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## Child Exit Types and Permanency Outcomes in Foster Care as Correlated to CASA Involvement

Grace Elizabeth Hill  
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## ABSTRACT

This study sought to identify correlations between Court Appointed Special Advocate (CASA) activities and exit outcomes for children in foster care. Previous research on the impact of CASA has been inconclusive and offered mixed findings, so this study sought to build off of previous research while also exploring new areas of research that have not yet been investigated. Big Country CASA's database, Optima, was utilized to retrieve data on cases that closed during the 2021 fiscal year (September 1, 2020, to August 31, 2021). This yielded a sample size of 75 cases. Through an analysis of these cases to test five different hypotheses, it was found that higher intensity, as defined by the number of times a CASA does case-related work per month, of CASA activities per case is correlated with shorter case length. Additionally, more frequent parent contact is associated with higher likelihood of reunification. No statistically significant differences were found in intensity between cases with multiple children versus cases with one child.

Child Exit Types and Permanency Outcomes in Foster Care as Correlated to CASA  
Involvement

A Thesis

Presented to

The Faculty of School of Social Work

Abilene Christian University

In Partial Fulfillment

Of the Requirements for the Degree

Master of Science in Social Work

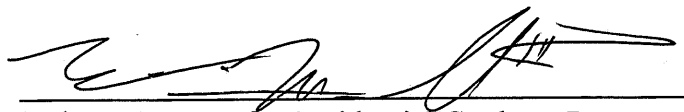
By

Grace Elizabeth Hill

May 2022

This thesis, directed and approved by the committee for the thesis candidate Grace Hill, has been accepted by the Office of Graduate Programs of Abilene Christian University in partial fulfillment of the requirements for the degree

Master of Science in Social Work



Assistant Provost for Residential Graduate Programs

Date

May 2, 2022

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Thesis Committee



Dr. Tom Winter, Chair



Kyeonghee Jang (May 2, 2022 10:02 CDT)

---

Dr. Kay Jang



Lauren Anderson (May 2, 2022 10:37 CDT)

---

Lauren Anderson, LMSW

This thesis is dedicated to my parents, Andrew and Miriam Hill, who journeyed on their own academic endeavors, fought to be lifelong learners, and demonstrated a commitment to excellence. You have encouraged me to do the same, and for that I am deeply grateful.

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## CHAPTER I

### INTRODUCTION

Foster care has long been a contentious, challenging, and heart-breaking endeavor to provide care for children who are placed in the care of the state due to the inability of their caregivers to meet children's needs. Often, child welfare cases remain open far longer than the one-year duration they are meant to have, and children do not experience permanency. For children who do exit care, the question is often raised: What are their outcomes, and what contributes to those various outcomes and exit types?

Over the 2021 fiscal year (September 1, 2020, to August 31, 2021), Big Country CASA has been involved in case closings for 170 children in 76 different cases; 54.71% of these case closures resulted in child reunification with biological parent(s), and 20.59% of these cases were closed with children being permanently placed with relatives through either adoption or permanent managing conservatorship (PMC) (Big Country CASA, 2021). This means that over 75% of children exiting child welfare who have been assigned a CASA advocate exit with a family placement. With this in mind, it became of interest to the agency to explore if there is a correlation between certain volunteer activities and the child's exit type.

#### **Study Overview**

This study seeks to identify the impact of Big Country CASA's involvement as correlated with various exit types and time to permanency for children exiting the child welfare system in Taylor County, Texas. Among all cases that closed in Taylor County,

Texas, in which CASA was involved, 94.1% of recommendations made by CASA volunteers were accepted (Big Country CASA, 2021). Only 5.9% of recommendations were rejected in court. This points toward a high level of trust in CASA volunteers' perspectives as well as an ability on the part of the CASA volunteer to understand well the cases to which they are assigned.

The researcher utilized Big Country CASA's database to run reports on the impact of CASA involvement on exit types and time to permanency for children in foster care. The database used by Big Country CASA (called Optima) functions as a tracking tool for the organization's outputs and outcomes. Through volunteer-reported case-related activities, the researcher sought to identify correlations between activities and child exit types.

