For the first time in decades, fewer than 5,000 children were placed in New York City foster care during the city fiscal year that ended in June 2005. The large majority were removed from their parents following a report of abuse or neglect, but such removals are down by more than half in just six years.

In fact, the total number of children in foster care today is less than 18,000. That’s very close to the number in care at the moment the crack epidemic first sent the system reeling in early 1986—the start of a rapid, steep climb to nearly 50,000 foster children in 1991.

And now for the first time, the city is reinvesting funds saved from the shrinking foster care system—$30 million worth—into support services for families who are at risk of losing their children to foster care, or who have moved back in with children who had been taken away.

These are the broad, defining facts that describe the changing landscape of the city’s child welfare system. But the full impact of such changes on front-line practice will take time to measure. Whether children will be better served and more quickly placed in—or returned to—permanent homes; whether parents and foster parents will always be given respect in their dealings with case-workers and courts; and whether investigators’ first contact with families becomes a consistently different experience—all of this is not yet certain.

In fact, the true impact of reform on the lives of families and children is often found in smaller details. In this edition of Child Welfare Watch, we look closely at changes in child...
welfare programs that in some cases affect only a few hundred people at a time. In one sense, they are just marginal shifts on the edges of a vast, billion-dollar system. But they matter a great deal to people in their day-to-day interactions with the foster care system.

For example, in two neighborhoods—Central Harlem and the Highbridge—the city is trying out an 11th-hour intervention that aims to prevent unnecessary removals of children from their parents, create an infrastructure of support around families that may be able to stay together and establish a better working relationship with parents whose children are taken away to foster care.

We also report on attempts to improve parents’ visits with their children in foster care, an area that is central to children’s lives and overdue for reform. Another article looks at changes in rent supports for families involved with the child welfare system—and the city’s initial steps toward a major increase in a key housing subsidy. Finally, we look at a small mental health project that may one day blossom into a full fledged transformation of the way foster children and child welfare agencies interface with the state’s unwieldy—and often unyielding—Medicaid-funded system.

This issue of Child Welfare Watch is a little different from what you may have come to expect. From now on, one out of every two editions will survey the latest news in New York’s child welfare system. We’ll continue to publish in-depth themed issues—look for a report on Family Court and ACS legal services next winter—but we have concluded that with so much rapid change going on, we need more flexibility to analyze developments as they’re happening and ensure accountability for how those changes affect children and families.

There is still a great need for improvements in principal aspects of the system. Yet there’s also cause to celebrate the drive for positive change. Reformers outside and inside the system are setting the course, affecting the lives of thousands of children and families for the better. ♦ ANDREW WHITE

• In 2004, more than 260 children from the Highbridge community district and 228 from Central Harlem entered foster care. But new pre-placement conferences focusing on finding alternatives to foster care could bring those numbers down significantly. (See “Stepping Back from the Brink,” page 6)

• An estimated 200 families each year are ready for their children to return from foster care but have no adequate place to live. ACS has set up a “front door” for housing assistance in downtown Manhattan, and is seeking a large boost in a temporary child welfare rent subsidy. (See “Raising the Rent (Subsidy),” page 9)

• The city has begun anew to press foster care agencies to make dramatic improvements in visiting practices for children and their parents. (See “Nice Place to Visit,” page 12)

• A pilot project that created satellite offices of community mental health clinics at two foster care agencies may be expanded if the state approves the plan. (See “Fostering Children’s Mental Health,” page 14)
FAMILY TEAM CONFERENCES CONVENED BEFORE CHILDREN ARE TAKEN FROM THEIR HOMES NEED FAR-REACHING SUPPORT TO SUCCEED.

In two neighborhoods, ACS is convening parents, their advocates, attorneys, community representatives, child protective specialists and others prior to removing children from their homes. Child Welfare Watch believes these conferences have the potential to prevent unnecessary removals and inspire more positive interaction with parents in the early stages of child abuse and neglect cases. The administration deserves high praise for undertaking this extraordinary effort.

Successful family conferences require strong parent advocates. Soon, the city will have to fund a new, well-trained network of parent advocates who have personal knowledge of the child welfare system based on their own families’ experiences. These advocates should be employed by community organizations and be available on very short notice.

Many families involved in these conferences will also need or want support services—regardless of whether their children end up in foster care, are placed temporarily with relatives or friends, or are not placed at all. Therefore we restate our recommendation that ACS mount a broad effort to assess the quality and effectiveness of family support services provided under contract with the city. Only appropriate, flexible, high-quality support programs can adequately help families.

In addition, it is essential that facilitators and other participants in family conferences be trained to identify and respond properly to families they encounter in these meetings who are experiencing domestic violence. Great care must be taken to avoid endangering the survivor as well as the children, and supports should be established for the non-offending parent whenever possible.

FAMILY TEAM CONFERENCES SHOULD BE HELD IN COMMUNITY AGENCIES, NOT ACS FIELD OFFICES.

At the moment when families are extremely stressed and most vulnerable, meetings held in ACS field offices are inevitably more intimidating and potentially less productive for parents than those held in welcoming spaces at familiar community-based agencies.

PARENTS’ VISITS WITH THEIR CHILDREN IN FOSTER CARE SHOULD BE FLEXIBLE, FREQUENT AND CREATIVE.

Frequent visits are the linchpin to getting children out of foster care and back home as quickly and safely as possible. Five years ago, ACS visiting guidelines encouraged creative approaches to visitation and required visits be unsupervised except when there is a clear reason to believe children are in danger. Yet Family Court, ACS attorneys and many nonprofit foster care agencies have not followed through.

The new ACS visiting unit and the agency’s planned visiting centers are important steps forward. So too are the efforts of a handful of foster care agencies to improve practice. But all players in the system should pursue the recommendations made by the ASFA Ad Hoc Coalition in its October 2004 report to ACS. These include: more and better training of foster care agency staff, ACS attorneys and Family Court judges; greater use of relatives or family friends who can host visits in their home; sleeping arrangements for people who want to have weekend visits with their children but have no home; reimbursements for food and transportation; and better communication on visiting issues among all the key players in a case.

Furthermore, foster care agencies’ adherence to visitation practice guidelines should be included in the city’s EQUIP performance measurement system.

