

**"Satisfaction of
1,100 Children in Out-of-Home Care,
Primarily Family Foster Care, in Illinois' Child Welfare System"**

Abstract

Objectives:

This paper documents the satisfaction of 1,100 children in out-of-home care, primarily family foster care, from 1993 to 1996. The children were served by Illinois' child welfare system.

Methods: The randomly selected samples were representative of all children in placement in the state of Illinois during the four years the surveys were conducted. The children were interviewed in person on their satisfaction with the homes in which they lived and their caretakers. They were also asked whether they felt loved and safe and rated the quality of their lives before and after placement in substitute care.

Results: The children's satisfaction with their living arrangements was high, as was satisfaction with the persons caring for them. This was especially true for children living in family foster care (86% of the children interviewed were living in family foster care, kinship and nonrelative).

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Illinois' Child Welfare System"**

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Introduction

In 1993, an estimated 445,000 children were living in out-of-home care in America's child welfare systems [Curtis et al. 1995]. Despite the increasing number of children in substitute care, there are few studies that document their satisfaction with their current homes, the services they are receiving and the quality of their lives. Studies that have documented interviews with children were based on small samples [Johnson et al. 1995; Gardner 1996] or reported on post placement interviews [Benedict et al. 1996].

A holistic evaluation of the quality of out-of-home care should include interviews with the children. Among the many quality of life outcomes that are measurable, consumer satisfaction is certainly one of the most important. No system can consistently improve unless it receives feedback. As one researcher said, "The children themselves should be consulted... they are a key source of information that has too often been overlooked" [Dubowitz 1994].

Child welfare systems have popularized the word "empowerment" as they have implemented reforms [Dunlap 1997]. This word is used most often when referring to the children's biological parents or their caretakers. Empowerment is also vital to children since opportunities for self-determination during childhood impact their adult lives. One of the first steps in making children feel empowered is to ask their input and to value their opinions.

The consistency of the four years of interview results documented in this article reflects the children's ability to report on their own circumstances and to assess their

needs. They are key members of their permanency planning teams whose lives are impacted by the judgments adults make. And yet, they are frequently neither asked nor heard when they offer an opinion on the quality of their lives or their future dreams.

The present paper describes selected results from four years of directly asking children in out-of-home care about their lives, satisfaction and preferences. This is the largest and longest lasting such effort found in the child welfare literature.

Background

The four Annual Client Evaluations (ACE) summarized in this paper consisted of interviews with 1,100 children in substitute care in the state of Illinois' child welfare system during calendar years 1993, 1994, 1995 and 1996. The children were asked about the overall quality of their lives before and after placement, satisfaction with their current homes, caretakers, caseworkers, and the services they received from the child welfare agency and its contracted provider agencies. The characteristics of the children and demographics were also documented. (The project also involved interviews with each child's foster parents, biological parents, and child care workers. Results of those aspects of the research have been reported to the state agency, but are not the topic of the present article.)

Over 86% of the 1,100 children interviewed were living in family foster care, kinship and nonrelative (n=942); 14% of the children were living in residential group care placements (group homes, child care institutions, shelters or any placement that was not family foster care) (n=158). The living arrangements of the children in the study were consistent with actual data from the state child welfare agency's tracking

system. In September 1996, the state agency was serving 50,611 children in out-of-home care: 91% of the children were living in family foster care; 9% of the children were living in some type of residential group care [IDCFS 1996].

As a point of comparison, nationally approximately 70% of children in out-of-home care are living in family foster homes. The remaining children are living in residential group care (group homes, residential treatment centers or institutional settings) [Risley-Curtiss 1997]. The percentage of children in family foster care in Illinois was within a few percentage points all four years and reflects this state's emphasis on family foster care in placement decisions.

