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BOERLAGE – PERMANENCE AND STABILITY OF PLACEMENT

Permanence and Stability of Placement:
An Assessment of the Effectiveness of Foster
and Adoptive Parent Training

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Author Note

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Abstract

Achieving permanence and stability, both emotionally and physically, is a major goal for most people. This goal begins to surface early in life within the family setting. Unfortunately, children who have been subjected to abuse and/or neglect at the hands of their caregivers may face the grave consequence of lack of permanency and instability within their family systems. This grave consequence is one that can have a negative effect on a person's future. In order to prevent this from occurring, the Monterey County Department of Social and Employment Services (DSES), Family and Children Services works to provide children, who have suffered from abuse, with permanent and stable placements. While interning with the Adoptions Unit for Monterey County DSES, I have gained the understanding that training is the key to preparing new foster and adoptive caregivers. This training also supplies these caregivers with the necessary information that will create a stable environment for the child. My Capstone centers on evaluating how effective this training is in hopes of giving the gift of permanence and stability to the children who have suffered from abuse.

Keywords: instability, permanency, adoption, child welfare, child abuse

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I. Problem Description

Problem Definition

A little boy only 10 ½ months old passed away on September 5th, 2011 after being taken off life support for three days. He faced multiple beatings over the course of his short life by his mother's boyfriend, Diego Burgos (Lee, 2011). His body finally had enough of the abuse when Burgos swung him like a baseball bat, hitting walls and other hard objects. Due to this trauma he fell into a vegetated coma. While in the hospital, the doctors examined his body and found unhealed fractures, bruises, and cuts. This boy did not deserve to live with constant abuse and he especially did not deserve to die from it. Though this is a heartbreaking story, it is just one example of a child abuse case in Monterey County; imagine the ones that did not make the news or the ones that go unreported.

According to the Legislative Analyst's Office (LAO), child abuse in the state of California is defined as "any act or series of acts by a parent or caregiver that results in harm, potential for harm, or threat of harm to a child (Child Abuse in California - Part I, 1996). There are four types of child abuse which are physical, sexual, emotional, and neglect. Physical abuse is when a parent or caregiver causes physical pain, injury, or other suffering or bodily harm. Examples of physical abuse would be punching, striking, and drowning a child (Child Abuse in California - Part I, 1996). Sexual abuse is the type of abuse in which a child is used for sexual

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stimulation; this includes child pornography, rape, and molestation. Emotional abuse is the hardest to prove because it leaves no physical evidence; examples are name calling and repeated humiliation (Child Abuse in California - Part I, 1996). Along with these types of abuse, is neglect, which is the neglectful treatment that threatens a child's health and welfare. Neglect occurs when a caregiver fails to provide a child with necessary food, shelter, and clothing. It can also occur when a caregiver fails to attain necessary medical and mental health treatment (Child Abuse in California - Part I, 1996). When discussing child abuse, a caregiver is an adult that cares for a child. Caregivers can be birth parents, foster parents, adoptive parents, and relatives.

When a person reports child abuse, social workers from Child Protective Services investigate the situation that has caused the report and determine their findings. The categories of findings are substantiated (found abuse occurring), inconclusive (abuse could have happen but there is no evidence to support it), and unfounded (no abuse occurred) (Child Abuse in California - Part I, 1996). Though Monterey County has a lower number of substantiated referrals compared to California, there has been a 9.5 percentage point increase in cases of substantiated referrals compared to the previous year of 2010, thus indicating child abuse is occurring more frequently within this community (CWS/CMS Dynamic Report System, 2011b).

Consequences of Child Abuse

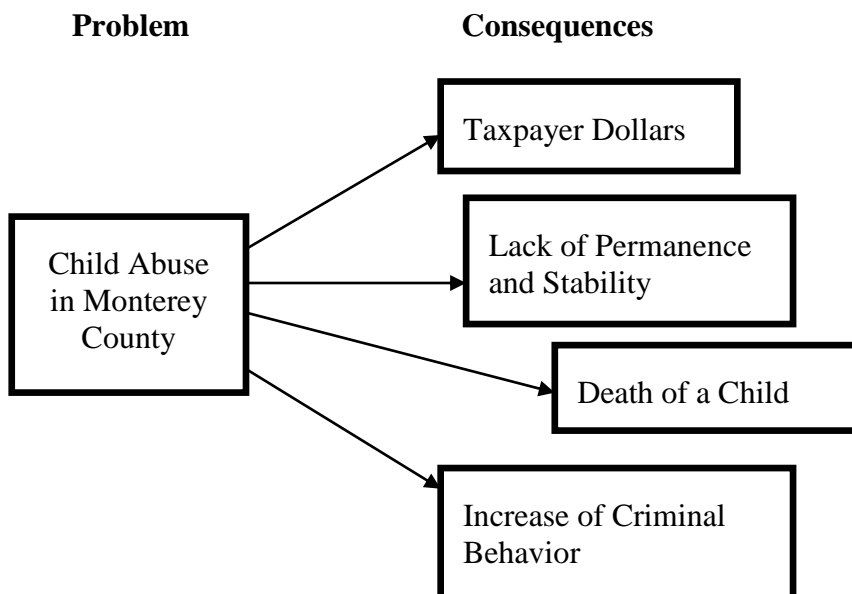
Child abuse in Monterey County causes a great deal of consequences not just for the children that face the abuse but for the community the children live in as well. This problem is not just significant to Monterey County; it is significant to the whole state and the entire nation. Children from early times have always been subjected to abuse but it was not until the early 1870's when the nation's attention was focused on an eight year old girl, named Mary Ellen

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Wilson. This little girl faced daily whippings and beatings from her foster mother, and sought protection from the American Society for the Prevention of Cruelty to Animals (ASPCA). This sparked the question to many about why little is being done to protect children from abuse. And with that The New York Society for the Prevention of Cruelty to Children was formed in 1874, which paved the way for federal and state laws pertaining to child abuse to be passed (Child Abuse Background and History, 2011).

Child abuse is a problem for Monterey County residents for four reasons: 1) taxpayers are paying for the services given to children and their abusers, 2) child abuse creates a lack of permanence and stability for the child both emotionally and physically, 3) the death of a child caused by abuse and 4) abused children are more likely to show criminal behavior. In Figure 1, the consequences of child abuse are diagramed.

Figure 1: The Consequences of Child Abuse



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The first consequence pertains to the amount of tax dollars spent on child abuse. Within the fiscal year of 2010-2011, the California State Budget allocated \$5.5 billion dollars to child welfare services, along with \$24 million dollars to the Child Abuse Prevention fund. Monterey County's portion of the state's money was \$15 million (California Department of Social Services, 2009). Taxpayers in Monterey County are supporting both the victim and in most cases the abuser/s involved in the child welfare system. A typical child welfare case can last anywhere from six months to several years, during which taxpayers are footing the bill for family reunification services, legal expenses, addiction treatment facilities, children's medical bills, foster care expenses, and other services needed for a child and their parent/s in the welfare system.

The second consequence of child abuse is that of lack of permanency and instability a child may face due to the abuse they have suffered. Within the article, *The Impact of Placement Stability on Behavioral Well-being for Children in Foster Care*, unstable children involved in the welfare system are more likely to have behavioral problems than children who have achieved permanency and stability early in the relationship with caregivers, in which "early" is determined to be 45 days (Rubin, O'Reilly, Luan, & Localio, 2007). The behavioral problems include aggression, depression, sexually acting out, and other inappropriate behaviors. A child, who is part of the welfare system due to abuse, can be unstable for several reasons; all due to the type of permanency they have not reached (Rubin, O'Reilly, Luan, & Localio, 2007). The first type of permanency is that of relational, which is described as having a long-term, loving, and accepting relationship with parental figures (biological, foster, or adoptive parents). The second type of permanency is physical in which the child has stability in school, their neighborhood, and in their

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community. This type of permanency incorporates values, norms, and culture into the systems the child is subjected to. The last type of permanency is legal permanency. Legal permanency is defined as a legal relationship between youth and their caretakers. This type of permanency is primary goal of the child welfare system (Rubin, O'Reilly, Luan, & Localio, 2007). After defining the types of permanency, it is ideal for a child to have all three but in reality the children involved with child welfare may not even have one. This in return will cause the child to lack in permanence and stability, which can hinder their social and emotional development as well as produce negative behaviors and habits (Rubin, O'Reilly, Luan, & Localio, 2007).

The third consequence is the harsh reality that children die from abuse. Some abused children in Monterey County, like the little 10 ½ month old baby in the story, will not experience the rest of their future because they have died at the hands of their abuser. In 2009, Monterey County had three deaths related to abuse that were recorded as such, while there may have been many more. According to Child Welfare Information Gateway, 50 to 60 percent of child deaths caused by maltreatment were not recorded on their death certificates (*Child abuse and neglect fatalities 2009: Statistics and interventions*, 2011). This means there could have been more than three deaths that occurred in 2009. This is an alarming fact for Monterey County because these children have not experienced life and have died for no reason. Child abuse is a community problem because more needs to be done to prevent abuse, especially when a child's life is at stake.

