



Every Kid Needs a Family Resource page

To go directly to a specific section, just click on the linked subject below:

[Advocacy Tips](#): *These resources offer practical and concrete tips for how to make legal arguments against institutional care.*

[COVID-19](#): *Institutional care placements bring particular dangers and concerns during the COVID-19 pandemic. These resources are helpful to use in advocacy during the pandemic to avoid and remove youth from institutional care, and also contain useful information to use in advocacy generally.*

[Family First Prevention Services Act \(FFPSA\)](#): *These resources, which use the language of FFPSA to make legal arguments regarding institutional care, will be especially useful in jurisdictions that have implemented the Act.*

[Kinship placements](#): *One way to avoid youth being placed in congregate care is to advocate for youth to be placed with family or kinship caregivers; these resources give advocates the tools and support to make those arguments.*

[Permanency](#): *Another way to avoid youth placement in congregate care is for advocates to focus their efforts on identifying a permanent placement for youth; these resources give advocates the tools and support to make those efforts and arguments.*

[Policy Recommendations](#): *These resources provide tools for advocating for system reform and policy changes that work towards reducing overreliance on institutional care and increasing family placements.*

[Racial Disparities](#): *These resources highlight the racial disparities for youth in institutional care specifically and in the child welfare system generally and can be used to support individual and systemic advocacy and arguments to avoid institutional care for youth.*

[Social Science Research](#): *These resources contain helpful data, statistics, and other research practitioners can use to support and enhance their advocacy.*

ADVOCACY TIPS

[Advocating for the Most Connected Placement: A Guide to Reducing the Use of Group Care – Youth Law Center & Juvenile Law Center](#) (May 2019)

This toolkit addresses fifteen principles and questions that guide attorneys and advocates through various points of intervention during their client's case. Each subsection includes specific action items for attorneys and advocates to pursue both in and out of court and references to authorities such as federal laws, California state laws, social science research, and expert opinions. The guide supports advocacy to ensure that youth are living in settings where they can be connected to family, the community, and a support system.

[Best Practices for Residential Interventions for Youth and their Families: A Resource Guide for Judges and Legal Partners with Involvement in the Children's Dependency Court System – Building Bridges Initiative, Association of Children's Residential Centers](#) (February 2017)



This resource guide provides judges and legal partners with key questions to ask the court when determining the appropriateness of residential intervention for their clients. These questions are grouped into eleven subsections that focus on the critical components of safe, quality, and effective residential programs: (1) permanency goals; (2) family engagement; (3) youth empowerment; (4) culturally and linguistically competent services; (5) trauma-informed care; (6) home community programming; (7) seclusion and restraint prevention; (8) transition to adulthood assistance; (9) use of psychotropic medications; (10) organizational best practices; and (11) analysis of program outcomes. The resource also includes action items for residential programs regarding the aforementioned subsections in order to increase the quality of care they provide. Additionally, the guide highlights research and best practices concerning children under twelve living in residential programs.

[Family First: Reducing the Use of Congregate Care – National CASA/GAL Association](#)

This infographic explains the issue of institutional care through statistics, visually depicts the continuum of care options, and describes the pre-placement and post-placement role of a CASA or GAL volunteer.

[Five Tips for Challenging Placement in a Residential Setting – American Bar Association; C. Freitas, D. Freitas, A. Roark](#) (September 2019)

This resource outlines tools for attorneys to utilize to challenge their client’s placement in institutional care and best meet a client’s individual placement needs (i.e. medical, therapeutic, educational). The resource advises attorneys to (1) independently investigate the institutional care program; (2) compare the client’s diagnoses with the program’s services; (3) make a chart for the court to demonstrate what the client will receive in the residential program versus in a home setting; (4) expand the scope of reasonable efforts litigation; and (5) hire an expert.

