This evaluation assesses the impact of changes in child welfare policy and practice undertaken in 11 urban areas participating in the Family to Family child welfare reform initiative sponsored by the Annie E. Casey Foundation. Many of the jurisdictions selected as “anchor sites” for this phase of the initiative were building on earlier successful efforts to align policy and practice with a set of values and operating principles that redefine the relationship between child welfare agencies and the families and communities they serve. Their objectives during this period were: (1) to maintain the emphasis on family-based out-of-home care they had accomplished through earlier efforts to decrease reliance on congregate care; and (2) to integrate work across the core strategies of Family to Family—Building Community Partnerships; Resource Family Recruitment, Development and Support; Team Decisionmaking; and Self-Evaluation. This executive summary describes the historical context of this phase of the initiative, the progress of anchor sites toward these objectives, and the impact changes in policy and practice had on various outcomes for children and families who became involved with the child welfare system during this period.
In 1992, the Annie E. Casey Foundation issued a framework paper describing the goals, objectives, and philosophical underpinnings of a new initiative, Family to Family: Reconstructing Family Foster Care. The paper included a specific statement of values that the Foundation espoused and to which it was seeking commitments from grantees (p. 17):

In summary, the Family to Family Initiative is founded on a few key value judgments: Reforms in family foster care must be directed to producing a service that is less disruptive to the lives of the people it affects, more community-based and culturally-sensitive, more individualized to the needs of the child and family, more available as an alternative to institutional placement, and in general more family-centered.

These and other values are an enduring part of the philosophy on which the initiative rests. Yet, at a time when the notion of “outcomes” was ill-defined in child welfare and the capabilities of states to measure outcomes were quite limited, the Foundation insisted that grantees pursue specific outcomes for families and children and measure improvements in those outcomes. Indeed, the original set of principles and outcomes continued to be emphasized by jurisdictions involved in Family to Family (pp. 16-17):

1. A reduction in the number of children served in institutional and congregate settings.
2. A shift of resources from congregate and institutional care to family foster care and family-centered services across all child and family-serving systems.
3. A decrease in the length of stay in out-of-home placements.
4. An increase in the number of planned reunifications.
5. A decrease in the number of unplanned re-entries into care.
6. A decrease in the number of placement disruptions.
7. A reduction in the total number of children served away from their own families.

While the underlying values and particular outcomes emphasized in the initiative remained consistent, the Foundation’s approach to grantmaking and delivery of technical assistance changed in significant ways. Exhibit E5.1 provides an overview of changes in the Foundation’s approach to working with sites, organized into distinct evolutionary phases and culminating with the designation of “anchor sites” in 2006.

When it was initiated, the orientation of Family to Family stood in contrast to the prevailing emphasis on family preservation and early intervention services in that it embraced out-of-home care as an essential component of the continuum of child welfare services. It was rooted in the assumptions that, while many children could be served safely in their own homes, those who were being removed to ensure their safety were often placed in overly restrictive settings rather than with foster families or relatives. Many local systems, especially those in large urban areas targeted by Family to Family, relied on congregate and institutional care because it was increasingly difficult to recruit and retain sufficient numbers of foster families. From the Foundation’s perspective, however, systems that operated in such a fashion added to the trauma experienced by children and made it difficult for those children to be reunited with their families. As a result, throughout the history of the initiative, many

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1 As the initiative has evolved, the list of key outcomes has been expanded to include reducing disparities associated with race, gender, or age, and increasing the rate of children entering care who are placed in their own neighborhoods or communities.
sites undertook “stroke of the pen” policy changes, such as closing emergency shelters and eliminating barriers to kinship care, as an initial step in their reform efforts. Therefore, the anchor-site phase of the initiative afforded an opportunity to refine policies and practices that were expected to improve safety and permanency outcomes, to improve the quality of care (e.g., stability of care), and to enhance family and community connections for children placed in out-of-home care.

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Exhibit ES.1: The Evolution of Family to Family

**Phase I: 1992 – 1997**
From its inception and throughout the history of Family to Family, AECF has enunciated a consistent set of values, operating principles, and outcomes to guide the work of state and local partners and technical assistants. The resulting guidelines and expectations provided a common framework for the initial phase of work in Alabama, Maryland, New Mexico, Ohio, and Pennsylvania. Although changes in leadership in some of the original states produced uneven results across time and sites, the lessons and accomplishments from 1992-1997 provided a base of experience for the next phase of development.

**Phase II: 1997 – 2000**
The focus of Family to Family during this period was on the development of “tools” that reflected lessons about practice strategies from the first phase. Participants from the initial group of states identified four strategies that they defined as integral to the initiative. They deemed these strategies, individually and in concert, to be critical to the initiative’s success. Based on this assessment, subsequent phases of development have focused on: 1) building partnerships with the communities most affected by the child welfare system; 2) team decisionmaking at critical junctures in the placement process; 3) recruitment, training, and support for resource families; and 4) building the capacity of child welfare agencies to evaluate their progress in achieving Family to Family outcomes.

**Phase III: 2000 – 2005**
The third phase of Family to Family, beginning in 2000, entailed broad geographic expansion throughout California and to a number of other states, including Colorado, Illinois, Kentucky, Michigan, North Carolina, Oregon, and Tennessee. Work in this phase was marked by a focus on the four core strategies and the development of teams of technical assistants to help guide work on each strategy. It emphasized results in two realms. First, consistent with the message across all phases, the states and localities involved in the initiative were expected to make improvements in specific outcomes for families and children, and to show that disparities in outcomes by race, age, or gender were being addressed. Second, in addition to tracking outcomes, participating agencies were expected to monitor and report on their progress in implementing each of the four key strategies. Thus, sites that became involved during this period, including Alaska, Arizona, the State of Washington, and under new leadership, New Mexico, sought to develop capabilities to evaluate both outcomes and the delivery of new practices and services.