The fourth consequence is if an adolescent survives the abuse during their childhood, they still face a chance of becoming a criminal. According to the U.S. Department of Justice, 14 percent of all men in prison were abused, while 36 percent of all women in prison were abused

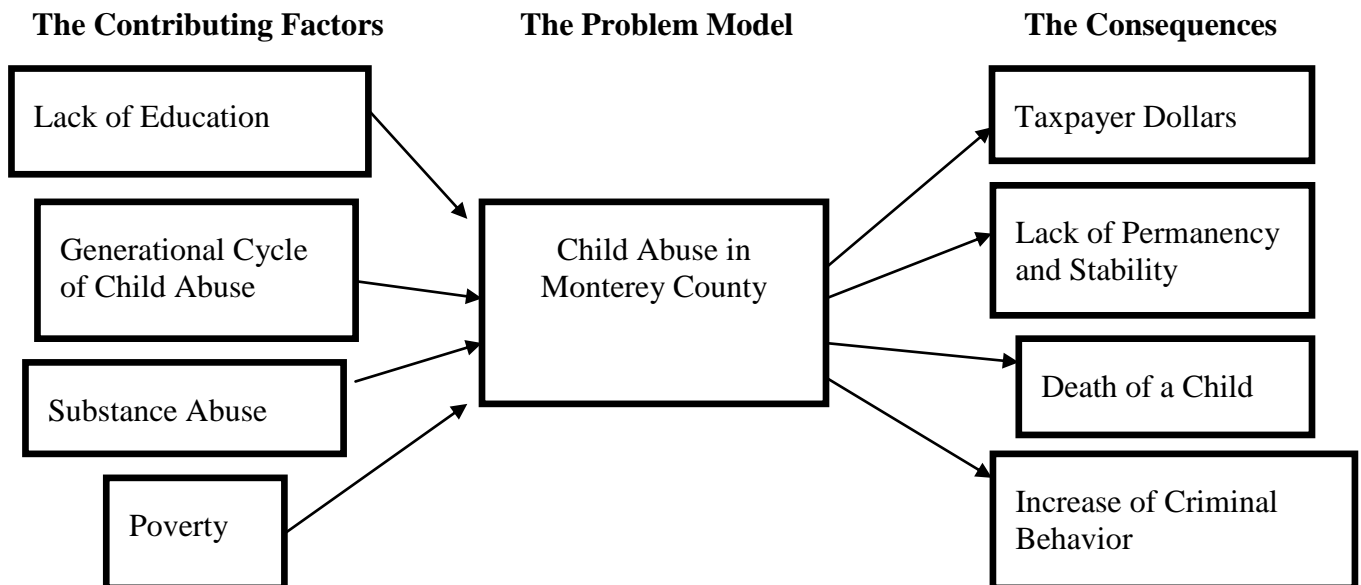
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(Harlow, 1999). Children who experienced child abuse are 59 percent more likely to be arrested as a juvenile, 28 percent more likely to be arrested as an adult, and 30 percent more likely to be convicted of a violent crime (*Child abuse and neglect fatalities 2009: Statistics and interventions*, 2011). These statistics are disquieting because Monterey County can experience more violence and criminal activity in their community as well as foot the bill for the state prisons and juvenile halls all because of child abuse.

Contributing Factors to Child Abuse

There are many factors that contribute to child abuse, many of which are related to one another. In Monterey County, the main factors that contribute to child abuse are lack of education, the generational cycle of child abuse, substance abuse, and poverty. These factors, along with the consequences, produce The Child Abuse Problem Model seen in Figure 2.

Figure 2: The Child Abuse Problem Model



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The first factor that can contribute to child abuse is the lack of education. According to the U.S. Census, 30 percent of Monterey County residents did not graduate high school (2009). Without the proper education, people rely on what they have been taught by family members or what they have experienced while growing up. This can include discipline methods as well as neglectful parenting styles which can produce negative outcomes (Herczog, Van Pagee, & Pasztor, 2001). One negative outcome is that of the generational cycle of abuse, which is another contributing factor.

The generational cycle of abuse is described as children who were subjected to abuse while growing up are more likely to abuse their own children in the future. This becomes important because 30 percent of abused and neglected children will later abuse their own children (Long-Term Consequences of Child Abuse and Neglect, 2008). One hundred and twenty one children entered the Child Welfare System in Monterey County during the time period of April 2010 to March 2011 (CWS/CMS Dynamic Report System Entries, 2011a). When applying the percentage pertaining to the cycle of abuse, about 37 of the 121 children who entered Monterey County Child Welfare System will most likely abuse their children.

The third causal factor that is related to child abuse is substance abuse. According to the Child Welfare Information Gateway, over 30 to 65 percent of child mistreatment involved some type of substance abuse (2008). Parents who abuse alcohol and other drugs are three times more likely to abuse their children and four times more likely to neglect them (*Child abuse and neglect fatalities 2009: Statistics and interventions*, 2011). Though it may not be apparent, substance abuse has increased by over 7 percent in Monterey County, which can correlate with the increase of child abuse (Monterey County Department of Social and Employment Services..., 2010).

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The fourth cause is poverty, which comes into play when dealing with child abuse, especially neglect. According to the U.S. Census, more than 13 percent of Monterey County residents lived in poverty in 2008, coinciding with a 30 percent unemployment rate that has remained consistently the same for the past two years (2009). With that said, families that make under \$15,000 a year are 22 times more likely to have child abuse and/or neglect occur in their homes (Reynolds, 2010). The abuse can stem from stressors surrounding unemployment, housing, being a single-parent, and attaining proper healthcare. Poverty creates neglect when a child's basic needs of shelter, food, clothing, and education are not met, which is occurring more in Monterey County due to hard economic times.

II. Field Agency, Alternatives, and Justification

In Monterey County, child abuse is a prevalent problem within the community. Many agencies and organizations within this community work to prevent abuse as well as work with families where abuse has already occurred. The Adoptions Unit of the Monterey County Department of Social and Employment Services, Family and Children Services is one of these agencies.

Agency Description: Monterey County Adoptions Unit

The mission of the Monterey County Department of Social and Employment Services, Family and Children Services is to promote both the social and economic needs of each individual and family in order to promote self reliance (Monterey County Department of Social and Employment Services..., 2010). The specific purpose of the Adoptions Unit, which falls under the Family and Children Services sector, is to find stable and loving families for children

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who are court-dependent and/or voluntarily given up by caregivers (J. Mendoza, personal communication, September 2, 2011).

The Monterey County Adoptions Unit was licensed as a certified state adoption facility in 1969 (N. Upadhye, personal communication, October 24, 2011). The Adoptions Unit offers a variety of services which include case management, referrals to outside providers, home studies, relative assessments, adoptability assessments, financial aid to adoptive parents, trainings, and therapy through Behavioral Health (MCDSSES: Family and Children's Services, 2011).

The client populations that the Monterey County Adoptions Unit serves are the children who have become court dependents and/or have been voluntarily relinquished by their parent/s. A court dependent child is one who has gone through the welfare process and the parents have been deemed by the court to be unfit to take care of children. Adoptive parents and families are served by the Unit through financial aid, education, and trainings (Monterey County Department of Social and Employment Services..., 2010).

Alternative Solutions to Child Abuse in Monterey County

As stated previously, there are a variety of factors contribute to child abuse. The one factor that can greatly affect a child, who has been abused or neglected, is that of not achieving permanency and stability while growing up. This inability to do so produces negative outcomes that can greatly shape a child's future. The Monterey County Adoptions Unit is the last stop for a child in the welfare system. With it being the last stop, the Adoptions Unit is also the last chance a child has to be in a permanent and stable family setting. The Adoption Unit strives to achieve permanency and stability for a child, and are looking to better their system in doing so.

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With that said, three options arise when analyzing the issue of permanency and stability. The first option is not to change anything. The next two options or solutions involve the practice of finding and preparing permanent, safe, and caring families for the children involved in the welfare system.

Alternative One: Status quo

According to the Adoptions and Safe Family Act of 1997, permanency and stability is the main goal when working with a child who has been mistreated and is in the child welfare system (Rubin, O'Reilly, Luan, & Localio, 2007). With that said, there needs to be reasonable efforts in providing stability and permanence for children, but by not making strides to be more efficient, many children may suffer the consequences of not being in a permanent and stable home. This becomes apparent when 1 in 3 children will fail to achieve a long lasting placement and may experience frequent placement moves (Rubin, O'Reilly, Luan, & Localio, 2007). Even if a child has had an intervention from the welfare system, they may be continually placed in different homes without permanency which can cause severe consequences. These consequences include the inability to achieve both physical and personal stability and to form important attachments. The lack of stability and attachments correlates to a person's capacity to maintain healthy relationships (Newton, Litrownik & Landsverk, 2000). The alternative of not doing anything is not a solution to increasing permanency and stability for mistreated children, but finding concurrent, safe, and loving families is.

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Alternative Two: Evaluate Concurrent Cluster Groups and TEAM Trainings

The second alternative solution involves monitoring and interviewing a monthly concurrent cluster group which is made up of people who have previously fostered and/or have adopted children for the system (N. Upadhye, personal communication, October 24, 2011). They meet as a support group and discuss the issues that surround their foster/ potential adopted child. The issues range from conflicts with birthparents to the child's physical and mental wellbeing. Within the cluster group meeting, a questionnaire will be distributed with the hopes of gathering information about how prepared they were from the education and training they received from the department. Along with the data collected from the monthly concurrent cluster groups, pre and posttest surveys will be conducted at Training, Education, And Mentoring (TEAM) series training courses. The TEAM training courses are designed to educate and prepare people, who are interested in fostering and/or adopting, about what the welfare process is and the issues surrounding the children (Family Matters, 2011). The pre and posttest surveys will determine the effectiveness of the potential caregivers' preparation. Their level of preparation will determine if they are going to be a stable and permanent placement for an abused child.

Alternative Three: Recruit Potential Foster and Adoptive Families

The second solution pertains to developing different strategies to increase the amount of people interested in fostering and/or adopting with the Monterey County DSES Recruiting Subcommittee. The Recruiting Subcommittee is composed of unit supervisors and program managers from the department. They develop ways of drawing in media attention in order to

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recruit more families (N. Upadhye, personal communication, October 24, 2011). The reason it is important to recruit more families who are willing to foster and/or adopt is because Monterey County has a limited amount of caregivers in the welfare system. Limited foster and adoptive caregivers mean that children within the system are placed in homes where there are several foster children already there, or the child has to be placed in a group home. If a child is placed in a home where there are several other children, the child may not get the attention he or she needs, which can have a negative impact. A group home does not provide permanency or stability in a way that is beneficial for a child (Herczog, Van Pagee, & Pasztor, 2001).

To increase the amount of potential foster and adoptive caregivers, I will collaborate with the committee on different recruiting strategies. These strategies will use media outlets to inform the public about the need for foster and adoptive parents. With the potential increase of people looking to foster/adopt, more concurrent homes will become available for children in the welfare system, thus allowing a child to gain permanence and stability.

Selected Alternative and Justification

The best solution that will aid in increasing stability among children in the welfare system is that of placing them with permanent, caring foster and/or adoptive families. To ensure the caregivers will provide permanency and stability for the child, there needs to be an evaluation on the effectiveness of the department's training in preparing foster and/or adoptive parents.

This solution is best chosen for the Adoptions Unit because there is evidence that foster/adoptive parents feel "ill-prepared" for the children entering their home in the 2010 Peer Quality Case Review (PCQR) of Monterey County. The PCQR is conducted by social workers

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from outside counties and they determine what areas the Monterey County Child Welfare System needs to work on through interviews and studying data reports (California Outcomes and Accountably System, 2010).