COVID-19

[Affidavit of Barry S. Levy, M.D., M.P.H., Regarding COVID-19 Infections in Congregate Care Facilities of the Massachusetts Department of Children and Families \(DCF\)](#) (April 2020)

This affidavit contains an expert’s opinion indicating an increased risk of infection posed to youth in institutional care during the COVID-19 pandemic. Recommendations include that residents be released to safe homes where social distancing measures can be practiced to reduce the incidence of COVID-19 infection, illness, and death.

[Congregate Care Programs 2019 Novel Coronavirus \(COVID-19\) Interim Guidance – Commonwealth of Massachusetts Department of Health](#) (April 2020)

This guide includes supplementary background, mitigating actions, and directives for institutional care facilities located in Massachusetts during the age of COVID-19. The guide outlines specific precautionary measures and actions to take in the event of a suspected or confirmed COVID-19 case in an institutional care setting.

[COVID-19 and Congregate Care Facilities: A Resource Guide for State Legislators – National Conference of State Legislatures](#) (July 2020)



This resource includes examples of how states and the federal government are addressing COVID-19's impact on youth in the child welfare system living in institutional care. The examples include executive orders, recommendations, and a bill which address topics such as hygiene, health care visitation, facility guidelines, and funding.

[Making an Emergency Plan with Youth in Congregate Care in California: A Toolkit for Dependency Attorneys, Youth Providers, and Advocates – Youth Law Center](#) (March 2020)

This toolkit contains (1) a comprehensive list of questions for attorneys, advocates, and youth providers to ask clients in institutional care in order to assess the quality of care, create contingency plans, and ensure the client's needs are met; (2) advocacy strategies for youth who will remain in institutional care through the health crisis; (3) advocacy strategies for youth who will not remain in institutional care through the health crisis; (4) a contact list template to optimize safety in case of an emergency; and (5) systemic advocacy suggestions and strategies.

[Making an Emergency Plan with Youth in Congregate Care in Massachusetts: A Toolkit for Dependency Attorneys, Youth Providers, and Advocates – Youth Law Center](#) (July 2020)

This resource contains Massachusetts-specific recommendations that are otherwise identical to the information in the similarly titled California resource.

FAMILY FIRST PREVENTION SERVICES ACT (FFPSA)

[A Complete Guide to the Family First Prevention Services Act – John Kelly, The Chronicle of Social Change](#) (February 2018)

This webpage provides a brief overview of the FFPSA and links to three articles three links that break down the two major sections of the act and all of the additional provisions: (1) services to prevent foster care; (2) limiting support for institutional care; (3) adoption, foster home recruitment, reunification, etc.

[Family First Prevention Services Act, Implementation Timeline – Children's Defense Fund](#) (February 2020)

This chart details the FFPSA implementation dates and summaries of the implemented changes, from 2018 through 2027.

[Family First Prevention Services Act, Issue Brief – National Center for State Courts, Government Relations Office](#) (February 2018)

This brief contains an eight-part overview and detailed summary of the FFPSA that highlights (1) prevention activities under Title IV-E; (2) enhanced support under Title IV-B; (3) ensuring the necessity of non-family placements; (4) continuing support for child and family services; (5) continuing adoption and guardianship incentives to states; (6) technical corrections; and (7) ensuring states reinvest savings resulting from increases in adoption assistance; and (8) miscellaneous provisions.

[Family First Resource Database – FamilyFirstAct.org](#) (July 2020)



This webpage contains information about the FFPSA, including links and summaries to an array of resources regarding understanding, implementing, and engaging with the act.

[Family First Resources – Grandfamilies.org](#)

This webpage includes three sections: (1) guidance from the U.S. Department of Health and Human Services; (2) general resources; and (3) kinship resources. The sections contain links to information pertaining to understanding and implementing the FFPSA, such as, toolkits for practitioners and advocates to discuss the act with the media, standards and procedures of model foster family homes and family-based treatments, explanations regarding federal funding opportunities and disbursement, and summaries of key responsibilities for legal professionals in order to improve outcomes for children and families.