**Phase IV: 2005– Present**
The expansion of Family to Family to so many sites imposed a heavy demand on Foundation staff and the technical assistance team. As a result, the Foundation decided to conduct a self-assessment beginning in 2005. Work over more than 18 months led to two conclusions: 1) reaffirmation of the initiative’s theory of change concerning the synergistic effect of integrated work across the core practice strategies; and 2) a commitment to “go deeper” in fewer sites. This resulted in the Foundation identifying 15 “anchor sites” in which to focus work in the next phase of Family to Family. These sites were judged to offer the most potential for full implementation of the initiative’s four core strategies, and therefore, to serve as places in which to assess the collective impact of those strategies on the outcomes the Foundation was seeking to improve. In addition to supporting enhanced technical assistance efforts beginning in 2007, the Foundation sponsored an evaluation that began with an implementation analysis in 2006 and culminated in this report.

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The evaluation addressed several aspects of the implementation of Family to Family, from both site-level and child-level perspectives. It concerns sites’ decisions to adopt and pursue the initiative, and the challenges they faced in the early stages of their efforts. The analysis also required a measurement strategy that identified and captured key elements of Family to Family values, principles, and practices, and then, measured the presence of those key elements in the experience of individual children and their families. This provided the basis for analyses of the breadth and quality of the implementation of core strategies, both individually and collectively. Finally, the implementation analysis concludes with a brief review of factors that site participants and members of the initiative’s technical assistance (TA) team identified as affecting the decision of sites in Tennessee and Michigan to withdraw from Family to Family during the anchor-site phase. Key findings from these analyses are described below.

Adoption and Continued Pursuit of the Initiative

Local commitment and leadership are critical to successful implementation and nearly all of the anchor sites exhibited these qualities when they adopted Family to Family as the focal point of their reform efforts. Conceived as an effort to forge a neighborhood-based foster care system, the early stages of the initiative demand considerable time and attention to building relationships between the local public child welfare agency and community partners in the neighborhoods from which the most children were entering agency custody. Absent the sincere commitment of local administrators to reach out to potential partners, it is highly unlikely that progress would have occurred. Similarly, without a local point person advocating stroke-of-the-pen policy changes and negotiating the realignment of services with law enforcement agencies, the courts, and private child-caring agencies, it is unlikely that the initial hurdle in implementing Family to Family would have been overcome.

In a number of these communities, the shelter(s) had been established and operated by private agencies. In Denver, for example, a new facility had recently been constructed with contributions from private benefactors just prior to that site embarking on Family to Family. In such situations, the prevailing perspective was that this is how a caring community provides a ready response to children who have been abused and neglected. This contributed to the political influence of private agencies providing placement services under contract to the public child welfare agency and increased the challenge of making the “stroke-of-the-pen” policy changes that were necessary to move away from relying on congregate care and toward using family-based out-of-home care.

Even after overcoming this major hurdle, it has been a challenge for sites to maintain a commitment to Family to Family. Ongoing work entailed several common challenges for anchor sites, including:

- Difficulty in achieving ongoing commitment of middle managers, frontline supervisors, and staff to Family to Family values and principles;
- Normal staff turnover in public child welfare agencies, which is typically quite high, demands continuing effort to promote Family to Family values and principles in orientation and training, which may conflict with education and training that new staff bring to their positions;
An Evaluation of the Anchor-Site Phase of Family to Family

Executive Summary

Changes in leadership resulting from: (1) routine changes in personnel due to retirement and managers taking positions of higher responsibility or in new locations; and (2) leadership transitions growing out of changes in elected officials who appoint administrators; and

Budgetary stress that raises questions about whether Family to Family practices are components of “core” child welfare services, especially crises that emerged in 2008.

Many of the values and operating principles of Family to Family conflict with those that often prevail in child welfare systems, especially among managers, staff, foster families, contract agencies, and community partners whose experiences are rooted in traditional “rescue the child” approaches. Achieving a shift in perspective and practice entails a deliberate and continuing organizational change process led by the director of child welfare and that person’s management team.

Given the reform impulse already in place in many Family to Family sites, certain innovative practices were in place or being put into place that were similar to the core strategies. Also, some sites were subject to consent decrees that dictated the adoption of certain practices. This was especially the case with regard to various types of family team meetings (e.g., family group conferences), but also applied to different training curricula for resource families or alternative approaches to building community partnerships. In each instance, the resolution of differences in values, practice philosophy, and operating procedures entailed discussions and negotiations among the Foundation, local leaders, site partners, and the TA team. This sometimes resulted in concessions by site partners that led to the adoption of Family to Family practices, but also resulted in “agreements to disagree” for anchor sites following approaches that deviated from statewide practices in state-administered systems. In two states, Tennessee and Michigan, differences ultimately led to the withdrawal of Shelby County (Memphis), Wayne County (Detroit), and Macomb County, Michigan, from further participation as anchor sites.

Measuring Family to Family

To capture the presence of values, principles, and practices of Family to Family in each site and in the experience of individual children and families, the evaluation team relied on descriptions of the key elements of each core strategy that the Foundation’s technical assistance team developed to guide implementation of each strategy. Consistent with the emphasis of the anchor-site phase on the integration of work across strategies, a number of these key elements reflected the intersection of work involving than one core strategy. Indicators of the key elements were recorded in an automated database for every Team Decisionmaking (TDM) meeting that was held during the anchor-site phase.

A subset of key elements of Family to Family, some selected specifically because they overlap aspects of practice in multiple strategies, comprise the child-level Family to Family index. The index ranges from 1 to 8 and is the sum of the number of key elements in place for each child at the time a TDM meeting was held. Because the Family to Family index includes data related to key elements of each practice strategy, it serves as a proxy indicator for the level of overall exposure to Family to Family and provides the basis for much of the analysis of outcomes. Children who did not have a TDM meeting were assigned an index value of zero. The index includes the following key elements, which are among the full range of key elements depicted in Exhibit ES.2:
Exhibit ES.2: Key Elements of Family to Family

- **BCP**: Recruitments are community-based, natural supports are accessible, homes in the neighborhood, and community supports & safety net for families are enhanced.
- **TDM**: Parent involvement in decision-making, child welfare team participates in making the decision, trained facilitator, and database tracks implementation.
- **RDS**: Families work with teams, info immediately available to families, training includes youth & parents, icebreaker meetings, and culture of respect for FP.
- **SE**: Partners participate in SE team, RDS & TDM staff participate in SE team, longitudinal data tracks outcomes, parents involved in decision-making, and children welfare team participates in making the decision.
- **FP**: Partners share in decision-making, FP share in decision-making, training includes youth & parents, and community supports for families are enhanced.
Building Community Partnerships (BCP) key elements:

(1) participation by community partners representing the community, but invited by the public child welfare agency;

(2) participation by family and friends invited by the family and service providers;

(3) the meeting is held in a community location away from the public child welfare agency; and

(4) participation by service providers from other agencies and organizations.