The PCQR's indicated area of having unprepared foster and adoptive parents calls for a solution. This solution includes the assessment of two different areas: the concurrent cluster group and the TEAM training. From the concurrent cluster group, a questionnaire will be developed to attain feedback from caregivers who have children in their care and see what the department has done or should do to better prepare future foster and adoptive parents. The second area that will be assessed will involve the TEAM series training. There will be a pre and posttest survey conducted to determine if all the required criteria is met. Some areas of the criteria are those of the expectations of the children, the beliefs about birthparents, and the issues that surround a child going through the reunification process, which all have the goal of preparing the potential caregiver. If the findings/expectations in the posttest survey are the same as the pretest survey, this will indicate a need from more training surrounding that certain criteria.

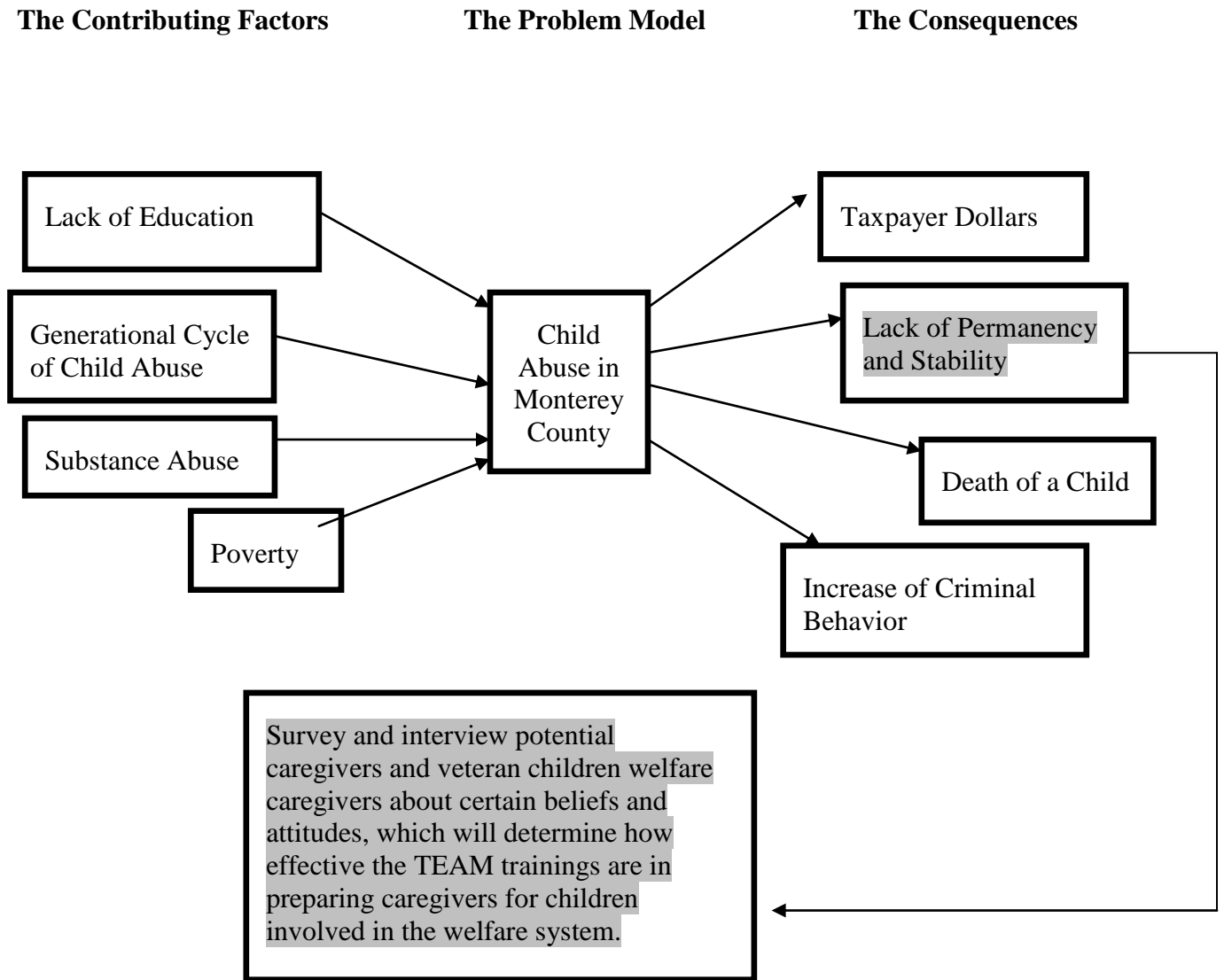
This is the best solution to increase permanency and stability of placement because since the TEAM trainings series have begun, there has not been an evaluation done to determine if the trainings are successful in preparing caregivers. From the findings of the pre and posttest survey, I hope to provide feedback for the TEAM trainings to the department that pertains to developing a more effective curriculum. The more effective curriculum will prepare caregivers on what to expect and how to promote stability in their relationship with the child. Along with the feedback, the department may implement the surveys in future TEAM trainings to determine if

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they successfully prepared potential caregivers for the children and the welfare system. This proposed solution is diagrammed in Figure 3, The Child Abuse Problem Model with Proposed Solution.

The possibility of more in- depth training will better prepare foster/adoptive parents. According to Puddy and Jackson (2003), “foster parent training is associated with placement stability, parenting skills, and foster parent satisfaction.” Also, when caregivers complete trainings that better prepare them for children involved in the welfare system, there are higher permanency rates (Herczog, Van Pagee, & Pasztor, 2001). Higher permanency rates will enable caregivers to bond with the children of the welfare system. In Monterey County, 31.1 percent of children in the welfare system have had two or more placements in 2011, while in the state of California, 26.3 children had two or more placements (CWS/CMS Dynamic Report System, 2011a). With that said Monterey County does not have high permanency rates, which indicates the possible need for more training for foster and adoptive care givers.

Figure 3: The Child Abuse Problem Model with the Proposed Solution



III. Implementation

Project Goal

Child abuse is a complex problem which makes it almost impossible for it to be solved. With that said, helping children within the welfare system achieve stability and permanency may contribute to reducing child abuse. The primary goal of my Capstone is to reduce the rates of

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child abuse in Monterey County. I hope to reduce child abuse by evaluating how effective the TEAM trainings are in preparing potential foster and adoptive parents for the children they will care for.

Primary Project Objectives

In order to achieve the goal of reducing the rates of child abuse in Monterey County, I developed objectives that will help diminish the problem of child abuse. The first objective of my Capstone project is to increase the preparation level of potential foster and adoptive parents by 10 percent by January 2013. In order to achieve this increase, the TEAM training and Concurrent Cluster Groups will be evaluated to determine if Monterey County is effectively training potential parents for children in the welfare system. The level of how prepared a foster and/or adoptive parent is will allow the child to be raised in a stable environment that could eventually lead to permanency for them.

The second objective is that by the end of my evaluation of the Monterey County Department of Social and Employment Services, Family and Children Services, 100 percent of the child welfare social workers who deal with foster care and adoption will understand the need of fully preparing potential parents for the children they will receive, identify the patterns and/or key elements that could possibly disrupt a placement, and understand the areas that need improvement in TEAM training. Monterey County Child Welfare social workers who fall under the placement units of the department are responsible for preparing a foster and/or adoptive parent for a child that will be in their care. It is important for these social workers to understand

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the TEAM training weaknesses and the elements that can cause a placement disruption in order to provide permanence and stability for a child.

Detailed Project Description

My Capstone project's main focus was evaluating Monterey County's training for preparing foster and adoptive parents. With my evaluation, I presented my recommendations based on my findings to my mentor, Jennifer Mendoza and her supervisor, Nancy Upadhye. The timeline of my Capstone project can be seen in Appendix A.

My Capstone began when discussing possible topics with my mentor. We both agreed that working around the area of foster and adoptive parents would be beneficial for both the parents and the department. I began attending training at the Kinship Center that centered on how to parent a child who has experienced trauma and loss. After a couple of sessions, one parent explained to the class how she wished the information presented in this training was part of the TEAM training. She said if this information was given during the TEAM training, she would have been more prepared in regards to understanding trauma and loss. Already enrolled in the TEAM training, Jennifer and I decided that my Capstone would focus on how effective the training was when it came to preparing potential foster and adoptive parents.

The first step of my Capstone project was to attain permission from the TEAM trainers as well as Hartnell College, who sponsors the training. After gaining permission, I began to develop a questionnaire for the concurrent cluster group. Jennifer and I decided that the questionnaire was a good starting basis for the pre and posttest surveys for the TEAM trainings. As seen in Appendix B, the questionnaire pertains to the members of the concurrent cluster

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group and their TEAM training experience. The information gathered from the answers helped me generate the pre and posttest surveys. The summary of answers to the questionnaire is located in Appendix C. I decided then to work with the primary TEAM trainer, Karen Clampitt. We generated a survey that determined if there was a change in attitudes and beliefs pertaining to the child welfare system and parenting, which can be located in Appendix D.

The second step was to distribute the surveys in the first TEAM session. I handed out the surveys when the trainees arrived. After all the participants were there, I explained that this survey was part of my Capstone project and it will help me determine how effective the TEAM training is in preparing both potential foster and adoptive parents for children in the welfare system. I also explained how there will be a survey in the last session to assess if there were any changes in attitudes and beliefs. Before allowing them to begin, I noted that this survey is not required and they could opt out of taking it. After the trainees completed the surveys, I collected them and recorded the results in Microsoft Excel.

The third step occurred at the ending session of the TEAM training. I distributed and collected the posttest survey. I compiled the results in Microsoft Excel to compare with the pretest survey answers. I then summarized my findings of the TEAM surveys into pie charts. With the pie charts, I gave my recommendations and findings to my mentor Jennifer Mendoza and the Adoptions Unit supervisor.

Project Obstacles

While implementing my Capstone project, some obstacles were encountered. The first obstacle was that some concurrent cluster group members did not fill out the questionnaire or did

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not go into detail with their answers. Also several cluster group members could not remember the training clearly since they took it a couple years ago. This did limit my data about what they have experienced with the trainings as well as it slightly hindered the process of creating survey statements for the TEAM training members. Another obstacle was that there were not many people that attended the TEAM trainings and some even dropped out before I could conduct the posttest survey. This altered my results and did not provide me with enough data to give thorough feedback to the department. The last obstacle I encountered was that of not having relevant survey statements in the pre and posttest. It is nearly impossible to assess how effective a parent will be until they have actually had hands on experience with the child. No survey will accurately provide information that will yield accurate results on the level of preparation of parenting.