[Legal Professional Roles: Implementing the Family First Prevention Services Act – ABA Center on Children and the Law](#) (July 2019)

This guide offers a breakdown of provisions in the FFPSA that are especially relevant to the legal community. It outlines the roles and responsibilities of legal professionals, including: state and local policy change guidance, direct practice implementation, and advocacy opportunities for Qualified Residential Treatment Program (QRTP) and non-family foster home placement cases.

[Tool for Engaging the Legal Community in Implementing Family First – ABA Center on Children and the Law](#) (February 2020)

This tool provides synopses of six sections of the FFPSA: (1) prevention services; (2) placement of a child with a parent in a residential substance abuse treatment facility; (3) reunification services; (4) foster family homes; (5) group setting foster care placements; and (6) inappropriate diagnosis protocols. The tool provides an outline of the relevant standards of the FFPSA in addition to the roles and responsibilities of local child welfare agencies, attorneys, and the judiciary.

[Congregate Care in the Age of Family First](#) (2021)

The Capacity Building Center for States published three briefs providing information on how child welfare agencies and care providers can meet the letter and spirit of the FFPSA. All three papers can be obtained via the link above. The three papers cover the following aspects of Congregate Care in the Age of Family First:

- [Overview](#) - Foundational information about the law, focusing on the institutional care aspects and their implementation.
- [Family Engagement](#) - Description of the family engagement aspects of FFPSA and strategies to achieve meaningful partnerships with parents and children in residential programs.
- [Trauma-Informed Care](#) - Information on the trauma-informed care provisions of FFPSA and strategies for implementing a trauma-informed approach to institutional care.



[Benefits of Kinship Placement - American Bar Association, Litigation Section](#) (March 2020)

This resource offers a list of kinship-focused talking points for trial counsel on the topics of (1) federal financial incentives; (2) benefits to those placed in kinship foster homes; (3) benefits of kinship placements for both the child and the caregiver; and (4) obstacles to kinship care and kinship adoptions. The resource also details clinical studies that assess multiple facets of kinship placements including (1) physical and psychological health of kin children; (2) relations between kin children and caregivers; (3) caregivers' access to available services; and (4) racial disparities that exist in kinship foster care placement.

[Circles of Safety and Support – Sonja Parker, SP Consultancy](#) (2015)

This resource describes the Circles of Safety and Support tool, a visual tool for children and families involved in the child welfare system to identify a safe support network. The resource details the structure of the tool, how to implement the tool, a comprehensive case example, process considerations, and additional resources on collaborative planning.

[Connect Our Kids Tools – ConnectOurKids.org](#)

This webpage contains free tools for child welfare professionals and advocates to help facilitate family-based placements for children and youth in foster care. The tools include a search engine to find contact information for extended and foster families, a family mapping program, communication templates, and mobile apps.

PERMANENCY

[Diligent Recruitment of Families for Children in the Foster Care System, Challenges and Recommendations for Policy and Practice - Heidi Melz, Ph.D., Colleen M. Killian, Ph.D., and Elliott Graham, Ph.D., James Bell Associates, Children's Bureau, Administration for Children and Families](#) (August 2019)

This report contains recommendations for overcoming common barriers to the recruitment and retention of skilled and effective foster and adoptive parents. The report details solutions, lessons, and suggestions by twenty-one agencies that received federal grants to improve permanency and outcomes for children in out-of-home placements. The report includes a guide to the diligent recruitment process – a systematic method of recruiting, retaining, and supporting diverse foster/adoptive parents in order to provide youth a culturally compatible and safe environment.

[Family Finding Evaluations: A Summary of Recent Findings – Sharon Vandivere and Karin Malm, Child Trends](#) (January 2015)

This brief contains findings from thirteen agencies that employed the Family Finding Model, a six-stage tool used to increase rates of permanency through locating and engaging relatives and adults. Although the findings indicate that the intervention had neither a positive nor negative impact on the likelihood of a child's permanency, the brief includes additional training and instruction that agencies can implement in order to increase the efficacy of the model in future applications.



