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FOLLOW THROUGH SINCE THE IMPLEMENTATION OF KATIE A V. BONTA

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FOLLOW THROUGH SINCE THE IMPLEMENTATION
OF KATIE A V. BONTA

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Alleena Parchment

May 2025

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May 2025

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ABSTRACT

This research proposal aims to explore how well Los Angeles County has followed through with the guidelines that *Katie A. v Bonta* has set. This paper will suggest ways to effectively carry out the research through a systematic literature review. Foster children are more likely to be diagnosed with mental health illnesses such as depression, anxiety, or PTSD. Katie, a young 4-year-old girl, went through 37 placements and received no mental health services. As a result, a class action lawsuit came about with Los Angeles County. Based on the lawsuit, policies were made to provide mental health services to foster youth. However, it is unclear if these policies have been effectively implemented.

This project proposes that data should be extracted from the articles based on the interventions, characteristics of the participants, and the methodology. The data that will be utilized consists of existing peer-reviewed research and grey literature. The potential contributions of potential findings to the social work profession. The proposed project will provide an additional tool for the Social Work profession to monitor if the implementation of the *Katie A V Bonta* guideline has been adequate and effective.

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CHAPTER ONE: PROBLEM FORMULATION

Introduction: Mental Health Needs in Foster Care

The foster care system is designed to remove children from potentially harmful situations and place them in a safe environment where their needs can be met. In 2021, 22,892 children entered the Foster Care system in California alone (Annie. E Casey Foundation, 2023). Unfortunately, many of those children experience a high rate of mental health disorders. For example, a 2022 study found that children in foster care are 3 to 4 times more likely to be diagnosed with a mental health illness compared to the general population (Engler et al., 2022) and about half of foster youth have mental health needs requiring treatment (Tarren-Sweeny, 2017).

Foster children are being diagnosed with a variety of mental health illnesses such as ADHD, depression, anxiety...major depressive disorder, or PTSD (Engler et al., 2022). Externalizing disorders may also be common such as substance-related or addictive disorders and internalizing disorders are seen as well from obsessive-compulsive disorders to trauma-related disorders (Engler et al., 2022).

A more pressing issue is suicidality. Engler and colleagues (2022), found that the two most prevalent predictors of suicide are physical abuse and the severity of maltreatment, additionally, the likelihood of suicidal ideation increased

by 68% each time a child experienced a placement change. Many times, suicidality may also lead to hospitalizations. Leathers and colleagues (2021) found that 38.2% of foster youth had one or more psychiatric or medical hospitalizations, and 25% of youth had a history of psychiatric hospitalization. These findings clearly show the need for appropriate and effective mental health services, which is why an investigation into policies affecting those mental health services is needed.

Policy

This paper will focus on a specific policy that aided in necessary change to the foster care system known as *Katie A v. Bonta*. Katie was 4 years old when she entered the foster care system, she went through a total of 37 placements and did not receive mental health services. As a result of her story, the class action lawsuit *Katie A. v Bonta* came about in 2002, with Los Angeles County settling in 2003. The main issue that needed to be addressed was how children entered into group homes or hospitals instead of receiving individual services (Bazelon.org, 2016). By 2005, a panel found that the county never developed a plan to help its foster youth, and in 2006, a judge ordered Los Angeles County to address the deficiencies in their plan and to continue reporting to the panel.

Ultimately, in September 2011, a settlement agreement came about to provide intensive home and community mental health services for foster youth and at-risk foster youth, and these services were to be provided under Medicaid (Bazelon.org, 2016). Slow yet steady progress seemed to have been made,

however, it was not until March 26, 2013, that an All-County Letter was released to address the changes implemented because of the lawsuit.

From a Micro perspective, these policies determine how one interacts with clients and what support they can offer. Without proper implementation of policies, the types of support social workers can give may be limited. Micro and macro practice are heavily intertwined and cannot be seen as mutually exclusive concepts.