VI. Evaluation Plan

Evaluation Design

Through my implementation of the concurrent cluster group questionnaire and TEAM pre and posttest surveys; I was able to evaluate the results I collected through different methods. The concurrent cluster group questionnaire was centered on the group members' experiences when they completed TEAM training. For example, a question I asked was "What could be included in the TEAM trainings that could have better prepared you?" This question asked the group member, who now has experienced children in their care, to reflect on what other elements could have been included to better prepare them. Another question I asked was "Can you apply what you have learned from the trainings in your life today with a child? How so?" This

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question asked the cluster group member to recall what they have learned in TEAM and how they have applied it with a child in their care. I also asked the concurrent cluster group members “Did the TEAM training prepare you for what to expect with the child and the processes of the welfare system? How so?” I thought this would be a relevant question in regards to formulating the TEAM survey because it gave me feedback about if the training prepared the cluster group members. For the concurrent cluster group questionnaire, I used a more qualitative approach, which allowed me to better understand their feelings and attitudes about the TEAM trainings.

The TEAM pre and posttest surveys were generated from the concurrent cluster group’s answers. The survey statements I developed with the TEAM trainer focused on specific attitudes and beliefs that could possibly be linked to how prepared the potential parents are for receiving a child. These specific attitudes and beliefs include the foster/adoptive parent’s feelings toward the birthparents, the child welfare process, the grief and loss experienced by a child, and attachment. An example statement used in the survey was “I will not have to collaborate with the birthparents.” The right selection for this statement for the posttest survey would be “Agree” because many of the children involved in the welfare system are in active reunification with their birth parent/s, which requires the foster parent to work with them. Other survey statements were “Becoming a foster and/or adoptive parent is a fairly easy process. I successfully parent my own child, so I can parent a child from the welfare system.” These survey statements produced quantitative data, using the Likert Scale. Along with the surveys, I also participated in the 8 week Team training sessions, where I observed the atmosphere and recording comments about what the trainees would like in the training to better ease their anxiety about taking in a child from the welfare system. By using my qualitative, quantitative, and observation findings, I

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reported my recommendations to my mentor and her supervisor. I then asked them to provide feedback pertaining to my project.

Some limitations that occurred with this design were that of not having enough data to support the findings from the pre and posttest surveys and not having enough people completing the surveys. This is important to note because with the limited survey population I had, the findings were screwed. Another limitation of the design was that the survey questions did not pertain fully to the training, which links to how prepared caregivers are.

Evaluation Results

In my Capstone, there were three different evaluations that yielded results. In the concurrent cluster group questionnaire, I asked several questions about their TEAM training experience. Looking over the answers, many of the group members had a hard time remembering what specific things they learned from the training. Also members referenced other trainings they attended pertaining to the children they foster or have adopted. For example, one member referenced how they learned to effectively discipline their foster child through the Love and Logic training, which is not part of TEAM. When members referenced other trainings, I found it to be ineffective for my evaluation of the TEAM training. However, it made the point that the TEAM training sessions did not include certain issues that would have been beneficial for foster and adoptive parents.

While looking at the answers, one question from the concurrent cluster group questionnaire was particularly relevant to the TEAM training. The question was “Did the

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TEAM training prepare you for what to expect with the child and the processes of the welfare system? How so?” Several cluster group members said they did not feel adequately prepared and wish that more was covered in the trainings. Others said that they were not fully prepared until they received the foster child. One member quoted in the meeting that, “No matter how much training you have, nothing compares to it like having the child in your care and learning at that moment how to be an effective parent.” Another question that yielded valuable results was “Did you feel adequately prepared now that you have a child in your care? Please describe how.” From the answers, the majority of the cluster group members stated that they did not feel adequately prepared and overwhelmed when they received a child. One member quoted, “ Not really, a lot of material was not covered like Medi-Cal and WIC, along with court, and the visitations/procedures.” I also asked the cluster group members, “What could be included in the TEAM trainings that could better prepare you?” This question had multiple responses like, the need for a resource book, the reality of caring for a foster child, basics of medical care, a mock court hearing, and reassurance that there are people there to talk to. Overall, the concurrent cluster group questionnaire was effective in helping me create the pre and posttest surveys.

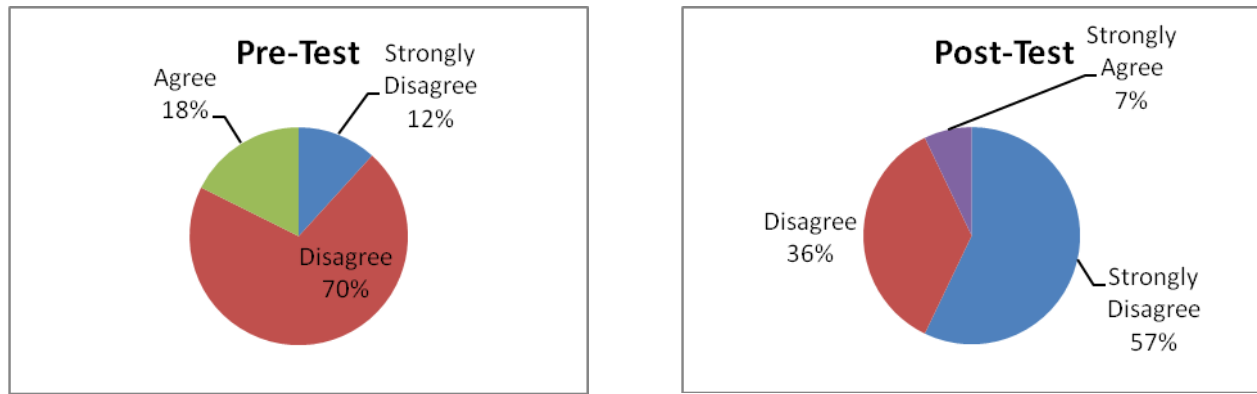
The pre and posttest survey was made up of seventeen statements, which is located in Appendix D, while the results are of the pre and posttest surveys are in Appendix E. While analyzing the pre and posttest survey results, there was a general change in answers in regards to trainees becoming more knowledgeable on certain issues. For example, one survey statement was "A newborn will be easy to take care over because they haven't experienced trauma and loss." The correct option choice for this statement would be “Disagree” or “Strongly Disagree” because newborns, especially those exposed to alcohol or drugs do experience trauma and loss. They lose the smell of their mother and the sound of her voice, which they heard in the womb.

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They also experience trauma when withdrawing from drugs. In Figure 4, the differences of answers to this survey statement are shown when comparing pre and posttest results. From the two pie graphs, there was a large change in the “Strongly Disagree” category and the “Agree” category. This change represents the knowledge gained by trainees that newborns experience trauma and loss. In the survey statement, “Becoming a foster and/or adoptive parent is a fairly easy process,” there was no drastic change in percentages except in the “Strongly Agree” and “Disagree” categories. When comparing the pre and post answers, 29 percent of the trainees believe the process is fairly easy but the actual answer would be “Disagree”, in which 71 percent did. The foster and adoptive process is quiet difficult and time consuming. It is full of obstacles when it comes to the legal process also when a child is actively reunifying with their birthparents. This reunification process is emotionally training on foster parents who have that child in their care. In the statement, “I successfully parent my own child, so I can parent a child from the welfare system,” there was an increase of 8 percentage points for the “Blank” option in the posttest survey as well as there were no “Strongly Agrees.” Also in the posttest survey, 43 percent agreed with the statement, while the other 43 percent disagreed or strongly disagreed. The actual answer to this survey statement would be “Disagree” or “Strongly Disagree” because children involved in the welfare system have experienced tremendous hardship from subjected to abuse or neglect by their caregiver and because of this abuse, these children behavior drastically different from children who are not involved in the welfare system.

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Figure 4: Pre and Posttest Survey Statement Results on “A newborn will be easy to take care of because they haven’t experienced trauma and loss”



The third evaluation occurred when asking my mentor what feedback she had in regards to my project. Since the TEAM training has never been evaluated before it was important to collaborate with my mentor throughout the whole Capstone process. In the beginning I asked for her feedback when creating the survey statements, which helped me to produce a more professional survey the second time around. As I evaluated the TEAM trainings, I asked my mentor and her supervisor what they thought about my results and if they were enlightening. Their overall impression was that the TEAM trainings are effective in preparing potential caregivers and the department is doing what they can to promote permanence and stability.

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Discussion of Results

In regards to my Capstone project, I believe it worked in regards to evaluating the training and determining if it is effective in preparing foster and adoptive parents. The TEAM training appears to be doing an efficient job in educating potential caregivers about the children in the welfare system and all the elements that go into adoption and fostering. This is seen through the pre and posttest survey results, where there was an increase of knowledge in the ending survey compared to the pretest.

I yielded the results I received because it is particularly hard to evaluate the level of preparation in foster and adoptive parents. It is also hard to evaluate if the training is providing the necessary tools and knowledge to give the trainees that level of preparation. Looking back now, I would have changed the surveys in order to see if there is a larger impact of the TEAM training on caregivers.

V. Conclusion and Recommendations

Conclusion

While reflecting back on the Capstone process and what the results were, I do not believe there was a significant change in regards to the Adoptions Unit, TEAM training, and preparing foster/adoptive parents. My Capstone did not have much impact on my goal of reducing child abusing and even on the smaller goal of better preparing foster and adoptive parents. There are not anticipated benefits from my project, except the recommendations on how to better follow the agenda for the TEAM trainings. I truly believe that being an intern at the Adoptions Unit

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was more effective than completing this project. I knew from the beginning that developing a community-based project would be difficult at a county agency due to the lack of leeway in regulations and that they have to follow certain protocols. Overall, being an intern for the Unit was more beneficial to the agency and for Monterey County because I helped provide the necessary services to achieve permanency and stability for children who have suffered abuse and neglect.