[Permanency: Children and Youth Living in Congregate Care – National CASA/GAL Association](#) (November 2018)

This document highlights the issues facing youth in institutional care and suggests employing several practice and program actions to ensure that youth are only placed in institutional care when truly necessary. The resource also highlights The Return Home Early Project that successfully reduced institutional care residency by 50 percent in the five years since the program's implementation. The document provides descriptions and links to five selected resources that aim to safely reduce institutional care for children and youth in foster care.

[Voices from the Field: Stakeholder Perspectives on Family Finding – Child Trends](#) (February 2014)

This brief contains a summary of findings from an evaluation of the Family Finding Model and data gathered from interviews/surveys of judges, guardians *ad litem*, and Family Finding specialists and experts. The evaluation, interviews, and surveys yielded five key themes: (1) family is important; (2) family involvement is not always easy; (3) family dynamics matter; (4) more supports are needed for relatives; and (5) program structure can support permanency. The brief includes analyses of each key theme and four practice and policy implications to consider in order to strengthen or expand a Family Finding program: (1) build a family-friendly culture; (2) increase supports and services to relatives; (3) measure other benefits of family finding; and (4) build a deeper understanding and respect of the sometimes conflicting roles of parties.

[Youth Voices for Permanency: Courtroom Guide on How Courts and Judges Can Make a Difference – Voice for Adoption](#) (May 2016)

This guide summarizes findings from a survey and focus groups of former and current foster youth showing attitudes and areas of improvement that judges can implement to achieve permanency for foster youth. The guide also includes a brief synopsis of permanency options and the law along with a list of questions for judges to ask youth in court hearings.

POLICY RECOMMENDATIONS

[A Historic Opportunity to Reform the Child Welfare System: Youth & Alumni Priorities on Quality Residential Services – The National Foster Care Youth & Alumni Policy Council](#) (February 2020)

The resource points to four specific policy recommendations the Council released in 2016 on institutional care: (1) states should make efforts to prevent disruptions and ensure placement in institutional care is appropriate; (2) establishing lifelong connections should be a priority for children placed in institutional care settings; (3) policies, oversight, and staffing of institutional care operations must be improved; and (4) institutional care settings must provide trauma-informed services. It also presents six new detailed policy priority areas: (1) ensure Quality Residential Treatment Programs (QRTPs) are caring for youth in need of complex intervention; (2) entry into QRTP intervention should be fair and appropriate; (3) QRTP should be in the young person's community; (4) ensure youth education and involvement in medication and mental health treatment plans; (5) create standards and measures of youth well-being; and (6) urgently address the vulnerabilities to sex-trafficking that are associated with placement in a QRTP.



[Families Over Facilities: Ending the Use of Harmful and Unnecessary Institutions and Other Group Facilities in Child Welfare Systems](#) - Children's Rights (March, 2021)

This report, endorsed by a number of prominent child welfare professionals and organizations, discusses the harms done to children by unnecessary placement in institutional settings and analyzes the public expense and civil rights implications associated with such placements. The report contains a toolkit with strategies for caseworkers and child welfare agencies to reduce unnecessary institutional placements and increase keeping children with parents or kin.

[Analysis of State 2020-2024 Foster & Adoptive Parent Diligent Recruitment Plans – FosteringChamps.org](#)

This report analyzes 42 state Foster and Adoptive Parent Diligent Recruitment Plans based on six drivers of effective foster parent recruitment and retention: (1) child-centered, (2) data-driven, (3) leadership, (4) collaboration and transparency, (5) youth and parent voice, and (6) sustainability. The report also includes five recommendations: (1) strengthen the focus on desired results for foster family recruitment and retention by amending the current Diligent Recruitment plan requirement; (2) require the U.S. Department of Health and Human Services to collect and publish information on trends and needs relating to foster parenting; (3) ensure that the Children's Bureau's Child Welfare Capacity Center Collaborative prioritizes on an ongoing basis recruitment and retention and has sufficient funding, expertise and other resources needed to provide technical assistance to states; (4) create a new federal grant program to facilitate effective partnerships between agencies and foster families; and (5) amend Title IV-E reimbursement to streamline and improve financing for foster family recruitment, training, support and retention services.

