



STRATEGY BRIEF

STRONG FAMILIES

How can we improve **placement stability** for children in foster care?

Placement into foster care is a significant and traumatic experience in the life of a child. When a child protection agency makes the life-altering decision to separate a child from their parents, the agency must ensure that it is the best and only intervention to keep children safe from harm.¹

The initial safety and placement decisions that child protection agencies make have long-term impacts on a child's future. The highest risk for placement disruption is within the first two months, suggesting a need for intensive supports during that time.² First and foremost, children deserve to be [placed with kin](#) (relatives by blood or marriage, or other people identified by the family as "chosen" kin). [Numerous studies](#) have established the benefits of kinship care, including greater placement stability. If that is not possible, a child's [first placement](#) should be in a stable, caring family that leads to a timely return home or other form of permanency. The [values embedded in the Indian Child Welfare Act](#) reflect child welfare best practices for all and underscore the importance of family, culture, and placement stability.

Strategies exist to help minimize the [trauma of placement moves](#). This brief, designed to highlight promising approaches that can have a positive impact on placement stability, is a companion brief to one that explores [the importance of placement stability](#).



Strategies to improve placement stability

Child protection agencies have implemented a number of strategies to improve placement stability for children in foster care. Some common approaches include: enhancing services for children in foster care, placement matching (including placing children with kin), improving the recruitment and retention of resource caregivers, and providing supports for resource caregivers. In many cases, these overlap with strategies that improve time to permanency; that is, [attending to permanency](#) can also improve placement stability. Key strategies are detailed in the sections below.

Prioritize placement with kin

Research on kinship care has found that the behavior, mental health, and well-being of children placed with kin is better than that of children placed in non-relative foster care, and that **children placed with relatives experience more placement stability.**^{4,5,6,7,8} As a result, many agencies have taken steps to advance a [kin-first culture](#), implementing **relative preference policies** to restrict non-relative placements and modifying caseworker decision-making practices to prioritize routine placement with kin. Agencies have also created **dedicated kinship support staff and family finding units** to help locate and engage relatives and chosen kin for both emergency and planned placements. A small study in California found that [family search and engagement](#) (FSE) connected **76% of the participating youth** with a permanent relationship.

Support kin placements and connections

Finding kin and placing children with them is important but not sufficient; [kin caregivers must also be supported](#)—through assistance with licensing, financial supports, social supports, and trainings. **Kinship navigator programs, which provide resources, information and support, can increase placement stability.**⁹

Even if children are not placed with kin, providing opportunities for them to maintain and strengthen relationships with relatives may help increase placement stability. A study in Illinois found that children who had at least one identified loving and supportive family member experienced 16% fewer placement

changes, controlling for risk behaviors, traumatic stress symptoms, and emotional/behavioral needs.¹⁰

Keep siblings together

Being placed with siblings can also improve placement stability. One study found that children placed with a sibling in kinship care were 77% less likely to experience a placement change compared to children placed without their sibling in non-relative care. Being placed with a sibling in non-relative care was also protective: those children were 38% less likely than those placed without their sibling to experience a placement change.¹¹ In cases where placement with siblings is not possible or appropriate, supporting strong connections with siblings and other family members is critical.

Prioritize youth voice

Though studies have not focused specifically on the impact of youth voice on placement stability, a large body of research underscores the importance of [meaningfully involving and empowering young people in case planning](#) rather than viewing them as service recipients.¹² Children and youth are experts on their own situations and their preferences should be considered in decisions related to placement and permanency. Youth advocates from California Youth Connection (CYC) are working to create a youth-centered process for placement stability within the foster care system, in the context of a state [law aimed at limiting placement changes](#).

Rimy Morris, alumnus of foster care and past member of the Indiana Youth Advisory Board, described the importance of allowing young people to have a voice in decisions about their placements. “Once I had a meeting about a new placement ahead of time, but I think it was so that I felt like I had a choice because my stuff was literally already in the trunk of my worker’s car.” She sensed immediately it was not going to work out: “I’m LGBTQ+ and I often got placed with really religious families. That doesn’t mean it can’t work, but this one was really hateful about it. I thought the meeting was going well, but then her other foster daughter said, ‘she wants to know if you’re gay.’ I told the worker it wasn’t going to work, but they didn’t

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believe me. I lived in that home for two weeks until I was muffed. She pushed me. The police were called, and I had to pack my bags that night. We could've avoided that whole thing if they had just asked me. Just listened to me."

Determine the best fit

If kin placement is not feasible, several tools and methods are available to help child protection agencies find the best placement to meet a child's needs and minimize subsequent placement moves. **Assessment tools and decision-making supports** for informing swift and optimal placements include [Child and Adolescent Needs and Strengths](#), [Treatment Outcomes Package](#) and the [Structured Decision Making \(SDM®\) Model in Child Protection](#).

[Every Child a Priority \(ECAP\)](#) matches children and resource families using a series of algorithms that combine preference and availability. [Research on ECAP](#) indicates that it increases placement stability and decreases time to permanency. Results from one study indicate that using a meeting process and facilitation for service planning that is consistent with **team decision-making principles** resulted in collaborative planning processes that may also promote placement stability.¹³

Matching children with resource caregivers from the same cultural or racial background can also increase placement stability.¹⁴ The Indian Child Welfare Act (ICWA) specifically calls for American Indian/Alaska Native children in foster care to remain connected to their extended family, tribe, and culture. The [values and spirit embedded in ICWA](#) form the basis of child welfare best practice for all and reinforce placement stability as a goal. When children are placed in families from different backgrounds, resource families should be supported in being culturally aware.