The ACEs generated satisfaction data as well as demographic information that increased the child welfare agency's knowledge of the children in the substitute care system. These outcomes offered policy makers and funders the unique opportunity to review current child welfare practices based on data gleaned from representative samples of children. Patrick A. Curtis, research director for the Child Welfare League of America, confirmed the importance of such feedback when he stated in the Children's Voice "...outcome measures are going to be increasingly important in the years ahead. In today's competitive climate, empirical evidence is vital. As budgets get leaner and meaner, and agencies are asked to do more with less, they need to know which services are most effective for which populations" [Child Welfare League of America 1996, p. 22].

Method

This section describes the methodology employed in designing and conducting the multiple years of the research reported herein. The methodology is divided into

sections on subjects, instruments, data collection, data analysis, reliability, and validity.

Subjects

This study provides data from interviews with 1,100 children from 1993 through 1996. The number of children annually interviewed was as follows: 250 children in 1993, 250 children in 1994, 300 children in 1995 and 300 children in 1996. The children were served by Illinois' child welfare system and were living in out-of-home care, primarily family foster care (86%).

Samples were designed differently and independently in the four years of the project. In the first year, 1993, the children in out-of-home care were selected as a simple random sample from the state child welfare agency's computer database. A larger than needed sample was drawn because of problems with the child welfare system's data accuracy. (This problem was discovered during the 1992 pilot study.) Interviewing stopped when 250 interviews were completed. Interviewers were given assignments three times the size of their target completed interviews. They were instructed to mark every third name alphabetically and proceed with interviews only returning to the beginning of the list if they were unable to complete their targeted number of interviews. There were very few refusals. The average interviewer only encountered one or two refusals. For the most part, children were unable to be reached because the state child welfare agency's computer information was inaccurate.

In the second year, 1994, simple random sampling was used again, with 250 completed interviews. In the third year, 1995, stratification was employed, with 100 children selected at random from nonrelative foster care, 100 from kinship care and 100 from residential group care (group homes, child care institutions, shelters, etc.) for a total of 300 completed interviews. This stratification scheme was used because of the child

welfare agency's interest in comparative quality across placement types. In the fourth year, 1996, stratification was used according to race/ ethnicity: 100 children of African American descent, 100 children of Caucasian descent and 100 children of Hispanic descent. The stratification was employed because of special child welfare interest in racial and ethnic issues.

The margin of error for the 1993 and 1994 random samples of 250 children, and for the 1995 and 1996 stratified samples, was approximately plus or minus 6% (according to the formulas suggested by Kish [1965].). When data from the 1995 and 1996 studies were pooled, the data were weighted to correct for the effects of stratification according to standard statistical methods [SPSS, 1993]. In effect, each child in the stratified sample is “weighted” according to the prevalence of that type of child in the population of children in the out-of-home care system.

The researchers were acting as agents of state government and as such, informed consent was not required. Nevertheless, no child was ever interviewed without requesting permission and receiving oral consent. The interviewers signed statements of confidentiality to protect the privacy of the children and those around them. The interviewers were fully informed during training of the penalties they would face for breaching confidentiality.

Instrument

As a starting point, the researchers reviewed the literature for outcome oriented instruments [Maguro, S. & Moses, B. 1986]. The instruments found did not meet the needs of this research project. With the child welfare agency's personnel, the depth and breadth of interests were explored. Issues the agency wanted to address included demographic information on the children, the children's satisfaction with various aspects of their lives and services, happiness with where they lived, their self-perceived quality of life before and after placement, and their relationships with caseworkers, the child welfare agency serving them, juvenile court, their biological family, other children living in their homes and their caretakers. The resulting questionnaire contained 49 quantitative questions (closed ended with answers given on scales or numbered choices), and 7 qualitative questions (open ended with answers taken down verbatim) to which the children responded. An example of a quantitative item is: "How do you feel about living here?" (Five point scale from Very Unhappy to Very Happy.) An example of a qualitative item is: "If answer was Unhappy or Very Unhappy, why are you unhappy here?" A pilot study was conducted in 1992 to test the instruments. Minor changes in wording and sequence were made to the survey instruments and full scale application was begun in 1993. Copies of the instruments can be obtained from the senior author.