Team Decisionmaking (TDM) key elements:

(5) the placement decision is “live” meaning that a recommendation on a placement decision (i.e. removal, change of placement, exit from placement) is being made during the meeting [(although this is measured only for removal meetings, it is a key element of all meeting types)];

(6) parents participate in the meeting;

(7) multiple child welfare agency staff participate in the meeting; and

(8) a trained and experienced facilitator guides the decisionmaking discussion.

Recruitment, Development, and Support for Resource Families (RDS) key elements (included in the index for change of placement and permanency meetings only):

(9) substitute caregivers [foster parents or relative caregivers] partner with the agency, community and family by participating in the decisionmaking process.

The implementation analysis was based on data collected from 2005 through 2008 about the presence of key elements in individual cases for more than 93,000 children and youth at risk of removal and more than 30,000 children and youth in out-of-home care for whom a placement change was being considered. Exhibit ES.3 summarizes changes across the anchor-site period in the median number of key elements present when a removal or a change in placement was being considered for a child. Across all sites, the median number of Family to Family key elements in place when making change-of-placement (COP) decisions was lower than the median for removal decisions. Since most sites implemented removal TDMs before rolling out COP meetings, it may not be surprising that change of placement meetings were not fully developed in the initial years of implementation.
Generally, the implementation analysis indicates that sites continued to make progress in implementing the key elements of Family to Family during the anchor-site phase. While all sites showed increased prevalence over time in at least some of the key elements, no site reached full implementation in terms of all key elements being reflected in all meetings. The data do suggest, however, that significant numbers of children representing a majority of the cases served by anchor sites in more recent years were exposed to Family to Family’s values, principles, and practices. The summary that follows provides additional perspective on the progress anchor sites made in implementing each core strategy.

### Implementation of the Core Strategies

Three of the core strategies of Family to Family—Resource Family Recruitment, Development and Support; Building Community Partnerships; and Team Decisionmaking—involve direct practice with children, their families, and the communities in which they live. The fourth strategy, self-evaluation, focuses on building capacity to monitor the implementation of new policies and practices, and to assess how those changes affected the outcomes targeted by the initiative.

**Resource Family Recruitment, Development, and Support.**

The impact of work related to resource family recruitment, development, and support (RDS) seems apparent in anchor sites’ increasing reliance on family-based care settings. Exhibit ES.4 shows increases for anchor sites as a group in the percentage of children initially placed in family settings. By 2008, more than 70% of initial placements in the six sites outside California were with foster families or relatives. The rate of placement with families in the California five sites was consistently 90%, however, an important shift occurred in 2007 and 2008 when placements with foster homes supervised by Foster Family Agencies (FFAs) became the predominant initial placement.
An Evaluation of the Anchor-Site Phase of Family to Family

Exhibit ES.4: Initial Placements in Family Settings

It is difficult to ascertain the impact of Family to Family values, principles, and practices on private child-caring agencies that play an increasingly broad role in the provision of foster family care in the anchor sites. Some sites, such as Maricopa County, rely exclusively on foster homes recruited and supervised by private agencies. Similarly, as Exhibit ES.4 shows, sites in California have become increasingly reliant on foster homes recruited and supervised by FFAs while the number of
children placed in other foster homes has declined. While these changing placement patterns are readily apparent, it was not possible to assess recruitment and retention efforts pursued by private agencies because case-level information about foster families is generally viewed as proprietary. As a result, only widely varying forms of aggregate data are available to monitor RDS-related activity by these agencies.

Given that initial admissions to out-of-home care are declining in a number of anchor sites, it is also difficult to assess whether improvements occurred in the recruitment of resource families during this phase of the initiative. For example, one site experienced a net increase of 352 foster homes while another site had a net decrease of 44 homes. Either result may be appropriate to local circumstances such as changes in the number of admissions to care or increased use of kinship care. Nevertheless, it is clear that Family to Family anchor sites generally increased their reliance on family-based care during this phase of the initiative.

Some data are available about two other aspects of RDS practice that were promoted in Family to Family. First, sites were encouraged to hold “icebreaker” meetings between birth parents and caregivers soon after children are removed from their homes to help in their transition to out-of-home care. Although a few sites are planning to arrange and supervise such meetings, a survey of local coordinators indicated that only one or two have actually carried out meetings. The other aspect of RDS practice concerns caregiver participation in TDM meetings to decide whether a change in placement may be necessary. Such participation is indicative of efforts both to provide support to resource families and to bring their perspective to critical decisions about the placement experiences of children in their care. In 2008, the level of caregiver participation in COP meetings ranged from 34% to 71% across sites and more than half of all the meetings conducted in 2008 included a caregiver. Therefore, this aspect of RDS practice is becoming widespread.

**Building Community Partnerships.**

A key premise of the Building Community Partnerships (BCP) strategy is that all communities have history, strengths, and traditions that should be acknowledged and respected by child welfare agencies. A commitment to BCP helps agencies draw upon these community assets. The description of key elements and steps necessary for full implementation provided by BCP technical assistants provides a roadmap for sites to move toward full implementation of the strategy, but does so within a framework that clearly acknowledges that every community and every public agency is different. Moreover, it is important to realize that many of the core elements of BCP also are embedded in RDS and TDM practices. While striving to implement the identified key elements, each site could also develop strategies for implementation that are unique to its circumstances, perhaps, making this strategy one of the most difficult to achieve full implementation. By 2008, many of the anchor sites had established vibrant partnerships with community organizations, but many sites still did not have all key ingredients in place. In light of this, questions arise as to the feasibility of implementing the BCP strategy within a short period of time.