Nurture family time

[Research](#) on the benefits of contact between parents and children in out-of-home care is limited, but suggests that well-planned, intentional contact with birth family members, or [family time](#), can promote placement stability and successful reunification. Foster

care alumnus Morris emphasizes that better supporting youth in their placement means also supporting and engaging their parents. "Workers don't play a big enough bridge between biological parents and foster/kin parents. My foster parents didn't speak with my mom, and I felt like I had to choose one or the other."

Address children's behavioral health needs

The trauma of system involvement and placement instability can lead to or exacerbate mental health problems,^{15,16} and children's unmet physical and mental health needs have been linked to placement instability.^{17,18} A study in Illinois found that 39% of caseworkers and 45% of resource caregivers said that their [inability to meet children's behavioral needs](#) was the first or second most significant reason for placement disruption. High-quality, timely behavioral health supports and services should be available to children and their caregivers throughout the placement process, including [wraparound services](#), **in-home and community-based therapy**, and [mobile crisis response](#), all of which should be [trauma-informed and healing centered](#). **Formal integration between child welfare and behavioral health** agencies also improves placement stability for youth involved with both service systems,¹⁹ by reducing administrative barriers and facilitating communication between caseworkers and counselors. All too often, placement changes are blamed on youth, when in reality, service fragmentation, inadequate access, and other systemic factors are at play.

Train and support resource caregivers

Several evidence-informed programs support resource caregivers in addressing the risks associated with placement disruption. The [Treatment Foster Care Oregon \(TFCO\)](#) practice model (formerly known as Multidimensional Treatment Foster Care) has been shown to significantly increase placement success and decrease the number of placement moves among children and youth with mental health issues who are in foster care.^{20,21} [Keeping Foster and Kin Parents Supported and Trained \(KEEP\)](#), which trains resource caregivers to address challenging behaviors and help

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children decrease problem behaviors, has also been shown to increase placement stability.^{22,23}

[Attachment and Biobehavioral Catch-Up \(ABC\)](#) teaches caregivers of young children who have experienced adversity how to nurture children and provide safe, stable environments. [Parent Child Interaction Therapy \(PCIT\)](#) can be used in the context of foster care for young children with emotional and behavioral challenges. PCIT has been shown to reduce the risk of child physical abuse,²⁴ reduce caregiver stress,²⁵ and increase caregiver tolerance of child behavior problems.²⁶

[Parent-Child Care \(PC-CARE\)](#), a dyadic intervention for children who have experienced trauma, are experiencing difficulties with their caregiver, or are adjusting to a new home, has been shown to decrease placement instability for young children ages 1 to 5 in foster care.²⁷ An exploratory study of [Trauma Systems Therapy for Foster Care \(TST-FC\)](#), a systemwide training which focuses on training resource caregivers, found that placement stability increased among children whose parents had received TST-FC training.²⁸

Offer ongoing resource caregiver support

Studies have also shown that embedding the resource family within a **broader network of social support** is associated with fewer placement disruptions^{29,30} and resource caregivers who have social support are more confident and satisfied as resource caregivers.³¹ As a result, agencies have taken steps to develop and implement resource caregiver buddy systems, peer support groups, help lines, and mentoring programs.

Providing ongoing support services, such as case management support, counseling, and support groups can bolster resource caregiver resilience and minimize burnout.³² Concrete resources, such as rent/utility assistance, funds for materials (clothing, bedding), or child care assistance, can also decrease placement instability.^{33,34}

Agencies can also support resource caregivers by simplifying policies and procedures and minimizing paperwork. Resource parent Marquetta King notes, “I know many foster parents who have experienced burnout not only due to the daily grind of parenting a child with behavioral and mental health issues, but also the undue burdens placed on them by bureaucratic policies and procedures.”

Strengthen the workforce

Pre-service and ongoing training can help caseworkers and others who interact with youth and families understand why children experience multiple placement moves and what can be done to prevent placement instability. Training can also emphasize the importance of creating a plan for placement and permanency upfront, rather than during a crisis, given the benefits of more intentional partnerships with parents, better assessments of children’s needs, better service plans, and, most importantly, better placements.

[Casework teaming](#) can also help support retention and placement stability. In this model of casework practice, staff share responsibility for supporting children and families. Teaming can offer resource families a larger



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network of trusting relationships bolstered by more frequent communication and a focus on developing creative solutions. **New York’s** [guidebook](#) for teaming in child welfare can be a helpful resource.

Reducing [caseworker turnover](#), which disrupts the continuity of relationships and exposes children to risk factors associated with placement instability, is also important. King notes, “I have had several children in foster care say that it would be a waste of time to get to know another caseworker because ‘they’ll eventually

leave.” Staff continuity enables caseworkers and other providers to build rapport with children, families, and resource caregivers; track the experiences of children and caregivers as they adjust to new placements; and make informed decisions about services and case planning. To [promote caseworker retention](#), agencies have sought to provide flexible scheduling, telecommuting options, opportunities for professional development and recognition, reasonable caseloads and workloads, and to improve organizational climate and culture.

To learn more, visit [Questions from the field](#) at [Casey.org](#).

- 1 Content of this brief was informed by consultation with members of the Knowledge Management Lived Experience Advisory Team on December 12, 2022, and January 6, 2023. This team includes youth, parents, kinship caregivers, and foster parents with lived expertise of the child welfare system who serve as strategic partners with Family Voices United, a collaboration between FosterClub, Generations United, the Children’s Trust Fund Alliance, and Casey Family Programs. Members who contributed to this brief include: Matthew Darnall, Marquetta King, Aleks Kort, Rimy Morris, and Lisa Myles.
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P 800.228.3559

P 206.282.7300

F 206.282.3555

casey.org | KMResources@casey.org