INCREASE THE CHILD WELFARE HOUSING SUBSIDY THIS YEAR.

ACS provides temporary rent subsidies to some families whose children are returning from foster care, as well as a handful of families who need housing to avoid losing a child to foster care, and to some young adults aging out of the system. This monthly subsidy is only $300, in a city where the median rent of a vacant apartment is $900.

This subsidy remains in place only up to three years. But rent support is often essential for helping a parent pull her family together and find other income. Six hundred households currently receive the subsidy, at a cost of about $2 million.

The state legislature will have to amend the state Social Services Law to create a more adequate subsidy, preferably $970 for a two-bedroom apartment, as ACS has proposed. Two-thirds of the subsidy is funded by Albany, which could move on the amendment this fall. Alternatively, the Bloomberg administration and the City Council should provide the funds from city revenues.

INTEGRATE MENTAL HEALTH SERVICES FOR CHILDREN WITHIN AGENCIES MANAGING FOSTER BOARDING HOMES.

Specially trained staff of community mental health clinics located in the neighborhood offices of foster boarding home agencies improves the quality of care, strengthens case management and increases access to services. The state Office of Mental Health should approve Medicaid funds and strongly encourage this practice. The potential payoff is tremendous: foster children are a tightly targeted group that experience a high rate of trauma and other emotional issues. The long-term benefits of proper care at an early age are clear.

In addition, parents and caregivers of children in foster care should be actively encouraged to participate in decisions made about their children’s mental health care. This is important as a fundamental right, and because effective treatment of behavioral health issues often requires adults in a child’s life to adapt, to support their children and sometimes to alter their own behavior.
In keeping with Local Law 25, passed by the City Council and signed by the mayor in March, the Administration for Children’s Services will no longer routinely file cases under the name of the child’s mother. Instead, cases will be referred to by the name of the alleged child’s mother. Formerly referred to by the name of the alleged child’s father, boyfriend or another caregiver.

The change stemmed from parents’ and advocates’ concern that women were unfairly tainted by having their names on cases even when there were no allegations against them. The law states that no agency practice—including tracking, record-keeping, reporting or data collection—may prejudice the rights of, stigmatize or otherwise harm a person because of his or her gender or relationship to a child involved in a child protective matter.

On July 19, ACS sent out an internal memo directing staff on how to implement the changes, which will take place immediately and affect new and existing cases, according to ACS spokesperson Lisi de Bourbon. Old cases will retain the same case number but be renamed, when appropriate, and the previous case name will be cross-referenced. In cases that don’t involve child protective services, such as PINS and voluntary placements, the name of the person requesting services will be used.

De Bourbon says she doesn’t agree that the old filing system had a stigmatizing effect, but adds, “There’s no need for that perception to exist.”

ACS AND CITY COUNCIL NEGOTIATE PARENTS’ ADVISORY GROUP
Pending City Council legislation, Intro 492, would establish a child welfare parent advocate advisory board to review budgets, policy statements and advocacy positions from ACS. Commissioner John Mattingly opposed the bill as it was originally proposed but is working with Councilmember Tracy Boyland, the bill’s sponsor, to craft a compromise.

The legislation aimed to give a voice to those directly affected by the child welfare system. “Sometimes you get a little removed without the ground level input,” says Councilmember Boyland. Commissioner Mattingly also supports the idea of a parent advisory group, but says he would make significant changes to its design. For one, the Child Welfare Organizing Project (CWOP), which helped draft the legislation, wants the council to be mostly composed of biological parents, but ACS would like to include foster and adoptive parents as well.

Also at issue is the scope of the board’s power. “They should have access to all public records, but shouldn’t be involved in the approval of contracts,” says Mattingly. “Lord knows if it takes 18 months to two years to get contracts passed now, we don’t want to add to that.”

The council and ACS are also discussing how members will be appointed. Mattingly would like the council and ACS to mostly discuss how members will be appointed. Mattingly would like the council and ACS to mostly discuss how members will be appointed. Mattingly would like the council and ACS to mostly discuss how members will be appointed. Mattingly would like the council and ACS to mostly discuss how members will be appointed. Mattingly would like the council and ACS to mostly discuss how members will be appointed. Mattingly would like the council and ACS to mostly discuss how members will be appointed. Mattingly would like the council and ACS to mostly discuss how members will be appointed. Mattingly would like the council and ACS to mostly discuss how members will be appointed.
A knock on the door brings a caseworker, and often the cops. This is the moment that Child Protective Services comes to take the kids away from home. Thousands of times every year in New York City, after city investigators decide a child is in danger, this painful scene unfolds, and more children enter foster care.

But this summer ACS began an experiment in Harlem, calling a time-out in a few cases before taking children from their parents. This was the first phase in a pilot that will soon extend to most situations involving child removals in Harlem as well as Highbridge, in the Bronx. From now on, after Child Protective Services decides to take custody of a child, there will be one more step: The investigator will ask the parent or caregiver to sit down that very day with a team of social workers, attorneys and others to attempt to come up with an alternative strategy for keeping the child safe.

The shift is a radical innovation aimed at cutting the number of foster care placements in districts with a very high rate of removals—and at reducing the trauma of pulling families apart when there may be another option. In 2004, more than 260 children from the Highbridge community district and 228 from Central Harlem entered foster care. The new pre-placement conferences could bring those numbers down significantly, according to ACS officials. At the very least, parents will have much more information about their rights and responsibilities—and where to turn for help.

“The goal is to make the best decision possible. To stabilize a family and keep children at home is preferable,” says Zeinab Chahine, ACS’ executive deputy commissioner for child welfare programs. “The other purpose here is to make that decision with the involvement of the community and to bring a sense of urgency around the decision, to say, ‘We’re about to make this major decision here and we need to bring all the relevant people around the table to say what’s best.’”

If the experiment works well in these two neighborhoods, she adds, ACS will extend the practice citywide.

“PLACEMENT DECISION MAKING CONFERENCES,” or PDMs, are an innovation of ACS Commissioner John Mattingly, who joined the agency last year after establishing himself nationally as a proponent of case conferences like these.

At the heart of the Mattingly model: pulling together a team that can muster resources to help a family in crisis, while also equipping parents to take a leading role in decisions about their own family. Neighborhood-based nonprofit family support agencies will take part, along with ACS staff.