Data Collection

Interviews with the children were conducted in their homes, in private unless the

children requested someone other than the interviewer be present. Interviewers were 11-14 professionals with undergraduate and advanced degrees and experience in the human service field. Seven of the interviewers stayed with the project 3 of the 4 years. In 1995, additional interviewers were added to meet the expanded number of individuals to be interviewed. In 1996, the sample was stratified by race/ethnicity and two more Spanish speaking interviewers were recruited.

The interviewers received eight hours of training each year at a centralized location. Training consisted of information on interviewing techniques and etiquette, procedures for scheduling interviews, handling situations they considered dangerous to the child interviewed and the questionnaires. Training attendance was mandatory.

Interviewers were told to rephrase questions to assure the child understood, but not to lead the child toward any specific answer via body language, tonality or facial expressions. Children were informed that they did not have to be interviewed, that they could stop the interview at anytime and that the interview would have no bearing on their situation whether or not they agreed to be interviewed.

Interviewers were also instructed to tell the children before the interview began that they were not employees of the child welfare agency and to encourage the children to share the concerns they expressed during the interview with their caseworkers, counselors, caretakers or relatives.

To help the younger children understand the Likert scales, a response sheet with five faces expressing great happiness, happiness, no emotion, unhappiness and crying was shown to the children. After a question was asked, the child pointed to the face that best expressed his/her feelings. For the more mature children, the five point scales

were explained and read out loud.

The length of the interviews depended on the child and ranged from approximately 15 minutes to 1.5 hours. The interviews were conducted over a 4 month period each year.

The questionnaire used five-point Likert scales, three-point alternatives, 'yes-no' questions, multiple choices items, requests for comments on specific answers, and open-ended questions taken down verbatim. For open-ended items that produced a short list of "types" of responses, those responses were coded into categories after the interviews. Open-ended items with a wide variety of responses were maintained in verbatim form.

Data Analysis

Data were entered onto a desktop computer using the SPSS data analysis software system [SPSS 1993]. Analyses were performed using appropriate statistical tests for each item of the survey. For group comparisons, the statistics utilized were the group t -test when there were two groups, and the analysis of variance when there were more than two groups. For example, tests for significant differences across the three types of out-of-home care (nonrelative foster, kinship, and group residential) were simple oneway analyses of variance. Each test used is described in each table of the Results section.

Reliability

Reliability was tested during the pilot study. The three kinds of reliability generally recognized for data collection instruments of these sorts are internal consistency, test-retest and interrater. For this study the features of test-retest and interrater reliability

were used. Not only had time passed between the two interviews (approximately 4 weeks), but a different interviewer was used. This means that the estimates of reliability derived from this study were conservative, that is, they were likely to be lower than either "pure" method. In this situation, it was not possible to conduct interview by two different interviewers on the same day, because of respondent burden and concern for intrusiveness. The only available opportunity to test reliability with these interviewers and these children was to allow some time to pass between interviews.

The test-retest study involved reinterviews by telephone of 44 respondents representing each interview category. The items selected for the study were 'YES'-'NO' and five point scale questions. Altogether, there were 60 items in the 11 interviews which were asked twice.

The items selected for the reliability study were 12 'YES'-'NO' type responses and 44 five point scale questions. These items were selected by the research team and the Advisory Committee because they were believed to be those most important to the study objectives.

The 'YES'-'NO' type responses were in perfect agreement, they were exactly the same 100% of the time. On the 5 point scale questions, 49 out of 56 items were in agreement for an overall percent agreement rating of 87.5% [Wilson & Conroy 1993]. It was concluded that the instruments displayed acceptable reliability properties, as judged by the combination of test retest and interrater criteria.