### **Key Terms**

The following terms will be utilized throughout this thesis:

- ***Removal Reason:*** The reason the child was initially removed from their home and brought into the care of the state.
- ***Permanency:*** Long-term, stable plan for a child exiting care.
- ***Permanency Planning:*** Interdisciplinary meetings that involve case workers, attorneys, and any other parties to the case. During these meetings, long-term permanency goals and back-up plans are formulated in order to proactively work towards efficient and successful permanency for children in the care of the state.
- ***Exit Types:*** The legal conclusion that is reached for a child to exit the child welfare system. Exit types in this thesis include: reunification with

biological parent(s), adoption, permanent managing conservatorship (PMC), or aging out.

- ***Reunification:*** A child returning to their biological parent(s) or the house from which they were originally removed.
- ***Adoption:*** Permanent legal guardianship being given to someone other than child's biological parents once parental rights have been terminated.
- ***Kinship Adoption:*** Extended family members of a child's biological family adopting the child(ren).
- ***Non-kinship Adoption:*** Adoption by someone the child is not related to in any way.
- ***Permanent Managing Conservatorship (PMC):*** A child's custody being transferred to someone who is not their biological parent, with or without the biological parent's rights being terminated. PMC can be given to Child Protective Services (CPS), another agency or entity, a relative, or a non-relative. PMC can end at any time if the person or entity given PMC decides they no longer wish to be the conservator for the child.
- ***Aging Out:*** Children who are not reunified, adopted, or emancipated by their 18<sup>th</sup> birthday being legally released from the foster care system when they turn 18 in compliance with state regulations. Emancipated and aged-out youth do not have formal support networks or legal family upon exiting the system.
- ***Court Appointed Special Advocates (CASA):*** CASA refers to both an organization and a person. In this study, CASA as an organization will be

identified by *National CASA*, *Texas CASA*, or *Big Country CASA*, while the person will be referred to as *CASA*. CASAs are community volunteers who seek to advocate for the best interest and well-being of children in the child welfare system through collaboration with all parties of the case they are assigned. CASAs keep an extra set of eyes on the children in the United States' child welfare system and speak in court in order to offer a perspective that gives voice to what will be best for child.

- ***Activities:*** Various actions CASA volunteers engage in advocating for the well-being of their child and monitor the progress of the case. CASA volunteers log these activities in CASA's database to track their work on the case.



## CHAPTER II

### REVIEW OF THE LITERATURE

A review of relevant and recent academic literature on child welfare, foster care, removal reasons, exit types, and permanency was conducted to provide a basis for the present study. The EBSCO database was utilized as a search engine, and most articles included in this study meet three criteria: (1) they were peer reviewed, (2) they were published in the United States, and (3) they were published in or after 2004. Key search terms included “foster care,” “child welfare,” “permanency,” “exit type,” and “removal.” These searches yielded just over 100 results, 52 of which were found to be applicable and thus were used in this review of the literature. In addition to current research, classic articles predating 2004 have been incorporated to provide historical context on these topics.

In the review of the literature on foster child removal reasons, permanency outcomes, and exit types, several themes emerged. Two key themes found within removal reasons were (1) maltreatment and (2) illicit substances. For permanency and exit types, four themes emerged: (1) demographics; (2) disabilities, behavioral problems, and mental health issues; (3) kinship versus non-kinship placements; and (4) court and legal systems. These four themes in large part determine how long permanency takes and what type of permanency the child achieves in exiting care. As the literature was reviewed, it became apparent that there is a need to differentiate between factors impacting child permanency as a whole versus factors impacting specific exit types.

## **History of Child Welfare**

The United States' child welfare system has not always existed as it does now. Prior to the early 1900s, foster care was not a formalized institution, and foster children were frequently mistreated and abused (Everett, 2013). Even after the foster care system was created in the 1900s, there were significant challenges with the care of foster children. Many of these concerns have carried on to present day foster care, resulting in a child welfare system that is relied on but highly questioned.

### **Colonial Child Welfare**

In early colonial America, English Poor-Law influenced much of the response to needs expressed by abandoned, neglected, or orphaned children and youth (Everett, 2013). Everett explains that often this approach resulted in children being sold into indentured servitude until they reached the age of 21. While this gave children a place to stay when their families were unable to care for them, it was also a permanent solution that did not focus on family reunification. Furthermore, children who worked as indentured servants were frequently exploited by their employer. However, people supported indentured servitude through the 20<sup>th</sup> century because supporters argued that an indentureship tied the child to a family-like setting which was seen as positive (Everett, 2013). Over time, a push began to have children placed into non-indentureship settings.