[Congregate Care, Residential Treatment and Group Home State Legislative Enactments 2009-2013 – National Conference of State Legislatures](#) (February 2017)

This resource includes statistics regarding the number and characteristics of children in institutional care settings, the reasons why children are placed in such settings, research on effective interventions, and ways states can further reduce the reliance on institutional care. The resource lists sixty-one unique institutional care legislative enactments from various states dating from 2009 to 2013, organized by topic area.

[Consensus Statement on Group Care for Children and Adolescents: A Statement of Policy of the American Orthopsychiatric Association – American Journal of Orthopsychiatry](#) (February 2014)

This article, authored by scholars in the field of psychology, asserts and provides scientific support for ten principles: (1) healthy attachments with a parent figure are necessary for children and help to reduce problem behaviors and interpersonal difficulties; (2) especially during adolescence, it is critical to balance children's need for parental control and regulation with their developing needs for autonomy; (3) child-sensitive exercise of adult authority is critical to healthy development; (4) group care is not an appropriate living arrangement, and it can never substitute for a home environment; (5) group care may be related to an increased likelihood of problem behavior; (6) group care may cause psychological harm even in typically developing children; (7) group care for abused and maltreated children may be physically dangerous; (8) there is no demonstrable therapeutic necessity for group care to be used as a long-term living arrangement; (9) even children who have never experienced secure attachments can develop them in appropriate family settings; and (10) group care should never be used for young children.



[Every Kid Needs a Family: Kids Count Policy Report – Annie E. Casey Foundation](#) (May 2015)

This report includes data regarding states' use of group placements, the cost to taxpayers, and the corresponding physical and mental harms to youth living in institutional care. The report offers a continuum of care options, indicating that residential treatment facilities are only effective to a small percentage of young people who cannot safely live in families and should not be utilized beyond short periods of time or for long-term living situations exceeding six months. To ensure that children in the child welfare system live in families wherever possible, three recommendations are asserted: (1) expand the service array to ensure that children remain in families; (2) recruit, strengthen, and retain more relative and foster families; and (3) support decision making that ensures the least restrictive placements.

[Perspectives on Residential and Community-Based Treatment for Youth and Families – Magellan Health Services Children's Services Task Force](#) (2008)

This resource includes six literature reviews and data collected from three community forums regarding the efficacy of institutional care treatment and alternatives for youth requiring intervention. It lists key components for residential treatment and effective short-term programs, both of which focus on family involvement, discharge planning, community involvement, and measuring outcomes. The resource also contains lists of alternatives to residential treatment, integrated community-based services, and in-home services that have shown to be effective.

[Principles of Care for Treatment of Children and Adolescents with Mental Illness in Residential Treatment Centers – American Academy of Child and Adolescent Psychiatry](#) (June 2010)

This resource contains guidelines for residential treatment centers which employ multidisciplinary mental health programs for children and youth who cannot be treated in a community-based setting. The resource provides guidelines in the following topics: (1) leadership and staffing; (2) admission process, treatment planning, and discharge planning; (3) prevention of aggressive/dangerous behavior; (4) therapeutic services standards; (5) special populations and programs; (6) educational services; and (7) therapeutic environment. The resource also includes specific treatment guidance for particular populations.

[Redefining Residential: Ensuring Competent Residential Interventions for Youth with Diverse Gender and Sexual Identities and Expressions – Association of Children's Residential Centers](#) (October 2014)

This paper includes ten organizational policies, procedures, and practices for institutional care facilities to employ in order to improve outcomes for LGBTQI2-S youth: (1) conduct agency self-assessments and ongoing continuous quality improvement efforts; (2) enforce non-discriminatory policies; (3) promote staff knowledge and development; (4) incorporate culturally and linguistically appropriate interventions; (5) promote a safe, supportive and culturally and linguistically competent environment; (6) implement practices to support preferences and affirm identities; (7) promote healthy and supportive peer connections; (8) strengthen family connections; (9) promote access to an array of affirming services and supports; and (10) facilitate community outreach and engagement. Additionally, the paper includes five considerations and issues for institutional care facilities: (1) integrate youth-guided programming; (2) detect and address cultural coercion; (3) separate/integrate LGBTQI2-S youth housing; (4) navigate varying cultural identities; and (5) establish a safe space for all residents.