Validity

Validity in general concerns the degree to which a test measures what it is intended to measure. Validity is usually divided into several categories: face, content,

predictive, concurrent and construct [AERA et al. 1985]. In this study face validity (do experts in the area of interest tend to agree that a test actually measures the underlying dimension of interest) and content validity (does the test give a broad representation of the elements and subcategories of performance in the desired content area) were informally established by utilization of a statewide advisory committee composed of experts in the field. Participants included statewide association representatives, advocates, service provider organizations and staff of the child welfare agency. The advisory committee reviewed and recommended revisions to the instruments.

Findings

Demographics

The children interviewed ranged in age from 5 to 18 years of age. At the time of their interviews, nearly all of the children were receiving regular dental and medical care and were in school or working on their GEDs.

Permanency was an ongoing concern. The average length of time the children's cases were in the system reached a high in 1996 of 46.3 months. It had increased from 38.7 months in 1995, 42 months in 1994 and 43 months in 1993.

The majority of the children were living in family foster care in Cook County, the county in which Chicago is located.

Overall Well-Being

The children were asked questions such as, "Are you loved?", and "Are you safe?" The responses to these questions were 'always', 'sometimes', and 'never' and are outlined in Table 1.

Table 1. Child Outcomes Are You Loved? Are You Safe? Annual Comparisons		
Year	Are You Loved? (% Always)	Are You Safe? (% Always)
1996*	82%	84%

1995*	86%	90%
1994	84%	87%
1993	87%	86%
* indicates data were weighted [SPSS 1993].		

Approximately, 4 out of 5 of the children interviewed, on average, each year said they were 'always' loved and 'always' safe.

Differences Across Placement Type in 1995

Although data were stable across the 4 years, a pattern of differences across placement types was evident in the 1995 samples. When the data related to being loved and feeling safe were analyzed by placement type in 1995, children living in family foster care were more likely to say they were 'loved' and 'safe' as compared to their counterparts living in group care arrangements [Wilson & Conroy 1995].

Of the 100 children in kinship care in 1995, 94% said they were 'always' loved' and 92% of these same children were 'always' safe. Children in nonrelative foster care (n=100) said they were 'always' loved 82% of the time. Of these same children, 92% said they 'always' felt safe.

By comparison, 46% of the children living in group care (n=100) 'always' felt loved and 64% of these same children said they were 'always' safe.

The data indicate that children in kinship care are more likely to 'always' feel loved than their peers living with nonrelatives in foster care or their peers in group care. The most dramatic differences, however, are related to the comparison of children in

family foster care with those in group care: the percentage of children in group care 'always' feeling loved and safe was significantly lower. (Treating the "do you loved" item as a three point scale, the three groups' responses were subjected to analysis of variance. The group means were significantly different ($F=28.84$, $df=2$, $p<.0001$). The least significant different post-hoc test revealed that the mean for children in group care was significantly different from the two other groups. Treating the "do you feel safe" item as a three point scale, the three groups' responses were subjected to analysis of variance. The group means were significantly different ($F=14.90$, $df=2$, $p<.0001$). The least significant different post-hoc test revealed that the mean for children in group care was significantly different from the two other groups.)

Quality of Life

When asked if they were satisfied with their present living arrangements, the children's responses across the four years were highly consistent and positive: on average more than three quarters of the children (81.5%) said they were 'happy' to 'very happy' with their current living situations.

The results of the self-reported quality of life scale, on average, revealed significant increases in the children's satisfaction after placement. The children were asked to rate, on a 1-5 scale with '5' the highest possible rating, 15 quality of life dimensions when they were living with their biological parents (**Then**). After they completed this evaluation, they were asked to rate the same items in out-of-home placement (**Now**). The responding children rated "**Then**" and "**Now**": health, how you look, school, playmates/friends, things you do for fun, clothes, comfort, food, place

where you lived before/live now, your bedroom or private space, sleep, feeling loved, feeling safe, family relationships, and happiness (Table 2). (Internal consistency for the "quality of life scale" was examined via Cronbach's Alpha. Alpha for the 15 item "then" scale was .93; alpha for the 15 item "now" scale was .94. Alpha values above .80 are considered acceptable.)