Recommendations for the Agency

The recommendations I have the agency in regards to the TEAM trainings are that of strictly following the proposed agenda. From my observations, too much time was spent discussing things that were not on the agenda. I know from looking at the TEAM training binder, that important topics were not fully covered, like grief and loss. Another recommendation is to have quizzes at the end of each session, which will help test the trainee's knowledge about the session's topics. I also recommend assigning mandatory homework at the end of each session. With this recommendation it is important to note that my mentor thought that the training should not have quizzes or homework in fear of "scaring away" potential foster and adoptive parents. My last recommendation is to have more hands-on activities, which will enable the trainees actively engaging with case examples or vignettes. My overall impression of the 8-week course was that of it not being well structured. These trainees in the future will have children in the welfare system who have been exposed to horrible abuse and neglect. These children need a support system that will be a permanent and stable structure for them, and these trainees need to understand this.

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Recommendations for Future Students

For future students, I recommend that they find a placement that gives more flexibility and allows creativity for a Capstone project. I also recommend not doing the project for a county agency, like child welfare and probation. I say this because these agencies know what they need to do and are busy doing it. It is a true obstacle to try to create a project that may not be utilized because it requires time that these professionals do not have.

CHHS Major Learning Outcomes

The Collaborative Health and Human Services Major Learning Outcomes (MLO) I included in my Capstone project were Leadership, Information Management, as well as Statistics and Research Management. I fulfilled the Leadership MLO by conducting interviews and questionnaires with the concurrent cluster group members, reviewing the TEAM curriculum and developing survey statements that pertained to its outcomes, as well as I reported back to the department on my findings. I also fulfilled this MLO by working with foster and adoptive parents and the department in regards to making a better TEAM training curriculum. Within the Information Management MLO, I researched caregiver training and determined if this information was reliable. I produced survey statements and evaluated the results using Microsoft Office applications. I fulfilled the Statistics and Research Management MLO by using the data I collected from the surveys and conducted analysis on it. I also used the quantitative, qualitative, and observational information that I recorded and produced recommendations to give to the department. I placed all the data in Microsoft Excel and calculated the percentage point difference among the answers.

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University Vision

Within the California State University Monterey Bay Vision, the concept about serving our community and promoting the wellbeing of those who live within is what my Capstone project reflects on. My project aims to reduce the amount of child abuse within Monterey County, thus directly promoting the wellbeing of the children who may be subjected to such harm. My project also strives to serve the community, more specifically the children involved in the welfare system and the potential caregivers who will foster and/or adopt them. The main purpose of my Capstone was to evaluate the level of preparation and training needed to establish permanency and stability for child who has experience traumatic abuse. This purpose is important because it will provide a better life for the child and their new family, thus promoting wellbeing in life.

Final Thoughts

Overall, I had a good experience with my internship and my Capstone. I strongly believe that my agency and community benefitted more from me being an intern in regards to helping my Unit and providing services. If I had to do this all over, I would have done a completely different Capstone project, one that I could be proud of because I know it would have helped reduce child abuse in Monterey County.

I first want to thank my mentor, Jennifer Mendoza. She spent many hours with me on what I should do for my Capstone, and I know those hours were time consuming, but they brought laughter for both of us. I also want to thank my amazing professor, Adrienne Saxton. She has been there for me since day one, with tremendous support. She was always the positive

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voice of reasoning for me when I just wanted to give up on my project. I want to thank my Capstone class because without them, I would have gone crazy without the. They have provided me with much support and allowed me to vent.

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Appendices

Appendix A: Interview Questionnaire for Concurrent Cluster Group Members

Hello, my name is Alexis Boerlage and a senior at California State University Monterey Bay as well as an intern for the Adoptions Unit. I am conducting my senior project on how effective the TEAM trainings were in preparing foster and adoptive caregivers in terms of the expectations of the children and the welfare system in general. With that, I am respectfully asking you to help me develop survey statements to give to the TEAM training members. The more detailed answers I receive will help me develop better survey statements that will aid in assessing the TEAM trainings. Unfortunately, I am not able to attend this meeting but please return the questionnaire to Nancy Upadhye when completed. Thank you for taking time out to answer these questions.

Respectfully,

Alexis Boerlage

1. What specific items did you find valuable in the TEAM sessions?
2. Can you apply what you have learned from the trainings in your life/lives today with a child? How so?
3. Did you feel adequately prepared now that you have a child in your care? Please describe how.
4. What could be included in the TEAM trainings that could better prepare you?

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5. Please list some things about birth parents that are comfortable for you and things that make you uncomfortable

6. Please describe your initial expectations of the foster child/ren.

7. Did the TEAM training prepare you for what to expect with the child and the processes of the welfare system? How so?

8. Do you have a stable relationship with the child in your care? How is it stable or unstable?

9. If you had a failed placement, what could have been done to make the placement successful?

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Appendix B: Pre and Posttest for TEAM Training Members

TEAM Series Trainee Pre-Test Survey
Please Circle the Best Fitting Choice

1.	Becoming a foster and/or adoptive parent is a fairly easy process	Strongly Disagree	Disagree	Agree	Strongly Agree
2.	The department will have a thorough history of the child's needs and behaviors	Strongly Disagree	Disagree	Agree	Strongly Agree
3.	The Child Welfare System has plenty of resources to help a child	Strongly Disagree	Disagree	Agree	Strongly Agree
4.	I successfully parent my own child, so I can parent a child from the welfare system	Strongly Disagree	Disagree	Agree	Strongly Agree
5.	A child will benefit more from me caring for them than their birthparents	Strongly Disagree	Disagree	Agree	Strongly Agree
6.	I will have more say about the child's needs than the birthparents since the child is in my care	Strongly Disagree	Disagree	Agree	Strongly Agree
7.	Foster parents have a significant influence over visitation arrangements between the child and their birthparents	Strongly Disagree	Disagree	Agree	Strongly Agree
8.	I will not have to collaborate with the birthparents	Strongly Disagree	Disagree	Agree	Strongly Agree

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9.	A child should be encouraged to meet the foster/adoptive parents “half-way” when learning how to be a family	Strongly Disagree	Disagree	Agree	Strongly Agree
10.	Any person who has ongoing contact with the child must be fingerprinted and approved by the department	Strongly Disagree	Disagree	Agree	Strongly Agree
11.	All the children need is a lot of love to resolve loss	Strongly Disagree	Disagree	Agree	Strongly Agree
12.	Attachments can be easily made with children involved in the welfare system	Strongly Disagree	Disagree	Agree	Strongly Agree
13.	It is valuable to support healthy relationships between children and birth family	Strongly Disagree	Disagree	Agree	Strongly Agree
14.	I can discipline the child the way I see fit	Strongly Disagree	Disagree	Agree	Strongly Agree
15.	Foster parents can consent for ear piercings and major hairstyle changes	Strongly Disagree	Disagree	Agree	Strongly Agree
16.	A newborn will be easy to take care of because they haven’t experienced trauma and loss	Strongly Disagree	Disagree	Agree	Strongly Agree
17.	Children’s fantasies about birthparents will go away eventually	Strongly Disagree	Disagree	Agree	Strongly Agree

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Appendix D: Questionnaire for the Monterey County DSES

1. Do you believe my evaluation of the TEAM training and placement disruption data was an effective tool?
2. Will you incorporate the pre and posttest surveys I developed in future TEAM trainings?
3. What feedback do you have to better my evaluation tools?
4. Did you find my recommendations about the TEAM trainings insight?
5. Do you approve and/or agree with my recommendations?

Appendix E: Concurrent Cluster Group Members Questionnaire

The Summary of Findings

1. What specific items did you find valuable in the TEAM sessions?

- Timelines of the process
- Other foster/adoptive parents sharing their experiences (4)
- How to treat birthparents
- What to expect in the future
- Getting to know other prospective foster parents
- Court reports
- Drug and alcohol effects on children
- What brings a child into care
- Behaviors of children that come into care
- How court law works and court briefings
- Various services available for a child
- Guest speakers
- Social worker briefings
- All were useful tools in helping to “Navigate the System”
- All the training that was received
- The phases and stages of the process from the time you receive a call through the duration of the time the child is in your care
- The different scenarios of the actual life stories of the foster/adoptive children
- All the support and beginning of networking
- Watching the videos on how the children felt after being put into foster care
- Sally the nurse visiting and telling us about how the Medi-Cal system worked and what doctor appointments needed to happen within specific time frames
- Got a lot out of the active foster parents visiting and showing their experiences

2. Can you apply what you have learned from the trainings in you life/lives today with a child? How so?

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- Yes: Ideas on what to do with the birth parents, baseline of how court works, and used the ideas from the foster parents who spoke in training
- Somewhat: Knowing who to talk to, dealing with different children types but learned more from specialized trainings after TEAM
- In part: Some of what they went over doesn't or hasn't applied to me in current situation
- Yes: The training really helped understand if you want to be a foster parent or not, also understand where the child is coming from and why they may act out the way they do. I refer back to my book if I needed information, even today
- Yes: All of the things regarding special needs children and alcohol/drug exposed children will be applied. Sensitivity to their learning problems, dealing with their sensory problems
- I learned how to help the children with disabilities and understanding more their problems
- Yes: I have applied what I learned in trainings to children in my home. I was able to follow the time-line guides to understand what was expected of me. I used the networks of support to help survive and support the child's needs and our family questions. Team also put into perspective unique factors that children need to best help them adjust and thrive
- *I do apply what I have learned in the trainings such as time out does not work for our children but time in is more successful way to deal with their crisis. Giving the children the power to make choices as taught in Love & Logic. I also learned that their brain function is very different and I have had to retrain myself in order to successfully parent our children*
- I do not currently have any foster children in our home but I found it helpful to learn about the legal requirements. Part of what I got out of the trainings was the attitude/feelings/devotion many people shared in caring for these often traumatized children

3. Did you feel adequately prepared now that you have a child in your care? Please describe how.

- No: The first time I felt overwhelmed and it was a very unusual care with a child not the age range I wanted. The next child I felt much more prepared and it was a more "normal" case
- Not really: A lot of material not covered like Medi-Cal and WIC, along with court, and the visitations/procedures (never saw the rooms that children were going into to help them understand)
- Somewhat: The classes didn't always stay on the current subject for the week and I feel I might have missed some valuable information
- Yes: Overall it brought to light what to expect. However it didn't really prepare me for the heartache when a child left my care that I had grown much attached too. (I don't think anything can really prepare you for that)
- *Yes: Especially after attending the SPARK training*

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- I don't have one child right now but when we had one a few months ago, we did know how we can help the child
- I felt prepared to provide care on a daily basis in our home. I felt prepared to be supportive during visitation. I feel that the training was a good foundation and the experiences were valuable lessons
- I have been fostering for 6 years. I do feel prepared now. In the beginning it was not as clear to me as to what to expect from our children. There were something I was not prepared for such as children that are cutters and children that are use to eating out of a trash can
- With the first 2 children placed with us (brothers) after the training, I felt very overwhelmed. I was overwhelmed with the shift of caring for 3 kids (instead of 1), with visits, picking up breast milk for the baby, finding doctors to care for the boys (our family doctor did not accept Medi-Cal), and both boys had feeding issues. The boys had separate visits with their mother, their fathers, and 2 grandmothers. I would like to have had better information about the visits, including staff supervised vs. foster parent supervised.

