabilities, but they can be overcome. Broadening recruitment of families to national efforts, matching children and families carefully, providing caseworkers with training specific to disabilities, preparing adoptive families before placement, and offering postplacement services were all strategies used by United Methodist Family Services of Virginia. From 1985 to 1988, of the 66 waiting children identified as having disabilities, 41 were placed for adoption.

Even though it can be difficult to find adoptive homes for waiting children, there is evidence that such placements work, i.e., they are indeed permanent (Barth & Berry, 1987). The children are generally satisfied with their adoptions and are developing normally. Adoption is a viable permanency plan, especially if designated early and parental rights are terminated in a timely fashion (Finch, Fanshel & Grundy, 1986).

Summary

Research literature reveals glimpses of the status of adoption for children in foster care, but it does not assess the overall commitment of individual states to such adoptions. It is possible to identify early in the foster care experience those children for whom adoption is a likely permanency plan. Social work techniques and process elements that promote expediency have been identified. Past research indicates support for the plan of adoption, and specific strategies have been successful, such as social work educated caseworkers, improved efforts to recruit adoptive families, and reduced caseloads for caseworkers.

Variance between states in implementing P.L. 96-272 has been researched, showing that political and popular support for the underlying values in the law is key (Samantrai, 1992). Given this variance, states committed to long term incorporation of permanency strategies should, logically, have higher adoption permanency plan and finalization rates than states without these strategies.

From the rising numbers of children in foster care, it is clear that a commitment to permanency is needed. Adoption could be better utilized as an option for the permanent care of more than 15% of these children.

CHAPTER III

RESEARCH METHODOLOGY

Introduction

Possible permanency options include return to the birth family, long-term foster care, kinship placement, guardianship and adoption. Currently, about 15% of U.S. children in foster care have adoption identified as their permanency plan, and only 24% of children with adoption plans are adopted (APWA, cited in Committee on Ways and Means, U.S. House of Representatives, 1994, p. 653).

However, national figures do not reveal the successes and hindrances of individual state programs and policies. Adoption policy is implemented uniquely by each state, inviting comparisons of various efforts. States with effective policy components should have an adoption plan rate higher than 15%, and ideally all of those children should be attaining finalized adoptions.

Research Question

Research is critical to improving adoption practice and policy to best serve children (Barth, 1994). The proposed research question herein is, How committed are states to invest in adoption as a permanency plan for children in foster care? The hypothesis is that states committed to adoption will have rates higher than 15% of adoption plans for children in foster care, and those children whose stated goal is adoption will actually attain finalized adoptions. Stated another way, does a state with a low caseload ratio, specialized adoption programs, and county rather than state foster care system administration make a permanency plan of adoption for more than 15% of its foster care population? And of those kids whose goal is adoption, how many adoptions are finalized?

Unit of Analysis and Subject Population

The unit of analysis is a formal group -- the state. In this case, the characteristic of the state being studied (investment in adoption) is administered through a governmental department, variously named social services, health and human services, child and youth services, family services, economic security, or the like. The population for this study consists of the 50 states and District of Columbia. A comparison of various characteristics of the jurisdictions based on 1990 census data (Appendix A) reveals a wide range:

- * in population counts,
- * of racially diverse populations,
- * of urban/rural population percentages, and
- * in wealth, indicated by median household income.

The research attempts to compare results from a variety of state profiles, reflecting diverse state characteristics that impact foster care and adoption status. For example, African-Americans are over-represented in foster care population (Albers, Reilly & Rittner, 1993; Pecora, Whittaker & Maluccio, 1992); and wealthier families are more likely to adopt (Stolley, 1993).

Independent Variable

The independent variable is the state's commitment to adoption as a permanency plan option. This commitment is operationally defined as using county rather than state foster system administration, having specific programs to recruit and support adoptive families, and a small worker caseload to enable thorough and personalized attention.

The concept of permanency is "not defined simply as a child's extended residence with a particular family. Rather, permanency refers to a placement in which the caretakers (usually biological or adoptive parents) have made the commitment to take responsibility for a child until adulthood" (Seltzer & Bloksberg, 1987, p. 65). It is important to understand that permanency is not limited to reunion with the birth

family or adoption, however. Long-term care in a single foster home, guardianship and kinship care are also “permanent” when there is a deliberate intent and commitment to care for the child until adulthood. Permanency is operationalized in P.L. 96-272 itself as a prescribed and planned series of events.

Dependent Variable

The dependent variable is the rate of adoption for children in foster care. It is operationalized by

1) comparing annually

- a. the number of children with plans to have their parents' rights terminated plus those whose parents' rights were already terminated, to
- b. the total number of children in foster care; and,

2) comparing annually

- a. the total number of adoption finalizations for children in foster care, to
- b. the number of children who plan to terminate their parents' rights plus those whose parents' rights were already terminated plus those who were adopted that year.

(See Appendix C, Formulas 2 and 3.)

Survey Instrument

As passed in 1980, P.L. 96-272 mandated that states collect data and track the status of all children in foster care. The content of this information system was not specified, however, and reporting to a centralized agency was voluntary. Finally, a regulatory rule effective January 21, 1994 (Federal Register, 1993, December 22), was issued that set forth the standard reporting to be used for every child, and the penalty schedule for failure of states to comply (Adoption and Foster Care Analysis and Reporting System, or AFCARS). Even so, this new system is optional until October

1996, therefore complete and accurate annual data will not be available until after October 1997. As a result, accurate state data to answer the present research question, which according to P.L. 96-272 should be collected, reported centrally and available to the public, is not available.

Each state has a unique data collection format. For the purpose of this study, a ten-point survey (Appendix B) was devised to standardize the information requested, following input from the adoption unit supervisor in the Minnesota Department of Human Services and staff at the North American Council on Adoptable Children. Specific data was requested in accordance with the operationalized variable definitions. To figure the rate of adoption use as a permanency plan and the rate that those plans were finalized (as defined by this researcher), it was necessary to know how many children were in foster care, how many had adoption as their permanency plan, and how many children were in each stage of the permanency process. Further, to assess commitment, as operationalized by this researcher, data on workers and programs was needed.

Two of the survey questions were nominal measurements (numbers one and nine) and one was open-ended (number ten). The remaining seven questions were ratio measures, each requesting specified data for six consecutive years to reveal trends. A total of 42 pieces of ratio measured data were therefore requested. Data from individual states were analyzed to discern internal trends. States were also compared to assess the various permanency efforts. Descriptive statistics were used to summarize responses, such as central tendency measures and distribution frequencies.

The instrument was mailed to the 51 state foster care supervisors. Supervisors not responding within four weeks were contacted by telephone to answer questions and concerns, and encourage a response. Follow-up telephone calls were also made to responding participants to double check the availability of data missing on returned surveys.

Summary

The results of this study could help states better serve the best interests of children in foster care by discerning strategies and techniques that appropriately expedite adoption as a permanency plan. This means early identification of the children for whom adoption is appropriate, and timely completion of the adoption process.

The ultimate goal of foster care is a safe, stable, nurturing family for every child. It is hoped that increasing the use of adoption as a permanency plan option for children unable to reunite with their birth families will reduce the number of children in foster care limbo. The ideal result is a win-win-win situation for the child, adoptive family and birth family -- and general society.

CHAPTER IV

FINDINGS

Introduction

Survey responses were received from 27 of 51 state jurisdictions, a response rate of 53%. (See Appendix D for compiled state data.) Included were a cross section of states, as shown by selected 1990 census data listed in Appendix A. Surveys were received from five of the 15 most populous states, and 10 of the 15 least populous states. Surveys were also received from seven of the 15 states with the largest population percentage of color; nine of the 15 least racially diverse states returned surveys. Ten surveys were from among the 15 states with the largest percentage of its population living in rural areas, and four were from among the 15 states with the smallest rural population. Five of the 15 states with the highest median household income returned surveys, while 13 surveys were received from the 15 states with the lowest median household income.

State data for years 1991 through 1993 were most often submitted. The five states Idaho, Louisiana, Mississippi, New Mexico and Vermont supplied 1992 and 1993 data for all variables. Only Mississippi completed survey questions through all six years under study, 1988 through 1993. Alabama, Indiana, Michigan and Vermont submitted data on at least one research variable for all six years.

Because they provided the most complete information for all variables, findings from the six states Florida, Idaho, Louisiana, Mississippi, New Mexico and Vermont will be highlighted. Data from all states provide a broader national context.