During the colonial period, several private orphanages were established to care for children whose needs were not being met (McGowan & Meezan, 1983). Other children ended up in almshouses that housed individuals from the dependent population, including the mentally ill, alcoholics, or the poor (Everett, 2013). In these settings, it was argued that the conditions were deplorable for the well-being of children and that children's

moral and educational needs were disregarded. During this time period, charity workers began to take action to address the needs of neglected and abandoned children. This led to the formation of two guiding principles for determining the placement of dependent children as early as the 1860s: (1) free foster care and (2) prioritizing family settings for foster care (Everett, 2013).

### **Formalized Foster Care**

Charles Birtwell was the first to formally argue for the reunification of families, changing foster care placements from a long-term placement solution into a short-term placement option that allowed parents to rehabilitate in order to regain custody and guardianship of their children (Everett, 2013). In 1909, the U.S. White House published a statement that said, “The carefully selected foster home is, for the normal child, the best substitute for the natural home” (as cited in Everett, 2013, Historical Milestones section). This statement informed much of the approach to foster care in the United States in its earliest forms.

For much of the first half of the 1900s, the foster care system began to take shape as a formal, legally-informed way of dealing with dependent children, but by the 1950s, concerns about the outcomes for children in foster care surfaced. A 1959 publication by Maas and Engler titled *Children in Need of Parents* revealed that of those in foster care, very few children ever returned home or were adopted. Additionally, the publication shared that the majority of parents of children in foster care had negative or non-existent relationships with the agencies in charge of their children (Maas & Engler, 1959).

## **Foster Care Today**

Attempts to address the concerns raised in this publication were made for the following two decades, but the outcomes for these efforts were minimal. One such effort was permanency planning, but despite the federal law requiring the development of a permanency plan for every child in foster care in the United States, upwards of three-fourths of children at times did not have one (Everett, 2013). Additionally, parental contact was still heavily discouraged at this time. However, the Oregon Project in Permanency Planning, which was conducted from 1973-1974, ran goal-based casework that incorporated more involvement from the parents with the end goal of reunification (Everett, 2013).

Permanency planning focuses on implementing goal-based activities that offer children the opportunity to develop lasting relationships with nurturing caretakers (Maluccio & Fein, 1983). It is key to note that a significant part of permanency has to do with the intent of the placement, meaning that although a child may be in a foster placement for an extended period of time, if the intent of that placement is not to be permanent, different avenues must be explored through which the child can achieve permanency (Maluccio & Fein, 1983).

The permanency planning model as first laid out in the Oregon Project helped highlight the importance of goal-directed casework and permanency planning as child outcomes were improved through higher rates of permanency (Wiltse, 1985). Today, foster care can be defined as “a temporary service to be discontinued once the parents' condition or behavior has improved or an alternative plan for permanence, including

adoption, long-term foster care, independent living, and guardianship, can be implemented” (Everett, 2013, Historical Milestones section).

### **Entrance Type and Removal Reason**

The initial reason for removing a child from their home can have significant impact on their exit type and permanency. The two removal reasons that most impact permanency outcomes are parent usage of illicit substances (Akin et al., 2015, 2017; Cheng, 2010; LaBrenz et al., 2021; Lloyd & Akin, 2014; Lloyd Sieger, 2020a; Lloyd Sieger, 2020b) and maltreatment and abuse (Bell & Romano, 2017; Connell et al., 2006; Eastman & Putnam-Hornstein, 2017). While the specific impact of each of these removal reasons differs, both are associated with a lengthened time to achieving permanency.

### **Illicit Substances**

For children removed due to parental use of illicit substances, all substances were generally found to increase the child’s time to achieving permanency (Akin et al., 2015; Lloyd & Akin, 2014), but certain substances caused a greater delay in achieving permanency. Removal due to illicit substances can occur when parents test positive, children test positive, or an illicit substance is found in the home. Methamphetamine was found to delay children’s permanency the most according to two studies (Akin et al., 2015; Lloyd & Akin, 2014). Additionally, racial disparities were found among children removed due to substance abuse, with poorer child welfare outcomes for African American children in comparison to White children (Lloyd Sieger, 2020b).

A 2021 study found that time in care was negatively associated with the likelihood of reunification (La Brenz et al., 2021). Because time to permanency is often extended in cases for children removed due to substance abuse, reunification rates may be

lower than those removed for other reasons. Cheng (2010) suggests this may be because case workers often perceive parental substance abuse as a risk to the well-being of the child, which can impact permanency recommendations.

