

From Foster Care to Adoption and Guardianship: A Twenty-First Century Challenge

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Abstract For nearly four decades, child welfare policy and practice have focused on the achievement of legal permanence for children in foster care. Although federal child welfare policy has resulted in the movement of children from state custody to legally permanent adoptive or guardianship families, little is known about the quality and enduring nature of these placements. A significant challenge of the twenty-first century child welfare system is how to ensure the well-being of children currently living with adoptive parents or guardians. This paper discusses child welfare policy and trends related to post-permanency well-being, including the decrease in Title IV-E foster care caseloads nationwide and the simultaneous increase in Title IV-E adoptive and guardianship caseloads. We highlight the needs of a twenty-first century child welfare system, including increased federal efforts to ensure child

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permanence and well-being after legal adoption or guardianship has been achieved, as well as more rigorous longitudinal and interdisciplinary research focused on the postpermanency adjustment of children and their families.

Keywords Adoption · Permanence · Guardianship · Stability · Post-permanency discontinuity · Title IV-E · AFDC look-back · Relational permanence · Well-being

Introduction

For nearly four decades, child welfare policy and practice have focused on the achievement of legal permanence for children in foster care. We are now at a crossroads in advancing our understanding of a twenty-first century child welfare system. As this paper will detail, we are now at a point where there are 2.8 children living in federally-funded Title IV-E adoptive and guardianship homes for every child living in Title IV-E subsidized foster care. In the United States, when a child or youth achieves legal permanence through adoption or guardianship, legal custody of the child is transferred from the state to adoptive parents or guardians. When children are adopted, parental rights are terminated whereas in cases of guardianship, parental rights may or may not be terminated. Permanency policy and child welfare practice have prioritized the safe movement of children out of state custody, yet little is known about the lasting and binding nature of families formed through adoption or guardianship. While there is an intention of enduring parent-child relationships, where children are provided a sense of continuity, life-long connections, and a sense of belonging, recent research has found that these intentions do not always endure (Rolock, 2015; Rolock & Pérez, 2016; Rolock & White, 2016; Testa, 2005; Testa, Snyder, Wu, Rolock, & Liao, 2014; White, 2016).

The well-being of children in the U.S. child welfare system has been a focus of much recent discussion among advocates, policy-makers, researchers, and practitioners, with little agreement regarding the definition of child well-being or the best way to measure the construct. Since 1997 the Federal Interagency Forum on Child and Family Statistics has compiled 41 indicators of wellbeing from various branches of government; these indicators span seven domains: (1) family and social environment; (2) economic circumstances; (3) health care; (4) physical environment and safety; (5) behavior; (6) education; and (7) health (Federal Interagency Forum on Child and Family Statistics, 2015). In 2015, one of the specific areas in the Family and Social Environment domain that the forum highlighted needing accurate measurement is social connections and engagement. The Forum defined and justified this need:

The formation of close attachments to family, peers, school, and community that have been linked to healthy youth development in numerous research studies. Additional research needs to be conducted to strengthen our understanding of how these relationships promote healthy development and protect youth from risks that, in turn, affect later life success. We currently lack regular indicators on aspects of healthy development, such as relationships with parents and peers, connections to teachers and school engagement, resilience when confronted with difficulties, and civic or community involvement. (Federal Interagency Forum on Child and Family Statistics, 2015, p. 12)

For children who exit foster care through adoption or guardianship, a source of social connection is family, including family members who are part of the child's family of origin and members of the family formed through adoption or guardianship. To facilitate family connections for children involved with the child welfare system, relevant legislation such as the Adoption and Safe Families Act of 1997 (ASFA) was designed to prioritize legal permanence for foster children, while also ensuring their safety, with the expectation that children and youth would live 'happily ever after' (Hanna, Tokarski, Matera, & Fong, 2011) after adoption or guardianship is legally finalized. A key assumption of these policies was that safety and permanence would translate into child well-being.

Our aims in this paper are to:

 Discuss the child welfare policy context related to permanence and well-being of children involved with the foster care system;

- Demonstrate changing demographics of the federallyfunded child welfare system through analysis of an underused data source, federal Title IV-E Program Quarterly Financial Reports;
- 3. Discuss how legal permanence is conceptualized, and how it may need to be adapted to address the wellbeing of children after they have exited foster care through adoption or guardianship; and
- 4. Discuss future directions for a twenty-first century child welfare system.