Independent Variables

The research question in this study proposed that certain system components would result in increased use of adoption as a permanency plan for children in foster care. The survey addressed three system components as independent variables.

1) County or state administrators -- It was hypothesized that administration at the county level would facilitate more individualized attention to children in foster care, resulting in higher adoption plan and finalization rates than achieved under state administration. All returned surveys specified the state's type of administration.

Respondents overwhelmingly, 24 states, administer their foster care programs at the state level; only Georgia, North Dakota and Wisconsin reported county level administrations (Table IV-1). The impact of this system component cannot be determined for lack of sufficient comparative information.

2) Caseloads below 40 children per worker -- Low worker caseloads, optimally at or below 40 children per worker, are very effective in achieving permanency, including increased adoptions (Miller, Fein, Bishop, Stilwell & Murray, 1984; Seaberg & Tolley, 1986; Katz, 1990; Stein, Callaghan, McGee & Douglas, 1990). Fourteen states provided staff size and foster care population information for at least one year under study, from which caseload levels were tabulated (Table IV-2). Differentiations were not made between types of workloads, such as family reunification, foster care or adoption.

Table IV-1: Type of Foster Care Administration

County	State		
Georgia	Alabama	Kentucky	Oklahoma
North Dakota	Alaska	Louisiana	Rhode Island
Wisconsin	Arizona	Michigan	South Carolina
	Delaware	Mississippi	South Dakota
	Florida	Missouri	Tennessee
	Idaho	Nebraska	Vermont
	Indiana	New Jersey	West Virginia
	Iowa	New Mexico	Wyoming

N = 27 states responding

Only South Dakota, at 40 to 43 children per worker, was close to the standard of 40 children maximum per worker until 1992 when New Mexico, at 46 children per worker, became the exemplary state among respondents. However, the front runners in 1993, New Jersey (39 kids) and Oklahoma (41 children), did not provide this data for years prior to 1993. During these years, Mississippi consistently reported the highest caseload levels, fluctuating between 283 and 505 children per worker.

New Mexico and Florida both reported a 1993 caseload rate of 42 children per worker. In 1993 Louisiana (106 children), Idaho (140 kids), Vermont (163 kids) and Mississippi (329 children) trailed far behind the goal of less than 40 children per caseworker.

Table IV-2: Caseload of Children per Worker

A. Annual State Ranking For 1988-1993

<u>1988</u>	<u>1989</u>	<u>1990</u>	<u>1991</u>	<u>1992</u>	<u>1993</u>	
SD/41	SD/40	SD/41	SD/43	NM/46	NJ/39	VT/163
NM/71	NM/78	NM/75	ID/78	SD/49	OK/41	IA/165
FL/76	AZ/88	ID/82	NM/81	FL/85	NM/42	WV/219
AZ/80	FL/95	FL/88	FL/92	ID/107	FL/42	MS/329
MI/159	MI/163	MI/169	VT/134	LA/111	SD/55	
MS/449	MS/505	MS/299	MI/157	VT/149	LA/106	
			IA/167	MI/155	MI/120	
			MS/283	IA/169	ID/140	
				MS/317	RI/160	
n=6	n=6	n=6	n=8	n=9		n=13

N = 14 different states responding

B. State Trends Across 1988-1993

	<u>1988</u>	<u>1989</u>	<u>1990</u>	<u>1991</u>	<u>1992</u>	<u>1993</u>
AZ	80	88				
FL	76	95	88	92	85	42
ID			82	78	107	140
IA				167	169	165
LA					111	106
MI	159	163	169	157	155	120
MS	449	505	299	283	317	329
NJ						39
NM	71	78	75	81	46	42
OK						41
RI						160
SD	41	40	41	43	49	55
VT				134	149	163
WV						219

N = 14 different states responding

3) Special adoption programs -- Research has shown that specifically focused programs can raise adoption planning and finalization rates (Abramson, 1991; Wimmer & Richardson, 1990). Five states, Delaware, New Jersey, Oklahoma, South Carolina and Tennessee, reported having three programs. Seven states reported two programs, eight had one program, and seven cited no special adoption programs. Regarding the six focus states, Idaho cited no programs; Louisiana, Mississippi, New Mexico and Vermont each reported just one; and Florida reported two programs. (See Table IV-3 for all responses.)

The 37 total programs cited were of two general types: recruitment strategies and efforts to affect the adoption process. Recruitment programs were usually targeted at families of color or families for children with special needs. Process programs were more varied. The one common type was a registry of waiting children. Registries, whether local, state or national, facilitate the stage of the adoption process when families approved for adoption are looking for a child to be referred to join their family.

Some cited programs overlap both recruitment and process effects. For example, foster-adopt programs recruit foster families open to adopting if/when their foster child becomes available for adoption. These are process efforts in that foster placements are an early stage of the substitute care process, but they are also recruitment strategies in that the families are selected for their commitment to ultimately becoming adoptive parents. Research conducted by Barth, Courtney & Berry (1994) predicts that foster-adopt placements result in timely adoptions.

Table IV-3: Adoption Programs Reported by States1 Program Reported

Indiana	Recruitment of families for children with special needs
Iowa	Permanency planning regional specialists
Kentucky	Special Needs Adoption Program (SNAP)
Louisiana	Fost-adopt program
Mississippi	One Church/One Child black adoptive family recruitment
New Mexico	Fost-adopt program
Vermont	Paralegal staff in permanency planning unit
West Virginia	State registry of waiting children
n=8	

2 Programs Reported

Alabama	One Church/One Child black adoptive family recruitment Recruitment of rural families for children with special needs
Arizona	Timely Termination of parental rights project Fost-adopt program
Florida	One Church/One Child black adoptive family recruitment Home Finders - adoption workers for hard to place children
Georgia	One Church/One Child black adoptive family recruitment Minority recruitment collaboration with private agency
Michigan	Department policy support for adoption option Contracts with private agencies offering financial incentives for timely adoptive placements
Nebraska	Intrastate registry of waiting children Fost-adopt placements
Rhode Island	Collaboration with Urban League for recruitment of families Statewide registry of waiting children
n=7	

Table IV-3, continued

3 Programs Reported

Delaware	One Church/One Child black adoptive family recruitment African American recruiters National registry of waiting children
New Jersey	Adoption subsidies Treatment homes to prepare children for adoption National registry of waiting children
Oklahoma	One Church/One Child black adoptive family recruitment Waiting child television promotions Matching parties for waiting children and adoptive families
South Carolina	Media campaign to recruit adoptive families Church volunteer "buddies" for adoptive families in process Recruitment of rural adoptive families
Tennessee	Statewide registry of waiting children African American adoptive family recruitment One Church/One Child black adoptive family recruitment

n=5

0 Programs Reported

Alaska	Missouri	South Dakota	Wyoming
Idaho	North Dakota	Wisconsin	

n=7

Dependent Variables

The purpose of this study concerned the use of adoption for permanency for children in foster care. Two characteristics of the foster care system were studied.

1) Adoption plan rate -- This answers the question, What percent of children in foster care plan to be adopted? For 1988 through 1993, states were asked to report the number of children identified for or in process of having their birthparents' rights terminated, and the number of children who had completed the termination of parental

rights process. These two figures together, when compared to the state's total year-end foster care population, give the percentage rate of that population which has plans to be adopted.

APWA reported that in 1990 adoption was the permanency plan for 15% of the foster care population across the country (Committee on Ways and Means, U.S. House of Representatives, 1994, p. 653). Slightly higher than that finding, the survey of this study showed an average adoption plan rate of 19% in years 1992 and 1993, the years with the largest number of responses (nine and ten, respectively) (Table IV-4).

Rates in 1992 ranged from Missouri at 5% (representing 117 kids per percentage point) to New Mexico at 38% (17 kids per percentage point). The 1993 rates again ranged from Missouri at 4% (126 kids per percentage point) to New Mexico at 35% (17 kids per percentage point). Across the years, states' rates were remarkably stable.

Trends varied of the six focal states, which have a comparatively wide foster care population range, from Idaho at under 1000 children in 1993 to Florida at about 9000. Over the six studied years, Mississippi hit a high rate in 1990 of 20% of its foster care population identifying adoption as their permanency plan; the other years fluctuated between 15% and 17%, slightly above the national average. Louisiana reported for five years and was consistently above the average, attaining a high of 24% in 1989 and 20% - 21% in the other years.