Each conference will also include at least two people who are explicitly looking out for the parents’ rights and interests: a lawyer and a parent advocate, someone who has been through the child welfare system herself and now counsels others.

The meeting will consider whether there is a way to stabilize a home and keep a child there. Participants may also use the conference as a way to identify a family member or other trusted adult who can take the child for a time. According to Mattingly, as many as one-quarter of the families that take part in similar conferences in other cities have avoided having their children placed in foster care.

“It follows from the commissioner’s notion that removing a child [unnecessarily] is the most terrible thing a child welfare system can do, and that the role of a child welfare system is to make sure that doesn’t happen,” says Susan Jacobs, executive director of the Center for Family Representation, which has been working with ACS to bring parents and attorneys together for case conferences in Harlem.

Very few advocates or practitioners in New York City have had experience with PDM conferences, and some have raised questions about the extent of supports that can be made available. “It’s not a great idea” in emergency situations, says...
attorney Marcia Robinson Lowry of Children’s Rights, Inc., whose lawsuit Marisol v. Giuliani forced the city to address deep deficiencies in child welfare casework and supervision. “What kind of services are going to be made available?” she asks, warning that preventive services provided by private contract agencies are often poorly monitored.

ACS officials say they fully intend to use the conferences in as many cases as possible, including those demanding immediate action. They point out that case conferences focusing on the decision to put a child in foster care have already become standard procedure in more than three dozen cities and counties in the United States. Typically, they take place before children are removed from home; in the riskiest situations, they’re done immediately afterwards. “Even when a child has to be removed,” says Patricia Rideout, a consultant to the Annie E. Casey Foundation, “it’s done so carefully, and with such thorough discussion, that people feel better about it and can feel better about services.”

Through Casey’s Family to Family program, Rideout helps local governments implement case conferences. San Francisco, Detroit, Cleveland and Denver all use them. Washington, D.C., recently launched conferences using a different model, working with the American Humane Society. A national evaluation of the Casey effort is underway, with initial results expected in 2006.

Casey’s model has its roots in the work Rideout and Mattingly did together in the late 1980s, when he was child welfare commissioner of Toledo, Ohio. “Early on, it was perceived as quite radical and impossible by most people you floated the idea to, primarily because, just logistically, nobody believed you could bring a group together within this short window,” says Rideout. “Also, people were very scared about sitting down and negotiating with families in crisis.” Mattingly left Toledo in 1991 to join the Casey Foundation, and brought the team conferencing model with him.

According to the ACS, one of its main goals is to involve parents more in the decision-making process. The new PDMs aim to put parents front and center, and to make the removal decision itself the focus of the meeting. The meeting’s organizers—ACS child evaluation specialists—will encourage parents to bring friends or family members for support. While ACS will still hold final decision-making power, the meeting is structured to get input from outsiders.

One of those outsiders will be an attorney for the parent—a measure some advocates have sought ever since ACS started holding the 72-hour and other case meetings. Until now, ACS has refused. “We want to go to conferences, but they haven’t let us,” says Lauren Shapiro of South Brooklyn Legal Services, who argues that state regulations permit a parent to bring anyone he or she chooses to meetings about their service plan.

Some supporters of PDMs express caution about having lawyers involved. “In some cases, everyone shuts down when the lawyer arrives,” says Rideout. “I say this as a lawyer myself. Sometimes we come in a room and everything changes.” She asserts that good results can come out of meetings without the presence of a legal advocate.

“PEOPLE WERE VERY SCARED ABOUT SITTING DOWN AND NEGOTIATING WITH FAMILIES IN CRISIS.”

Now that it has opened the door, however, ACS has to decide whose legal counsel to include. Because a parent’s lawyer will attend, an ACS attorney will as well. The Legal Aid Society, which represents children in Family Court, has also expressed interest in being included. But lawyers for children don’t officially have authority until the city files its case in court.

There’s also the question of what information will be shared should a case proceed to Family Court. Under existing ACS protocol, only the service plans and outcomes from case conferences are shared with judges; other content of the meetings is confidential. Chahine says protocols for the PDMs are still being worked out.

IN HARLEM AND HIGHBRIDGE, NONPROFIT organizations will provide parents with attorneys and other supports. For example, the Bronx Defenders’ Family Defense

FIVE YEARS AGO, NEW YORK ADOPTED TEAM conferencing as a standard procedure following the placement of children in foster care, with meetings organized within 72 hours after a child was removed and then again at 30 days and six months after the placement. At those meetings, parents and social workers are supposed to reach agreement on a service plan to be followed in order to get children out of foster care.

But a 2003 report from the ACS Child Welfare Advisory Panel—on which Mattingly served while still with the foundation—concluded that the case conferences, while often well attended, “have not yet become the family engagement and family decision-making vehicles that ACS envisioned.” Even though initial meetings were held soon after children’s removal from their homes, the meetings were not used to assess that decision, the report found. Frequently, parents found themselves sidelined. Service plans were drawn up before the meetings, while parents were left to watch as caseworkers traded jargon and planned the details of the children’s new lives in foster care.

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IN HARLEM AND HIGHBRIDGE, NONPROFIT organizations will provide parents with attorneys and other supports. For example, the Bronx Defenders’ Family Defense
Project will send lawyers to represent parents at meetings in Highbridge. The Bridge Builders project—a family support partnership involving the Highbridge Community Life Center, Citizens Advice Bureau, Bronx Defenders, Legal Services, and other advocacy groups in the area—will have a pool of parent advocates trained in a new accredited program at Hostos Community College and ready to take part in the conferences.

The biggest hurdle may be getting lawyers, social workers and parent advocates, plus the parent herself, into a room at a moment’s notice. ACS has decreed the meetings will take place within two hours of a decision to remove a child. “Getting everything we need to get together will be a challenge,” says Shaolee Sen of Bronx Defenders. “The social worker will have to have contacts for service providers. The legal representative will have to pull files.”

The parent advocates, it’s hoped, will convince parents that there’s something to be gained in working with ACS and others in the room to address family problems.