### **Maltreatment**

Maltreatment and abuse minimize the probability of reunification for children in foster care (Cheng, 2010). However, for children who are neglected, reunification is more likely than it is for other types of maltreatment (Cheng, 2010). Children with a history of physical abuse are more likely to have critical incidents of serious injury that was self-inflicted, accidental, or non-accidental while in care, in comparison to children who were neglected (Bell & Romano, 2017).

Sexual abuse decreases the possibility of reunification for children in foster care; it also decreases the probability of adoption (Cheng, 2010; Connell et al., 2006). This leaves children who have suffered abuse at a heightened risk of not achieving permanency. Even for children among this population who do achieve permanency, physical and sexual abuse have been tied to worse post-permanency adjustment (White, 2015). Post-permanency adjustment refers to a child's ability to adjust behaviorally, emotionally, and socially following their time in care. Further studies are necessary to explore effective strategies and interventions for shortening time to permanency and increasing the probability of adoption for this population.

### **Exit Types and Permanency**

According to Lloyd and Barth (2011), permanency is more developmentally advantageous than staying in foster care. Therefore, the primary focus should be finding permanent solutions for children in foster care with efficiency to maximize stability in the

long term. In many cases, reunification is the end goal, but in others, adoption or guardianship is the ideal outcome. As discussed previously, a child's length to permanency and exit type from care are largely influenced by their removal reason. Exit types include, but are not limited to, reunification with biological parent(s), adoption, permanent managing conservatorship (PMC), and aging out of care.

### **Demographics**

Studies spanning the past 20 years have concluded that both permanency and type of exit from foster care are impacted by child demographics. Age (Akin, 2011; Cheng, 2010; O'Brien et al., 2012; Sattler & Font, 2020; Wulczyn, 2004) and race (Akin, 2011; Cheng, 2010; LaBrenz et al., 2021; Sattler & Font, 2020; Wulczyn, 2004; Yi & Wildeman, 2018) were the most impactful demographics on permanency. Each variable independently, as well as both variables together, can influence when and how a child exits care.

#### ***Age***

Across all exit types, younger children are more likely than older children to achieve permanency (Cheng, 2010; O'Brien et al., 2012). However, as age increases, reunification and guardianship typically occur more frequently (Akin, 2011), while rates of adoption decrease (Akin, 2011; Wulczyn, 2004). Infants are less likely to be reunified (Connell et al., 2006; Wulczyn, 2004) but are more likely to be adopted in comparison to older children (Akin, 2011). Additionally, for adolescents who were adopted, higher rates of dissolution have been found in comparison to younger children and infants who are adopted (Sattler & Font, 2020). This points to a need for greater emphasis on prioritizing permanency for older children in foster care.

## ***Race***

Historically speaking, racial inequalities exist in the United States' child welfare system. Removal rates for African American and Native American children are far higher than those for White, Hispanic, and Asian children (Yi & Wildeman, 2018). However, studies on rates of reunification across racial groups as well as on adoption have been less conclusive in their findings.

**Reunification.** Recent research has found that reunification rates differ among various racial groups in the United States. Historically, African Americans (Cheng, 2010; Connell et al., 2006; Wulczyn, 2004) and Native Americans have experienced lower rates of reunification than White children, while Hispanic children have experienced higher rates of reunification (La Brenz et al., 2021). More recently, Akin (2011) found that African American children and White children had similar rates of reunification but that children of all other racial groups experienced higher rates of reunification. The most current findings suggest higher rates of reunification among African American children in comparison to their multi-racial and White counterparts (Ryan et al., 2016). However, one question is whether this identified racial disparity in reunification may be impacted by geographic region or initial removal reasons being more prominent among different racial groups.

**Adoption.** When it came to adoption, it was found that African American children experienced lower rates of adoption than did White children (Akin, 2011; Cheng, 2010). Furthermore, African American children experienced higher rates of guardianship dissolution compared to White or Hispanic children, arguably highlighting racial disparities in the United States' child welfare system (Sattler & Font, 2020).



Multiple studies have sought to address this through increasing kinship placements which have been found to increase stability for children in foster care (Keller et al., 2007; Rubin et al., 2008).