[State Policies on Non-Family Foster Care Settings – Youth Law Center](#) (July 2015)

This resource details the various types of state-imposed restrictions on institutional care, the effects of legal restrictions, and four recommended policy principles for state lawmakers: (1) eliminate institutional care as a placement and permit residential treatment as an intervention only if it is the least restrictive option to meet the child’s documented clinical needs; (2) prohibit institutional care for children under age thirteen; (3) impose licensing standards and program requirements to ensure treatment facilities have the capacity to provide needed treatment and developmentally appropriate care; and (4) ensure that funding supports policy.

[Using Evidence to Accelerate the Safe and Effective Reduction of Congregate Care for Youth Involved with Child Welfare – Chapin Hall & Chadwick Center](#) (January 2016)

This policy brief contains findings from the Multistate Foster Care Data Archive, the National Survey of Child and Adolescent Well-Being, and the California Evidence-Based Clearinghouse for Child Welfare in order to: (1) better understand the population of youth placed in institutional care; (2) identify strategic levers for reducing the use of institutional care; and (3) understand the variation in state and local utilization of institutional care. The brief emphasizes the need for evidence-based interventions to address the needs of youth with complex behavioral and mental health profiles and highlights the need for strategies to increase home-based placements through increased services and support for home-based caregivers. The brief identifies nine disruptive behavior treatments that are well-supported by research evidence as well as five placement stabilization programs that aim to reduce the number and frequency of disrupted out-of-home placements. The evidence presented in this brief informs recommended actions to reduce the use of institutional care, stabilize and support home placements, and support access to and funding for evidence-based interventions, services, and practices.

RACIAL DISPARITIES

[Fewer Foster Youth, More Foster Homes: Findings from the 2019 Who Cares Project – John Kelly, The Chronicle of Social Change](#) (October 2019)

This resource provides state-by-state infographics regarding the surge of Native American and Black youth in care as well as states that have experienced an increase of twenty percent or more in institutional care placements. The data, collected directly from states and specially obtained federal reports, indicates that although the number of youth in foster care has declined by three percent since 2017, many states have experienced a sharp increase in the percentage of youth in care.

[Patterns of Treatment/Therapeutic Foster Care and Congregate Care Placements in Three States - RTI International; Chapin Hall; U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Education](#) (June 2019)

This analytic report provides a quantitative analysis of three states’ implementation of therapeutic foster care in order to understand the efficacy of the treatment in decreasing the unnecessary use of institutional care. The report analyzes race/ethnicity by state across all placement types, finding Black children were disproportionately represented in institutional care placements in Illinois.



[Placing Foster Children with Relatives May Help Prevent Congregate Care – Jeremy Loudenback, The Chronicle of Social Change](#) (February 2020)

This resource highlights key findings from a study conducted by the Children’s Data Network.¹ The study found racial disparity in institutional care placements, indicating that Black youth were placed in institutional care at a rate 1.7 times higher than that of white youth. Additionally, results also indicated that youth who experienced a non-kin placement as their first placement were moved into institutional care at a significantly higher rate than youths who experienced a kin placement. The resource urges social workers to understand bias and employ more racially conscious decision making.

[Racial Disproportionality and Disparity in Child Welfare – Children’s Bureau, Child Welfare Information Gateway](#) (November 2016)

This brief discusses the prevalence of racial disparity and disproportionality of children/families of color in the child welfare system. The brief lists six strategies to address racial disproportionality and disparities: (1) increase prevention and early intervention services; (2) increase cultural competence training for mandatory reporters; (3) examine how agencies’ screening, investigation, and assessment practices affect children of different races and ethnicities; (4) provide access to culturally competent service providers in the community; (5) offer services that promote family reunification and pursue kinship care to increase likelihood of permanency; (6) engage in best practices (ensure agency policies are racially equitable, utilize trusted community leaders in family group decision-making, ensure child welfare workforce is culturally competent and diverse, and form partnerships with community and faith-based organizations).