Florida and Vermont both provided data for the last three surveyed years. Florida, 21% to 31%, was not only consistently above the national average, it also consistently increased its adoption planning rate. Vermont hovered below the average, ranging from 11% to 14% of its foster care population identifying adoption as their permanency plan. Idaho and New Mexico reported only for the last two surveyed years and were an extreme contrast. At the low end was Idaho, 5% both years, contrasted with New Mexico topping out at 38% in 1992 and 35% in 1993.

Table IV-4: Percentage of Foster Care Population Whose Permanency Plan is Adoption

A. Annual State Rankings For 1988-1993

<u>1988</u>	<u>1989</u>	<u>1990</u>	<u>1991</u>	<u>1992</u>	<u>1993</u>
MS/15%	MS/17%	MS/20%	VT/12%	MO/5%	MO/4%
	LA/24%	LA/21%	MS/16%	ID/5%	ID/5%
			FL/21%	VT/11%	VT/14%
			LA/21%	MS/16%	MS/16%
			WI/22%	LA/20%	WI/18%
				WI/20%	SC/19%
				FL/26%	LA/20%
				KY/29%	KY/23%
				NM/38%	FL/31%
					NM/35%
				sample mean 19%	sample mean 19%
n=1	n=2	n=2	n=5	n=9	n=10

N = 10 different states responding

B. State Trends Across 1988-1993

	<u>1988</u>	<u>1989</u>	<u>1990</u>	<u>1991</u>	<u>1992</u>	<u>1993</u>
FL				21%	26%	31%
ID					5%	5%
KY					29%	23%
LA		24%	21%	21%	20%	20%
MS	15%	17%	20%	16%	16%	16%
MO					5%	4%
NM					38%	35%
SC						19%
VT				12%	11%	14%
WI				22%	20%	18%

N = 10 different states responding

2) Adoption finalizations -- The corresponding number of actual adoption finalizations of children in foster care indicates states' relative success at achieving termination of parental rights and recruiting adoptive families. Merely having a goal of adoption is not permanency; a legally finalized adoption is real permanency.

According to data from APWA, the 1990 national rate of adoption finalizations for foster children with an adoption plan was 24%. The current findings were similar (see Table IV-5). Years 1991 through 1993 had the highest number of respondents, at rates averaging 21% each year with seven states reporting, nine states reporting, and nine states reporting, respectively. During those years, Missouri, at 8%, 7% and 4%, reported the lowest rates, while Idaho and Vermont reported the highest rates, in the mid- to upper-30% range.

Among the six most complete respondents, Mississippi was the only state to provide finalization data for all six years. Louisiana reported for five years, Vermont for four years, and Florida, Idaho and New Mexico for two years each.

Idaho and Vermont were in a class of their own. Their finalization rates in the 30% - 40% range were well above the national rate. Louisiana made much needed and steady progress from 1989 to 1993, settling in at the national rate of 24%. Mississippi's finalization rate went from low, 8% in 1988, to lower, only 4% in 1989, then climbed to 19% by 1991, before falling to 16% in 1992 and 1993. New Mexico, only reporting for 1992 and 1993, was consistent, but at only about half the national finalization rate. Florida's rates, reported only for 1991 and 1992, held steady at slightly above the national rate.

Table IV-5: Percentage of Children with an Adoption Plan Who Attain a Finalized Adoption

A. Annual State Ranking For 1988-1993

<u>1988</u>	<u>1989</u>	<u>1990</u>	<u>1991</u>	<u>1992</u>	<u>1993</u>
MS/8%	MS/4%	LA/12%	MO/8%	MO/7%	MO/4%
	LA/13%	MS/15%	WI/15%	NM/12%	NM/14%
		VT/38%	KY/18%	KY/15%	KY/16%
			LA/18%	MS/16%	MS/16%
			MS/19%	WI/16%	WI/19%
			FL/27%	LA/21%	LA/24%
			VT/39%	FL/28%	SC/27%
				VT/34%	ID/33%
				ID/36%	VT/34%
			sample mean 21%	sample mean 21%	sample mean 21%
n=1	n=2	n=3	n=7	n=9	n=9

N = 10 different states responding

B. State Trends Across 1988-1993

	<u>1988</u>	<u>1989</u>	<u>1990</u>	<u>1991</u>	<u>1992</u>	<u>1993</u>
FL				27%	28%	
ID					36%	33%
KY				18%	15%	16%
LA		13%	12%	18%	21%	24%
MS	8%	4%	15%	19%	16%	16%
MO				8%	7%	4%
NM					12%	14%
SC						27%
VT			38%	39%	34%	34%
WI				15%	16%	19%

N = 10 different states responding

Relationship Between Variables

Trends of the quantitative variables studied can be compared. That is, variations in state caseload levels (an independent variable) may correspond to variations in rates of adoption planning and finalizations (dependent variables). An inverse relationship was hypothesized between caseload sizes, and rates of adoption planning and finalizations. That is, as caseloads increased, adoption planning and finalization would decrease. Likewise, decreased caseloads would enable states to increase adoption planning and finalization. Variable comparisons of the six focal states are shown in Figure 4.1.

Although Mississippi workers' caseloads were always high, between 1989 and 1990 caseload levels dropped dramatically -- from 505 kids per worker to 299, a 41% decrease. This corresponded with an 18% increase in adoption plans and a whopping 275% increase in the rate of finalizing those plans.

Conversely, caseloads in Idaho increased 79% over two years, spread almost evenly, from 78 children per worker in 1991 to 140 children per worker in 1993. The accompanying adoption planning and finalization rates for 1991-1992 are unknown, but from 1992 to 1993 the planning rate remained constant and finalizations dropped 8%.

Trends completely contrary to the hypothesized inverse relationship were never found, that is, an increase in caseload levels never compared to increases in both plans and finalizations, nor did decreases occur across all three variables. However, Figure 4.1 shows that trends in planning for adoption did not always match trends in finalizing adoptions for the foster care population planning to be adopted. States were internally inconsistent between these two factors. High rates of adoption planning did not necessarily equate with high rates of adoption finalizations, and vice versa low planning rates did not always equate with low finalization rates.

That is, New Mexico, in the two years it reported, had the highest planning rates -- in the mid- to upper-30% range. But it had the lowest finalization rates -- between 10% and 15%. New Mexico was making plans for adoptions at more than twice the national rate, but succeeded in finalizing adoptions at only half the national rate. In other words, children in New Mexico's foster care, relative to other states,

had a good chance of identifying adoption as their permanency plan, but low odds of actually being legally adopted. Idaho was the exact opposite with low planning rates and high finalization rates. Missouri had low rates in both categories. South Carolina had slightly higher rates in both categories.

These findings are thus not conclusive regarding a correlation between caseload trends and use of adoption for permanency.