Policy Context: Shift in Focus from Foster Care Drift to Permanence

The perception of foster care drift-the phenomenon of children having multiple placements and exiting the foster care system on their own after experiencing prolonged lengths of stay-was first documented in the late 1950s (Maas & Engler, 1959). As a response to this issue, the promotion of permanency planning took hold during the 1970s when child welfare agencies saw an extraordinary increase in the number of children experiencing foster care drift impacting workers in the public child welfare systems (Lahti, 1982; Lahti et al., 1978). To reduce child welfare caseloads, the Adoption Assistance and Child Welfare Act of 1980 (AACWA) (Pub. L. No. 96-272, § 42 U.S.C. 622, 1980) codified the practice of permanency planning-the process through which child welfare agencies work in conjunction with dependency or family courts to meet prescribed time frames aimed towards safely moving a child into a legal permanent status. The preference for a legal permanent status is predicated on the belief and the empirical evidence that support the notion that vulnerable children are best reared within the realm of a permanent family, where they feel a sense of security, belonging, and bonding to caring adults, rather than in the insecure and temporary environment that foster care provides (Pecora, Whittaker, Maluccio, Barth, DePanfilis, & Plotnick, 2009). AACWA also de-linked the federal foster care program from the Aid to Families with Dependent Children (AFDC) welfare program but kept in place the income eligibility standards. Thus, under Title IV-E of the Social Security Act, states are reimbursed for children who were in foster care that also met AFDC income requirements, and children who did not qualify for AFDC were ineligible for federal reimbursement.

In the 1990s the number of children in foster care rose to an all-time high, over 550,000 children in foster care in 1998, 305,000 who were in Title IV-E subsidized foster homes (Committee on Ways and Means, 2014; U.S. Department of Health and Human Services, Administration for Children and Families, 2011). In response to the high number of children in foster care two significant child welfare policy reforms amended the Title IV-E foster care program by decreasing children's eligibility for federal foster care support and reinforced the principles and practices needed to attain permanence. In 1996, the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) replaced AFDC with the Temporary Assistance for Needy Families (TANF). Under TANF, decisions about children eligible for federal foster care and adoption assistance are based on the eligibility criteria that are linked to poverty standards in place on July 16, 1996 (Allen & Bissell, 2004; Murray, 2005). This PRWORA provision is commonly referred to as the "AFDC lookback" and to date has not been adjusted for inflation. As a result, each year fewer children are eligible for foster care maintenance payments because federal funds to states are reduced. For example, a Pew Charitable Trust (2007) report has shown the numbers of children who are ineligible for Title IV-E foster care financial support has increased from 5,000 children in 1999 to 35,000 children in 2005. In addition to PRWORA provisions, the Adoption and Safe Families Act (ASFA) of 1997 (Pub. L. No. 105-89, § 42 U.S.C. 1305) codified the child's safety, permanence, and well-being as the cornerstones of child welfare practice. AFSA also shortened the time frames for moving children into a legal permanent status by safely returning them home to their families of origin or by planning for an alternative permanency goal, such as adoption, through an incentive payment program for states to promote adoptions from foster care.

During the first decade of the twenty-first century, the framework of permanency planning was reaffirmed by the philosophy and practice of permanence outlined in the Fostering Connections to Success and Increasing Adoptions Act of 2008 (Pub. L. No. 110-351, § 42 U.S.C. 1305, 2008). This Act amplified the philosophy of permanence by, among other things, expanding available permanency options, particularly guardianship, and changes to the adoption incentives program. It also highlights the importance of the parent-child relationship, one that is mutually understood to be lasting; a relationship that endures beyond child welfare supervision (Barth & Chintapalli, 2009; Cushing & Kerman, 2009). To this end, in FFY 2010 the Adoption Assistance eligibility criteria started gradually de-linking from the AFDC lookback, and in FFY 2018 will eliminate "resource-related tests" tied to the AFDC lookback (Stoltzfus, 2012, p. 39). This has resulted in states claiming increased federal matching funds for children who are adopted from foster care and do not meet the AFDC lookback income eligibility criteria. States are required to reinvest savings in existing permissible federally funded child welfare services generated by the delinking the AFCD lookback to Adoption Assistance eligibility. Finally, the Act codifies kinship guardianship as a legal permanency outcome, but the AFDC lookback eligibility criteria remain tied to guardianship assistance payments. These policy changes have coincided with an increased number of children moving from foster care to legally permanent adoptive or judiciary created guardianship families.

Demographic Changes: Title IV-E Shifts from Foster Care to Subsidized Adoption and Guardianship