Theories Guiding Conceptualization

The two theories that will be of primary focus are attachment theory and ecological systems theory. Bowlby theorized that infants are programmed to build strong emotional relationships with their caregivers. Based on their relationship, they can either form secure or insecure attachment styles (Miranda et al., 2019). Many foster children seek control of their environment, and consequently, disorganized attachment styles come into effect (Miranda et al., 2019). For a secure attachment style to form, it is dependent on the caregiver and how nurturing, comforting, supportive, and stable they are, which is unfortunately rare for foster children (Miranda et al., 2019).

Many different types of insecure attachments can form because of unstable relationships with caregivers. Those include anxious, ambivalent, avoidant, and disorganized, and it can result in a risk of psychopathology, depression, anxiety, behavioral issues, and difficulty maintaining relationships. Consistent long-term behaviors may also persist, including an antisocial

personality, being emotionally unavailable, and being manipulative (Miranda et al., 2019).

Bronfenbrenner developed the ecological systems theory and examined how the different systems may impact an individual. The core piece is that these systems are not supposed to be seen as standalone parts, but they heavily interact with one another, and a person is an active agent within their systems (Farineau, 2016). The first is the Microsystem. It encompasses caregiver-adolescent relationships as well as peer relationships. As illustrated above with attachment theory, caregiver and adolescent relationships are vital in a foster child's development, however, peer relationships should not be discounted either. Peer relationships can influence delinquency, and positive social interactions can decrease the level of delinquency (Farineau, 2016). Second is the Mesosystem, which is how the microsystems interact with one another. A lack of harmony between various microsystems can be detrimental to a foster child and impact their behavior (Farineau, 2016).

Next is the exosystem, which consists of policies that may impact placement, reunification, and placement disruptions. The macrosystem is how society views the group you are a part of. For example, there is a stigmatization of the foster care system and everyone who is involved, which can lead to feelings of disconnect and problematic behaviors (Farineau, 2016).

Lastly is the chronosystem, which is the historical time one exists in (Farineau, 2016). It impacts the policies that may or may not be in place, which in

turn affects a family and child. Another important factor is the developmental stage that one is in. Certain behavioral issues may line up with the developmental stage that the child is in, and it can also help to understand better where the behaviors may be coming from (Farineau, 2016). These different systems work together heavily, and both theories should be taken into consideration when creating policies that directly affect foster children and their mental health needs.

Contributions of Findings and Research Question

The findings of this research project will contribute to Social Work practice by providing an additional resource about the impact of Katie A. v Bonta on the mental health services provided to foster youth. Additionally, it will provide valuable information to Social Workers about the follow-through of this policy and how well it is being implemented. In turn, this will help Social Workers in micro practice to ensure that the necessary guidelines are being followed to better assist their clients. As Social Workers must stay compliant with constant changes, it is important to analyze how well the follow-through of these policies is. Therefore, the research question is as follows: Since the implementation of Katie A. v Bonta, how well have agencies followed through with the necessary changes?

CHAPTER TWO: LITERATURE REVIEW

Introduction

Because there is little to no research on how well Los Angeles County has followed through with the changes that need to be made since Katie A., this chapter will focus on building a solid understanding of the requirements of the two settlements. First, the gap in existing research will be touched on; then, there will be an explanation of the 2003 settlement and the 2020 settlement. Both differ slightly, but the focus will be on what is required of the counties across the state and what they have agreed to do. Finally, there will be an explanation of the terminology used in both agreements. These settlement agreements apply to all counties in the state of California, however, while monitoring all counties would be ideal, this paper will focus on Los Angeles County and its progress.

The 2003 Settlement

The 2002 lawsuit was against California State Departments of Health Care Services and Los Angeles County. The main concern was that they failed to provide mental health services to at-risk foster youth (National Health Law, 2020). This 2003 settlement forced the county to close large facilities for foster youth. The 2003 settlement agreement starts by identifying class members. Children and young adults who are in the custody of the Department of Children and Family Services (DCFS), children who have behavioral, emotional, or

psychiatric impairment, and those who need individualized mental health services are all class members in the settlement. In addition, four goals are established: 1. Class members receive necessary individualized health services in their own home or the most homelike setting that is appropriate; 2. To receive the care and services needed, 3. Stability in their placement, when possible, and 4. Receive care and services consistent with good child welfare and mental health practice.