One of the key elements of BCP calls for each site to develop an infrastructure that supports ongoing community partnerships. The infrastructure established for conducting the BCP work varied across the anchor sites. All sites outside California identified a member of the child welfare agency’s staff to lead and support the community partnership work. Additionally, two sites established strategy teams or steering committees to guide this work and two sites geographically assigned staff to work with children and families from specific neighborhoods. Of the 11 sites included in the evaluation, Cuyahoga County, Denver County, Fresno County, Jefferson County, Los Angeles, San Francisco, and Wake County established a community collaborative/coalition or contracted...
with a lead community agency. The child welfare agency provides funding to the collaboratives in two sites. Most of the anchor sites contract for some Family to Family activities, even though there may not be coalitions of community-based organizations that collectively contract with the PCWA to provide several of these activities.

On of the key premises of Family to Family is that the public child welfare agency cannot do the work of supporting families and children alone. The BCP strategy provided a mechanism by which sites developed partnerships to support the work of the agency. One manifestation of these partnerships was the level to which community members representing the community participated in TDM meetings. The level of participation varied considerably—ranging across sites from 2% to 37% at removal TDMs and 9% to 27% at change of placement TDM meetings. Additionally, in some sites communities provided meeting space within the neighborhood to hold TDM meetings, thereby making it easier for families and others to attend. Like other elements there was considerable variance in this percentage as well, ranging from 0% to a high of 42% of removal meetings and 0% to 36% of change of placement meetings.

Another common activity across sites is the support that community partners provide in the recruitment and support of resource families. Often this work is focused in the neighborhoods from where most children live. It may also vary from conducting recruitment activities to providing support for existing foster parents.

Many of the challenges of implementing BCP would be familiar to the founders of Settlement Houses and other community organizers. What is more unique to Family to Family are the challenges of using BCP as part of an effort to reform public systems. When reform is targeted in a specific neighborhood, the activities can be tailored to the specific needs of that neighborhood, but how does this approach apply to changing entire systems? If every community is unique and every public agency is unique, is it possible to apply a uniform approach to developing community partnerships in all communities? Family to Family coordinator surveys included some reports that sites believed they were expected to implement the core strategies in ways that did not fit their local context. In terms of BCP, some sites were given the impression that they were expected to implement the “Cleveland” model of BCP, but local circumstances encouraged them to develop a different approach to funding and/or indentifying community partners. For example, some sites have developed partnerships with faith communities in addition to or instead of geographic-based communities. Some sites have developed contracts with community-based organizations for just one service, such as resource family recruitment, rather than contracting for an array of services and funding staff positions to carry out those functions.

In the anchor-site phase of Family to Family, a compelling rationale existed for focusing on the core strategies and specific key elements for implementing those strategies. This approach helped the anchor sites understand what their commitment to being an anchor site entailed and it helped promote model fidelity for the national evaluation. With this phase complete, it may be appropriate to introduce more flexibility into efforts to build community partnerships. Sites could even be given the opportunity to experiment, systematically, with alternative implementation of the BCP strategies in ways that are deemed most appropriate to local circumstances.

**Team Decisionmaking.**

Achieving full implementation of Team Decisionmaking (TDM) is similar to the other practice strategies in that it is dependent on simultaneous implementation of other core strategies; thus, progress on TDM is constrained by progress in implementing RDS, BCP, and self-evaluation. Still,
the data available from TDM databases successfully implemented by every site indicate that all sites moved steadily toward full implementation of removal and change of placement (COP) TDM meetings during the anchor site phase of the initiative. Yet, it is also clear from these data that TDM implementation is a multi-year process and that the necessary realignment of human and other agency resources cannot be accomplished in a year or less. Also, while all sites had begun implementing a third type of meeting, permanency TDM meetings, late in the anchor-site phase, the volume of data about these meetings is insufficient to complete an analysis of them.

From 2005 through 2008, anchor sites conducted removal TDM meetings for more than 93,000 children and youth, and change of placement meetings for more than 30,000 children and youth. Rough indicators of the extent to which meetings were being held in all instances when placement data indicated that they should have been held suggest that sites were approaching full coverage. By 2008, the removal coverage rate ranged from 51% to 90% and the median level of coverage across the 11 anchor sites was 67%. Change of placement coverage rates were consistently lower than removal coverage rates across the anchor-site period; however, data suggest that progress toward full coverage occurred from 2005 through 2007, with a slight decline in the median coverage rate for 2008. Still, comparing 2005 rates to 2008 rates revealed increased coverage in every site except Maricopa which was still in the very early phases of rolling out COP meetings and San Francisco, in which the rates were equivalent (38%).

As the breadth of coverage of TDM meetings improved, monitoring data suggest that improvement also occurred in the quality of meetings in terms of the number of key elements of practice that they reflected. Across the anchor sites, the number of key elements in place for removal TDM meetings was higher in 2007 and 2008 than previous years. By 2008, the most prevalent key elements in a removal TDM were: (1) the presence of an experienced facilitator—80% in California sites and 89% in other states; (2) parental participation—90% in California sites and 83% in other states; and the presence of more than one child welfare staff person—87% in California sites and 73% in other states. Among sites outside California, approximately three-fourths of removal meetings occurred prior to removal in 2008. About half of the meetings in 2008 (51%) were attended by a family member or friend in sites outside California and 45% of removal meetings held that year in the California sites had such participants. Approximately one-third of removal meetings in all 11 sites included a service provider from outside the child welfare agency. Fewer than one in five meetings in sites outside California had a community representative and even fewer meetings in California had someone representing the community in removal TDMs.

For change of placement meetings held in 2008, the most prevalent key elements were the presence of an experienced facilitator, more than one child welfare staff person, a service provider, and a caregiver. The patterns for sites outside California and those in California show more similarities than differences; however, some differences are noteworthy. For example, meetings held in California are more likely to have more than one child welfare agency staff member in attendance, but less likely to have an experienced facilitator lead the meeting (although nearly eight of ten meetings have such an experienced person in California). Family or friends also are more likely to attend meetings in California than in other sites, while meetings in sites outside California are more likely to include a community representative (although only 12% of meetings have such participants).