As described above, ASFA occurred at a time when the number of children in foster care was on the rise. As depicted in Fig. 1, our analysis of federal Title IV-E Program Quarterly Financial Reports shows approximately 300,000 children were living in Title IV-E subsidized foster care, and the system placed renewed focus on moving children out of foster care and into permanent homes. In 1997, in addition to the 300,000 children in foster care, there were 147,000 children receiving IV-E subsidized adoption assistance, in other words, for every two children in foster care, there was one child in an adoptive home assisted by federal funds-a ratio of 0.5 children in adoptive homes for every child in foster care. By 2002, the number of children in IV-E assisted foster care was less than the number of children in Title IV-E assisted adoptive and guardianship homes (254,000-285,600), a ratio of 1.1 children in adoptive or guardianship homes for every child in foster care. After the Fostering Connections to Success and Increasing Adoptions Act of 2008 was enacted, this ratio nearly doubled to 2.0 children in adoptive or guardianship homes for every child in foster care, and in 2015 the ratio increased to 2.8 children in adoptive or guardianship homes for every child in foster care. It should be noted that Fig. 1 reports on children in foster care with Title IV-E assistance only. There are a significant number of children in foster care without Title IV-E assistance because they did not meet the Title IV-E eligibility criterion. However, this analysis focuses on the federally-funded caseloads. It is noteworthy that the trends in the number of children in care, regardless of IV-E assistance, follows a similar trajectory, albeit a less dramatic difference between foster care and adoption or guardianship. These data are also included as a point of reference in Fig. 1, the gray line. As depicted in Fig. 1, the number of children in Title IV-E subsidized adoptive and guardianship homes surpassed the number of children in the U.S. foster care system in 2010 and have continued to be slightly higher each year since 2010. The linking of Title IV-E support to the AFDC look-back has a clear impact on these ratios.

This changing dynamic at a national level has also been seen at a state level. In 2015, every state in the nation had more children placed in Title IV-E supported adoptive or

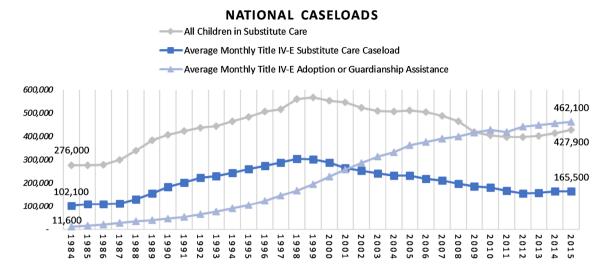


Fig. 1 The number of children in Title IV-E federally-subsidized substitute care is represented in the *light blue line* with *triangles*. The number of children in Title IV-E federally subsidized adoptive and guardianship homes are represented in the *dark blue line* with *squares*. The *grey line* with *diamonds* represents all children living in foster care in the nation (Title IV-E subsidized and non-federally subsidized). Data source: The information on federally-funded case-

loads is from the Committee on Ways and Means (CWM) of the U.S. House of Representatives 2014, and represents the average monthly Title IV-E caseloads. The data on foster care caseloads comes from the U.S. Health and Human Services, Administration on Children and Families and represents point-in-time counts of the number of children in care at the end of the FFY. (Color figure online)

guardianship homes than in Title IV-E assisted foster care. A key challenge of the child welfare system in the twentyfirst century is how to ensure the well-being of children in foster care, and those formerly involved with the foster care system, but currently living in legally permanent, Title IV-E subsidized homes with adoptive parents or guardians. It may be especially difficult for the child welfare system to assess the well-being of children and families whose formal relationship with the child welfare system is limited, and not well-defined. In some states and jurisdictions postpermanency services and supports are offered, but not in all states (e.g., Fuller et al., 2006; Child Welfare Information Gateway, 2012; Freundlich, 2007). Once permanence is achieved, the state (or child welfare system) does not have legal authority to ensure child well-being, despite studies suggesting that social connections and engagement are critical to youth as they make their way to young adulthood (Courtney et al., 2011; Pérez, 2014; Samuels, 2008).

As shown in Table 1, the ratio of children placed in Title IV-E federally-subsidized adoptive and guardianship homes (post-permanence) compared to the ratio children in IV-E federally subsidized substitute care (foster care) has dramatically shifted over the past 15 years. The ratios under one indicate years in which there were more children in foster care than adoptive or guardianship homes, and the ratios above one show the opposite—that is, years in which more children were in adoptive or guardianship homes than in foster care. While not every state was above one in 2000, it is remarkable that no state was under one in 2015, despite proportions varying by state. For instance, Alabama, Idaho, Mississippi, and Pennsylvania were among the last states to change to over one. In 2015, states' ratios of children in Title IV-E federally subsidized adoptive, and guardianship homes ranged from 1.3 in Alabama to over 5 in Florida, Iowa, and Nebraska, and 16 states had ratios of 3 or higher.

Taken together, Fig. 1 and Table 1 reflect the policy and practice goals associated with a primary focus on the achievement of legal permanence for children in the U.S. child welfare system. However, as children and youth move from foster care to legal permanence, there is a limited understanding of their well-being. Although extant research has shown that the vast majority of children who have exited foster care through adoption or guardianship remain with their newly formed state-sanctioned families (Festinger, 2002, 2006; Rolock, 2015; Rolock & White, in press, 2016), little is known about the post-permanency well-being of these children. Conversely, research that follows youth who have aged out of foster care has consistently demonstrated that these youth fare poorly on a range of well-being outcomes across key well-being indicators, such as housing insecurity, underemployment, lack of access to mental health services and health care, likely to rely on public assistance, and experience incarceration (Courtney et al. 2011; Kerman, Wildfire, & Barth, 2002). Similar research is needed to understand the longterm outcomes for families formed through adoption or guardianship.

