

SUBSTITUTE CARE

In Texas, when the Department of Family and Protective Services (DFPS) Child Protective Services (CPS) determines that a child has been abused or neglected, CPS may remove the child from his/her home to ensure their immediate safety and place the child in substitute care. Substitute care services include kinship care, foster care, adoptive homes (both private agency and DFPS), independent living programs and other court ordered placements (DFPS, 2016). In 2016, DFPS had legal responsibility for 48,795 children in Texas with 19,079 children removed from their homes during that fiscal year. 47,408 children were placed/resided in substitute care (DFPS, 2017a).

KINSHIP CARE

“CPS and the courts must consider relatives and others with close ties to the child or family as an option. CPS asks parents to name relatives and family friends who might care for their children. CPS contacts relatives and explains their options and the state support that is available. These “kinship caregivers” may also adopt or accept legal responsibility for children when they cannot return home safely. Kinship care gives children more stability and keeps them connected to family when they cannot live with their birth parents” (DFPS, 2016, p.13).

When a kinship care provider agrees to accept a child into their home they must meet all of the requirements to become a foster parent. After fostering the child for a minimum of six months, the kin caretaker may apply to take permanent, legal custody of the child either

through adoption or a permanent managing conservatorship under the *Permanency Care Assistance (PCA) Program*. An alternative to adoption, the PCA program provides the family with additional benefits including “monthly financial assistance and health care assistance to help raise the child to adulthood” (DFPS, n.d.e). In 2016 there were 7,829 families receiving kinship caregiver monetary assistance in Texas. In Bandera County there were six families, Bexar County had 676 families, Comal County had 55 and Kendall County had seven (Texas.gov, 2017).

The following table lists the numbers of children residing in kinship care in Texas and the KCF counties of interest.

CHILDREN IN KINSHIP CARE DURING FY 2016			
	Child Population	Children in DFPS Legal Responsibility	Children in Kinship Care
Texas	7,407,636	48,795	13,350
Bandera	3,899	42	14
Bexar	503,711	4,834	1,258
Comal	28,367	455	174
Kendall	8,543	27	12
(DFPS, 2017a)			

FOSTER CARE

If a child is not able to be placed in the home of a relative or close family friend, s/he may be placed in foster care. “Foster care is meant to be temporary until a permanent living arrangement is found” (DFPS, n.d.c).

There are four basic foster care settings:

- *Foster family home* -- provides care for six or fewer children up to the age of 18 years for 24 hours a day.
- *Foster family group home* -- provides care for seven to twelve children up to the age of 18 years for 24 hours a day
- *Residential group care facilities*
 - General residential organizations (GRO) provide care for 13 or more children up to the age of 18 years for 24 hours a day that does not include specialized care programs
 - Residential treatment centers (RTC) provide care and treatment for 13 or more emotionally disturbed children up to the age of 18 years for 24 hours a day
 - Emergency shelters provide short-term care (less than 30 days), for 13 or more children up to the age of 18 years for 24 hours a day
 - Specialized group facilities including
 - Operations serving children with intellectual disabilities
 - Maternity homes
 - Halfway houses that provide transitional living services to prepare older children for independent living

(DFPS, n.d.c&d)

- *Facilities overseen by another state agency* – “A very small number of children are in placements offered through other state agencies, such as the Department of State Health Services, and the Department of Aging and Disability Services. There are also a small number of children with very high needs that require a child specific contract, often with a provider who is outside of the current contracted foster care system” (DFPS, 2017b, p.7)

In addition to licensing independent foster homes, DFPS contracts with a variety of child placement agencies (CPA) which place or plan for the placement of a child in a foster/adoptive home or other residential care setting. “While DFPS verified 1,896 foster homes directly, it contracted with 436 foster care providers to provide many thousands of additional foster homes. DFPS spent \$423,084,683 on foster care

in FY 2016” (DFPS, 2016, p.15). A full list of current CPAs is available on the DFPS website (DFPS, n.d.f). The following table lists the number of children in substitute care in Texas on August 31, 2016 by type of facility:

NUMBER OF CHILDREN IN SUBSTITUTE CARE BY FACILITY TYPE ON AUGUST 31, 2016		
	Texas	KCF Counties
Kinship Care	11,209	1,302
CPA Foster Home	11,066	1,017
Residential Treatment Center	1,631	206
DFPS Foster Home	1,529	130
General Residential Operations	806	155
Emergency Shelter	731	191
Other Foster Care	658	111
Other Substitute Care	507	72
CPA Adoptive Home	392	20
DFPS Adoptive Home	193	15
DFPS Supervision	10	2
(Texas.gov, 2017)		

FOSTER CARE STATISTICS

In 2016, 47,408 children were placed under the legal responsibility of the State of Texas, with 31,943 of these children residing in some type of foster care (DFPS, 2017a). The largest percentages of children in Texas foster care were Hispanic males in the 0-2 year-old and 6-9 year-old age groups. More specific demographic statistics regarding Texas children in foster care appear in the following table:

DEMOGRAPHIC CHARACTERISTICS OF TEXAS CHILDREN IN FOSTER CARE DURING FY 2016		
Age	Number	Percent
0-2	8,331	26.1
3-5	5,829	18.2
6-9	6,164	19.3
10-13	4,631	14.5
14-17	5,303	16.6
18-21	1,685	5.3
Sex		
Male	16,488	51.6
Female	15,453	48.4
Unknown	2	0.0
Ethnicity		
Anglo	10,082	31.6
African American	6,926	21.7
Hispanic	12,871	40.3
Native American	35	0.1
Asian	122	0.4
Other	1,907	6.0
Total	31,943	100.0
(DFPS, 2017a)		

3,469 children living in Bexar, Bandera, Comal, and Kendall Counties were in foster care during 2016. The following table offers statistical breakdowns for each of those four counties:

CHILDREN IN FOSTER CARE DURING FY 2016 IN THE SAN ANTONIO AREA			
	Child Population	Children in DFPS Legal Responsibility	Children in Foster Care
Bandera	3,899	42	33
Bexar	503,711	4,834	3,155
Comal	28,367	455	253
Kendall	8,543	27	28
(DFPS, 2017a)			

RESIDENTIAL FOSTER CARE

While it is usually preferable for a child to be placed in individual family foster care because of its similarity to typical family life, many circumstances do result in residential foster care placement. One common reason for residential placement is the lack of families available to provide individual foster care. Residential foster care also offers the best opportunity for groups of sibling to be kept intact and remain at least within the same facility. These sibling placements help keep groups of children connected to their family members, hopefully minimizing the trauma of removal (DFPS, 2017c).

Placement in residential facilities often offers additional benefits, support, and services for children that are not typically available in individual foster families. Some of those benefits may include on-site counseling staff, a more structured environment with behavior modification, supportive psychiatric or other mental health services, established independent living programs, and other support services for the child, and, in some cases, for the family (DFPS, n.d.d).

In the San Antonio area, several options for residential foster care exist:

- St. Peter – St. Joseph Children’s Home
- Baptist Children’s Home Ministries
- Girls and Boys Town
- Boysville (located in Converse, TX)

- The Children’s Shelter
- New Life Children’s Center (located in Canyon Lake)
- Medina Children’s Home (Bandera County)

There are also several facilities that provide residence to children with special needs. Some of these specialized homes include:

- Seton Home for Pregnant Women
- Mission Road Developmental Center
- Roy Maas’ Youth Alternatives, Inc.
- The Children’s Shelter
- The Children’s Inn (located in Boerne, TX)
- St. Jude’s Center for Young Children (Comal County)

The Department of Family and Protective Services (n.d.f) offers an on-line search for Child-Care Operations on its website that lists all of the licensed agencies in Texas.