The recommendations produced by TDM meetings follow distinct patterns by type. Removal TDM meeting recommendations in sites outside California were almost evenly divided between maintaining children in their own homes and removal. In contrast, the patterns of recommenda-
tions from removal meetings held in the California sites show a distinct increase in the rate of recommendations for children to remain in their own homes (or to be returned immediately if they had been removed on an emergency basis), rising to more than 60% of recommendations in 2008. Analysis of the key elements reflected in a meeting and the recommendation developed in the meeting indicate clearly that the more key elements that are reflected in a removal TDM meeting, the more likely it is that the group will recommend that a child remain in his or her own home or, if previously removed on an emergency basis, that the child be returned home immediately. The rate of these recommendations increases from slightly more than 10% when very few key elements are present to nearly 60% when all or most key elements are present. This provides support for the Family to Family premise that the three practice strategies working together will encourage better outcomes for children.

Analysis of recommendations developed in change of placement TDM meetings shows that the percentage of children with a recommendation to remain in the current placement decreased from about 35% in 2005 to about 25% in 2008. During the same time period, there was a small increase in the percentage of children with a recommendation to move to a less restrictive setting while the rates of recommendations to move to more restrictive and to a placement of the same level remained about the same. In contrast, the rate of recommendations to maintain the current placement remained at just over 50% in the California sites. Roughly similar percentages of children had recommendations to move to a different placement of the same level of restrictiveness or to move to a less restrictive setting. In contrast to recommendations in sites outside California, fewer than 10% of COP meetings in California ended with a recommendation for a more restrictive placement setting.

Self-Evaluation.
While anchor sites adopted and successfully implemented many components of the core strategies of Family to Family, they also encountered a variety of circumstances that created challenges and, in some instances, insurmountable obstacles to full implementation. In the case of self-evaluation, the emergence of the Child and Family Service Review (CFSR) process established by the federal government posed two fundamental challenges to the approach promoted by Family to Family. First, the CFSR process required the use of performance indicators that the Family to Family technical assistance team believed to be imprecise and unreliable. Second, aspects of the CFSR process, such as the statewide self-assessment and the monitoring of Program Improvement Plans, required that limited child welfare agency analytic resources be focused on CFSR data compilation and analysis. As a result, it was neither feasible nor appropriate to implement a self-evaluation process organized primarily around the outcomes and performance measures emphasized in Family to Family. Instead, self-evaluation teams typically focused on ad hoc issues that addressed specific needs of strategy teams, especially issues that cut across the interests of multiple strategy teams. Also, considerable time and resources were devoted to building new data collection and analysis capabilities related to the practice strategies, particularly in RDS and TDM.

Progress in implementing the core strategies of Family to Family varied both across anchor sites and across time within each site. As a result, the experiences of individual children and families reflected varying levels of exposure to the values, principles, and practices of Family to Family. Given this variation, the outcome analysis relied on both site-level trend analysis and child-level multivariate statistical models to assess the likelihood that children would experience improvements in four outcome domains: safety; permanency; quality of care; and family and community connections. Predictive variables in the models measured exposure to key elements of Family to Family and factors describing characteristics of the child, the sites in which they lived, and the year they became involved with the child welfare system.\(^4\)

**Family to Family and Safety**
- Repeat maltreatment decreased as the initiative progressed in California sites.
- Children from California sites who had a TDM within 1 day of a substantiated referral were almost 40% less likely to experience repeat maltreatment within 6 months as children who did not have a TDM within this time frame.
- Children who experienced a removal TDM with a high number of key elements and who exited to reunification within 90 days were 38% less likely to reenter placement within 6 months in California sites (p = .054); no statistically significant relationship was found in sites outside California.
- No significant relationship was found between Family to Family exposure and reentry within 12 months in any site.
- In sites outside California, children maintained in their own homes following a removal TDM did not experience elevated rates of maltreatment.

**Safety.**
By searching for and identifying natural supports and formal services for children and their families, removal TDM team members identified alternatives that made it possible for them to recommend that more than half of the children for whom meetings were held to remain in their homes. To address concerns about the recurrence of maltreatment among children not removed from their homes in sites outside CA, they were tracked in future maltreatment reports. Site-level analysis indicated that rates of subsequent maltreatment did not increase appreciably across the anchor-site period.

The capability to match child-level maltreatment reports and removal TDM data made it possible to pursue a more rigorous assessment based on a multivariate analysis of more than 125,000 cases in California. Modeling revealed a strong effect related to the timing of a TDM; specifically, children who had a TDM within one day of a substantiated referral were almost 40% less likely to experience recurrence as those who had a TDM more than one day later. This result lends support to TDM practice guidelines that call for convening a meeting as soon as possible around a “live” decision. Also, children with an initial substantiated referral that occurred later in a site’s implementation of Family to Family were less likely than those from earlier time periods to experience recurrence.

\(^4\) Institutional Review Board restrictions dictated that separate analyses be conducted for children served in California.
Another indicator of safety is the likelihood of reentry to out-of-home care, and the group most likely to reenter care tends to be children with very short lengths of stay. Among children who exited to reunification within 90 days of initially entering care, high exposure to Family to Family within one week of entry to care decreased likelihood of reentry within six months by 38%. Among children outside California there was no statistically significant relationship between Family to Family exposure levels and reentry.

**Family to Family and Permanency**

- Depending on their race and ethnicity, and whether they lived in California or not, children with high Family to Family exposure were 15 to 29% more likely to reunify within 12 months.
- Depending on their race and ethnicity, and whether they lived in California or not, children with low Family to Family exposure were 8 to 24% more likely to exit to reunification or relative within 12 months than children with no exposure.

**Permanency.**

Perhaps the most impressive results of Family to Family are its positive effects on reunification rates in the presence of changes in other outcomes that have been shown to push these rates in the opposite direction. The number of children entering care decreased in many sites while the use of kinship care increased for children entering care. This pattern of change tends to be associated with decreases in timely exit rates. Despite this, children in California sites who experienced a high exposure to Family to Family were 15% more likely to exit to reunification within 12 months while those with low Family to Family exposure were eight percent more likely than children who had no exposure. In sites outside of California, the relative risk of reunification or exit to relative within 12 months was 27%, 29%, and 29% higher, respectively, for white, black, and Hispanic children with exposure to 5-8 key elements compared to children with no exposure. When exits to relatives were excluded and the analysis focused only on reunification, the increased rate of reunification was even greater for children in the high index group—43%, 36%, and 37% for white, black and Hispanic children respectively.