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
ALABAMA	0.4	0.4	0.4	0.5	0.8	0.7	0.7	0.7	0.8	1.0	0.7	0.8	1.3	1.2	1.2	1.3
ALASKA	2.2	2.7	4.2	6.8	4.2	2.4	2.2	2.6	2.8	3.0	3.0	3.3	3.6	3.3	2.9	2.8
ARIZONA	0.9	1.1	1.3	1.5	1.1	1.3	1.6	1.9	2.0	2.1	2.2	2.6	2.5	2.5	3.0	2.8
ARKANSAS	0.5	0.5	0.5	1.0	1.0	0.9	1.0	1.2	1.3	1.6	1.6	1.8	1.9	2.1	2.1	2.2
CALIFORNIA	0.4	0.6	0.7	0.9	1.0	1.1	1.3	1.4	1.6	1.9	2.1	2.2	2.5	2.5	2.2	2.2
COLORADO	1.4	1.5	1.9	1.9	2.2	2.2	2.3	2.6	2.9	3.1	3.2	3.6	4.5	4.6	4.6	4.7
CONNECTICUT	0.6	0.8	1.3	1.6	1.1	1.2	1.3	1.3	1.5	1.9	2.3	2.6	2.8	3.1	3.1	2.7
DELAWARE	0.8	1.0	1.2	1.7	1.8	2.1	2.3	2.3	2.2	2.6	2.4	1.5	1.6	1.8	1.7	1.8
DIST.OF COLUMBIA	0.3	0.3	0.4	0.6	0.7	0.9	1.3	1.7	2.0	1.7	1.9	2.0	1.8	2.1	2.2	2.4
FLORIDA	1.0	1.4	1.2	1.4	1.1	2.1	2.4	2.6	3.1	3.9	4.5	3.5	4.6	5.5	5.4	5.7
GEORGIA	1.1	1.2	1.0	1.9	1.6	1.4	1.7	2.2	2.3	2.5	3.0	3.2	2.9	2.9	2.7	2.6
HAWAII	0.8	0.9	1.1	1.5	1.5	1.5	1.7	2.6	4.5	6.3	6.3	6.3	6.2	5.9	5.2	4.5
IDAHO	0.7	1.1	1.1	0.9	0.9	0.9	0.9	1.0	1.1	1.3	1.5	0.6	2.1	2.5	2.5	2.6
ILLINOIS	0.9	1.3	1.5	1.5	1.6	1.8	1.8	1.9	2.0	2.0	2.2	3.0	2.8	2.9	2.6	2.7
INDIANA	1.3	2.0	2.1	2.6	4.0	3.6	3.4	2.8	2.9	2.7	2.9	3.4	5.5	5.4	3.1	3.5
IOWA	1.1	1.5	2.5	2.8	2.3	2.5	2.4	2.9	3.6	4.1	4.3	4.3	4.7	5.5	5.5	5.8
KANSAS	1.5	1.6	1.8	2.1	1.4	1.4	1.4	2.9	4.2	4.0	4.3	4.6	4.6	4.6	4.5	4.5
KENTUCKY	0.4	0.6	0.7	0.7	0.9	1.0	1.0	1.2	1.4	1.6	1.9	2.1	2.2	2.2	2.0	2.0
LOUISIANA	0.8	0.9	0.9	0.9	1.0	1.0	1.0	0.7	0.7	0.7	0.8	2.0	2.3	2.6	2.8	2.6
MAINE	0.4	0.4	0.6	1.1	1.3	1.2	1.2	1.9	2.1	2.3	2.4	4.0	4.1	4.0	4.0	4.4
MARYLAND	0.4	0.6	0.7	0.9	1.2	1.4	1.5	1.6	1.6	1.9	2.2	2.6	2.9	3.1	3.3	3.3
MASSACHUSETTS	1.3	1.1	1.4	1.4	1.2	1.1	1.4	1.8	2.0	2.3	2.3	2.3	2.5	2.5	2.9	2.5
MICHIGAN	1.6	1.9	2.3	2.7	3.0	3.5	4.5	4.9	5.3	5.3	5.0	4.9	4.7	4.7	4.5	4.4
MINNESOTA	0.8	1.0	1.2	1.4	1.6	1.6	1.9	2.0	2.0	2.2	2.6	3.0	3.3	3.0	2.7	2.2
MISSISSIPPI	0.6	0.9	1.6	1.3	1.3	1.4	1.1	1.2	1.3	1.2	1.3	0.8	1.2	1.5	1.6	1.5
MISSOURI	0.7	0.8	1.0	1.1	1.3	1.5	1.6	2.1	2.7	2.8	3.0	2.7	2.7	2.8	2.7	2.7