SPECIAL ISSUES IN FOSTER CARE

Many factors make foster care a complex and difficult system. Providing quality care for children is challenging not only because of the difficulties the children faced in their family of origin, but because of additional issues such as racial disparities within the system, placing children far from their homes, the high prevalence of special needs among foster children, and the increasing amount of children aging out of the foster care system.

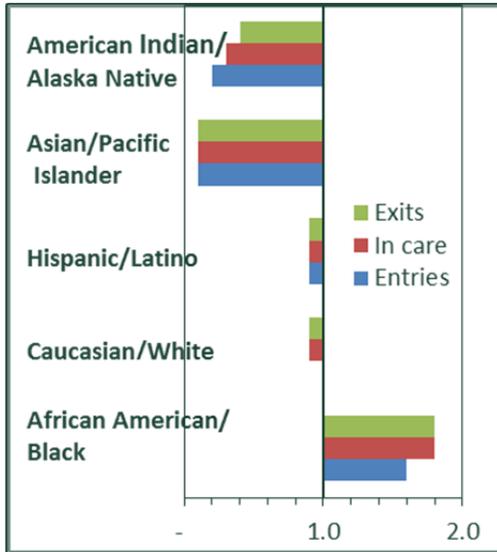
Racial disparity

In general, children of color are over-represented in the child welfare system, in out-of-home placements, in length of time in foster care, and in the termination of parental rights. In Texas, African-American children were over-represented in foster care at almost twice the rate of their population in the general public. African-American children comprised 11.7% of the child population in Texas and 21.7% were in substitute care in 2013 (Summers, 2015).

“Disproportionality is the level at which groups of children are present in the child welfare system at higher or lower percentages or rates than in the general population. An index of 1.0 reflects no disproportionality. An index of

greater than 1.0 reflects overrepresentation. An index of less than 1.0 reflects underrepresentation” (Summers, 2015, p.61). The following chart is a visual representation of the disproportionality rates of children in substitute care in Texas in 2013:

RACIAL DISPROPORTIONALITY INDEX, TEXAS, 2013



(Summers, 2015, p.61)

DFPS has implemented reforms related to enforcement actions, policies, and procedures to remedy disparities:

- Kinship Care preserves children’s connections to family, community, and culture
- Family Group Decision Making conferences encompass a “variety of practices to work with and engage children, youth, and families involved in the CPS system in safety and service planning and decision making”
- Diligent Recruitment to ensure the recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in foster care
- Permanency Care Assistance providing family members with long-term financial assistance for children who cannot be adopted or returned to their parents
- Permanency Round Table (PRT), a structured meeting facilitated by a permanency practitioner to develop a child’s specific permanency action plan
- Advisory Committee on Promoting Adoption of Minority Children to advise DFPS on policies and practices that affect

the recruitment and licensing of families for minority children awaiting adoption with the goal to increase adoptions for children of color

- Fatherhood Initiative to engage fathers and their extended families
- Alternative Response allows CPS to refer families to community services (if warranted) rather than remove the child from the home

(DFPS, n.d.b).

Location of Placement

According to DFPS, the agency hopes to place children within their surrounding community in order to instill a sense of stability and encourage family reunification. However, children are often placed far away from their city of origin.

CHILDREN IN FOSTER CARE AT THE END OF AUGUST 2016				
Legal County	Total in Foster Care	Placed in County	Placed in Region	% Out of Region
Bandera	15	0	11	27%
Bexar	1,557	969	1,296	17%
Comal	128	18	102	20%
Kendall	11	4	9	18%

(DFPS, 2017a)

Special needs

Because the impact of abuse and neglect on a child has many consequences, a challenge in providing foster care for children is that many have special needs, such as emotional, behavioral, socialization, or cognitive problems, due to the abusive or unstable environments from which they have been removed. Of Texas children who were eventually placed into adoptive homes during 2016, 39% had a disabling condition: 8% were considered emotionally disturbed, 13% abused drugs and/or alcohol, 1% faced physical handicaps, 5% were medically involved, and 12% experienced learning difficulties (DFPS, 2017a).