Figure 4.1: Comparative Variable Trends by State For 1988-1993

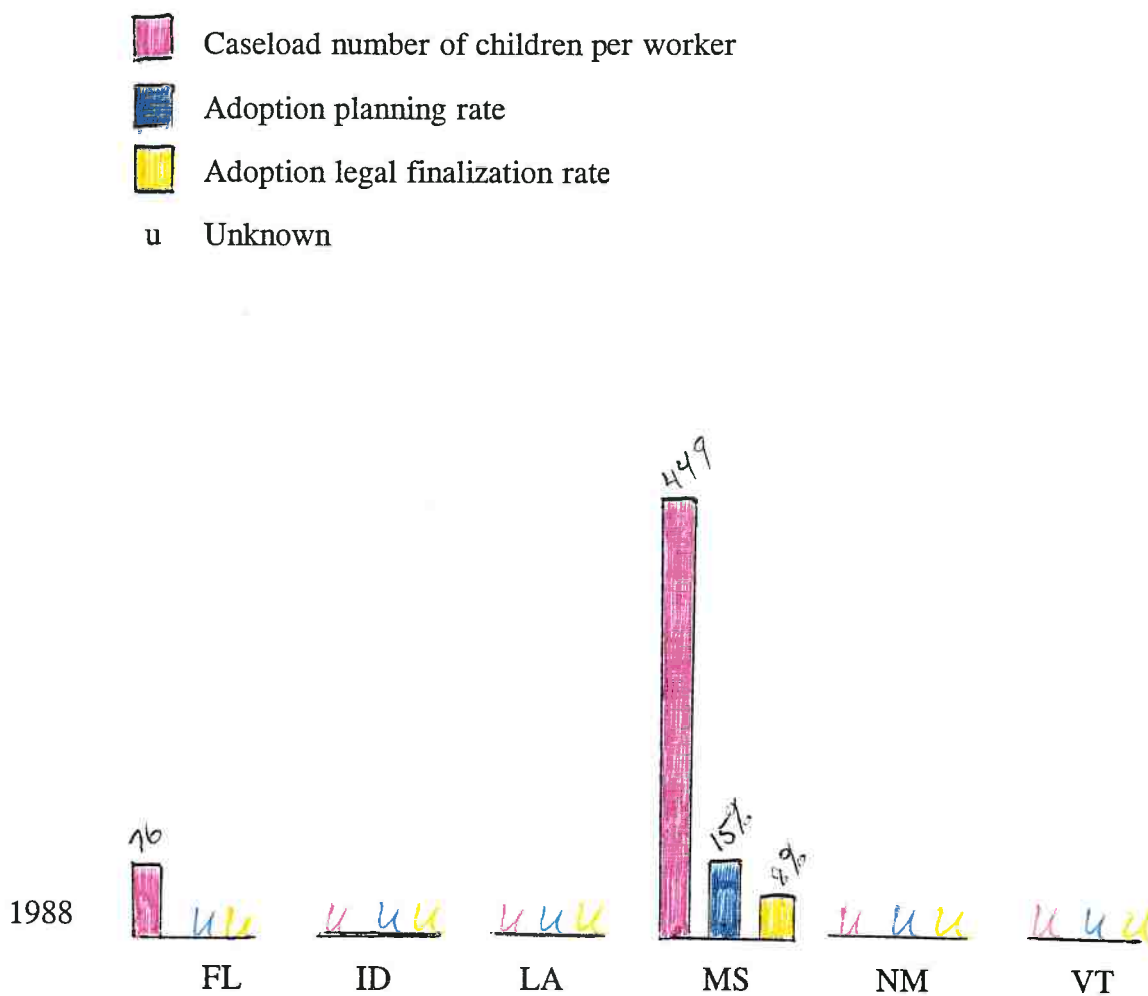
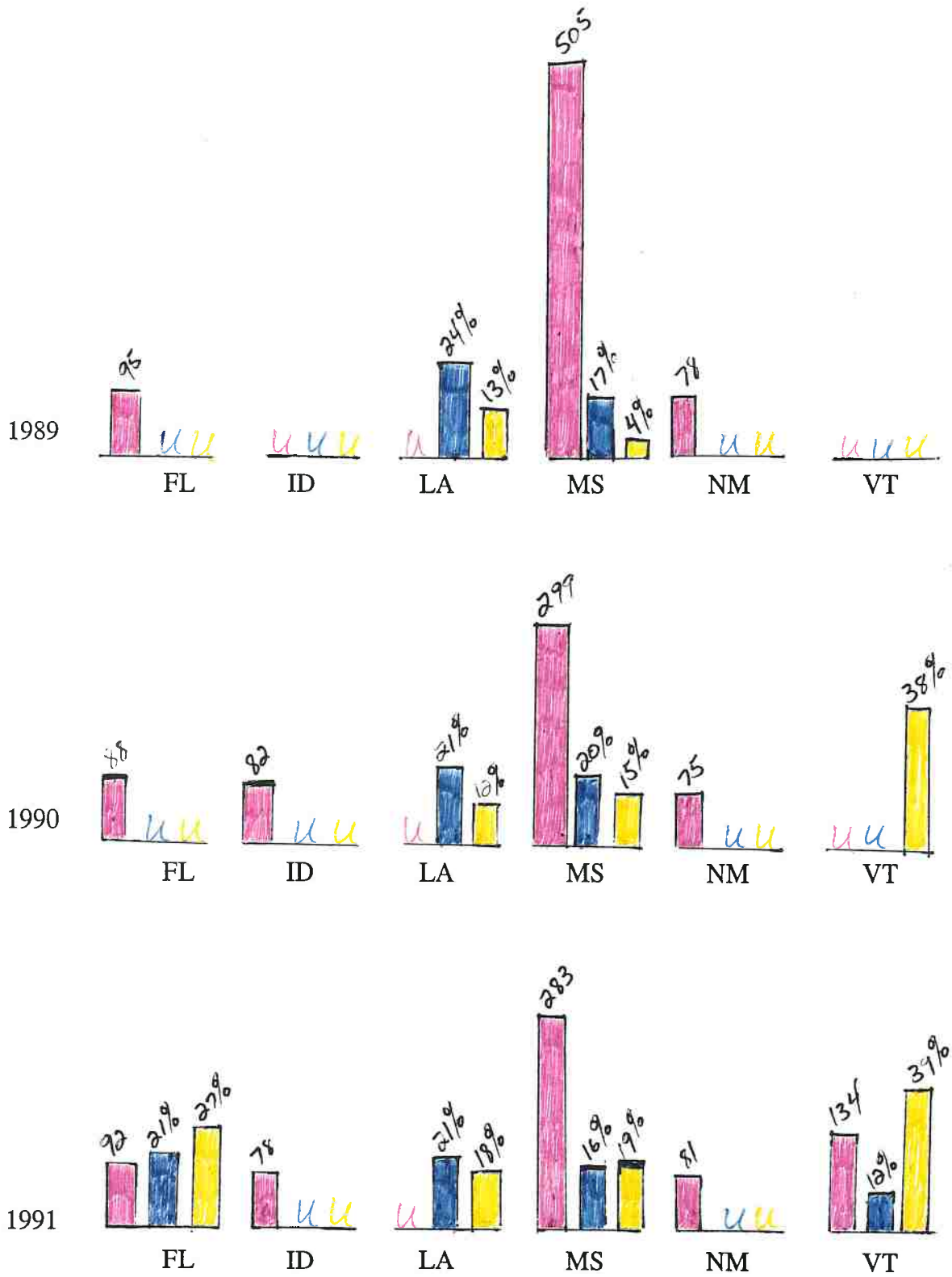
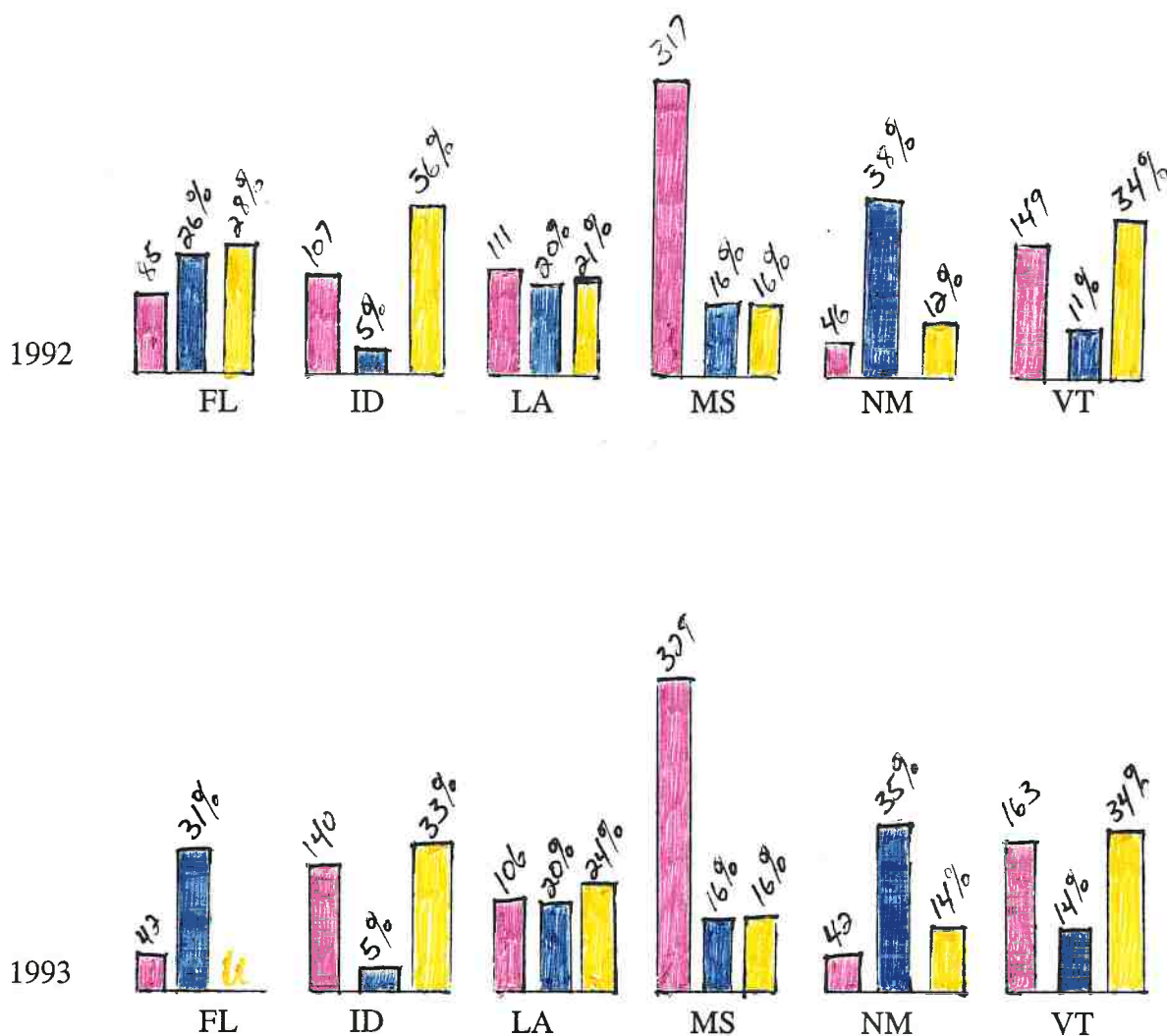