### ***Indian Child Welfare Act***

While no studies identified in a search of the literature yielded information on American Indian or Alaskan Native children in the child welfare system, the Indian Child Welfare Act (ICWA) of 1978 has influenced court and legal proceedings for children with American Indian or Alaskan Native ancestry. The ICWA seeks to acknowledge the cultural needs of Indigenous children and to respect their cultural heritage by handing over legal proceedings to the Indigenous nation to which the child belongs (Halverson et al., 2002; MacEachron et al., 1996). The transfer of jurisdiction of these child welfare cases is an effort to reverse previous legislation that had endorsed genocide and assimilation and to restore self-determination to Indigenous nations (MacEachron et al., 1996).

Indigenous nations are given responsibility to run their own child protective courts and family support services distinct from the state's services and courts (Barsh, 1980; MacEachron et al., 1996). Furthermore, Indigenous foster families are given preference over non-Indigenous families in an effort to help foster cohesive cultural identity in the child (Barsh, 1980; Halverson et al., 2002; MacEachron et al., 1996). Because of the separation in legal proceedings for child welfare cases for American Indian and Alaskan Native children from all other ethnicities and races of children in the United States, there were few findings yielded in the initial search of databases for this literature review.

## **Disabilities, Behavioral Problems, and Mental Health Problems**

Extensive studies conducted over the past two decades have revealed that some of the most significant hinderances to children in foster care achieving permanency are disabilities, behavioral problems, and mental health problems (Akin, 2011; Akin et al., 2012, 2017; Connell et al., 2006; Salazar et al., 2018; Sattler & Font, 2020). Children with mental health issues are typically found to have fewer and slower exits out of care than children without mental health issues (Akin, 2011; Akin et al., 2012). Placement instability is often higher among children with mental health issues (Akin et al., 2012).

The literature on the impact of disability on a child's permanency is ambiguous at best. While disability doubled the likelihood of a child exiting care to adoption, mental health issues cut the likelihood of adoption in half (Akin, 2011). A 2012 study found that disability increased a child's risk of long-term foster care (Akin et al., 2012). Other studies have found that disability and mental health issues minimize the likelihood of reunification (Akin, 2011; Connell et al., 2006) as well as the likelihood of adoption (Connell et al., 2006).

Even for children with mental health issues who are reunified with their parents, time to permanency is delayed in contrast to children without any mental health issues (Connell et al., 2006). For children with behavioral problems, there are higher rates of re-entry into foster care following reunification (Akin et al., 2017). Furthermore, dissolution rates for both adoption and guardianship were found to be higher for children with behavior problems, a cognitive disability, or mental health issues (Sattler & Font, 2020).

While many studies have explored disabilities, behavioral problems, and mental health issues independently of each other, little research has been done on children with

co-occurring issues of the three discussed. This is a crucial area for future research in order to effectively assess any statistically significant intersectionality factors.

### **Kinship Care versus Non-Kinship Care**

In recent years, researchers have conducted studies that provide support for kinship placements while children are in the foster care system (Bell & Romano, 2017; Goering & Shaw, 2017; Keller et al., 2007; Koh & Testa, 2008; Lloyd Sieger, 2020a; Pennell et al., 2010; Rubin et al., 2008; Ryan et al., 2016; Zinn, 2009). While studies conducted in the late 1990s and into the early 2000s had found that kinship placements often resulted in lengthened time to permanency and lower rates of reunification (Akin, 2011), findings from recent studies have swung in the opposite direction. This may be in part due to the recent emphasis on child reunification and an increase of focus on services for parents in child welfare cases.

### ***Foster Parent Demographics***

A 2009 study sought to explore any demographic differences between kinship and non-kinship placements (Zinn, 2009). The study found that on average, in comparison to non-kinship placements, kinship foster parents were older and had lower income levels. Additionally, kinship foster parents were more likely to be African American than non-kinship foster parents, and the households were more likely to be headed by a single adult rather than a couple (Zinn, 2009). These statistically significant findings may point to the intersectionality of race with poverty, single parent households, and over-involvement with the child welfare system in the United States. The age difference may be accounted for by the large percentage of grandparents that step into kinship foster parent roles due to their children being unable to parent the third generation of children.

### ***Stability***

According to Akin's 2011 study, "kinship placements did not adversely affect rates of reunification or guardianship. In fact, in the case of guardianship, kinship placements were noted as facilitating permanency" (p. 1009). This is supported by findings that suggested that kinship placements aid in stability for children in foster care and can help with long-term outcomes as well (Keller et al., 2007; Lloyd Sieger, 2020a; Rubin et al., 2008).