MONTANA	0.6	1.0	1.1	0.7	1.2	1.2	1.1	1.5	2.0	2.9	2.5	2.4	2.5	3.1	2.4	2.6
NEBRASKA	0.6	0.9	1.3	1.2	1.1	0.8	1.4	1.3	1.4	2.0	2.0	3.0	2.8	2.5	3.6	8.9
NEVADA	0.4	0.7	1.2	0.8	1.5	1.2	1.2	1.3	1.2	1.2	1.4	1.9	2.1	1.8	2.2	2.5
NEW HAMPSHIRE	0.3	0.6	0.6	0.6	0.8	0.9	1.1	1.3	1.3	1.8	2.0	2.2	2.3	2.2	2.4	3.0
NEW JERSEY	0.6	0.7	0.7	0.8	1.0	1.5	1.8	1.9	2.1	2.0	1.8	2.0	2.1	1.9	2.0	2.2
NEW MEXICO	1.1	1.5	1.6	1.6	1.5	1.4	1.5	1.8	2.1	2.6	3.2	4.4	4.0	3.6	3.0	2.8
NEW YORK	1.1	1.3	1.5	1.8	2.2	2.7	3.5	3.2	3.1	2.9	2.8	2.4	2.2	2.1	2.2	2.3
NORTH CAROLINA	1.0	0.9	1.1	1.9	1.7	1.8	1.8	1.7	2.0	2.6	3.0	3.1	3.2	3.2	3.0	2.8
NORTH DAKOTA	0.5	0.7	0.7	0.8	0.9	1.0	1.2	1.4	1.7	1.8	1.8	1.9	2.3	2.0	1.7	1.8
OHIO	2.7	3.2	3.1	3.3	2.5	2.2	2.5	2.6	2.6	3.1	3.3	2.9	4.2	4.1	3.1	2.4
OKLAHOMA	0.4	0.5	0.7	0.8	0.9	0.9	0.9	0.9	1.1	1.9	2.6	2.6	2.4	2.7	2.2	1.9
OREGON	1.2	1.6	1.8	1.8	1.8	1.9	1.9	2.3	2.9	3.4	3.2	3.5	3.4	2.6	2.7	2.8
PENNSYLVANIA	0.5	0.6	0.7	0.8	0.9	0.9	1.0	0.9	0.9	0.9	0.9	0.9	2.6	1.8	3.0	3.6
RHODE ISLAND	1.6	1.7	1.9	2.2	2.5	2.2	2.0	2.1	2.4	2.4	2.9	2.9	3.4	3.4	3.6	3.7
SOUTH CAROLINA	1.5	1.5	1.4	1.8	2.6	3.0	4.9	3.4	3.0	3.0	2.9	1.7	2.4	2.3	2.3	2.6
SOUTH DAKOTA	1.0	1.0	1.1	1.4	1.6	2.0	1.9	2.3	2.8	2.2	1.7	2.0	3.1	2.9	2.7	2.8
TENNESSEE	0.4	0.4	0.5	0.6	0.7	0.6	1.4	1.7	1.9	2.3	1.9	2.1	2.0	1.9	1.8	2.1
TEXAS	1.2	1.2	1.2	1.2	1.1	1.0	1.1	1.2	1.5	1.8	2.0	2.0	2.3	2.8	3.4	3.8
UTAH	1.7	1.9	2.3	2.6	2.4	2.5	2.5	2.4	2.7	2.7	2.8	2.9	3.0	3.1	2.9	3.1
VERMONT	0.6	0.8	0.9	1.1	1.3	1.6	1.7	1.8	2.2	2.4	2.8	3.3	3.3	3.3	3.1	2.6
VIRGINIA	0.7	0.7	0.7	0.8	0.8	1.0	1.1	1.1	1.3	1.3	1.7	2.0	2.3	2.6	2.5	2.6
WASHINGTON	2.1	2.1	2.0	2.4	2.3	2.4	2.4	2.6	2.6	2.9	2.8	3.7	3.6	3.5	3.5	3.3
WEST VIRGINIA	1.0	1.2	1.3	1.7	2.1	3.7	2.5	1.9	2.6	2.8	3.1	3.8	6.3	4.9	2.8	2.4
WISCONSIN	0.9	0.9	1.1	1.6	2.4	2.3	2.5	2.6	3.3	3.9	3.4	3.1	3.0	2.8	2.9	2.8
WYOMING	0.3	0.4	0.5	0.6	1.0	1.5	1.5	1.7	2.0	2.1	2.5	2.6	3.1	3.4	1.8	1.9
United States	0.8	1.0	1.1	1.3	1.4	1.5	1.7	1.9	2.0	2.2	2.4	2.4	2.8	2.8	2.8	2.8