Figure 4.1, continued





Summary

While the survey return rate was satisfactory, responses were not complete. Data that were supplied, though, illustrated wide variance between states in the use of adoption as a permanency plan for children in foster care.

Three variables were studied to assess their impact on adoption within the foster care population.

1) Type of administration, county or state, was inconclusive since respondents were overwhelmingly one type (state). 2) At least once over the years 1988 - 1993, South

Dakota, New Jersey, Oklahoma and New Mexico achieved a worker caseload close to the optimal standard of 40 children maximum per worker. 3) Adoption programs reported by the states included adoptive family recruitment and adoption process efforts. States are especially strategizing to recruit adoptive families of color and families for children with special needs. Waiting children registries are common process efforts. Other process programs were unique to the particular state.

New Mexico by far currently makes adoption plans for a larger portion of its foster care than any other responding state. Responses in 1993 to this variable ranged from 4% to 35%, with a mean of 19%. In comparison, the national rate is 15%. Idaho and Vermont have the highest rate of finalizing adoptions for children with adoption identified as their permanency plan. Again, there was a wide range of survey responses in 1993, 4% to 34%, with a mean of 21%. The national rate is 24%.

CHAPTER V

DISCUSSION

Introduction

The lack of uniform, continuous data collection practices throughout each state made it difficult to conduct a thorough assessment of states' commitment to the use of adoption as an expedient permanency plan for children in foster care. Incomplete data precludes generalizing the present research findings. Nevertheless, support for the accuracy of the limited findings that were evidenced can be inferred from similarities to findings from previous studies.

Commitment to Adoption as Permanency

This research, at a sample mean of 19% in 1993, indicated more frequent identification of adoption as a permanency plan than previous APWA findings that 15% of children in foster care in 1990 have plans to be adopted. Plans are only the initial step, however. Of further interest is the rate of attaining finalized adoptions for children intending to be adopted. Data from 1990 published by APWA shows that the national adoption finalization rate for this group of children was 24%. The current research found a 1993 sample mean rate of 21%.

Although the 1993 aggregate rates of adoption planning and finalizations found in the current research were similar, states were internally inconsistent between these two factors. High rates of adoption planning did not necessarily equate with high rates of adoption finalizations, and vice versa low planning rates did not always equate with low finalization rates.

The interplay of three factors may explain much of this inconsistency: 1) departmental emphasis on family preservation and reunification programs to the exclusion of adoption, 2) barriers to termination of parental rights (TPR), and 3) lack of adoption supports and services. A departmental emphasis on reunification will

reduce the use of adoption as the identified permanency plan for children in foster care. This small group may then find it easier to be adopted, resulting in a high finalization rate for children with an identified plan of adoption. Alternatively, department policy may place into foster care only children from imminently dangerous family circumstances, for whom adoption is the obvious, probable permanency plan, thus raising the adoption plan rate. But this includes many hard to place children, a population likely to have a lower adoption finalization rate.

Other states may value the option of adoption and make adoption plans for a large portion of the foster care population, but barriers are encountered when adjudicating TPR. TPR is a critical action in the adoption process, one that can be foiled by several parties. Some conservative judges and social workers believe that the birth family unit is not to be divided except in very extreme circumstances, and they effectively quash TPR efforts. A belief by judges or social workers that a particular child is unadoptable may also stymie TPR efforts.

A parent can stall TPR efforts through repeated eleventh hour minimum performance achievements. For example, the mother who has not contacted her children in foster care for a year may visit the week before a TPR hearing, claim she has turned her life around, and demand -- and receive -- another chance to raise her children.

Finalization rates may also be held low if the state has few supports and services to encourage families that adoption is a feasible life choice. So-called special needs or hard to place children are a growing segment of waiting children and adoptive families need ongoing help to succeed in parenting. Financial subsidies help, as do support groups, respite care, medical and therapy services. Offering these may result in higher rates of finalized adoptions.

Variables That Increase Adoption

Only a handful of survey respondents indicated a worker caseload level approaching 40 children per worker. Despite repeated proof that low caseloads effectively move children into permanency, the practice is not widely used. Unfortunately, few states are so committed to children that they invest the required resources in this era of cutthroat social services budget competition.

The exception is when state or local jurisdictions are court-ordered to improve child welfare services, as in Kansas, New Mexico, Louisiana, District of Columbia, Utah, Kansas City, New York City, Milwaukee, Philadelphia and others (Stein, Callaghan, McGee & Douglas, 1990; Pierce, 1992). Easing caseload burdens is a basic system design element in improvement of service delivery to children and has been incorporated in several foster care system reformations.

For example, New Mexico child welfare policy now includes a statewide caseload limit of 35 children maximum per worker. The state also uses a bifurcated staff design with one pool of foster care workers for children until they are free for adoption, and a second pool of adoption workers for children free for adoption or in adoptive placements (Stein, Callaghan, McGee & Douglas, 1990).

The current research provided data only from New Mexico that corresponded reasonable worker caseloads with both adoption planning rates and finalization rates. In that state, thus far adoption planning rates are now above average, but finalization rates are still below average. Florida also reports a good caseload level corresponding with a high adoption planning rate; the finalization rate, however, is unknown. This data is insufficient to conclude a correlation between caseload levels and use of adoption as permanency for children in foster care.

Adoption programs also did not consistently correspond to adoption rates. Idaho reported no special programs, yet had a comparatively high 1993 finalization rate (33%) among the six states. Vermont was the only state with a higher rate, at 34%,

reporting one program which stressed the legally proper documentation of cases presented for termination of parental rights and adoption by hiring a paralegal in the permanency planning unit.

Louisiana and New Mexico both reported foster-adopt programs whereby foster parents were encouraged to adopt children in their care who became available for adoption. Their finalization rates, however, were very different. Louisiana's 1993 rate was at the national rate of 24%; New Mexico reported a 1993 finalization rate of only 14%.

Programs cited by Florida and Mississippi were all specialized recruitment efforts. The one adoption program cited by Mississippi focused on recruitment of minority adoptive families. That state's 1993 finalization rate was a below average 16%. Florida efforts were targeted to placements of African American and special needs children in foster care. The corresponding finalization rate of 28%, as of 1992, was modestly higher than the national average.

These variances could be due to differences in administration within the states. For example, recruitment program directors may command varying levels of respect within their local communities of color. Also, since this was an open-ended question on the survey, it is also possible that states did not fully disclose programs offered in that state. Some interesting innovative programs were identified that warrant closer inspection. These include the treatment homes for preparing foster children to be adopted in New Jersey, Vermont's hiring of a paralegal to properly document cases for termination of parental rights, and the financial incentives offered in Michigan to private agencies for timely adoptive placements of foster children.

Commitment to Data Collection

A prominent learning from this research is that states do not know the status of their foster care systems. Of 51 jurisdictions surveyed on basic data that P.L. 96-272 instructs the states to keep, only 27 responded, and of those only five provided

sufficient data to study the research question. The type of information requested should have been already collected and easy to retrieve; states should have been reasonably able to easily and quickly fill out the entire survey.