Since it is conceivable that the primary, and perhaps sole factor, driving reunification is the presence of the parents in the TDM meeting, additional models were developed to isolate the presence of a parent from other components of the index. The results indicated that the relationship between the key elements index and parental presence and reunification outcomes differs by race and permanency outcome. For a model combining reunifications and exits to relatives, the interaction between parental presence and the remaining key elements is significant for all races. This indicates that the impact of the remaining Family to Family key elements is different depending on whether a parent is present. Children of all races whose parents attend the initial removal meeting are more likely to experience reunification or exit to a relative within a year than are children whose parents do not attend. The children with the greatest rate of reunification or exit to relative are those whose parents attend a TDM meeting in which one to four key elements were present with white children 99% more likely to exit, black children 67%, and Hispanic children twice as likely to exit as children having a meeting with no parents and a low number of key elements.

When a parent is not in attendance the presence of 4-8 key elements significantly increases the rate of exit for white children by 48% and Hispanic children by 32%. Among black children, when
a parent does not participate in the TDM there is no positive effect from additional key elements suggesting that the primary factor affecting the likelihood of reunification or exit to a relative for black children is the involvement of parents. This finding is supported further by the reunification-only model for black children where the presence of a parent at the meeting was highly significant (p < .001), but the key elements index was not significant. Black children whose parents attended the removal decisionmaking meeting were almost twice as likely (RR = 1.97) to exit to reunification within one year as black children whose parents did not attend the meeting, but contrary to reunification-only models for white and Hispanic children the presence of other key elements in the meeting was not related to reunification within one year.

The consistency of the reunification results across all sites and across race groups in the sites outside of California holds significant promise for sites that have been struggling to improve this very important outcome for children and families. The results suggest that the early involvement of parents together with other supports such as family and friends, community representatives, service providers and multiple staff within the child welfare agency result in faster reunification. The difficulty, however, is that to bring all these elements to bear on the case in this timely manner requires widespread cooperation and collaboration among the many partners that support families in these difficult situations and requires the implementation of all the core strategies of Family to Family not just one or two which is often difficult for sites as shown in the implementation data.

High Exposure to Family to Family and Maintenance of Family Connections for Children in Placement

- Children entering care with no siblings were 39% more likely in Denver and Cleveland and 44% more likely in California sites to maintain a family connection through neighborhood placement or relative placement than children with no exposure.

- Children entering care with siblings in Denver and Cleveland were 91% more likely to maintain a family connection through placement with a sibling or neighborhood placement or relative placement.

- Children in sites outside California were 17% more likely to be placed with a relative than children with no exposure; when a relative was present, high exposure increased likelihood of placement with the relative by 23%.

- Children in sites outside California were 18% more likely to be initially placed in a family setting, even in the context of already high usage rates of foster and kinship homes.

Family Connections.

Many of the anchor sites were in the middle to late stages of a longer term reform process at the start of the anchor-site phase in 2006. As a result most sites were already placing children in family-based settings at high levels ranging from 68% to 86% of all children initially entering care within the jurisdiction. Within the context of this far-reaching shift toward family-based care, anchor sites increased their use of placement settings that facilitated family connections by: (1) placement with a relative; (2) placement near the child’s home neighborhood; and/or (3) placement with other siblings. Not only did sites maintain the initial high levels of placement in a family settings, but in two sites outside California, Denver and Clevelenad, and in the California sites, children entering care without a sibling and who had exposure to more than four key elements of Family to Family were about 40% more
likely to maintain a family connection in their first placement than children with no exposure (OR = 1.39 in Cleveland and Denver and 1.44 in California sites).

Supplemental analyses in sites outside California found that children in the high exposure group had an 18% increased likelihood of placement in a family setting and were 17% more likely to be placed with a relative than a child with a low or no exposure. Given that these findings could be driven by relatives’ attendance at meetings, we conducted exploratory analysis to investigate the relationship between relative placement and relative involvement at meetings using only the sample of children who had a TDM meeting. Not surprisingly, the analysis revealed a strong effect of a relative’s presence and relative placement. Also, among the subpopulation of children who had a relative present at their removal meeting, having more key elements (4-7) reflected in the meeting further improved the chances of placement with a relative by 23%.

Finally, these results must be interpreted within the constraints of the data. Qualitative data suggest that some Family to Family anchor sites are following approaches similar to other states in which child protective services help relatives obtain temporary custody of children under voluntary kinship care arrangements that may or may not involve custody of the child welfare agency. Prompted in part by federal requirements that kinship foster homes meet the same licensing standards as other foster homes, these arrangements involve varying degrees of oversight, services, and support. Since such circumstances fall outside the purview of the federal Adoption and Foster Care Analysis and Reporting System (AFCARS), it is incumbent upon state and local agencies that pursue this approach to kinship care to monitor the continued safety of children in these arrangements, to support the families caring for related children, and to pursue reunification with birth parents when appropriate.

**Family to Family and Stability of Placement In Sites Outside California**

- Children initially placed in foster homes who had a change of placement TDM meeting due to an imminent risk of moving were 17% less likely to make an undesirable move (p=.07) when the meeting reflected a high number of key elements.

- Children initially placed in a relative’s home who had a change of placement TDM meeting due to an imminent risk of moving were 25% less likely to make an undesirable move when the meeting was attended by the relative caregiver.

**Quality of Placement Experience.**

The results of analyses that examine the relationship between Family to Family exposure and stability for children in out of home placement are less promising. In neither California nor other states did analysis show a strong statistically significant relationship between the exposure levels and whether a child moved. However, subgroup analyses that only included children having a change of placement meeting reveal areas that merit further analysis. For example, among children in foster homes, the risk of making an undesirable move (i.e., moving to a more restrictive setting or making a lateral move to the same type of setting) is less (RR = .83, p=.07) for children whose change of placement TDM meeting reflects a higher number of key elements. Although not statistically significant at the .05 level, these results suggest a positive impact and should be explored in future studies.
Among children in kinship care, the presence of the caregiver is an influential key element. When the caregiver attended the change of placement meeting, children were 25% less likely to move laterally or to a more restrictive placement; however, the modified key elements index (i.e., with caregiver attendance omitted) was not statistically significant.