4. What could be included in the TEAM trainings that could better prepare you?

- Reassurance that there are people for you to talk to
- Resource book (the binder) to be simple
- A mock court hearing
- Basics of medical and WIC
- Visitation room visits
- Building layout, where the different departments and rooms are
- More information on the process, especially the court process
- More information from actual foster parents that have experienced the day-to-day issues
- I don't have anything to add, they covered many, many areas
- I think they give all the information we need to know
- TEAM training really provided great detail and tried to relay the message of how unknown many of the placements we would have. Experiences enhance what you were taught
- The reality of caring for foster children. Foster children have been through a lot of horrible situations that take a toll on their well being. Life puts a strain on who they are and who they feel that they are. This is a lot of work on the foster parents, we need to prepare for this
- More first hand information, phone numbers of who to call for what

5. Please list some things about birth parents that are comfortable for you and things that make you uncomfortable.

Comfortable

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- Talking to the birth parents about the child
- Getting information on the child's history, opening up with them to get to know them
- Meeting them in person
- When the parents' efforts at behavioral change are sincere it is easy to work with them
- Talking
- Sharing information
- Playing with the child
- Birth parents realize I am trying to help
- I like working with birthparents for the most part, I like listening to and talking with birthparents about their child

Uncomfortable

- When I have to confront the birth parents about something (changing the baby's diaper more often)
- When the birth parents won't talk to me
- Dealing with possible drug and gang issues
- Being seen in public with the child and having the family coming up to you
- Taking the birthparents to doctor appointments with the child \
- When I feel that a birth parent had been particularly negligent regarding the child it is difficult to envision supporting the child's reunification with them
- The birth parents want to make little decisions like don't cut her hair or what toys to buy for her
- If the birth parents are in gangs
- Sharing too much personal information, and confidential information about our whereabouts and last names/ everyone knows your name
- When the birth parents feel that I am taking their child away
- I have little patience for continued drug use
- Not comfortable about talking about my family and personal life
- Talking with parents about sexual abuse their children have endured

6. Please describe your initial expectations of the foster child/ren.

- I expected the teenager to cause problems but she didn't, she listened and did what I asked
- Hard to handle
- Dealing with sexual or abusive households
- Infants and their special needs
- The process seemed longer than I expected, but for the child themselves, I opened my heart to what God sent

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- At first all the children felt lost and alone (cried, can't sleep, or slept a lot)
- They needed to feel secure and have some structure
- We accept each child from where they came from and accept them for who they are
- I don't have an expectation of the children, I expect them to have expectations of the foster parents
- Most of the children are reluctant to be with the foster parents and resent being separated from their parents
- I expect them to have expectations of the foster parents
- The child would need lots of patience and time to adjust and need their needs met to feel secure
- I expect the child to be scared, unhappy, and difficult
- I expect that they will be scared and unsure of what's going on

7. Did the TEAM training prepare you for what to expect with the child and the processes of the welfare system? How so?

- Yes: It gave me the resources to be able to find answers if the TEAM training information wasn't enough
- No: There are so many issues that the welfare system has that you couldn't cover them all, a lot of the information that they went over was very fast and you really didn't have time to absorb it
- No: Even now that I am in the middle of the process I feel that I don't fully understand it sometimes
- Overall the training did tell you what to expect, however there is nothing like experiences
- The training did prepare us for the child. However, the court and government's determination to reunify families no matter how destructive and risky it is to the child's welfare was truly surprising
- The training prepared us for the child, and the government has most all the solutions with the court and families involved in the case
- I felt through the TEAM that the foster parent was more part of the TEAM-the decision TEAM and that together we would make a decision for what the child would need. However, the decisions that the foster parent make is to care for the child and the social workers make the decisions
- I was a little prepared as to what to expect but experience and trainings have been a huge help
- Somewhat: I understood some of the legal necessities. I understood some of the philosophy. On the surface level, I understood some about the abuse and neglect the children might have experienced

8. Do you have a stable relationship with the child in your care? How is it stable or unstable?

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- Yes: I have a stable relationship, the children are two and under so we are very bonded
- Yes: The child was adopted by us
- Yes: Very stable and loving relationship
- Yes: I feel that overall we have a stable relationship with most of the children that came into our care. However, there have been a few that needed extra support
- Yes: We have had stable relationships with the children; they have thrived and felt much loved. The child in our home now is very stable, securely bonded, and loved/loving
- I have a stable relationship with my children, we talk a lot
- I do not currently have any children in foster care. But, I've always had stable relationships with the ones who have been her in the past

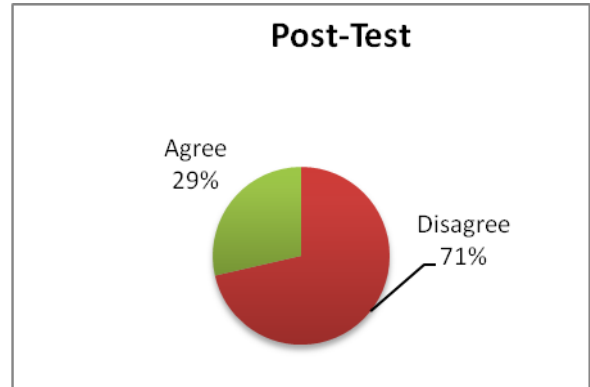
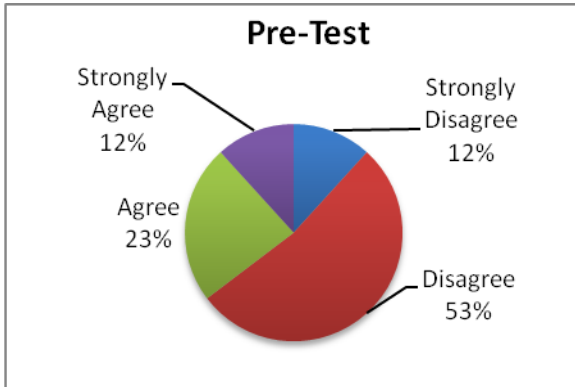
9. If you had a failed placement, what could have been done to make the placement successful?

- More support getting child into counseling and therapy sooner
- Probably would have only taken the one child not two due to their ages (21 months and 11 weeks)
- It seems as though the social workers were truly out front with some of the problems that the child had, they absolutely diminished the problems of sexual abuse and drug exposure that the child had encountered
- Give more information about the problems the child has

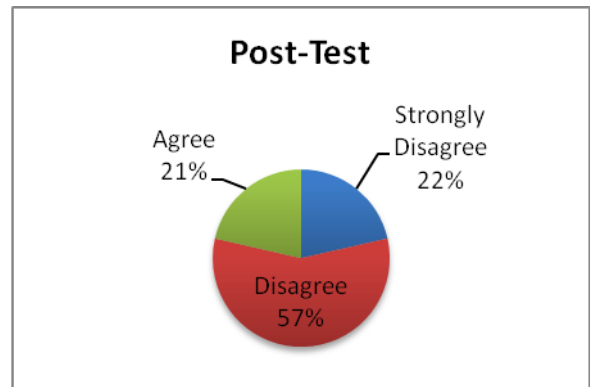
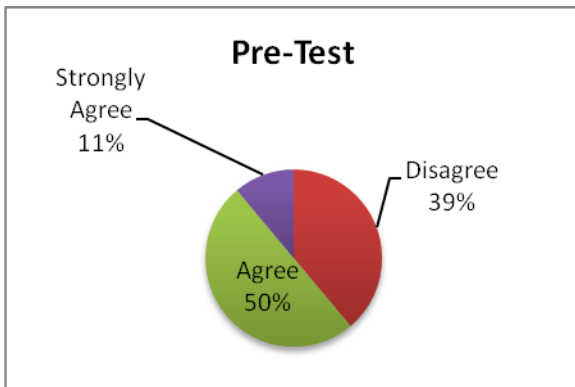
Appendix F: Pre and Posttest Survey Results

TEAM Series Pre and Posttest Survey Results

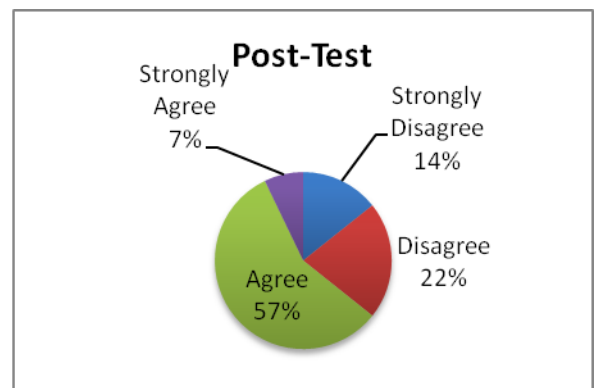
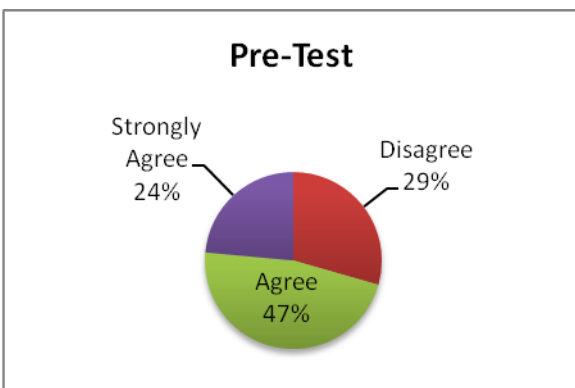
1. Becoming a foster and/or adoptive parent is a fairly easy process