It is clear from repeated lamentations of other researchers that this researcher's experience of difficulty in gathering data is not unique (APWA, cited in U.S. House of Representatives, 1994; Barth, 1994; Pecora, Whittaker & Maluccio, 1992; Pierce, 1992). Lack of complete, accurate and accessible foster care and adoption data is inexcusable in an advanced technological nation such as the U.S. that claims to care about children and family values. Until states get serious about knowing who are the children in foster care and what are their needs, the kids will not be well served. Kids will continue to lose opportunities for permanency and stable childhoods.

Limitations

As stated above, incomplete survey responses limit the generalizability of this research. Respondents did not include the five states with the largest foster care populations, which account for half of the national total -- California, New York, Illinois, Pennsylvania and Ohio. In addition, no state provided all requested information, resulting in gaps that limited broad comparisons.

Diversity among states also limits generalizability. It cannot be assumed that planning strategies and adoption programs which succeed in urban states are transferable to rural states. Likewise, efforts that succeed in recruiting white adoptive parents are not necessarily transferable to communities of color (Gilles, 1991).

In addition, system participants' attitudes and myths around adoption affect commitment and this research made no attempt to study those.

Implications for Social Work Practice

Clearly, social workers in the foster care system must consider each family individually to determine the permanency plan which suits the best interests of the child in foster care. Priority must be given to the right of each child to a secure, stable

childhood. Adults -- parents -- currently have most of the legal clout in the foster system today. Social workers can be effective system change agents to make children the priority instead.

Early, accurate identification of children for whom adoption is an appropriate permanency is crucial. Social workers also must work at improving and disseminating the tools for these assessments. Katz's matrix, discussed in the Literature Review, is an excellent example.

And, of course, social workers need to advocate for the financial supports for the services and supports needed by foster care families, adoptive families and the children. The current political climate does not bode well for social services budgets. Administrators must use funds wisely and effectively.

Summary

States' commitment to the use of adoption as a permanency plan for children in foster care varies widely. True commitment to adoption as a permanency plan demands sufficient resources throughout the process. There are three distinct process components: 1) adoption planning, 2) terminating parental rights (TPR), and 3) finalized adoptions, i.e. post-adoption.

It does no good to make adoption plans without completing TPR and recruiting appropriate adoptive families. Similarly, an active and effective adoptive family recruitment program will fully use its potential only when the planning and TPR processes succeed in appropriately freeing children for adoption. Situated in the middle, poor TPR processing negates the effects of good planning strategies and successful family recruitment efforts.

None of the responding states submitted evidence of commitment to adoption through all three components. Depending on the state of residence, children in foster care may have a good chance of planning for adoption but a poor chance of attaining adoption. In other states a child has a poor chance of being identified for adoption, but

if s/he is identified s/he has a good chance of being adopted. In still other states, commitment to adoption is unknown because information is unavailable or at least not made public.

This inconsistency and system haphazardness is a grave disservice to children in need of permanency. It is imperative that future practice include the standardized collection and study of foster care data. To properly serve children, we must know who is in foster care, why they are in care, what is the best plan for their permanent care, and how is the plan to be implemented, including adoption options.

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Appendix A

Sample Demographics
(1990 Census Data)

<u>State</u>	<u>Population</u>	<u>Nat'l Rank</u>	<u>Pop'n % of Color</u>	<u>Pop'n % Rural</u>	<u>Median Househ'd Income</u>
Alabama	4,040,587	22	26.4%	40%	\$23,597
Alaska	550,043	49	24.5%	33%	\$41,408
Arizona	3,665,228	24	19.2%	12%	\$27,540
Arkansas	2,350,725	33	17.3%	46%	\$21,147
California	29,760,021	1	31.0%	7%	\$35,798
Colorado	3,294,394	26	12.0%	18%	\$30,140
Connecticut	3,287,116	27	16.3%	21%	\$41,721
Delaware	666,168	46	19.7%	27%	\$34,875
Florida	12,937,926	4	16.9%	15%	\$27,483
Georgia	6,478,216	11	29.0%	37%	\$29,021
Hawaii	1,108,229	41	66.6%	11%	\$38,829
Idaho	1,006,749	42	5.6%	43%	\$25,257
Illinois	11,430,600	6	21.7%	15%	\$32,252
Indiana	5,544,159	14	9.4%	35%	\$28,797
Iowa	2,776,775	30	5.0%	26%	\$26,229
Kansas	2,477,574	32	9.9%	31%	\$27,291
Kentucky	3,685,296	23	8.0%	48%	\$22,534
Louisiana	4,219,973	21	32.7%	32%	\$21,949
Maine	1,227,928	38	1.6%	55%	\$27,854
Maryland	4,781,468	19	29.0%	19%	\$39,389
Massachusetts	6,016,425	13	10.2%	16%	\$36,952
Michigan	9,295,297	8	16.6%	29%	\$31,020
Minnesota	4,375,099	20	5.6%	30%	\$30,909
Mississippi	2,573,216	31	36.5%	53%	\$20,136
Missouri	5,117,073	15	12.3%	31%	\$26,362
Montana	799,065	44	7.3%	47%	\$22,988
Nebraska	1,578,385	36	6.2%	34%	\$26,016
Nevada	1,201,833	39	15.7%	12%	\$31,011
New Hampshire	1,109,252	40	2.0%	49%	\$36,329
New Jersey	7,730,188	9	20.7%	11%	\$40,927
New Mexico	1,515,069	37	24.4%	27%	\$24,087
New York	17,990,455	2	25.6%	16%	\$32,965
North Carolina	6,628,637	10	24.4%	50%	\$26,647
North Dakota	638,800	47	5.4%	47%	\$23,213
Ohio	10,847,115	7	12.2%	26%	\$28,706
Oklahoma	3,145,585	28	17.9%	32%	\$23,577
Oregon	2,842,321	29	7.2%	30%	\$27,250

State	Population	Nat'l Rank	Pop'n % of Color	Pop'n % Rural	Median Househ'd Income
Pennsylvania	11,881,643	5	11.5%	31%	\$29,069
Rhode Island	1,003,464	43	8.6%	14%	\$32,181
South Carolina	3,486,703	25	31.0%	45%	\$26,256
South Dakota	696,004	45	8.4%	50%	\$22,503
Tennessee	4,877,185	17	17.0%	39%	\$24,807
Texas	16,986,510	3	24.8%	20%	\$27,016
Utah	1,722,850	35	8.2%	13%	\$29,470
Vermont	562,758	48	1.4%	68%	\$29,792
Virginia	6,187,358	12	22.6%	31%	\$33,328
Washington	4,866,692	18	11.5%	24%	\$31,183
West Virginia	1,793,477	34	5.8%	64%	\$20,795
Wisconsin	4,891,769	16	7.8%	34%	\$29,442
Wyoming	453,588	50	5.8%	35%	\$27,096

Appendix B
Survey Instrument

State _____

1. Are you a state or county administered system?

_____ State

_____ County

2. Unduplicated number of children in foster care -- total at end of year

_____1988

_____1990

_____1992

_____1989

_____1991

_____1993

3. Percentage of children returning home within six months

_____1988

_____1990

_____1992

_____1989

_____1991

_____1993

4. Number of children in foster care with plans for termination of parental rights (TPR) or other severance preparatory to adoption -- total at end of year

_____1988

_____1990

_____1992

_____1989

_____1991

_____1993

5. Number of post-TPR children in foster care -- total at end of year

_____1988

_____1990

_____1992

_____1989

_____1991

_____1993

6. Number of adoption finalizations of children under state or county guardianship (foster care) -- total at end of year

_____1988	_____1990	_____1992
_____1989	_____1991	_____1993

7. Number of full time equivalent (FTE) adoption positions at state level

_____1988	_____1990	_____1992
_____1989	_____1991	_____1993

8. Number of full time equivalent (FTE) adoption positions at county/local level

_____1988	_____1990	_____1992
_____1989	_____1991	_____1993

9. Do you have purchase of service contracts with private agencies for recruitment of:

Foster families -- _____Yes _____No

Adoptive families -- _____Yes _____No

10. What programs exist in your state to expedite placement of foster care children in adoptive families (program name and short description)?