Year	Mean "Then"	Mean "Now"
1996*	3.96	4.37**
1995*	4.04	4.52**
1994	3.71	4.48**
1993	3.50	4.42**

* indicates data were weighted
** indicates changes from "Then" to "Now" were significant by paired t-tests at the .01 level.

The means indicate the children reported that the quality of their lives, on average, was perceived to have improved by moving to out-of-home care.

Self reported quality of life in 1995 varied across placement types. By combining the 15 quality of life items into a single scale, it was possible to test for group differences via analysis of variance. Children in group care gave significantly lower satisfaction ratings than children in family foster: kinship and nonrelative foster care ($F=26.63$, $df=2$, $p<.0001$).

Perceptions of Child Welfare/Provider Agency

Three out of 4 children (76%) were "happy" to "very happy" with their caseworkers. Interviewers were instructed to ask the children why they responded the way did. Their comments were verbatim transcriptions included in the reports. Most frequently, the children said their caseworkers were nice people. For example, "[He/she] is funny, nice to talk to, easy to understand." The negative comments most often related to caseworkers' inaccessibility, inability to visit often enough and failure to do what they promised. One child complained that her caseworker was not understanding, never visited or called, provided inaccurate information and "even criticizes me."

When asked if they had helped their caseworkers decide on their permanency goals, on average across the four years, fewer than a third (29%) of the responding children said 'yes'. The question was phrased: "Did you help your caseworker decide what was going to happen to you after you left your own family and were living somewhere else?" If they didn't understand the terminology the interviewers were instructed to use alternative terminology until they were convinced the child understood the question. One child commented, "It was like I wasn't even there." These data prove that children know what they want and can respond reliably, and yet, their input was not considered when the issue of permanency was debated.

When asked if there was anything they needed, on average, approximately one quarter of the children said 'yes' from 1993 to 1995. In 1996, the percentage of children reporting they had unmet needs jumped to 47%. Without further research, it is difficult to ascertain the exact cause or causes of this dramatic increase from

approximately one quarter to nearly one half of the children having "unmet needs."

Consistently, more than four out of five children who responded, on average, said DCFS or one of the agencies it contracted with to provide services 'always' or 'sometimes' helped (Table 3).

Table 3. Has DCFS/Private Agency Helped You? % responding "Always" or "Sometimes"	
Year	Mean
1996*	86%
1995*	88%
1994	82%
1993	85%
* indicates data were weighted	

Despite the fact that the overwhelming majority of children believed these organizations had helped them, when asked to rate DCFS/private agency, on average, only 63% of the responding children rated these entities 'good' to 'excellent' (Table 4).

Table 4. Please Rate DCFS/Private Agency % responding "Excellent/Good"	
Year	Mean
1996*	65%
1995*	63%

1994	62%
1993	60%
* indicates data were weighted	

Qualitative Data

The final section of the children's questionnaire asked several open-ended questions. One of these asked the children to tell the interviewers what they liked most about what had happened to them since they had left their parents' homes. The children frequently talked about being treated well, doing better in school, having friends, improved self-esteem, being comfortable, having fun, nice clothes and enough to eat. In response to what they liked least, they frequently talked about being separated or not seeing their parents and siblings, losing their freedom, being teased or treated badly by other children or not liking some physical aspect of where they lived, e.g., their bedrooms or neighborhoods.

Conclusion

The limitations of the data reported herein must be made clear. First, the present report deals only with the responses of the children themselves. In each year of the annual client evaluation, foster parents and child care workers were also interviewed. During the first 3 years of the evaluation, biological parents were interviewed. Their responses are not reported here, but they were included in reports to the state child welfare agency [Wilson & Conroy 1993, 1994, 1995, 1996].