Youth Transitioning to Independence

A large number of Texas foster children in state custody “age out of the system” each year when they turn 18 years old. It is important that foster children are provided with adequate

assistance in the transition to young adulthood. The Fostering Connections Act, passed in October 2008, improves access to education and health care and extends federal support for foster youth until age 21 (Child Welfare Information Gateway, n.d.).

There were 648 youth aged 18-21 in substitute care in Texas on August 31, 2016 (DFPS, 2017a). DFPS offers the Preparation for Adult Living (PAL) Program, which provides independent living services to youths aged 16-22 who are close to aging out of the system or have aged out of the foster care system. Such services include life skills training, vocational and educational services, supportive services, financial benefits, and case management. In 2016, Texas provided PAL services to 6,750 youth aged 16 to 21 of the 8,058 youth eligible for services (DFPS, 2017a).

Despite these efforts at improving the system, youth who age out of foster care still struggle more than others. A recent National Survey revealed that at age 21:

- 67% received a high school diploma or GED
- 32% were enrolled/attending and educational program
- 52% were employed either full or part-time
- 38% received public assistance (housing, food, or financial)
- 23% were neither enrolled in an educational program nor employed
- 26% of were homeless at some point in the past two years

(National Youth Transition Database [NYTD], 2016)

“Youth who at age 21 reported having experienced homelessness within the past two years were also more likely than their peers who had not experienced homeless in the past two years to report other financial challenges, including being unemployed (58% versus 44%) and not having Medicaid or some other type of health insurance (28% versus 18%). These youth were also more likely to report having given birth to or fathered a child (31% versus 23%)” (NYTD, 2016, p.4).

Additional Transitional Living Services (TLS) available in Texas include:

- Extended Foster Care – youth may stay in, or return to, foster care until age 21 if they meet at least one of the following conditions
 - Attend high school or a program to get a high school diploma or a high school equivalency certificate (GED)
 - Attend college or other institutions of higher learning
 - Take part in a program or activity to make them job ready
 - Work for at least 80 hours a month
- Education and Training Voucher program provides
 - Financial aid while attending college or other post high school education
 - Free tuition and fees at state-supported universities, colleges, and vocational schools

(DFPS, 2016, p.15)

DFSP Program Improvement Plan

Initiated in January this federally-approved Plan includes the following objectives:

- First and foremost, children are safe in their placements
- Children are placed in their home communities
- Children are appropriately served in the least restrictive environment that supports minimal moves for the child
- Connections to family and others important to the child are maintained
- Children are placed with siblings
- Services respect the child's culture
- To be fully prepared for successful adulthood, children and youth are provided opportunities, experiences and activities similar to those experienced by their non-foster care peers
- Children and youth are provided opportunities to participate in decisions that impact their lives

(DFPS, 2015)

To achieve these objectives, the DFPS Foster Care Redesign Implementation Plan (DFPS, 2015) includes systems improvements such as changes to the contracting and procurement processes for foster care services and includes

financial incentives to providers for improved outcomes.

DFPS also conducted a foster care needs assessment to identify placement patterns and show where capacity is most needed. Among the findings, it was suggested that while foster care capacity for the state as a whole was being utilized, local capacity was not always available. The Foster Care Redesign calls for the San Antonio catchment area (Region 8A&B) to include 28 counties surrounding San Antonio. “Capacity deficits in the larger urban centers of 6A (Houston), 7B (Austin) and 8A (San Antonio[Bexar County]) are supported by corresponding surpluses in the surrounding county catchments of 6B, 7A, and 8B. While resource sharing works to some extent, a greater development of foster care capacity in the urban centers would allow more children to be placed closer to home and for counties on the farther outskirts of the supplying catchments (6B, 7A, 8B) to participate in more resource sharing. The creation of new resource hubs may also be considered... DFPS is experiencing difficulty securing and maintaining placement resources for children” (DFSPS, 2017b, p.5). It is the goal of DFPS to place children in situations within 50 miles of their home.

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