But it may take a lot more to make some parents think any good can come out of ACS, the agency with the power to take their children away. Indeed, one of the stickiest questions still being worked out is where the conferences will take place. The Bridge Builders organizers want the meetings held in a space where parents feel comfortable, such as the storefront office of a trusted community group. But ACS representatives prefer the agency’s field office on the Grand Concourse at Fordham Road, where staff have ready access to case information and security is available should a removal situation explode.

The legal teams in the two pilot projects have short-term funding. Project Engage, a collaborative effort in Harlem between the Center for Family Representation, ACS, the Legal Aid Society and the state courts, is funded by the state Office of Children and Family Services, and Bronx Defenders has support from several private funders.

If the PDM conferences are to be rolled out citywide, ACS will have to figure out how to pay for parent representation. There are very few attorneys in Legal Services or other nonprofit organizations available to work with parents before a case reaches court. Most parents with children in foster care are represented by court-appointed attorneys.

As of late July, the first three conferences had been held in Harlem. Child Welfare Watch was unable to reach any of the parents or families involved. Participants from ACS and Project Engage were enthusiastic. “They’ve gone very well,” says Michele Cortese of the Center for Family Representation. “All three of them have convinced me that had these cases progressed in the usual manner of filing a child protective case against the parents there never would have been the same opportunity for attorneys, service providers, parents and sometimes the children themselves to work thoughtfully on a plan to assure the child’s safety.

Ultimately, the conferences are about building at least some small degree of trust with parents—and a basis for working toward a resolution—at a moment when they are inevitably angry, suspicious and vulnerable. “Usually, when a parent comes into a room with six or seven people from ACS sitting there, it’s quite a scene. It’s intimidating and alienating,” says Sen of Bronx Defenders. “When we walk in with a team of service providers, community residents, all of a sudden the child welfare workers have support. And the parent isn’t alone.”

—ALYSSA KATZ

RESOURCES

WHO’S USING FAMILY CASE CONFERENCES TO MAKE PLACEMENT DECISIONS

Bridge Builders
Bridge Builders targets social services, legal representation and parent support in three Bronx Census tracts. Partner Bronx Defenders represents parents in placement decision meetings.
Contact: John Courtney, 212-529-0110, john.courtney@nycwf.org

Community Partnerships for Protecting Children
Center for the Study of Social Policy
“Family Team Conferencing Handbook”
This manual was devised for the Edna McConnell Clark Foundation community partnership in Cedar Rapids, Jacksonville, Louisville and St. Louis.
www.cssp.org/center/publications.html
Contact: Claire Anderson, 202-371-1565

Family to Family Initiative
The Annie E. Casey Foundation promotes family team decisionmaking meetings, “involving not just foster parents and caseworkers, but also birth families and community members in all placement decisions to ensure a network of support for the child and the adults who care for them.”
www.aecf.org/initiatives/familytofamily/tools.htm/16539.pdf
Contact: Nancy Stephens, 301-922-0281, nstephensmsw@aol.com

National Center on Family Group Decision Making
American Humane Association
Provides training and technical assistance in implementing family group decision making, another team meeting model.
www.americanhumane.org/site/PageServer?pageName=pc_fdgm
Contact: Lisa Merkel-Holguin, 303-792-9900

Project Engage
A collaboration between the Center for Family Representation, the state Office of Court Administration, Legal Aid Society and Administration for Children’s Services. Provides legal representation and other services to parents whose children are found at elevated risk of abuse or neglect; staff participates in Harlem placement decision making meetings.
www.cfrny.org
Contact: Michele Cortese, 212-691-0590, mcortese@cfrny.org
RAISING THE RENT (SUBSIDY)
Help paying the rent is sometimes all that keeps a child in foster care and apart from her parents. The city is proposing a sizeable increase in temporary rent supports.

For Donella Coleman, losing her children started and ended with homelessness. In 2000, battling an addiction to crack, she left her son and twin daughters unattended at the city’s homeless intake center while she went looking for a hit. At first they played video games at a nearby arcade, but when she didn’t come back by nightfall, the Administration for Children’s Services (ACS) took them into custody.

It would be years before Coleman got clean. But by late 2004, she had done it: kicked drugs, started therapy, gotten a job. Both she and ACS agreed she was ready to reunify with Marvin, aged 10, and her two 12 year olds, Rebecca and Rachel. There was just one thing missing: a home.

Having lived in a residential drug treatment center for nearly three years, Coleman had no apartment of her own. Her foster care housing specialist wasn’t much help, she says. In December, when Marvin was to rejoin her, ACS told her to report to the city’s new homeless family intake center in the Bronx.

Neither Coleman nor Marvin knew what to expect. They arrived on Monday morning and endured a grueling series of interviews, recalls Sabita Krishnan, an NYU law student who accompanied Coleman to the center. A supervisor there told Coleman she would be placed in a temporary shelter for 10 days while her case was evaluated. Then someone else said her placement would last until she found an apartment. Yet another worker said they should expect a 10-day wait. Marvin waited for six hours without food, wondering if he was really going home.

Eventually, they were placed in a Bronx family shelter, where Rebecca and Rachel recently joined them. It was scary, says Coleman, to be suddenly thrust back into motherhood without a stable home. But “I learned to deal with it,” she said. “I just wanted to be with my child. It didn’t make a difference where they put me.”

Over the last two decades, public interest attorneys filed successful lawsuits insisting that homelessness and poverty were not valid reasons for keeping parents apart from their children. And since 1990, the Administration for Children’s Services has provided limited rent subsidies to several hundred families as their children returned home.

But today, ACS officials hope to transform the landscape of housing supports for families that are either ready to reunify or struggling to avoid losing their children to foster care altogether. The agency recently set up a new, centralized “front door” for housing assistance at ACS headquarters in downtown Manhattan, where any client with an open preventive or foster care case can apply for subsidies directly from the agency. Staff there see dozens of parents every day.

The city is also negotiating in Albany for a large increase in the three-year, city- and state-funded child welfare housing subsidy, which has long been stagnant at $300 per month—a rate ACS officials have termed “grossly inadequate.” Nevertheless, the subsidy currently helps about 600 households pay their rent.