In addition to increasing stability, kinship placements often also facilitate social support through expanding family connections (Pennell et al., 2010). In contrast, Koh and Testa (2008) found that while initially there was more disruption in non-kinship placements, at one year's time, there was no difference in stability between kinship and non-kinship placements.

### ***Reunification and Adoption***

Despite kinship placements in foster care generally being found to provide greater placement stability, they have also been associated with lower rates of reunification and adoption (Bell & Romano, 2017; Winokur et al., 2014). Koh's 2010 study found mixed results in assessing the reunification rates between kinship placements and non-kinship placements across five states, with two states having higher rates of reunification for children in kinship placements and three states having lower rates of reunification.

Despite possibly lower adoption and reunification rates, one study found that children have the lowest odds of re-entry into the foster care system if extended family members achieve guardianship, indicating one type of permanency that is supported by kinship placements (Goering & Shaw, 2017). Furthermore, findings indicate that children

in foster care voice greater desire for relational permanency rather than legal permanency (Salazar et al., 2018), and kinship placements help facilitate relational permanency if not legal permanency (Pennell et al., 2010).

### ***Safety in Kinship Placements***

It is important to note that while stability has been found to increase across kinship placements, research on the safety of kinship placements in comparison to non-kinship placements has been inconclusive. While Farmer (2009, 2010) found that kinship placements were slightly lower quality than non-kinship placements, a 2009 study found that the inverse was true (Winokur et al.). Placement quality was measured by researchers and refers to how well a placement was believed to meet a child's needs (Farmer, 2009). Further research is needed to identify whether kinship placements provide any advantage when it comes to the safety of children in foster care.

### ***Licensing***

Most foster homes are required to be licensed through an intensive home study and training process, but that requirement is not always applicable to kinship placements. While some kinship placements may be licensed, many are not. Many kinship placements who do become licensed complete an expedited training process because of their status as kin. A 2016 study of particular interest assessed the impact of licensing of kinship placements on child reunification (Ryan et al.). The study found that licensed kinship placements were less likely to result in reunification than were unlicensed kinship placements. This may be in part because these kinship placements have more legal backing due to their licensing status, whereas unlicensed kinship placements do not have the same credentials to continue providing placement as opposed to the parents. Licensed

non-kinship placements had rates of reunification between licensed and unlicensed kinship placements (Ryan et al., 2016). These findings call into question whether findings in the literature regarding kinship placements might be more consistent if a licensing measure were taken into consideration in future studies.

### **Judicial and Extra-Judicial Approaches**

Various federal supports and legal system variations have been shown to help improve outcomes for children and families involved in the child welfare system (Lloyd Sieger et al., 2021; McCombs-Thornton & Foster, 2012; Pennell et al., 2010; Sloan et al., 2013; Zinn & Orlebeke, 2017). Initiatives geared towards parents as well as initiatives focused on the children or the family as a whole have shown promise for increasing rates of support that lead to positive outcomes for the family. Additionally, parental compliance with assigned services (Gifford et al., 2014) and family group conference meetings (Wang et al., 2012) can be significant factors in the child exit type. As parents play a significant role in the permanency outcomes of their children due to reunification not being a suitable option if parents have not completed the necessary services, it is pertinent to examine whether certain court and legal systems impact family reunification.

#### ***Judicial Approaches***

Because child welfare is intrinsically intertwined with court and legal systems in the United States, it is crucial to assess how judicial systems influence outcomes for children in child welfare. For parents with substance abuse issues, one such judicial approach to increasing reunification has been the combination of drug treatment court (DTC) with family court (Sloan et al., 2013). Unified DTC and family court not only increased rates of reunification, but also shortened the time children spent in care, which

was associated with improved school performance of the children (Sloan et al., 2013). This suggests that for families with cases in multiple courts, it can be beneficial for the cases to be integrated in order to gain a fuller understanding of the various legal variables at play.

Juvenile dependency court (child welfare court) judicial expertise has been found to have only minimal influence on rates of exit to permanency for children in foster care (Zinn & Orlebeke, 2017). While the initial results of this study found that judicial expertise was positively correlated to certain dependency court (child welfare court) transitions, there were not significant enough associations with other transitions to claim that judicial expertise is statistically significantly correlated with a child's time to exit to permanency (Zinn & Orlebeke, 2017).