To be successful, the county must immediately address the service and needs of the plaintiffs, improve the consistency of DCFS' decisions by incorporating Structured Decision-making, expand wraparound services, implement Team decision-making, expand the use of Family Group decision-making, ensure mental health service needs are met, and enhance permanency planning. In addition to all these stipulations, the development of an advisory panel made up of six members was implemented.

The advisory panel had to make regular written reports and determine whether the plans were reasonable and calculated, determine if the county had carried out these plans, and monitor the implementation of the plans. Homan and colleagues (2018) described the advisory panel's 2017 report, sharing that there were major concerns about the lack of urgency in implementing the settlement and uncertainty surrounding the strategies the County wanted to utilize. The County decided to shift implementation plans, which were met with apprehensions. Instead of utilizing an Immersion Process in which the Shared

Core Practice Model only goes to a few offices every 18 months, they decided to use a countywide approach to reform all 19 offices simultaneously. This agreement was supposed to stay in place until it was determined that the County had fulfilled the goals and plans.

The 2020 Settlement

In 2019, Los Angeles County moved to end the agreement that was in place, and in September 2020, a new settlement was formed. This new settlement aims to increase the number of class members who receive Intensive Care Management (ICM) and Intensive Home-Based Services (IHBS). These services are to be delivered promptly when medically necessary, prevent unnecessary psychiatric hospitalization, decrease placement disruptions, and limit the number of placements in a short-term residential therapeutic program (STRTP). Additionally, this agreement should provide therapeutic foster care to class members who need mental health services.

This settlement agreement encompasses a wider scope, covering multiple groups of people and providing additional guidelines. Guidelines are provided for individuals who have undergone psychiatric hospitalization and for youths with intellectual disabilities. The settlement also mandates more comprehensive training materials on screenings and specialty mental health services. The most significant requirement is that the county needs to submit monthly reports showing the progress they have made in complying with the settlement.

The beginning of the twenty-twenty settlement states that there were extensive changes made to deliver child welfare services and mental health services. The County adopted the Shared Core Practice Model, utilized a Child and Family Team meeting, reduced the caseload of social workers, adopted the County's Mental Health Screening Tool, and created Coordinated Services Action Teams (CSAT). Throughout this time, the Katie A. Advisory Panel and the Plaintiffs have monitored the county. However, one major change in this settlement agreement is the removal of the Advisory Panel.

Common Terms Used in the Settlements.

Shared Core Practice Model

The shared core practice model, also called the California Child Welfare Core Practice Model, was put into place to develop and implement a plan to support child welfare practice and help professionals be more effective. The model considers historical trauma, developmental theories, intervention theories, and organizational theories (University of California Berkeley, School of Social Welfare, n.d.). To implement the Core Practice Model, there are four phases: engagement, service planning, monitoring and adapting, and transition. These four phases are supposed to work closely with the Child and Family Team to carry out the plan (California Department of Social Services, n.d.).

Therapeutic Foster Care

Therapeutic foster care is designed to provide short-term and intensive care as well as individualized specialty mental health services (SMHS) to children and youth. This service is provided to kids who have complex emotional and behavioral needs. Foster youth are placed with trained, supervised, and supported parents working under a TFC Agency. The utilization of therapeutic foster care has increased foster parent retention because of the support provided (Frederico et al., 2017). Additionally, children in a TFC program were less likely to develop mental health disorders and use substances. They were also more likely to strive toward higher education (Frederico et al., 2017).

Wraparound Services

Wraparound is not just one service it has to do with a system of support (Sather & Bruns, 2016). There are ten elements that wraparound must consist of, but some that stood out are as follows: drawing upon natural supports in the family's context, problem-solving throughout challenges, and the use of a strengths-based model (Browne et al., 2016). Some additional features of wraparound services include a facilitator and team meetings with the family, articulating family needs, and developing an individualized plan for the family (Sather & Bruns, 2016, Connell et al., 2024).