Despite these efforts, Coleman’s experience remains common, says Chris Gottlieb, adjunct professor at the NYU School of Law Family Defense Clinic. Many families have no choice but to reunify in shelter, she says, and it’s an inherently problematic way to start a new life. “It’s better for everybody if you put them in long-term housing.”

CITY OFFICIALS ESTIMATE THAT ABOUT 200 families each year are ready for their children to return from foster care but have no adequate place to live. Most either reunify in a homeless shelter or use government rent supports to find a home. Last year alone, ACS gave out 350 federal Section 8 rent vouchers to families and to young people aging out of fos-
ter care. Section 8 covers the difference between 30 percent of a family’s income and the fair market rent on their apartment.

But the environment for housing supports has grown increasingly complicated as the Bush administration has strictly limited the growth of Section 8. There are very few new federal vouchers available, and ACS now relies on Housing Stability Plus, a temporary rent voucher program introduced late in 2004 by the Department of Homeless Services, for families on public assistance.

Housing Stability Plus provides a rent voucher that, in combination with the public assistance shelter allowance, gives a family of three $925 per month in rent support for a year. The voucher then declines in value by 20 percent each year, until it disappears completely after the fifth year. Only people on welfare can participate in the program.

Concerns about the voucher’s steady decline in value have spurred ACS officials to seek the increase in the agency’s own $300-a-month child welfare housing subsidy, which serves not only families with children in foster care, but also those trying to avoid losing their kids.

“Our families are among the more challenging,” explains Gary Sutnick, a former health department official who was recently appointed director of ACS housing policy. “We think they need a more stable subsidy. We want to have a program that really meets their needs.”

**MAINTAINING SAFE AND SANITARY HOUSING**

has always been a central issue in child welfare. At the turn of the last century, children were taken from crowded New York tenements and shipped off to distant farms where they could enjoy healthier, if not happier, lives. More recently, in a 1985 case called *Cosentino v. Perales*, the Legal Aid Society of New York sued the city and state on behalf of homeless families, seeking to put the onus on public agencies to do something about families' housing situations.

“In many cases, parents were coerced into placing their children into voluntary care under threat of losing their parental rights in court,” recalls Steve Banks, attorney in chief at the Legal Aid Society. In 1989, the state appellate court ruled in favor of Legal Aid. The city and state created the three-year child welfare housing subsidy soon thereafter.

For years, applications for housing assistance had to be made through case planners at foster care agencies, who often failed to inform parents of all their housing options, according to ACS. Sutnick has opened up the process, and clients can now also show up at ACS headquarters to apply. Each day, his staff sees at least 25 to 30 parents, he says. To handle the heavy demand, Sutnick is hoping to hire five new employees: two more eligibility workers, a community housing specialist to create an inventory of available housing, a housing inspector and a community liaison.

The agency has also reached out to foster care agencies and community groups, asking them to identify families who would reunify but for lack of housing. These families have been called in and in many cases encouraged to sign up for Housing Stability Plus. The city is also training foster care agency staff in

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**HELP WITH HOUSING**

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<tr>
<th>Type of Subsidy</th>
<th>What It Is</th>
<th>How Many Available?</th>
<th>How to Get It</th>
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<tbody>
<tr>
<td>ACS HOUSING SUBSIDY</td>
<td>3-year subsidy set at $300 per month. Available to families who prove that housing is primary obstacle to reunification or primary risk factor for foster care.</td>
<td>Unlimited. About 600 households currently benefit.</td>
<td>Apply through housing specialist or directly at ACS.</td>
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<tr>
<td>HOUSING STABILITY PLUS</td>
<td>5-year subsidy based on household size. Set amount diminishes by 20 percent each year and ends after five. Available to families who prove that housing is primary obstacle to reunification.</td>
<td>Unlimited. More than 500 families have applied through ACS; 157 were deemed eligible and 28 have found homes.</td>
<td>Apply through housing specialist or directly at ACS.</td>
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<tr>
<td>SECTION 8</td>
<td>Ongoing subsidy that pays the difference between 30 percent of household income and fair market rent. Available to families who prove need, with priority for families in DV, witness protection and ACS systems.</td>
<td>None. Last year, ACS gave out 350 vouchers to families and young people aging out of foster care.</td>
<td>All waiting lists are closed. Applications are no longer accepted.</td>
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the details of rent supports. Sutnick wants housing assistance to be included as a performance measure of the city-contracted foster care agencies. “It’s more than an extra push,” he says. “It’s a hammer over the head.”

DESPITE THESE ADVANCES, SOME CHILDREN continue to linger in foster care needlessly. “Even today, on any given day, there are still children who aren’t reunified expeditiously with their families primarily because of lack of housing,” says Legal Aid’s Banks.

In 2002, Yvette Valentine voluntarily placed her infant son in foster care and enrolled herself in residential drug treatment. She completed both the program and a course in clerical work two years later. Ready to start over, she still needed a home where she could reunify with 3-year-old Jerome. The city approved her application for Housing Stability Plus in March, but she didn’t find an apartment until late May. Armed with a list of possible apartments from ACS, Valentine says she called and visited more than 30 owners and real estate agents. For two months, she was simply turned away. “They said no, they don’t deal with government programs. A lot of them told me to tell [ACS] to take their names off the list.”

Although the voucher starts at a higher rate than the ACS subsidy, its time limits and diminishing value make it a gamble for landlords. Vince Castellano, a broker who specializes in Section 8, says he’s wary of referring clients with Housing Stability Plus, particularly if they’re young mothers just starting out. “You have to examine the qualifications of the tenant more vigorously,” he says. “If the tenant does not have a work history, how is the owner supposed to believe that the leopard is going to change its spots?”

But that’s not the only problem with Housing Stability Plus. The vouchers are funded in part with federal welfare dollars, which the state says can only be used to fund families on welfare. Sutnick estimates that as a result, only 40 to 50 percent of ACS families for whom housing is the only obstacle to reunification are eligible for the subsidy. In its first six months of operation, 509 families applied for Housing Stability Plus through ACS, while 157 were deemed eligible and just 28 had found homes.

Meanwhile, families on welfare who begin to work will lose their housing voucher once they’re no longer eligible, a Catch-22 the city is urging the state to help remedy by finding other sources of funding. “It doesn’t make sense,” says Ana Cintron, an independent living coordinator and housing specialist at New York Foundling, a foster care agency. “What if they get laid off? Then they’re back to square one.”