Cells that are less than one (colored orange) represent higher numbers of children living in Title IV-E federally funded foster care; cells over one (colored purple) represent higher ratio of children living in Title IV-E federally adoptive or guardianship homes

Data source: U.S. Department of Health and Human Services/Administration for Children and Families, compiled data from states' Title IV-E Programs Quarterly Financial Reports, Forms IV-E-1 (for years prior to 2011) and CB-496 (for 2011 and later)

How is Well-being Defined?

Results of a systematic literature review of research on the well-being of children and youth involved in public systems-child welfare, juvenile justice, education, and public health-indicate that the literature on prevention research has shifted its focus over the past 15 years. The focus has changed from a concern for the prevention of harm to a system focused on the prevention of an adverse outcome, with little attention paid to promoting positive outcomes (Campie, Pakstis, Flynn, & McDermott, 2015; Catalano, Hawkins, Berglund, Pollard, & Arthur, 2002). One reason for this paradigm shift in child welfare and many related fields is an increasingly sophisticated understanding of trauma and its impact on brain development (e.g., Perry, 2000; Racco & Vis, 2015; Shea, 2015). Advances in biological research have increased our understanding of how trauma influences the developing brain and other biological systems, from birth through adulthood, as well as how adolescent brain development continues into early adulthood and can be substantially derailed by traumatic events (DeBellis & Zisk, 2014; Perry, 2000). However, in their review of 70 articles, Campie et al. (2015) reported that child welfare studies have primarily examined well-being regarding exposure to abuse and neglect (i.e., risk) and actual harm from that exposure (e.g., posttraumatic stress disorder). In other words, child welfare research has focused on well-being and has neglected the accumulated trauma many children may experience while in foster care, through loss, placement instability, and other adverse experiences related to being placed in temporary care (Pecora, 2010; Riebschleger, Day, & Damashek, 2015). Thus, Campie and colleagues noted that research studies have been much more likely to examine child well-being from the perspective of preventing an adverse outcome, rather than promoting positive child development. Moreover, the authors found that few studies have evaluated efforts to specifically increase well-being for children who have already experienced trauma, stating:

Most surprising, perhaps, was the lack of studies examining well-being among youth already experiencing child abuse and/or neglect, behavioral health disorders, juvenile justice involvement, or educational failure. In fact, most of the studies examined general populations of youth, or youth who could be at risk, rather than focusing on young people whose well-being may already be compromised. (p. 180)

How do Children Fare After Legal Adoption or Guardianship?

Consistent with findings of Campie et al. (2015) that there is limited research on the promotion of child wellbeing in populations of children who have experienced trauma, there is surprisingly little peer-reviewed research to date that has rigorously examined post-permanency well-being of children formerly in foster care. There are many reasons why obtaining data on children and families after legal permanence presents a challenge. For example, child welfare cases are often closed or transferred after adoption or guardianship, families are transient, and in the case of adoption, children's names may change (Barth, Wildfire, Lee, & Gibbs, 2002; Child Welfare Information Gateway, 2012; Festinger, 2002). Furthermore, practices related to legal guardianship may vary considerably between states and jurisdictions (Children's Defense Fund, 2004; Fuller et al., 2006). Thus, post-permanency researchers have often relied on small convenience samples and short study windows to examine child and family adjustment after adoption or guardianship (White, 2016). Another reason for the paucity of rigorous research on post-permanency outcomes of children is that child welfare practitioners, policy-makers, researchers and advocates presume that young people who achieve legal permanence through adoption or guardianship have access to support from their permanent family systems and fare well as adults-or, at a minimum, fare better than their aged out counterparts-by virtue of attaining legal permanence (Pérez, 2014).

However, the assumption that children involved with the child welfare system who achieve legal permanence also experience well-being is speculative, particularly in subgroups of children, such as youth who achieve permanence at an older age, or those with special developmental or behavioral needs. Specifically, once court and case management oversight associated with foster care ends, services and supports may stop or change, yet the service needs arising from foster youths' traumatic pasts may persist. Indeed, research suggests that youth continue to exhibit significant behavioral and emotional needs long after adoption or guardianship finalization, and families must adapt to address their evolving needs (Berry, Propp, & Martens, 2007; Child Welfare Information Gateway, 2012; Simmel, Barth, & Brooks, 2007). Furthermore, longitudinal studies have shown that 10-15% of children who have achieved adoption or guardianship may experience post-permanency discontinuity, defined as either a reentry into foster care or a premature ending of an adoption or guardianship subsidy payment, given a sufficiently long study window to monitor those changes (Rolock, 2015; Rolock & White, 2016, in press; White, 2016).