Secondly, there are several shortcomings in satisfaction research generally, such as respondents' desire to provide socially acceptable answers, memory difficulties, and response biases such as acquiescence and recency [Berger 1983; Sigelman et al. 1981]. Although every effort was made to avoid these pitfalls in this body of work, some elements remained possible as threats to validity.

Another possible limitation is the fact that sampling strategies varied over the 4 years of research. Hence pooling the data must be done with caution, including appropriate weighting.

Finally, there may be some doubt about the validity of young children's answers in surveys of this kind. However, this study produced evidence that children's responses tended to be stable over time and across interviewers. It is suggested that all future efforts to evaluate child welfare systems should include the voices of the children themselves, with all appropriate psychometric checks and cautions.

With these potential limitations in mind, it is appropriate to begin to interpret the findings and suggest avenues for further investigation.

The Illinois Department of Children and Family Services (IDCFS) is one of the

few child welfare agencies in the nation to ask service recipients to evaluate its performance. The outcomes documented herein offer policy makers and funders the unique opportunity to review current child welfare practices based on reliable data gleaned from representative samples of children.

The data suggest that Illinois' substitute care system is received favorably by most of the children served, especially children living in family foster care. (Of the 1,100 children interviewed, 86% were living in family foster care; 14% of the children were living in some type of residential group care.) The findings assisted decision makers in:

- 1) making purposeful decisions about the future;
- 2) developing new services and supports based on the children's input;
- 3) targeting problems before they escalated; and
- 4) redesigning, limiting or discontinuing services which were not well rated.

For example, feeling loved and safe are key indicators of a child's well-being. When the data related to feeling loved and safe were analyzed by placement type in 1995, children living in family foster care were far more likely to 'always' say they were loved and safe when compared to their counterparts living in group care arrangements. The 1995 analysis highlighted other significant differences in key indicators when family foster care was contrasted with group care: The children consistently expressed greater satisfaction with family foster care. Kinship versus nonrelative foster care was examined in detail in the 1995 report. Few differences were found in the children's satisfaction among children in foster care: kinship and nonrelative; however, large and significant differences were found in the comparison of family foster care to group care.

Overall, the children's feedback reflects their satisfaction with substitute care, primarily family foster care. On average, the children were highly satisfied with their homes, their caseworkers and their self-reported quality of life had improved in substitute care. They also believed the child welfare agency or its contracted providers had helped them.

One of the deficits in this system was the lack of input the children had in writing their permanency plans. Fewer than a third of the children, on average, helped their caseworkers decide their permanency goals. The children also voiced complaints about the way they were treated by juvenile courts. Most frequently, the children said no one listened to them in court or the proceedings were so complex they didn't understand what was happening.

This research suggests avenues for further investigation: 1) permanency - children remained in the system an average of nearly 4 years while termination of

parental rights occurred in fewer than 5% of the cases [Wilson & Conroy 1996] and 2) the marked increase in the number of children who said they had unmet needs in 1996 (47%).

This is a report card on the children's well-being in out-of-home care, primarily family foster care, in one large child welfare system. The results were remarkably consistent from one year to the next. For the great majority of the children and from their own reports, the system is working. These findings are evidence that this child welfare system's emphasis on family foster care in placement decisions is producing positive outcomes for the children it serves (of the 50,611 children in out-of-home care in this child welfare system in 1996, 91% were living in family foster care; 9% were living in some type of residential group care [IDCFS 1996].)

The annual client evaluations summarized in this article are a reflection of the paradigm shift in all human services toward the measurement of recipients' satisfaction [Glosser & Wexler 1985; Conroy et al. 1987]. Kuhn [1963] showed how almost every significant breakthrough in the field of scientific endeavor was first a break with tradition, with old ways of thinking, with old paradigms. Evaluation of services by recipients is a break with tradition, whether the recipients are children, persons with developmental disabilities or those who are elderly. It is not a fleeting trend, but an essential tool that will lead decisions made on out-of-home care into the next century.

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