2. The department will have a thorough history of the child's needs and behaviors

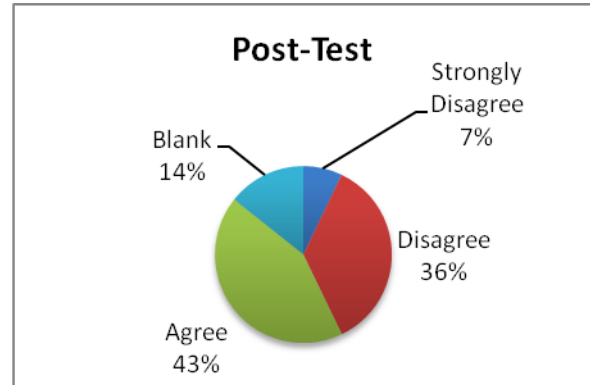
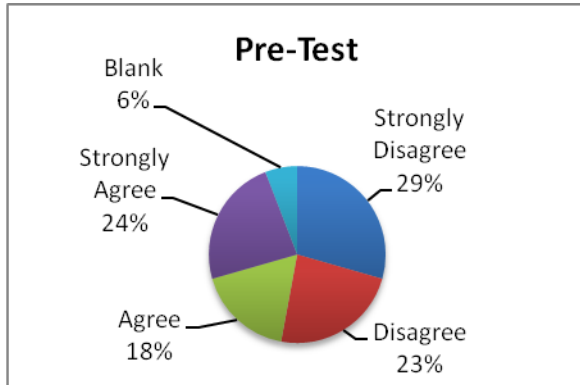


3. The Child Welfare System has plenty of resources to help a child

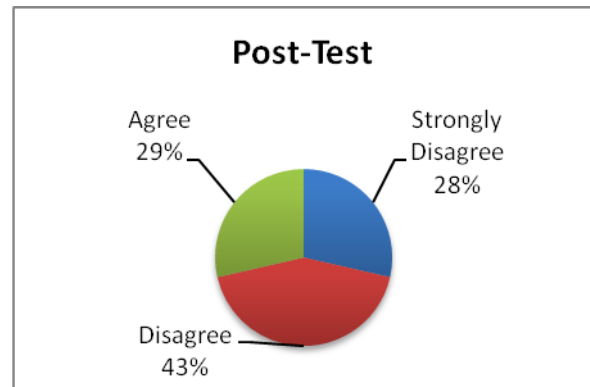
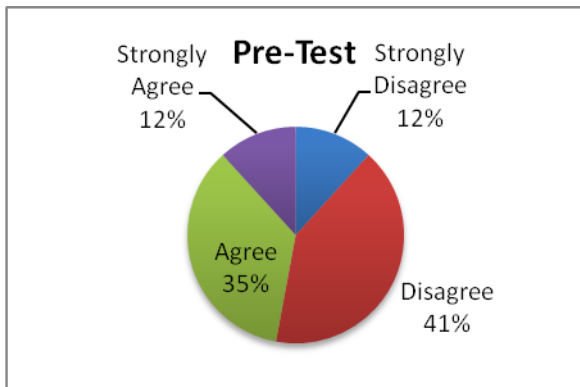


BOERLAGE – PERMANENCE AND STABILITY OF PLACEMENT

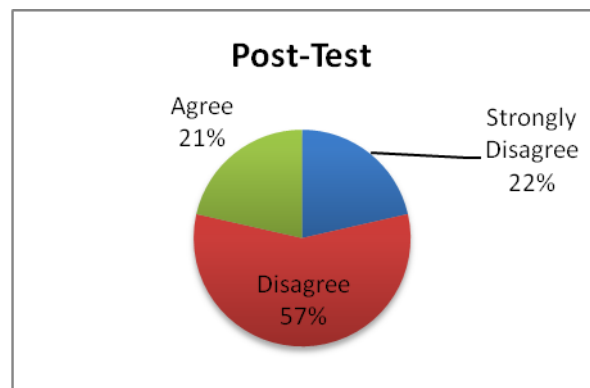
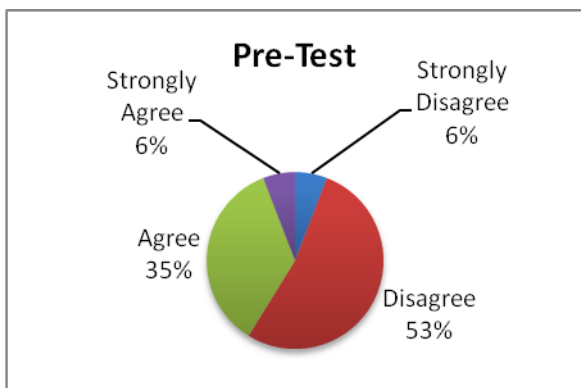
4. I successfully parent my own child, so I can parent a child from the welfare system



5. A child will benefit more from me caring for them than their birthparents

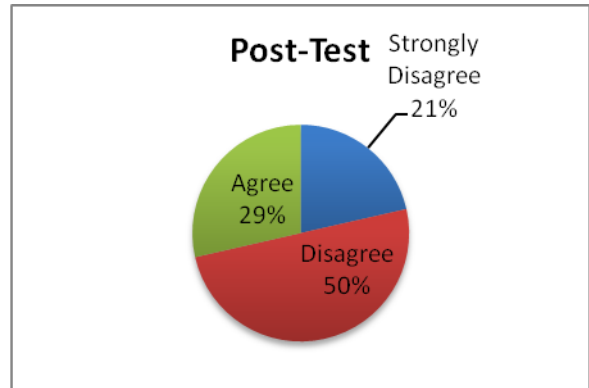
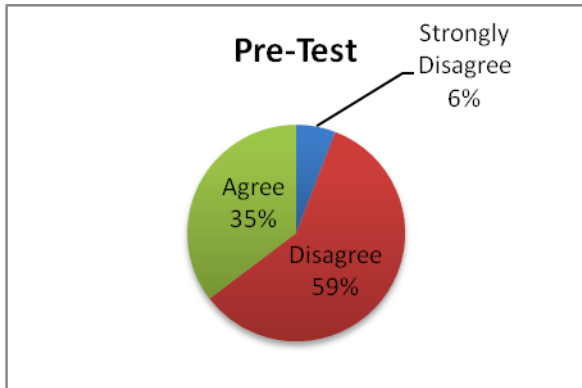


6. I will have more say about the child's needs than the birthparents since the child is in my care

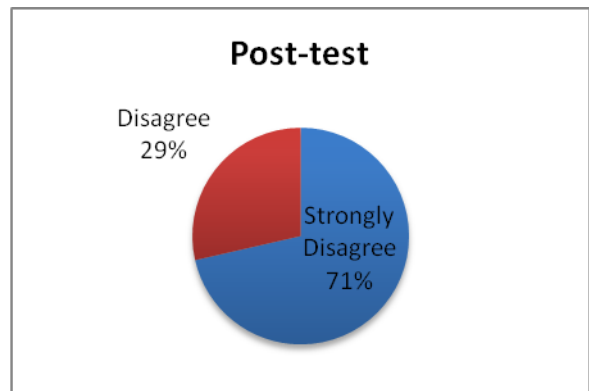
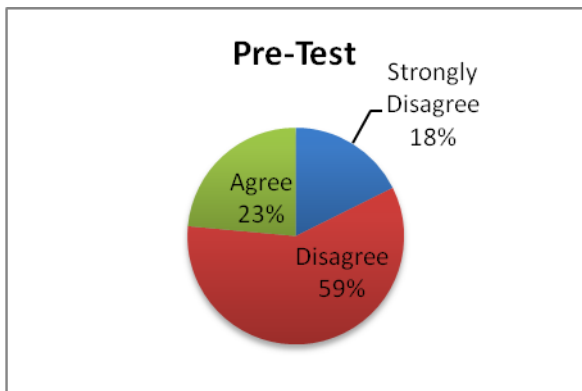


BOERLAGE – PERMANENCE AND STABILITY OF PLACEMENT

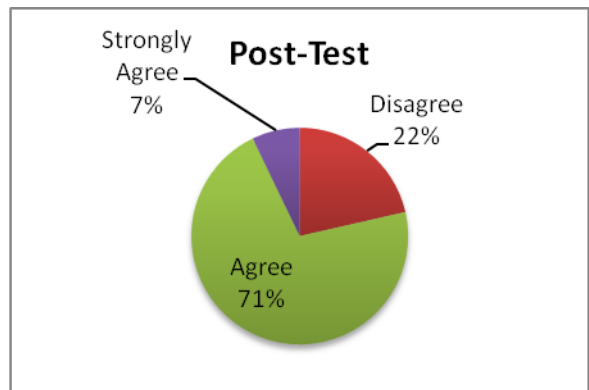
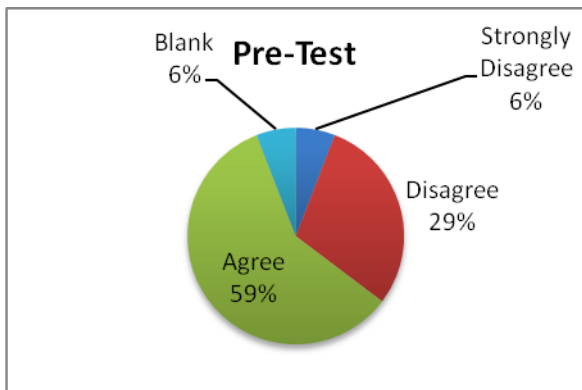
7. Foster parents have a significant influence over visitation arrangements between the child and their birthparents



8. I will not have to collaborate with the birthparents

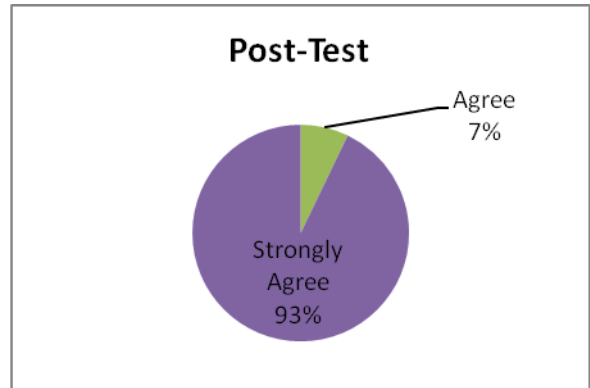
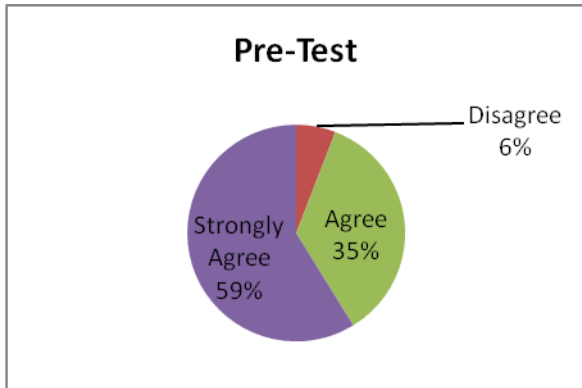