### ***Extra-Judicial Approaches***

A parent's active and positive involvement in the case is a telling factor in the likelihood of reunification (Cheng, 2010). A collaborative approach between the caseworker and parent has been praised as a highly effective strategy for maximizing opportunity for reunification to occur (Cheng, 2010). Both Pennell et al. (2010) and Wang et al. (2012) discuss the influence of family group engagement or family team group conference meetings in case outcomes. These meetings include all parties involved in the case and provide space to create a family service plan and discuss desired case outcomes. One study found that family team group conference meetings did not influence time to permanency for children (Wang et al., 2012), but a study from two years prior found that family team meetings decreased time to permanency for children in care provided that the family team meetings happened within 72 hours of the initial removal

of the child (Pennell et al., 2010). However, both studies found that regardless of the timeline of when family group engagement took place during the case, there was an increase in desirable permanency outcomes of reunification or kinship placements (Pennell et al., 2010; Wang et al., 2012). This suggests that family engagement positively influences child welfare case outcomes, but that the earlier the family engagement takes place, the more quickly those positive permanency outcomes will be achieved.

### ***Court Appointed Special Advocates (CASA)***

National CASA was founded in 1977 after a judge became frustrated with the lack of information he had on the cases over which he was presiding (National CASA/GAL Association for Children, n.d.). Since its founding, CASA has become decentralized and has branches located across the United States. Typically, cases assigned a CASA volunteer have greater complexity or severity than cases without a CASA (Osborne et al., 2019). While the goal is often to have a CASA volunteer on every case, this is not realistic in most regions given the number of volunteers in proportion to the quantity of child welfare cases.

While attorneys and judges expressed high satisfaction with CASA, low satisfaction rates came from case workers and parents (Litzelfelner, 2007). Much of this frustration stemmed from CASA volunteers not understanding the limitations of the child welfare workers and the extent of their role in the case (Litzelfelner, 2007). Additionally, cases assigned a CASA volunteer in counties with higher poverty rates were likely to have more court-ordered services in comparison to cases without a CASA volunteer (Jaggers et al., 2018). For some families, too many court-ordered services can be overwhelming and hinder the family's ability to follow through with their service plan,



resulting in the potential termination of parental rights. *Court-ordered services* are required classes, activities, or commitments assigned by the court during hearings for the case. Jagers et al. (2018) suggest that perhaps CASA volunteers struggle to balance the need for court-ordered services and the need for finances to pay for these services. If this disconnect does exist, then it may explain the low rates of satisfaction from families. CASA volunteers must learn to streamline their service recommendations so that parents and children receive all necessary services without being overloaded with court-ordered services.

Children served by CASA volunteers are more likely to be adopted (Osborne et al., 2020; Pilkay & Lee, 2015; Poertner & Press, 1990). However, Osborne et al.'s 2020 study found that children assigned a CASA volunteer have significantly lower rates of permanency, specifically in terms of reunification, in comparison to children not assigned a CASA volunteer. Despite there being lower rates of permanency found in recent studies, CASA is a cost-effective solution to serving children because CASA operates with professionally trained, unpaid volunteers, which minimizes the overall costs associated with child welfare cases (Poertner & Press, 1990). Because the overall impact of CASA on cases and children in the child welfare system is somewhat inconclusive, there is need for further exploration and analysis of variables and outcomes for cases with a CASA volunteer.

### **Summary**

In the foster care system, factors involving both parents and children impact the case outcomes. Illicit substance use and maltreatment of the child are parental decisions that most negatively impact permanency outcomes. For children, their age and race play a

significant role in permanency outcomes. In current literature, kinship placements are nearly always preferred over non-kinship placements because they tend to provide greater stability for the child. Additionally, family engagement is known to improve permanency outcomes by increasing reunification rates and decreasing time to achieving permanency. After reviewing both historical and contemporary literature on the child welfare system, it became apparent that there have been inconclusive findings across many aspects of research on the child welfare system.

This study seeks to identify how specific activities of CASA volunteers are associated with various exit types of children exiting the child welfare system in Taylor County, Texas. Several key findings of the literature review provided support for five hypotheses around which this study is based:

1. There will be no relationship between the frequency of all activities by the CASA and the time to achieving permanency.
2. There will be no relationship between the intensity of activities per case by the CASA and the time to achieving permanency.
3. There will be no relationship between the intensity of activities per child by the CASA and the time to achieving permanency.
4. CASAs who had more parent contact during the duration of their case were more likely to see reunification as the exit type.
5. The intensity of CASA activities on a case will increase as the number of children on the case increases.