Appendix C

Abbreviations

Ad'n -- adoption

FC -- foster care

Final'd -- finalized

Final'ns -- finalizations

FTE -- full time equivalent

Pop'n -- population

Post-TPR -- the child's birth parents' rights have already been terminated

TPR -- termination of parental rights

W/ -- with

Formulas

1) Caseload of Kids per Worker =

$$\frac{\text{year-end foster care population}}{\# \text{ FTE state workers} + \# \text{ FTE local workers}}$$

2) Percentage of FC Pop'n with an Adoption Plan =

$$\frac{\# \text{ Kids w/ TPR plan} + \# \text{ Kids post-TPR}}{\text{year-end population}}$$

3) Percentage of Adoption Plans Finalized =

$$\frac{\# \text{ adoptions finalized}}{\# \text{ kids w/ TPR plans} + \# \text{ kids post-TPR} + \# \text{ ad'n final'ns}}$$

Appendix D

Alabama						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	4,417	4,483	4,397	4,340	4,117	3,907
Undup FC Population	7,552	7,713	7,660	7,429	7,106	6,475
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids	283	285	333	355	310	303
% FC Pop'n is Post-TPR	6.41%	6.36%	7.57%	8.18%	7.53%	7.76%
% with Adoption Plan						
# Adoptions Finalized	169	145	150	182	192	151
% Adoption Plans Final'd						
% Waiting Kids Final'd	37.39%	33.72%	31.06%	33.89%	38.25%	33.26%
<i>Program Data</i>						
# Adoption Programs						2
# FTE State Workers						
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						N
Alaska						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population						1,405
Undup FC Population						3,588
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized						91
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						
# FTE State Workers						
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						

Appendix D

Arizona						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	3,057	3,338	3,589			
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% With Adoption Plan						
# Adoptions Finalized		188	351	225	248	294
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						2
# FTE State Workers	3	3	3	4	4	3
# FTE Local Workers	35	35	35	35	40	40
Caseload of Kids/Worker	80.4474	87.8421	94.4474	0	0	0
Private Contracts Yes/No						Y
Delaware						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population						
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids		103	101	89	77	87
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized		43	62	48	46	31
% Adoption Plans Final'd						
% Waiting Kids Final'd		29.45%	38.04%	35.04%	37.40%	26.27%
<i>Program Data</i>						
# Adoption Programs						3
# FTE State Workers	1	1	1	2	2	2
# FTE Local Workers	6	6	6	6	6	6
Caseload of Kids/Worker						
Private Contracts Yes/No						

Appendix D

Florida						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	7,658	9,565	9,925	10,370	9,815	8,985
Undup FC Population						
# of Kids with TPR Plan				1,040	1,335	1,354
% FC Pop'n w/ TPR Plan				10.03%	13.60%	15.07%
# Post-TPR FC Kids			854	1,087	1,222	1,399
% FC Pop'n is Post-TPR			8.60%	10.48%	12.45%	15.57%
% with Adoption Plan				20.51%	26.05%	30.64%
# Adoptions Finalized			635	780	988	
% Adoption Plans Final'd				26.83%	27.87%	
% Waiting Kids Final'd			42.65%	41.78%	44.71%	
<i>Program Data</i>						
# Adoption Programs						2
# FTE State Workers	3	3	3	3	3	3
# FTE Local Workers	98	98	110	110	112	210
Caseload of Kids/Worker	75.8218	94.703	87.8319	91.7699	85.3478	42.1831
Private Contracts Yes/No						Y
Georgia						
County Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population				8,997	14,958	14,965
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids	1,442	1,565	1,749			
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized	341	385	405	377	575	806
% Adoption Plans Final'd						
% Waiting Kids Final'd	19.13%	19.74%	18.80%			
<i>Program Data</i>						
# Adoption Programs						2
# FTE State Workers						9
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						Y

Appendix D

Idaho						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population			822	778	962	978
Undup FC Population						
# of Kids with TPR Plan					40	50
% FC Pop'n w/ TPR Plan					4.16%	5.11%
# Post-TPR FC Kids				20	50	50
% FC Pop'n is Post-TPR				2.57%	5.20%	5.11%
% with Adoption Plan					9.36%	10.22%
# Adoptions Finalized				51	50	50
% Adoption Plans Final'd					35.71%	33.33%
% Waiting Kids Final'd				71.83%	50.00%	50.00%
<i>Program Data</i>						
# Adoption Programs						0
# FTE State Workers	1	1	1	2	2	1
# FTE Local Workers	9	9	9	8	7	6
Caseload of Kids/Worker			82.2	77.8	106.889	139.714
Private Contracts Yes/No						N
Indiana						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	6,148	6,196	7,224	8,126	8,598	8,900
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids	684	490	550	552	536	552
% FC Pop'n is Post-TPR	11.13%	7.91%	7.61%	6.79%	6.23%	6.20%
% with Adoption Plan						
# Adoptions Finalized	289	238	196	212	313	237
% Adoption Plans Final'd						
% Waiting Kids Final'd	29.70%	32.69%	26.27%	27.75%	36.87%	30.04%
<i>Program Data</i>						
# Adoption Programs						1
# FTE State Workers					1	1
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						N

Appendix D

Iowa						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	3,549	3,674	3,771	4,018	3,915	3,599
Undup FC Population	7,427	7,743	7,540	7,430	8,775	7,471
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized	205	311	306	290	235	138
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						1
# FTE State Workers	2	2	2	2	1.5	1.5
# FTE Local Workers				22	21.6	20.35
Caseload of Kids/Worker				167.417	169.481	164.714
Private Contracts Yes/No						Y
Kentucky						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population			3,238	3,084	3,109	3,320
Undup FC Population					6,966	6,870
# of Kids with TPR Plan	234	326	298	236	352	214
% FC Pop'n w/ TPR Plan					11.32%	6.45%
# Post-TPR FC Kids	476	309	331	304	538	536
% FC Pop'n is Post-TPR					17.30%	16.14%
% with Adoption Plan					28.62%	22.59%
# Adoptions Finalized				121	160	138
% Adoption Plans Final'd				18.31%	15.24%	15.54%
% Waiting Kids Final'd				28.47%	22.92%	20.47%
<i>Program Data</i>						
# Adoption Programs						1
# FTE State Workers	7	7	7	7	7	7
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						N

Appendix D

Louisiana						
County Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	5,056	4,992	5,707	6,065	6,033	5,587
Undup FC Population						
# of Kids with TPR Plan		563	430	468	505	485
% FC Pop'n w/ TPR Plan		11.28%	7.53%	7.72%	8.37%	8.68%
# Post-TPR FC Kids		640	761	809	718	647
% FC Pop'n is Post-TPR		12.82%	13.33%	13.34%	11.90%	11.58%
% with Adoption Plan		24.10%	20.87%	21.06%	20.27%	20.26%
# Adoptions Finalized		183	164	280	319	367
% Adoption Plans Final'd		13.20%	12.10%	17.98%	20.69%	24.48%
% Waiting Kids Final'd		22.24%	17.73%	25.71%	30.76%	36.19%
<i>Program Data</i>						
# Adoption Programs						1
# FTE State Workers					4.5	4.5
# FTE Local Workers			44	51	50	48
Caseload of Kids/Worker					110.697	106.419
Private Contracts Yes/No						Y
Michigan						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	9,917	10,241	10,989	11,531	11,356	10,632
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids	1,609	1,836	2,128	2,466	2,821	2,605
% FC Pop'n is Post-TPR	16.22%	17.93%	19.36%	21.39%	24.84%	24.50%
% with Adoption Plan						
# Adoptions Finalized	927	995	1,222	1,320	1,680	1,959
% Adoption Plans Final'd						
% Waiting Kids Final'd	36.55%	35.15%	36.48%	34.87%	37.33%	42.92%
<i>Program Data</i>						
# Adoption Programs						2
# FTE State Workers	9	9	9	14	14	14
# FTE Local Workers	53.5	54	56	59.5	59.5	74.5
Caseload of Kids/Worker	158.672	162.556	169.062	156.884	154.503	120.136
Private Contracts Yes/No						Y