MARIA PIZARRO, A 38-YEAR-OLD SECURITY guard, is desperate to reunite with her two youngest children, Derrick and Anthony. Because Pizarro isn’t on welfare, she can’t get a Housing Stability Plus voucher. She is eligible for the three-year ACS housing subsidy, but she’s found that even with her earnings of $8 per hour, the $300 per month still doesn’t cut it. Like Donella Coleman, she’s considering moving into a homeless shelter just to reunify with her kids.

To help even that playing field, ACS has proposed its most dramatic change yet: Asking the state to boost the housing subsidy from the current $300 per month to roughly $970 for a two-bedroom apartment.

“The $300 Housing Subsidy that ACS makes available to youth aging out of care and families is grossly inadequate,” explains a draft of the agency’s housing plan. It also lays out a quandary. The state currently covers 65 percent of the cost of the subsidy. If the city wants help from the state with a higher rate, the legislature will have to amend the state Social Services Law. The city plans to make the request in the fall. If it is denied, ACS will have to look for other sources of funding, presumably within City Hall.

THE NEW HOUSING VOUCHER DECLINES IN VALUE BY 20 PERCENT EACH YEAR, UNTIL IT DISAPPEARS ENTIRELY.

ACS declined to comment on the potential subsidy boost or to estimate its cost, pointing out that negotiations are delicate. Currently, the total cost of the ACS housing subsidy is only about $2 million. But if the rate increased substantially, presumably so too would the demand among families desperate for help paying the rent.

Advocates see no reason to delay on an issue of such importance to city families. “There’s nothing preventing the city from using its own money to supplement the state subsidy,” says Jessica Marcus, staff attorney with South Brooklyn Legal Services.

For Maria Pizarro, help can’t come soon enough. “It’s going on four years now that my son’s been with this lady” in foster care, she says. “I just want ACS to give me a chance, and the only way they’ll give me a chance is if I have an apartment.” —CASSI FELDMAN
NICE PLACE TO VISIT

A renewed and intensified effort to overhaul the way agencies manage all-important visits between parents and foster children is underway, but there's still a long way to go.

During visits with his 1-year-old daughter at her foster care agency, Albert Shepherd felt confined. The visiting room was small, with low tables designed for children that left him on his knees. Other children ran about screaming. His caseworker sat to the side with a pad and pen, taking notes on his behavior.

Albert held his daughter, tickled her and made her laugh. As she got older, he taught her to count in English and Spanish. Much as he enjoyed seeing her, Albert felt judged and suffocated at the agency. Often Albert told the caseworker, “We’re tired of this room. I need to go outside with my daughter.” Sometimes the caseworker agreed. But when he asked to spend more than an hour with his daughter every two weeks, she told him, “We’ve got to ask the judge,” even though caseworkers can increase visits without a judge’s order in most cases.

Luckily, Albert, who grew up in foster care, pestered his lawyer and asked his daughter’s foster mom, Mary, if he could visit at her house. Mary said yes, and Albert spent many afternoons banging on her piano with his daughter. “My daughter was so much happier during those visits,” says Albert, whose daughter returned home last fall, after four years.

Overwhelming evidence from a number of published studies shows that frequent visits are the linchpin to bringing families back together and getting children out of foster care as quickly and safely as possible. In fact, the Administration for Children’s Services’ own visiting guidelines, released in 2000, require visits to be unsupervised unless there’s a clear reason to believe that children are in danger, and to be frequent and creative, such as allowing families to take trips to the zoo or spend an afternoon at grandma’s, rather than meeting for an hour in a sterile visitation room at an agency.

However, like Albert, many parents with children in foster care are stuck visiting with their children only once a week or less, usually in agency playrooms, either because agencies are short of money and staff to arrange more creative visits, or because frontline workers and judges don’t believe that visits are crucial to bringing families back together, say parent advocates and attorneys who work in the system.

This summer, ACS unveiled plans to radically improve visiting practice. Innovators in foster care agencies say it’s an important step toward overhauling a culture that has been far too slow to adapt.

“Think about what it’s like to visit your children in a three-by-five room, with little tables and little chairs. It’s a little like visiting in jail,” says Susan Kyle, who supervises family support services at Good Shepherd Services in the Bronx. “How positive can that possibly be? What parent isn’t going to get aggravated? What kid isn’t going to act up? Then we say it wasn’t a very good visit, but maybe that’s not a natural thing to do.”

RESEARCH SHOWS THAT WHEN FAMILY members see each other more often, children adapt better to separation, caseworkers make better judgments about whether children should return home and parents are reunited with their children more quickly. These studies indicate that visiting rooms are poor settings to observe how parents support their children or resolve conflicts.

During supervised visits, older children may hesitate to raise difficult questions, for fear that a social worker might take an argument as evidence that parent and child should not be together. And parents of younger children don’t get to handle common situations—like a child crying for candy in a bodega or throwing a tantrum at the dinner table—that test their parenting skills.

“It’s really important for families to practice parenting, especially saying ‘no’ and ‘yes’ to a child. You don’t really test parents in a room,” says Sharmeela Ediratta, director of family enhancement services at SCO Family of Services, a nonprofit foster care and preventive services agency.

But an October 2004 survey by the ASFA Ad-Hoc committee, a group of advocates, found that visiting practice has hardly improved since 2000. The committee surveyed dozens of parents, child protection practitioners, attorneys, judges and others. They concluded that while most parents get weekly visits with their children, those visits tend to take place at agency offices, with a caseworker present. Rarely do caseworkers allow families to visit in more natural settings, or create visiting plans that give parents increasing responsibility, such as overnight and week- ends, to prepare them and their children for the child’s return home. According to the report, many caseworkers do not even know they have the right in most cases to increase a parent’s visits without court approval.

NICE PLACE TO VISIT
In response to the survey, Commissioner John Mattingly revived the ACS Visiting Task Force, the group of advocates and ACS personnel who originally wrote the visiting guidelines. The group outlined desperately needed reforms in a March 2005 report that spelled out a slew of changes intended to bring visiting practice into alignment with ACS policy and published research.