In addition to the research on children previously in foster care, there is a federal interest in understanding the unregulated transfer of custody (UTC). UTC is defined by the Capacity Building Center for States (2016) as the "practice of adoptive parents transferring custody of a child to another individual or group without involvement of relevant authorities." Little is known about the prevalence or causes associated with UTC cases. The U.S. Government Accountability Office (GAO) (2015) released a report on UTC that identified barriers to understanding UTCs, including the difficulty in tracking, due to lack of federal or state oversight. Their observations of social media sites found 23 instances of parents posting that they were seeking a new family for their child, over a 15-month period. Through interviews with state and federal officials, as well as representatives from national child welfare and adoption organizations, the following reasons for UTCs were identified: parents were not sufficiently prepared for the challenges they experienced in their adoption; parents could not access post-adoption services to help them cope with or avoid reaching a crisis point in their adoption; and stigma was associated with contacting child welfare agencies since those agencies are also generally responsible for investigating cases of child abuse. Some states and federal agencies have taken steps to address UTC. The GAO identified 15 states where there has been legislative, and other activity intended to address UTC. These changes included criminalizing UTCs, restrictions of the advertisement of children, as well as activities associated with improving postadoption services.

Nonetheless, studies examining post-permanency experiences suggest several children, family, and service factors associated with post-permanency discontinuity. Specifically, children who are older, exhibit more significant behavioral difficulties, or who have experienced physical or sexual abuse may be at higher risk for post-permanency adjustment difficulties (White, 2016). Caregivers or families who receive less support from child welfare agencies or who are less prepared for child placement may experience more complications related to post-permanency stability (Rolock & White, 2016; Testa, Snyder, Wu, Rolock, & Liao, 2014; White, 2016). A systematic review of the literature on post-permanency outcomes identified additional factors that may be related to post-permanency stability, including child gender, race, and placement with siblings, but the results within or across studies have been somewhat mixed (White, 2016). The mixed findings within or across studies may reflect the use of different samples and outcome measures, as well as the presence of selection or moderating factors that are unaccounted for in statistical analyses (White, 2016). For example, it may be that permanent placement with siblings, kin, or former foster parents influence post-permanency adjustment, but specific effects 17

are moderated by certain child or family characteristics, such as child age (Haugaard, Wojslawowicz & Palmer, 1999; Rolock & White, 2016; White, 2016). Also, emerging research by Rolock and White (in press) has found that adoptive placements are more stable, on average, compared to guardianship arrangements, but this difference largely disappears once potential selection factors (placement with siblings, foster care instability, length of time in care and age at finalization) are accounted for (Rolock & White, in press).

Finally, it is important to remember that children and youth may perceive permanence and subjective well-being in ways that are not reflected in child welfare policy or in the administrative or legal records maintained by state child welfare agencies. For instance, research focused on relational permanence—that is, children and youth have mutually committed lifelong connections to caretakers (Cushing, Samuels, & Kerman, 2014)—has shown that youth privilege relational permanence over legal permanence (Sanchez, 2004; Rolock & Pérez, 2016). Yet child welfare policy has driven researchers to focus on the legal status of an indicator of success, which neglects the assessment of the quality or durability of legally sanctioned familial relationships.

In summary, the evidence regarding post-permanency well-being for children who have been legally adopted or in guardianship is scant and hampered by limitations of research (White, 2016). However, studies suggest that adoptive and guardianship families may need support and guidance for an extended length of time, before and after legal permanence are achieved. Although most children and families report stability after adoption or guardianship, it is likely too optimistic to assume that the act of achieving legal permanence translates into positive well-being for former foster children and their families. Systems that work to ensure that supports, services, and life-long connections are in place are greatly needed, particularly for those families known to be more at risk for post-permanency adjustment difficulties.

Discussion

Where Do We Go Next?

The seven domains of well-being indicators from the various branches of government (Federal Interagency Forum on Child and Family Statistics, 2015) highlight the need for more research on the accurate measurement of social connections and engagement in the specific domain about Family and Social Environment. This is particularly relevant to traumatized children and youth whose permanence is jeopardized because of the insufficient research of what contributes to their well-being. A call for action is warranted to direct future research and policies addressing improving the well-being of children and understanding the post-permanency needs of families in the U.S. child welfare system in the twenty-first century.

In the US, the federal government has increased efforts to understand and address the post-permanency needs of children and families. For example, Intensive Child-Focused Adoptive Parent Recruitment and the National Quality Improvement Center for Adoption and Guardianship Support and Preservation (QIC-AG) are two national research projects aimed at developing promising permanency planning and post-permanency services and supports. The QIC-AG (2016) team has developed a permanency continuum-a theoretical model for permanency planning-built on the assumption that preparation for the possibility of difficulty after adoption or guardianship finalization should begin prior to finalization, and continue after legal permanence has been achieved. Over the course of the next few years, we expect to hear about the efficacy of these efforts.