9. A child should be encouraged to meet the foster/adoptive parents “half-way” when learning how to be a family

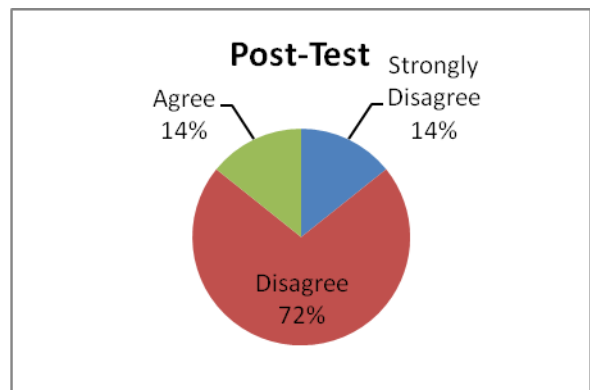
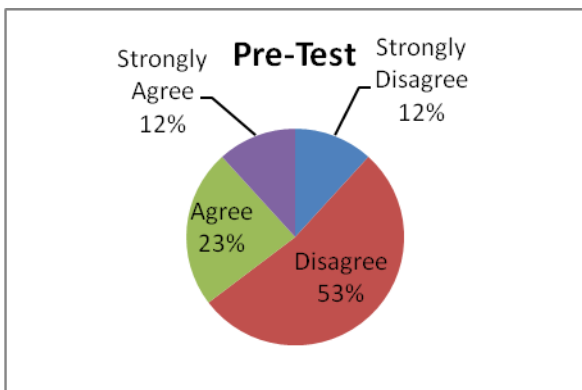


BOERLAGE – PERMANENCE AND STABILITY OF PLACEMENT

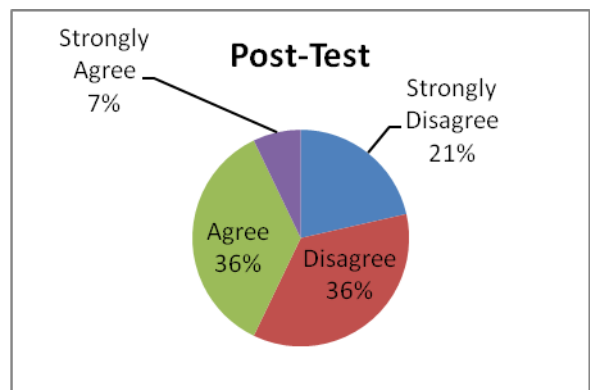
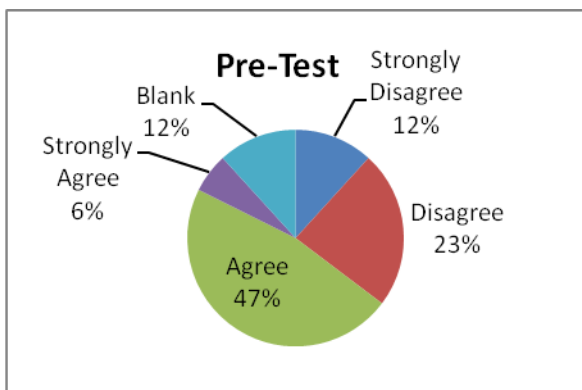
10. Any person who has ongoing contact with the child must be fingerprinted and approved by the department



11. All the children need is a lot of love to resolve loss

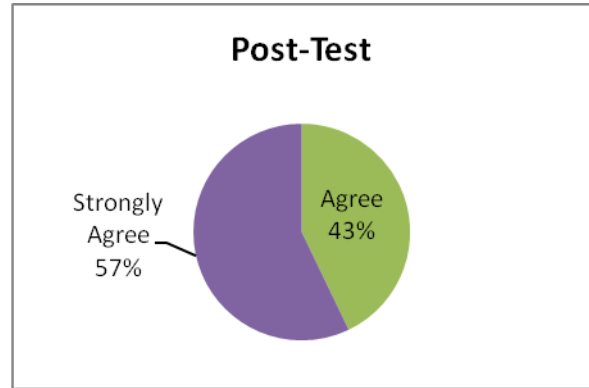
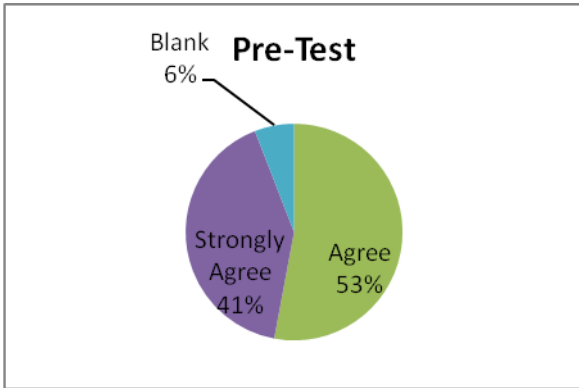


12. Attachments can be easily made with children involved in the welfare system

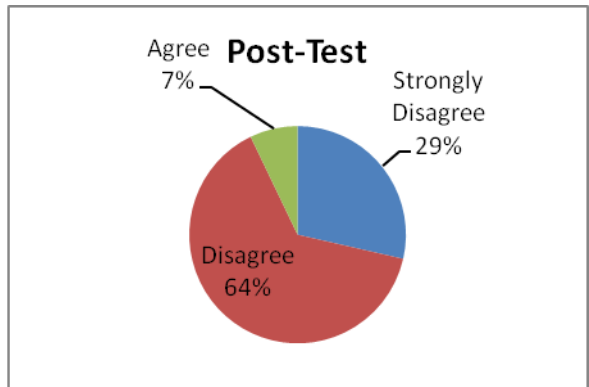
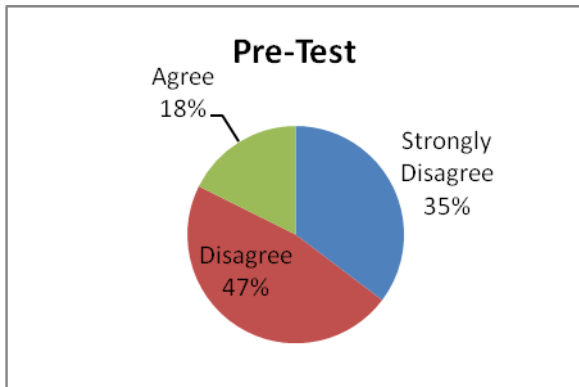


BOERLAGE – PERMANENCE AND STABILITY OF PLACEMENT

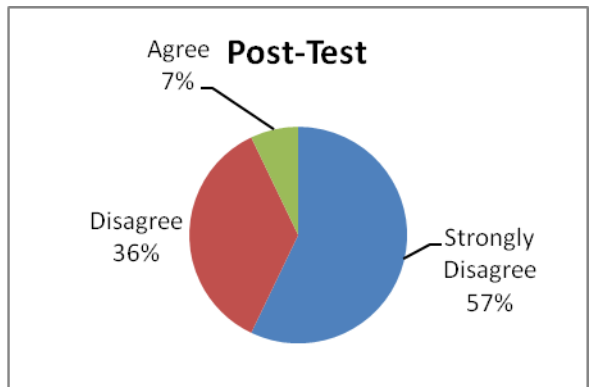
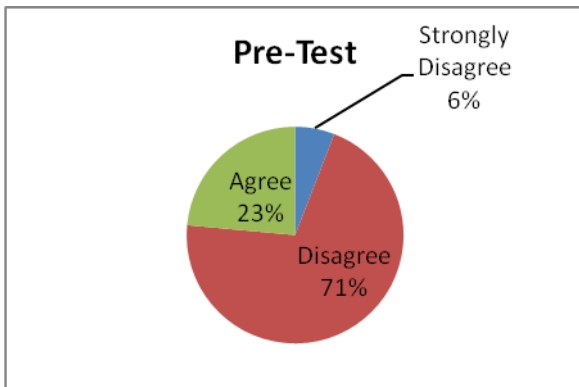
13. It is valuable to support healthy relationships between children and birth family



14. I can discipline the child the way I see fit

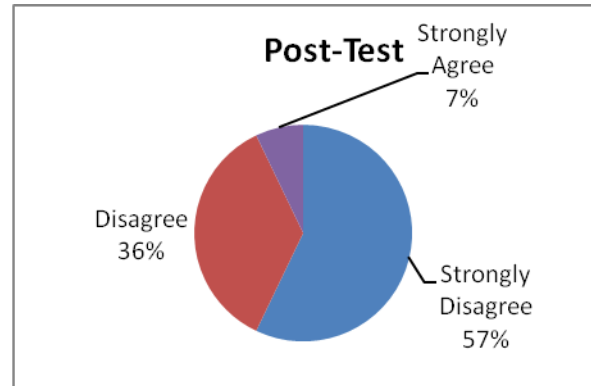
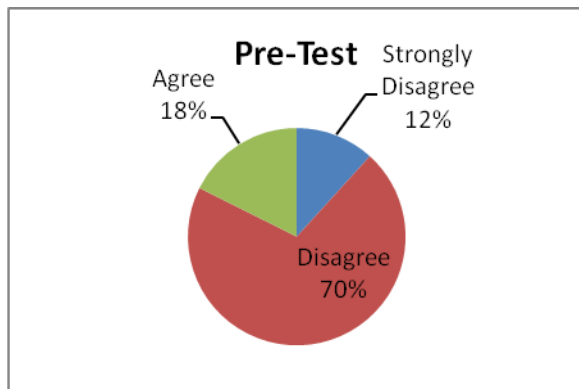


15. Foster parents can consent for ear piercings and major hairstyle changes



BOERLAGE – PERMANENCE AND STABILITY OF PLACEMENT

16. A newborn will be easy to take care of because they haven't experienced trauma and loss



17. Children's fantasies about birthparents will go away eventually