This summer, ACS is staffing a new visiting unit with five certified social workers who will train caseworkers to implement the guidelines and provide technical support to agencies. ACS also intends to open three visiting centers in the fall, in renovated former group homes. These centers will provide home-like environments where parents can visit with their kids, take parenting skills classes or even stay the night if they’re ready for overnight visits but don’t have housing.

**NEW VISITING CENTERS WILL PROVIDE HOME-LIKE ENVIRONMENTS WHERE PARENTS CAN BE WITH THEIR KIDS.**

PROMISING AS THESE INITIATIVES ARE, PARENTS, lawyers and creative foster care practitioners say that much still has to change. They say there will have to be a culture shift in the courts and among frontline workers, in particular, in support of more frequent and less restrictive visiting. Advocates also say agencies need financial support not only to provide more frequent visits but also to help parents afford basic costs, like transportation to visits or a bite to eat with their children.

Some judges and caseworkers now see visits as a reward that parents must earn through compliance with other aspects of their cases, like drug treatment programs or parenting classes, says Michele Cortese, deputy director of the Center for Family Representation, which provides legal services to parents.

“There are many, many people in the courts and child welfare who do not see visiting as crucial. They think, for example, that parents shouldn’t get more visits unless they’re completely compliant,” Cortese says. “But they’re not about rewarding parents. Visits are about helping a child understand the experience of being in foster care. They’re at the core of making very difficult but accurate assessments of family functioning.”

Philneia Timmons, a parent organizer at the Child Welfare Organizing Project, said she saw that attitude when her children spent a year in foster care in 2001. “If the parent works or is in treatment, they don’t accommodate. They say, ‘Your visits are Tuesday at 4 p.m. It’s that day or we’re going to suspend your visits,’” Timmons says. When her children entered care, Timmons got only biweekly visits for the four months after her kids went into care. Only once she had arranged for her mother to be the kinship foster parent, and her mother requested that Timmons be allowed to visit at her home, did she get her wish for more visits. “I had to fight really hard, because two hours a week is not enough time to bond with your child. It’s ludicrous,” Timmons says.

In part, agencies haven’t yet improved visits because of practical difficulties. “Many people say, ‘We want them to see their families, but how? ‘Their hearts and minds are shifted, but they don’t have the resources,’” says Tanya Krupat, who runs the Children of Incarcerated Parents program at ACS. Every supervised visit requires caseworker time, and planning creative visits also requires time. If a parent would like to take a child to a cousin’s birthday party, say, the caseworker might have to go along, or check the cousin’s home for safety by visiting or doing a background check, says Luisa Doyle, Bronx regional director for New York Foundling. “Everyone really wants families to have more visits but caseworkers also have a thousand court appearances, so it’s hard to balance,” Doyle says. It will become the visiting unit’s job to help agencies find creative ways to provide visits, or raise money for necessary staff.

Despite the practical barriers, some caseworkers have long found ways to ensure that parents and children visit often, says Cortese. One caseworker identified an aunt who was willing to host her nieces and nephews and their parents for Sunday dinners at her home. Another found a bowling coach who watched over a father and son as they bowled together every Friday night, and another located a pastor who oversaw parents and their two teenage daughters as they attended church together.

The Center for Family Representation has started a program, called Visit Hosts, that allows parents like Albert—who are not considered a danger to their child—to choose a family friend or member who will supervise visits outside of the agency. Up and running at four agencies, it gets families out of cramped visiting rooms and makes it easier for parents and children to bond.

This spring, caseworkers and parent advocates began asking families, “Who might be a support to you and your family? Is there someone you can imagine in this role?” The scrutiny alone has begun to change visiting policy. At one agency, caseworkers picked out three families to choose visit hosts but then decided none of the families actually needed any supervision at all.

Cortese quickly learned the pilot will take longer to lift off than she imagined. “I met with agency executives this fall. It was one of the most sobering meetings I’ve ever been to. ‘The execs named one problem after another about why it would be hard to integrate on a large scale,’” she says. But Cortese is confident there will be progress. “We’ll deal with every one of these issues. It’s got to take root.” —NORA MCCARTHY
FOSTERING CHILDREN’S MENTAL HEALTH

An experiment that meshes mental health services with foster care may improve access to therapy, improve caseworkers’ skills—and shorten the length of time children spend in foster homes.

There's mounting evidence that children in foster care are far more likely to suffer serious mental health problems than their peers. Yet there's been little movement toward overcoming the longstanding dearth of appropriate services that has resulted from the limited capacity of community mental health clinics and restrictions imposed by Medicaid.

A small pilot project that created satellite offices of community mental health clinics at two foster care agencies is now offering a view of what the future may hold for collaboration between the two fields. It provides psychotherapy and treatment for post-traumatic stress disorder to children in foster boarding homes as well as clinical support and training for their caseworkers. State officials must soon consider whether to expand the project to additional agencies, ratcheting up mental health care for more children in foster care.

Researchers have found that many foster children are at great risk of depression, social phobia, panic syndrome and a range of other mental illnesses because of their experiences of abuse or neglect, the trauma of family separation and foster care placement, and, for some, family histories of mental illness.

Almost one-third of foster children in New York City have symptoms of serious emotional disturbances, including one-fifth of children in regular foster boarding homes, according to an August 2000 study by Dr. John Lyons. The study, which examined caseworker assessments of 509 randomly selected children in the city’s foster care system, also found that three-fourths of the children had some difficulty dealing with trauma.

This high rate of mental health problems among foster youth continues long after they age out of care, according to a March report by the Annie E. Casey Foundation, which looked at adults aged 20 to 33 who had been in foster care in Washington and Oregon. More than half of adult former foster children reported mental illness during the 12-month period studied, according to the report, which also found that the rate of post-traumatic stress disorder among this population was twice that of U.S. war veterans.

A SERIES OF LOGISTICAL OBSTACLES HAS complicated mental health care for New York foster children. Although the nonprofit agencies contracted by the city to provide foster care are responsible for assessing and ensuring the treatment of mental health problems, few of them have enough staff to care for all of the children they place in foster boarding homes. The vast majority of agencies referred at least half of the children receiving mental health services to hospital- and community-based clinics, according to a May 2005 report by the Citizens’ Committee for Children.