A challenge in preparing families for what might happen after adoption or guardianship is that agencies cannot predict the future. Families who adopt or assume guardianship from the child welfare system may experience "cumulative disadvantages" resulting from poverty, child abuse and neglect, and foster care instability that may pose difficulties. However, research suggests that most families will not experience discontinuity, and most report that they are able to adequately provide for their children with the services and support they are currently receiving (Fuller et al., 2006; Rolock & White, 2016). In addition, training and information provided at the time of finalization may not be provided at the right time. For instance, information about the needs of a child exposed to substances may not seem relevant to a parent of a newborn, or a happy toddler, yet when that child is a teenager and experiencing issues related to being born substance-exposed, the parent may not remember the information provided at the time of finalization. Information needs to be provided at the right time. The research suggests that, for many families, the right time may be the pre-teen or teen years (Rolock and White, 2016). Prevention efforts that target families with youth of these ages may be helpful in addressing issues before they become a crisis.

The US is not alone in calling for a new system, a new definition of how the state intervenes in family life. For instance, in Britain, Featherstone, Morris and White (2014) argue for the need to develop a family support system for the twenty-first century. They envision this as a system that "celebrates families' strengths as well as their vulnerabilities ... and re(locates) workers as agents of hope and support" (p. 1737). They posit that a child-centered focused

system, rather than family-focused system, will only further intensify the inequities seen in society. A family-focused system works to enhance and sustain trust between the family and sources of support so that when families find themselves on hard times or in stressful situations, they have sources of support for information, assistance, and connectedness. Currently, the only information the federal government collects on children who were adopted or placed with guardians is collected through the Administration on Children and Families, known as Adoption and Foster Care Analysis and Reporting System (AFCARS), which is limited to the year that a child was adopted or placed with guardians. The federal government has proposed revisions to AFCARS that would require the collection of additional, albeit limited, data on children receiving adoption and guardianship assistance payments. If enacted, these data would allow for a better understanding of the characteristics of children receiving permanency payments over time as well as patterns of when those payments stop.

In addition to these national efforts, existing state postpermanency service providers and other state and local efforts are underway to increase understanding and improve the post-permanency experiences of children, youth, and families. This includes, for instance, the Texas Youth Permanency Study (Faulkner, Adkins, & Pérez, 2016) that is seeking to understand how foster care experiences shape outcomes in emerging adulthood, and how stable and nurturing relationships impact developmental outcome during emerging adulthood. With the potential increase in federal funding, as a result of the changes outlined in the Fostering Connections Act, states have the ability to build on the work of these national efforts and expand post-permanency services.

Moving into the Twenty-First Century

Although adoption and guardianship confer legal permanence, little is known about the extent to which this results in long-term relationships of care, continuity, and a sense of belonging. The Child Welfare Information Gateway (2012) reports that less than10 percent of adoptions lead to children's returning to state custody, but reliable estimates remain elusive. The Children's Bureau has called for additional research to determine the rate of re-entry into foster care, the factors associated with post-permanency continuity, and why some adoptions and guardianships, which are intended to last indefinitely, do not (Child Welfare Information Gateway, 2012). To respond to this request, and to bring about the type of change that is needed for a comprehensive understanding of post-permanency well-being, longitudinal studies are urgently needed. Longitudinal studies should comprehensively focus on social connections and engagement,

and elucidate what these well-being constructs mean for children, vouth, and families. Further, longitudinal studies should also examine what services and supports are needed to address the long-lasting impact of trauma and loss associated with maltreatment and involvement in the child welfare system, as well as the well-being of children who have exited foster care through adoption or guardianship, long after legal permanence has been achieved. In the UK, a recent national project was undertaken to gain a better understanding of the rate at which adoptive placements end after they have been finalized, and to conduct in-depth interviews with those involved with adoption discontinuity (referred to as disruption in the study) and to understand the experiences of those families who were experiencing difficulty (Selwyn, Wijedasa, & Meakings, 2014). These studies report on the well-being of the children and their parents, for those who were doing fine, and those who were struggling. This foundational work is critically important in the United States, to gain a firm understanding of the strengths of families that allow them to remain intact despite difficulties, and to understand the issues that arise in families that are no longer living together.

The UK study found that about one-quarter of parents reported major challenges in caring for children who were going through difficult times, and that they were struggling with service providers to gain access to the assistance they needed. Typically, parents reported physical and mental exhaustion and a negative impact on marital and family relationships. While these parents are not typical of all adoptive parents—they were selected because they were facing challenges within their families—this research provides valuable insight into the experiences of families formed through adoption. Similar research is needed in the US. These children and families are the new faces of the twenty-first century child welfare system, and a better understanding of their long-term trajectories and sense of well-being is urgently needed.

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Compliance with Ethical Standards

Conflict of interest Nancy Rolock, Alfred G. Pérez, Kevin R. White, and Rowena Fong declare that they do not have any conflict of interest.

Ethical Approval This article does not contain any studies with human participants performed by any of the authors.

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