Connell and colleagues found that children with wraparound services had a decrease in externalizing and internalizing behaviors compared to children who do not have wraparound services. It is important to note there are also different

terms for what may be considered wraparound. Some of these are “Intensive Care/Case Management, Child and Family Teams, System of Care, and Intensive Community or Home-Based Services (IHBS)” (Sather & Bruns, 2016).

Intensive home-based services are made available to those with Medi-Cal, and the services are needs-driven, strength-based, individualized, and engage in the participation of the child or youth with their primary caregiver (California Department of Social Services, n.d.). Another common abbreviation that comes up throughout the settlement agreement, which can be under the umbrella of wraparound, is Intensive Field Capable Clinical Services (IFCCS). This is a mental health program made to provide field-based trauma-aware services to children with an open child welfare case.

The Gap in Existing Research

The peer-reviewed research on Katie A v. Bonta is nonexistent. What we do know, however, is that Katie A. went through 37 separate placements and did not receive any mental health services. Unfortunately, this is not a rare experience, and that can be seen through numerous personal accounts. One person wrote on her blog, “...I was moving from home to home, group home to group home, out of one school and into another-all while having numerous caseworkers” (Sutherland, 2021). Another former foster youth, Brittany Clark, shares her story about experiencing physical and sexual abuse in a group home. She was then put in multiple different homes, at least five of which were first-time

foster parents. She recommended that current foster youth utilize counseling and therapy to get a better chance of being placed in a safe home (Clark, 2015).

Finally, another former foster youth described her experience in detail. She moved from her grandparents' home to her mom's home multiple times before going from group home to foster home repeatedly. She described how her younger brother would show up to court with bruises all over his body. When she left the system, she struggled with alcoholism, and after becoming sober, she graduated with her master's degree (Illges, 2022). These personal accounts show how important it is to invest in foster youth, and the Katie A. settlements aimed to improve the current support.

While peer-reviewed research is not available, there is some data available that Los Angeles County has provided regarding services for Katie A. subclass members. For example, in 2014, 3,565 subclass members received Intensive Home-Based services, and Los Angeles County spent about \$7,700 per youth. While this may sound significant, Alameda County had 442 subclass members and spent nearly \$22,500 per youth (Kelly, 2014). The goal of the Katie A. settlements is to get more children access to Intensive Home-Based services, Therapeutic Foster Care, and Intensive Care Coordination. In 2014, Los Angeles County received praise for increasing mental health services for children in foster care. However, there was still an insufficient number of providers (Loudenback 2014). While personal anecdotes and grey literature are important tools to utilize,

there needs to be updated peer-reviewed research to monitor the progress of the implementation of Katie A. in Los Angeles County.

Summary

The county had a plethora of work to do following both settlement agreements, but there were strong interventions that could help guide them in the right direction. The shared core practice model, therapeutic foster care, and wraparound services are just a few tools that the county was planning to utilize. Although the advisory panel seemed effective, it was terminated after the 2020 agreement.

The 2020 settlement provided detailed guidelines on how to deliver specialty mental health services, training materials, wraparound services, and intensive home-based services, and it even aimed to protect those with an intellectual disability. In addition to protecting class members, the county still had to do some form of data reporting to the plaintiffs so they could be sure that the follow-through was happening. With the extensive requirements that the county had to follow, it is easy to see how and why there has not been any concrete monitoring of their progress.

CHAPTER THREE:

METHODS

Introduction

Despite the many different methodologies available for research, a literature review was the most appropriate format for this design. Systematic literature reviews outline how information is collected and how it will be examined. In this case, a systematic literature review will help to analyze the evidence available on the current state of research on the impact of Katie A. v Bonta regarding the services available for foster youth in the state of California. There will also be an explanation as to why this research is vital to the social work profession. This chapter will concentrate on the design of the proposed study as well as the purpose. It will also go over the instruments, sampling, protection of human subjects, and how the literature will be analyzed.

Study Design

This paper proposes a study on analyzing if Los Angeles County has effectively made the changes proposed by the Katie A. v Bonta guidelines. Additionally, it will identify the gaps in research surrounding this topic and outline ways that this information could be impactful to the social work profession.