Even foster care agencies that can afford to hire dedicated, on-site mental health practitioners often rely on community mental health clinics. The Seamen’s Society in Staten Island, for instance, employs four staff psychologists, two part-time psychiatrists and several psychiatric social workers. Still, Paul Smetko, director of psychological services, estimates that of the agency’s children who receive mental health services, between one-half and two-thirds have to do so at clinics.

“It’s always preferable to keep the patients in-house if possible,” says Smetko. “But if I don’t have room among the staff here, I send them to an outside clinic, and then quality control and communication drop off.”

These off-site, outpatient clinics can be ill-suited to foster children’s needs in several ways. “Ours are school-aged children, so they’re not available between nine and three,” says Susan Kyle, administration supervisor for family support services at Good Shepherd Services in the Bronx. “Most of the mental health clinics, even if they have evening and Saturday hours, they’re filled up.” And, says Kyle, no matter when a child is available for an appointment, “there’s always a waiting list.” Indeed, the time between the initial referral to an outpatient mental health clinic that serves children and a first visit averaged six weeks, according to a 2003 study done by the New York City Department of Health.

There’s also a geographic mismatch between foster children and mental health services. A mapping of community mental health providers and the foster care agencies done in 2003 showed services to be scarcest in the neighborhoods with the greatest number of foster children. For the majority of children who have to travel to get services, the greater the distance, the less likely they are to show up for appointments.

If foster children do get—and keep—appointments, the services they receive are frequently not well tailored to their needs. There is often poor communication between the foster care provider and the clinic, for instance, so mental health clinicians may be unaware when children move, or foster care providers might not know about changes that affect a child’s treatment. “Foster care agencies
complained that they weren’t informed when kids were being terminated from mental health treatment because of missed appointments,” says Paul Levine, associate executive vice president of the Jewish Board of Children and Family Services.

Medicaid restrictions also limit the time clinic employees can spend on tasks necessary to provide good treatment to a child in foster care, such as talking over the case with foster care workers, meeting with parents and attending family court if necessary.

IN 2003, MENTAL HEALTH AND FOSTER CARE professionals teamed up to try to resolve some of these problems, setting up a foundation-funded pilot project that placed staff of licensed mental health clinics in two foster care agencies, Seamen’s Society on Staten Island and Good Shepherd Services in the Bronx. The pilot was designed by Levine and other representatives from trade associations of both fields—the Council of Family and Child Caring Agencies and the Coalition of Voluntary Mental Health Agencies—who predicted that better access to mental health services would improve foster children’s chance of remaining in a stable placement and reduce the overall length of stay in care.

MOST CHILDREN GO TO CLINICS FOR MENTAL HEALTH CARE.

The program enrolled 37 foster children judged at high risk of being transferred to another foster home, providing them with therapy at their foster care agency. Only one has been transferred to a new foster home in the 18 months of the pilot. Levine estimates that one-third to one-half of children in the study would likely have been transferred without intervention.

Good Shepherd in the Bronx brought on two part-time mental health clinicians as part of the program, and they now work on weekends and other hours that don’t conflict with the school day. The clinicians provide therapy and regularly participate in case conferences. “It’s been very helpful in terms of permanency planning,” says Kyle, who emphasizes the advantages of having clinicians located in-house rather than at outside clinics. “It’s a whole lot easier to have an ad hoc conference if you’re in the same office,” she says.

Seamen’s Society, which already had several mental health clinicians on staff, now has an additional full-time social worker, Josh Gelber, who carries a load of between 15 and 17 cases. He has been able to help out in ways that a community clinic never could. One 8-year-old, for instance, was about to be transferred out of his foster home because of violent behavior when Gelber received a call from the boy’s foster mother. She told him the boy’s school had called, informing him that he had thrown something at a teacher and he’d been sent to the hospital. Josh met her and the boy at the hospital.

“The very fact that she wasn’t alone managing this gave her the confidence to work with Josh after the discharge, and it hasn’t happened again,” says Seamen’s Society’s Smetko, adding that “a lot of our placements could be preserved if we had enough bodies to do that.”

Levine and his colleagues now hope to expand the pilot to six agencies. So far there is no assurance from state officials that satellite licenses will be approved for the community clinics who would participate. The state Office of Mental Health generally keeps a tight cap on the capacity of community clinics, and any expansion would require a waiver.

IF THE PROJECT MOVES FORWARD, ABOUT 200 to 250 children would be in treatment each year through the program and, in addition, clinicians would participate in several hundred case conferences at their partner agencies. “If this is successful, there are a lot more than six mental health agencies in the city that could partner with foster care agencies,” says Levine.

The group is also training clinicians in five mental health agencies to use a standardized test to screen foster children for post traumatic stress disorder, or PTSD, and to develop more effective treatment based on recent research findings. Since September 11, 2001, a number of studies have examined treatment methods for children. More than 700 children traumatized by September 11 have been treated and closely studied in New York City, according to Kimberly Hoagwood, director of the Bureau on Youth Services Evaluation Research in the state Office of Mental Health and a professor of clinical psychology at Columbia University. The research shows that certain types of cognitive behavioral therapy have successfully lowered levels of PTSD.

Traumatized children are prone to periods of panic, according to Hoagwood. “Sometimes fears pop into people’s heads. Their hearts will start racing. Their palms may get sweaty,” she says. “Cognitive behavioral therapy is designed to identify their triggers and engage in other kinds of coping, such as relaxation, thought stopping and thinking about what they’re doing that will enable them not to be paralyzed by their fear.” Meanwhile, other treatments, including interpersonal therapy, which is focused on relationship issues, may provide a good model for treating depressed children and adolescents in foster care.

Though the State Office of Mental Health has not yet approved the new pilot, Levine is hopeful the program will be underway by the end of the year, bringing much needed relief to some youth in foster care. “It’s possibly a big, small victory in this effort to try to increase the quality and access to care,” says Levine.
# WATCHING THE NUMBERS

A six-year statistical survey monitoring New York City's child welfare system.

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*Projection based on data through May 2005

All numbers above reported in NYC fiscal years unless otherwise indicated. DNA means data not available.

Sources: NYC Mayor's Management Reports, New York State Office of Children and Family Services Monitoring and Analysis Profiles.
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