**Summary Assessment**

While all sites made significant progress in implementing the core strategies of Family to Family, it is not surprising that implementation of some principles and practices did not progress as far as others. For example, sites that had more experience with Family to Family prior to the start of the anchor period showed more progress in developing community partnership strategies than less experienced sites. Similarly, removal and change of placement TDM meetings are firmly established standard practices in every site, but nearly all are still in the early stages of implementing permanency TDM meetings. Given that public child welfare agencies are large and complex systems, it is not surprising that these and other changes in practice growing out of system reform have required years rather than months. This evaluation confirms the challenge of implementing changes in policy and practice, and unless social intervention researchers acknowledge time demands and are patient in waiting for implementation processes to play out, they are unlikely to witness the impact of those changes.

Perhaps the most promising news from the evaluation is that outcomes for children involved with the child welfare system can be improved even before the reform process is complete. “Stroke-of-the-pen” changes attributable to Family to Family helped to change the experiences of many children, including reductions from site to site in the reliance on out-of-home care. In addition, children entering out of home care were more likely to maintain a connection to their families and be placed with a foster family or a relative. Even more encouraging, perhaps, are suggestions in the findings that outcomes such as reunification can be improved for children and youth who remain in care for longer periods. In light of such findings, it is possible that further progress in implementing strategies such as permanency TDM meetings, Icebreaker meetings, stronger community partnerships, and targeted recruitment will yield improvements in other permanency outcomes.

**CONTEXT AND LIMITATIONS OF THE EVALUATION**

In the parlance of the Casey Foundation, Family to Family is a “service and system reform” initiative that is rooted in an explicit set of values and operating principles. The premise of such initiatives is that achieving change in human services requires the momentum developed through a reform movement—only by overcoming the inertia of systems that have come to rely on longstanding, but ineffective practices, can new approaches to service be successfully implemented. In addition, the “intervention” promoted by such initiatives is typically a bundle of discrete changes in policies and practices that are assumed to be highly interdependent, but individually critical to achieving the desired outcome(s) for the target population. As in the case of Family to Family, the proponents of reform argue that the effectiveness of the bundled intervention hinges on successful implementation of all of its components.
This approach stands in contrast to the reductionist perspective that prevails in social intervention research. Working from this perspective, evaluators seek to isolate specific components of an intervention and to measure their discrete contributions to changes in outcomes, assuming an additive effect. This approach influences not only the design of evaluations and the analytic methods used to explain variations in outcomes, but also constrains the design of interventions. It is arguable that such an approach is rooted in an assumption that the service system is generally stable and basically effective, so that relatively minor tweaking of practice is all that is necessary to improve outcomes. The result is a preoccupation with very narrowly defined interventions that are only marginally different from existing practice and, therefore, easier to implement and evaluate under tightly controlled conditions. Unfortunately, they may ignore fundamentally ineffective practice that actually requires a wholesale change in approach.

The circumstances that prevailed in most anchor sites when they embarked on Family to Family seem to validate the Foundation’s reform approach. In many sites, children brought into care after 5:00 p.m. were transported in the back seat of a police car to an emergency shelter where they were housed with children and youth of all ages. Many of these children experienced brief stays in the shelter before being returned to their birth family or members of their extended family, never to return to out-of-home care. As a result, the initial stages of work required efforts to:

- provide child welfare services around the clock to avoid unnecessary out-of-home placements,
- renegotiate a working relationship with the police and the court, and
- close or phase out the use of emergency shelters when it was necessary for children to enter out-of-home care.

Such changes amounted to infusing the entire service system with a new set of values and operating principles and, thereby, laying a foundation on which new approaches to practice could be implemented.

From this perspective, it is quite arguable that a saturation approach was necessary to overcome the inertia inherent in staid public service systems; however, the nature of reform initiatives makes the evaluation of them ill-suited to all experimental and some quasi-experimental designs. This, in turn, makes the evaluation of reform initiatives vulnerable to multiple threats to validity. The Family to Family evaluation is no exception. It is important, therefore, to identify potential threats to validity encountered in this evaluation and to discuss their possible influence on the results.

The question inherent in all quasi-experimental studies is whether the observed results are caused by the intervention or some other factor; that is, does the study have internal validity? Since the evaluation did not randomly assign children to the Family to Family and comparison conditions, it is possible that observed results are associated with other factors related to selection of participants into Family to Family. One possible threat to internal validity is that activities in the sites other than those associated with Family to Family may account for the changes observed changes. The evaluation does not posit that Family to Family is solely responsible for all improvements since most child welfare agencies are engaged in multiple and overlapping efforts to improve outcomes for children and it is likely that changes in outcomes are the result of a combination of activities. Also, given that the implementation of the core strategies required two years or more in every site, children in the comparison group were affected by the same agency environment as those who were more directly affected by Family to Family values, principles, and practices. This
reduces the potential threat posed by history. Indeed, because it was impossible to capture all manifestations of Family to Family in our case-level data (i.e., some of the unobserved heterogeneity in evaluation data is attributable to unmeasured Family to Family effects), the use of a comparison group within the anchor sites might have reduced our ability to detect positive changes associated with Family to Family.

The second threat to internal validity is, perhaps, more serious. It is the possibility that children and families participating in Family to Family were somehow those most easily served or, perhaps, the parents and relatives in these families would have become involved regardless of whether the initiative had been undertaken. Given that data collected during TDM meetings were used to measure exposure to Family to Family, was there selection bias associated with children and families who had TDM meetings, thereby resulting in systematic differences between children and families more directly affected by Family to Family and those to whom they were compared? The premise of TDM is that all children who experience placement events will have a meeting. During the early implementation stages, all sites worked to establish “firewalls” and monitoring mechanisms to be sure that every child who enters care has a removal meeting. The data indicate that coverage rates for removal TDMs steadily increased during the anchor-site phase so that by 2008 removal TDM meetings were being held for the vast majority of children who should have had them. This suggests that systematic selection of “easy” cases for TDM was unlikely. Nevertheless, the evaluation employed statistical controls for age, race, gender, site, year and other relevant factors in all models to control for participant characteristics over time for Family to Family and comparison group children.