An advantage of using a systematic literature review is the lack of human subjects. The data collection is strictly from existing literature, which helps to prioritize finding information to answer the research question. A systematic

literature review has very few limitations. However, one clear limitation of this design is the lack of peer-reviewed research available. Most of the information gathered about Katie A. will be through grey literature (literature that has not undergone peer review), however, there will still be inclusion and exclusion criteria to minimize the utilization of unreliable information, and the use of peer-reviewed research will be done when possible.

Sampling

This study will incorporate information from peer-reviewed research articles and grey literature. The databases that will be utilized are One Search, EBSCO Host, PsychINFO, and Google Scholar. In addition to articles, county webpages and reports from agencies supporting Los Angeles County DCFS will be used. The articles included were between 2003 and 2023. About 20 articles will be used in this systematic literature review to answer the research question appropriately. Inclusion criteria included articles containing pertinent information to the research question, articles published under government agencies, or professional magazines. Exclusion criteria included articles that were in languages other than English and articles not available through one of the previously mentioned search engines.

Data Collection and Instruments

Secondary data will be reviewed after being collected from peer-reviewed journals and grey literature. The selected articles will be retrieved from the

California State University, San Bernardino library databases such as EBSCO Host, and grey literature will be pulled from Google. Because there are no independent or dependent variables, the literature will be organized by author(s), year of publication, purpose of the study, methods, and outcomes. Additionally, there will be no qualitative data collected through questionnaires, interviews, or surveys. The literature will be screened to ensure it meets the inclusionary criteria. Because the nature of the study is a literature review, no special instruments will be utilized.

Procedures

Keywords will be used to search peer-reviewed articles as well as grey literature. The Keywords included Katie A v Bonta, foster care, resource parents, guidelines of Katie A settlements, wraparound services, therapeutic foster care, shared core practice model, changes made to Los Angeles County since Katie A., benefits of wraparound services, 2003 Katie A settlement, and 2020 Katie A. settlement.

EBSCO Host, PsycINFO, and Social Work Abstracts are some databases that will be used, as well as Google and Google Scholar. Each article will be examined according to the inclusion criteria, including peer-reviewed and grey literature published in English, articles available through the CSUSB library, articles published between 2003 and 2023, and articles having to do with the follow through of Los Angeles County after Katie A.

Protection of Human Subjects

Because this research proposal will utilize previously completed research and existing literature, there will be no human subjects in this study. However, the completion of a Collaborative Institutional Review Board Training Initiative (CITI) IRB review will be done to ensure that proper guidelines and ethics are followed, that is required by the Institutional Review Board (IRB).

Data Analysis

Relevant articles that are related to this research question will be done through data collection. Articles will then be gathered, and the inclusion and exclusion criteria will be taken into consideration. Additionally, the publisher of the article, the author(s), and the full text will all be evaluated. Data will then be extracted from the articles based on the interventions, characteristics of the participants, and the methodology. The goal of reviewing these articles is to identify the effectiveness of the changes being implemented after the Katie A. v Bonta lawsuit. It will systematically break down the proposed changes and identify if Los Angeles County is following through with the necessary adjustments.

Summary

In conclusion, this study will explore if the Katie A. v Bonta guidelines have been effectively implemented, identify the gaps in research regarding this topic, and gather information from existing literature. A literature review was selected

because no human subjects are required. Because of this, a literature review is advantageous in the sense that a deeper examination of existing research and literature can be done to answer the research question.

APPENDIX A
DATA COLLECTION AND EXTRACTION SPREADSHEET

DATA COLLECTION AND EXTRACTION SPREADSHEET

<p>FOLLOW THROUGH SINCE THE IMPLEMENTATION OF KATIE A. V BONTA Data Extraction Tool</p>
<p>Bibliographical data</p> <p>Author</p> <p>Year of publication</p> <p>Content related to settlement</p> <p>Geographic location</p> <p>Specific program details</p>
<p>Population</p> <p>Age</p> <p>Foster youth</p> <p>Exclusionary criteria</p> <p>Inclusionary criteria</p>
<p>Methodology</p> <p>Type of research method</p> <p>Type of Interventions</p>
<p>Results</p> <p>Overall findings of study</p>

Key findings

Findings that relate to research question

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