Appendix D

Mississippi						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	2,694	3,030	2,991	2,830	3,169	3,293
Undup FC Population						
# of Kids with TPR Plan	303	331	402	307	370	408
% FC Pop'n w/ TPR Plan	11.25%	10.92%	13.44%	10.85%	11.68%	12.39%
# Post-TPR FC Kids	107	192	184	132	128	124
% FC Pop'n is Post-TPR	3.97%	6.34%	6.15%	4.66%	4.04%	3.77%
% with Adoption Plan	15.22%	17.26%	19.59%	15.51%	15.71%	16.16%
# Adoptions Finalized	35	24	102	104	94	98
% Adoption Plans Final'd	7.87%	4.39%	14.83%	19.15%	15.88%	15.56%
% Waiting Kids Final'd	24.65%	11.11%	35.66%	44.07%	42.34%	44.14%
<i>Program Data</i>						
# Adoption Programs						1
# FTE State Workers	6	6	4	4	4	4
# FTE Local Workers	0	0	6	6	6	6
Caseload of Kids/Worker	449	505	299.1	283	316.9	329.3
Private Contracts Yes/No						Y
Missouri						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population					11,659	12,557
Undup FC Population	8,442	9,416	10,253	11,160		
# of Kids with TPR Plan	3,010	3,204	3,519	252	241	227
% FC Pop'n w/ TPR Plan					2.07%	1.81%
# Post-TPR FC Kids				286	285	286
% FC Pop'n is Post-TPR					2.44%	2.28%
% with Adoption Plan					4.51%	4.09%
# Adoptions Finalized	24	39	22	44	42	24
% Adoption Plans Final'd				7.56%	7.39%	4.47%
% Waiting Kids Final'd				13.33%	12.84%	7.74%
<i>Program Data</i>						
# Adoption Programs						0
# FTE State Workers						
# FTE Local Workers	106.35		197	146		
Caseload of Kids/Worker						
Private Contracts Yes/No						Y

Appendix D

Nebraska						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	2,296	2,391	2,543	2,660	2,985	3,222
Undup FC Population						
# of Kids with TPR Plan	258	257	374	403	450	363
% FC Pop'n w/ TPR Plan	11.24%	10.75%	14.71%	15.15%	15.08%	11.27%
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized						
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						2
# FTE State Workers						
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						N
New Jersey						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	5,896	6,052	6,103	6,072	5,663	5,498
Undup FC Population	9,643	9,760	9,679	9,437	9,079	
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids					425	399
% FC Pop'n is Post-TPR					7.50%	7.26%
% with Adoption Plan						
# Adoptions Finalized	674	733	649	623	704	598
% Adoption Plans Final'd						
% Waiting Kids Final'd					62.36%	59.98%
<i>Program Data</i>						
# Adoption Programs						3
# FTE State Workers						16
# FTE Local Workers						125
Caseload of Kids/Worker						38.9929
Private Contracts Yes/No						N

Appendix D

New Mexico						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	1,638	1,803	1,644	1,778	1,734	1,713
Undup FC Population						
# of Kids with TPR Plan	445	421	471	491	531	503
% FC Pop'n w/ TPR Plan	27.17%	23.35%	28.65%	27.62%	30.62%	29.36%
# Post-TPR FC Kids					133	100
% FC Pop'n is Post-TPR					7.67%	5.84%
% with Adoption Plan					38.29%	35.20%
# Adoptions Finalized	86	120	98		87	98
% Adoption Plans Final'd					11.58%	13.98%
% Waiting Kids Final'd					39.55%	49.49%
<i>Program Data</i>						
# Adoption Programs						1
# FTE State Workers	8	8	8	8	8	8
# FTE Local Workers	15	15	14	14	30	33
Caseload of Kids/Worker	71.2174	78.3913	74.7273	80.8182	45.6316	41.7805
Private Contracts Yes/No						Y
North Dakota						
County Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population			393	695	759	
Undup FC Population	1,152	1,126	1,199	1,271	1,331	11,469
# of Kids with TPR Plan	71	62	67	57	61	38
% FC Pop'n w/ TPR Plan			17.05%	8.20%	8.04%	
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized						37
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						
# FTE State Workers						
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						

Appendix D

Oklahoma						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	1,844	1,915	2,040	2,259	2,416	2,375
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids						400
% FC Pop'n is Post-TPR						16.84%
% with Adoption Plan						
# Adoptions Finalized						330
% Adoption Plans Final'd						
% Waiting Kids Final'd						45.21%
<i>Program Data</i>						
# Adoption Programs						3
# FTE State Workers					8	8
# FTE Local Workers						50
Caseload of Kids/Worker						40.9483
Private Contracts Yes/No						N
Rhode Island						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	920	1,000	1,230	1,350	1,500	1,600
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized						163
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						2
# FTE State Workers						5
# FTE Local Workers						5
Caseload of Kids/Worker						160
Private Contracts Yes/No						Y

Appendix D

South Carolina						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	3,503	3,286	3,698	4,114	4,469	4,482
Undup FC Population		8,235	8,991	9,498	9,510	9,005
# of Kids with TPR Plan	464	560	706	767	857	802
% FC Pop'n w/ TPR Plan	13.25%	17.04%	19.09%	18.64%	19.18%	17.89%
# Post-TPR FC Kids						41
% FC Pop'n is Post-TPR						0.91%
% with Adoption Plan						18.81%
# Adoptions Finalized	308	308	354	294	325	316
% Adoption Plans Final'd						27.26%
% Waiting Kids Final'd						88.52%
<i>Program Data</i>						
# Adoption Programs						3
# FTE State Workers						
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						Y
South Dakota						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	538	516	529	476	535	606
Undup FC Population	1,355	1,343	1,381	1,349	1,366	1,424
# of Kids with TPR Plan	100	99	90	95	129	147
% FC Pop'n w/ TPR Plan	18.59%	19.19%	17.01%	19.96%	24.11%	24.26%
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized						
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						
# FTE State Workers	1	1	1	1	1	1
# FTE Local Workers	12	12	12	10	10	10
Caseload of Kids/Worker	41.38	39.69	40.69	43.27	48.64	55.0909
Private Contracts Yes/No						N

Appendix D

Tennessee						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	4,760	5,301	6,113	6,847	6,972	7,562
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized						
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						3
# FTE State Workers						5
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						N
Vermont						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population				938	1,044	1,138
Undup FC Population						
# of Kids with TPR Plan			5	15	25	48
% FC Pop'n w/ TPR Plan				1.60%	2.39%	4.22%
# Post-TPR FC Kids	65	83	94	100	95	112
% FC Pop'n is Post-TPR				10.66%	9.10%	9.84%
% with Adoption Plan				12.26%	11.49%	14.06%
# Adoptions Finalized	59	54	60	72	63	83
% Adoption Plans Final'd			37.74%	38.50%	34.43%	34.16%
% Waiting Kids Final'd	47.58%	39.42%	38.96%	41.84%	39.87%	42.56%
<i>Program Data</i>						
# Adoption Programs						1
# FTE State Workers	1	1	1	1	1	1
# FTE Local Workers	6	6	6	6	6	6
Caseload of Kids/Worker				134	149.143	162.571
Private Contracts Yes/No						N

Appendix D

West Virginia						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population	1,983		1,951	2,039	2,291	2,492
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids						541
% FC Pop'n is Post-TPR						21.71%
% with Adoption Plan						
# Adoptions Finalized	92	78	81	70	65	90
% Adoption Plans Final'd						
% Waiting Kids Final'd						14.26%
<i>Program Data</i>						
# Adoption Programs						1
# FTE State Workers			1	1	1	1
# FTE Local Workers						10.4
Caseload of Kids/Worker						218.596
Private Contracts Yes/No						N
Wisconsin						
County Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population				7,201	7,412	7,634
Undup FC Population						
# of Kids with TPR Plan				758	733	669
% FC Pop'n w/ TPR Plan				10.53%	9.89%	8.76%
# Post-TPR FC Kids				794	765	707
% FC Pop'n is Post-TPR				11.03%	10.32%	9.26%
% with Adoption Plan				21.55%	20.21%	18.02%
# Adoptions Finalized				270	292	323
% Adoption Plans Final'd				14.82%	16.31%	19.01%
% Waiting Kids Final'd				25.38%	27.63%	31.36%
<i>Program Data</i>						
# Adoption Programs						
# FTE State Workers				34	34	33
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						N

Appendix D

Wyoming						
State Administered						
	1988	1989	1990	1991	1992	1993
<i>Population Data</i>						
Year-End FC Population				1,034	1,023	982
Undup FC Population						
# of Kids with TPR Plan						
% FC Pop'n w/ TPR Plan						
# Post-TPR FC Kids						
% FC Pop'n is Post-TPR						
% with Adoption Plan						
# Adoptions Finalized						
% Adoption Plans Final'd						
% Waiting Kids Final'd						
<i>Program Data</i>						
# Adoption Programs						
# FTE State Workers	1	1	1	1	1	1
# FTE Local Workers						
Caseload of Kids/Worker						
Private Contracts Yes/No						N