[Understanding the Differences in How Adolescents Leave Foster Care – The Center for State Child Welfare Data, Fred Wulczyn, Scott Huhr, Florie Schmits, and Alexandria Wilkins](#) (November 2017)

This brief explores the impacts of race, ethnicity, and type of placement on how and why adolescents exit care and rates of permanency. The brief also highlights the need to address the phenomenon of adolescents exiting the child welfare system into non-permanency.

SOCIAL SCIENCE RESEARCH

[A National Look at the Use of Congregate Care in Child Welfare – U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau](#) (March 2015)

This data brief is designed to help policymakers and advocates at the state and federal level better understand the population of children and youth who are likely to experience institutional care and what, if any, additional supports may be needed to further reduce reliance on it as a placement setting for certain cohorts of children and youth. The brief finds that while the overall use of institutional care has decreased nationally, there is still variation amongst the states in use of institutional care. The brief uses quantitative (Adoption and Foster Care Analysis and Reporting System (AFCARS)) and qualitative data to examine different trends in youth placed in institutional care, including gender, race/ethnicity, age, clinical

¹ Lindsey Palmer, Eunhye Ahn, Dorian Traube, John Prindle, Emily Putnam-Hornstein, *Correlates of Entry into Congregate Care among a Cohort of California Foster Youth*, 110 CHILDREN AND YOUTH SERVICES REV. (2020).



and treatment needs, and length of stay - and to answer the question, “What is the difference between children who do and do not experience institutional care?” The brief includes best practice recommendations and describes a three-tiered approach in order to utilize institutional care judiciously, efficiently, and effectively.

[Evidence Base for Avoiding Family Separation in Child Welfare Practice – Alia Innovations, Erin Sugrue, Ph.D., LICSW \(July 2019\)](#)

This brief reports empirical research findings and analyses in order to address the impact on children’s well-being of: (1) out-of-home placement and (2) being placed in a foster home with kin versus being placed in a foster home with strangers. The brief examines the impact out-of-home placement has on youth in the areas of dependency and criminal system involvement; mental and behavioral health; and early mortality. Each subject area contains a synthesis of articles, empirical reviews, and studies to facilitate a robust understanding of outcomes and effects of out-of-home placements. In addition, the brief examines research on the differences in outcomes for children placed in kin and non-kin foster homes through analysis of placement stability and emotional, social, and behavioral wellbeing. The brief also examines the impact of race on outcomes for youth in out-of-home and kinship care.

[Institutional Care for Young Children: Review of Literature and Policy Implications – Mary Dozier, Charles H. Zeanah, Allison R. Wallin, Carole Shauffer, National Institute of Health \(March 2012\)](#)

This article explains the negative effects of institutional care on children younger than six years old, including inability to form attachments, increased indiscriminate social behaviors, delays in physical and cognitive development, and poor regulation. The article lists two alternatives to institutional care: the Bucharest Early Intervention Project (BEIP) model of foster care and the Attachment and Biobehavioral Catch-up (ABC) intervention method which targets regulatory issues, attachment quality, and indiscriminate sociability issues that foster children face. The article includes four policy recommendations:(1) change positive attitudes toward institutional care by educating individuals, organizations, and donors about the importance of family-like settings for children and the harmful effects of institutionalization; (2) recognize impediments to transitioning from institutional care, such as diverting funds from institutions to community-based programs; (3) establish alternative community-based support systems, such as programs to support vulnerable birth parents; and (4) implement programs and services that have strong empirical support and advocate for the assessment of more services.

[What are the Outcomes for Youth Placed in Congregate Care Settings? – Casey Family Programs \(February 2018\)](#)

This article gives nationwide data regarding the use of institutional care and highlights research-based outcomes for youth placed in institutional care. The article contains links to five selected resources that consider and assess the nation’s use of institutional care and the ramifications of such care for children.