A similar argument could be made that it was parental participation rather than the multi-faceted collaboration of agency, family, and community promoted by Family to Family that accounts for improvements in certain outcomes. Evaluation results suggest that both are important. To understand the role of parental participation in relationship to the other key elements, the analysis specifically examined this interaction and found that parental involvement is key to some outcomes, such as early reunification, but that there was an added benefit to having other key elements in place both when parents were present and, perhaps even more importantly, when parents were not present. Finally, Family to Family sites committed to opening up a decisionmaking process traditionally owned solely by the child welfare agency and inviting a wide range of participants into the process. Across the years, parental participation grew from 79% to 83%, including increased participation by fathers. This parental involvement seems qualitatively different than a conventional parental engagement process that only begins after a child enters care. So, while it is possible that TDM meetings engaged only families who would have been engaged anyway, it does not seem plausible given the high level of parental involvement.

Another area that might compromise evaluation results is imprecise measurement of Family to Family exposure. Although the key elements index includes important components related to all the core strategies of Family to Family, it is not exhaustive. For example, there are contributions from community partners that are not captured in the index and, thus, go unmeasured in the case-level analysis. Similarly, efforts related to resource family recruitment, development, and support are primarily manifest in the increased likelihood of children being cared for in family-based settings rather than in more restrictive congregate care settings. As a consequence, it is more difficult to detect differences between the groups of children because children considered ‘unexposed’ to Family to Family may, indeed, have benefitted from parts of the strategies that were unmeasured. This lack of precision in measuring Family to Family is another factor that could result in the evaluation underestimating the initiative’s impact.
Finally, it is important to consider the statistical analysis techniques used for this evaluation. Multivariate models were used to assess the relationship between Family to Family and outcomes, controlling for a number of covariates. Some might argue that the models presented here could be strengthened in a couple ways. First, propensity score analysis is an increasingly popular method designed to address potential selection bias.\(^5\) The evaluation team decided not pursue this approach for two reasons: (1) the number of comparison cases was considerably smaller than the number of cases with exposure to Family to Family; and (2) only a limited number of potential matching characteristics (i.e., age, race, gender, and site) were available from administrative data. The lack of a wide array of matching variables had proven to be a significant constraint in a recent evaluation of the Title IV-E waiver demonstration project in North Carolina. Using the same type of child welfare administrative data available in this evaluation, efforts to create well-matched groups were not helpful in that models using matched data and unmatched data yielded very similar results.\(^6\)

After completing the analyses presented in this report, the evaluation team decided to test the assumptions on which our decision not to use propensity score analysis was premised. This led us to invite Dr. Shenyang Guo, coauthor of a recently published textbook on propensity score analysis (noted above) to assess whether findings based on those methods of analysis might yield different results. The conclusion from his detailed assessment, provided as an appendix to the final report, was:

> In summary, within the data and design constraints that prevail in the current evaluation of Family to Family, analyses using the original sample with a conventional covariance control approach are valid, and do not show findings that are different from those generated by propensity score analysis.

Another potential enhancement to the analysis presented here would be to adjust all models for the autocorrelation associated with circumstances such as individual children entering care as a member of a sibling group\(^7\) or systematic site-level and even neighborhood-level variations in policies, practices, child and family characteristics, and contextual factors. The fundamental issue is that clusters of cases defined by sibling groups, neighborhoods, local jurisdictions, etc. may tend to share similar outcomes. If this form of autocorrelation actually exists in the data sets used for this evaluation, it is possible that some results overstate the impact of Family to Family. It is important to understand, however, that making an adjustment for autocorrelation might result in reducing levels of statistical significance, but it would not alter the parameter estimates (i.e., the relative risks or odds ratios) presented here. The analytic procedures required to make these adjustments have been applied in some of models involving data from the California sites, but in many instances data constraints make it difficult or impossible to accurately identify sibling groups in sites outside California. Therefore, the extent to which we were able to make this adjustment was limited.


\(^6\) A similar result occurred in a recently completed study of academic achievement among young adults with foster care experience; see Calix-Hughes, Alexandra. (2009). *The effect of foster care experience and characteristics on academic achievement.* (Doctoral dissertation, The University of North Carolina at Chapel Hill).

The Evaluation of the Anchor-Site Phase of Family to Family

In 1992, the Annie E. Casey Foundation embarked on an initiative entitled Family to Family: Reconstructing Family Foster Care. By the time it concluded in 2009, dozens of large urban areas in more than 20 states had participated in Family to Family. The final phase from 2006 through 2009 focused on a smaller set of “anchor sites” in nine states. Drawing on earlier experience with the initiative, each anchor site developed a workplan to integrate efforts across four core strategies designed to achieve the transformation of policy and practice envisioned for Family to Family. To assess the impact of resulting changes in policy and practice on outcomes for children and their families, the Foundation sponsored an evaluation by a team of researchers from the University of North Carolina, Wildfire Associates, the University of California at Berkeley, and Case Western Reserve University. The evaluation team included: Judith Wildfire of Wildfire Associates, Inc., Co-Principal Investigator; Daniel Webster of the Center for Social Services Research (CSSR) at the University of California at Berkeley, Co-Investigator; David Crampton of Case Western Reserve University, Co-Investigator; and Lynn Usher of the School of Social Work at the University of North Carolina, Principal Investigator.

Reports from the evaluation include an executive summary, a comprehensive report with technical appendices, and profiles of each anchor site. Each report is available online at:

http://www.unc.edu/~lynnu/f2feval.htm

The evaluation team appreciates the cooperation it received from Family to Family participants in each site and from state child welfare officials who provided the data on which this evaluation is based. We also appreciate the efforts of Regional Operations Managers and Site Team Leaders in coordinating the review of draft site profiles, including: Suzanne Barnard; Bill Bettencourt; Fred Harris; Lisa Paine-Wells; Jana Rickerson; Sheila Spydell; and Kate Welty.

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