CHAPTER III  
METHODOLOGY

**Design**

This study draws from Big Country CASA’s existing database of client and case information. All cases that were closed within the 2021 fiscal year were included in a report that analyzed the duration of the case, initial removal reason, type and number of contacts the CASA advocate made, exit type, and child’s basic demographics, including age, race, and gender. These data already existed due to Big Country CASA’s extensive case note and contact log requirements for volunteers and employees.

This study sought to identify specific activities of CASA volunteers associated with various exit types of children exiting the child welfare system in Taylor County, Texas. The researcher utilized Big County CASA’s database to run reports on what CASA volunteer activities were most associated with various child exit types from care over the past fiscal year (September 1, 2020 through August 31, 2021). Texas CASA has identified 24 categories of volunteer activities that are measured in programs to create consistent measures across the state. The database used by Big Country CASA (called Optima) functions as a tracking tool for the organization’s outputs and outcomes. Through volunteer-reported case-related activities, the researcher identified correlations between activities and child exit types.

## **Population and Sampling**

This research has been approved by Abilene Christian University's Institutional Review Board as an exempt study (Appendix A). Permission was given from Big Country CASA to use their agency's data (Appendix B). All data collected pertain to Big County, Texas child welfare cases involving minors between birth and 18 years of age at the time of their case. Data from any children who were served by CASA during the duration of their case that closed between September 1, 2020, through August 31, 2021, are included in this study. In the summation and findings from research, all identifiers were removed from each case to protect the confidentiality of children formerly in foster care and families previously involved in the child welfare system. Additionally, cases were grouped by several variables, such as number of children on case or exit type, so individual cases are not discussed in the research findings.

## **Procedures**

A summary of all closed cases from the 2021 fiscal year (September 1, 2020, through August 31, 2021) was drawn from Big Country CASA's database. This report included the length of case, court closure reason, program closure reason, and final placement type. For each case that closed in the past fiscal year, a summary of all activity types for each individual case was collected. The data from these summaries quantify the frequency, measured by the number of times the activity occurred over the duration of the case, and the intensity, measured by the quantity of activities per month. Intensity will be measured in two ways: (1) by case and (2) by child. All data were compiled into a spreadsheet that assisted in synthesizing themes found among cases based on number of children, closure types, and CASA activity frequency and intensity.

Initial removal reasons (see Appendix C) are called *referral reasons* by CASA because CASA is assigned cases by the court. Texas CASA (n.d.) has identified 10 referral reasons that are reflective of the parental decisions leading to the removal of the child from the home and the opening of the child welfare case. *Court closure reason* (see Appendix D) refers to the legal closure of the case. Texas CASA (n.d.) has identified 14 different court closure reasons that identify how the child exited care based on the judge's ruling at the time of the final trial. *Program closure reason* (see Appendix E) refers to the reason that CASA was released from the case. Texas CASA (n.d.) has identified 16 different program closure reasons. Program closure reason is typically the same as court closure reason, but there are specific instances in which CASA may request dismissal prior to the case closing or when the court dismisses the CASA prior to the end of a case.

*Final placement type* (see Appendix F) refers to the living arrangement that has been made for the child at the time of case closure. Texas CASA (n.d.) has identified 13 final placement types, although it is important to note that two of the placement types, "Age Out" and "Runaway/Homeless," are not placements. Additionally, while it is ideal for a child to have permanent living arrangements upon the closing of their case, many of the final placement types are not permanent.

*Activity types* (see Appendix G) refers to the work the CASA volunteer does on the case. Texas CASA (n.d.) has identified 24 activity types that encompass both direct and indirect work a CASA volunteer does on a case. Because activity types were not standardized according to the above activity types prior to August 2021, Big Country CASA's previous activity types were grouped to fit into the new standardized activity types (see Appendix H). Three of the previous activity types were omitted from this

study: (1) “Case Note Entries” due to that activity not pertaining to the children on the case, (2) “Fundraising Event” due to that activity not pertaining to the children on the case, and (3) “Other” due to its lack of specificity. Of the new activity types, “CFE Meeting” and “CFE Tool Completed” were combined due to the previous activity types grouping all CFE activities together, and “Contact: Child Face-to-Face” and “Contact: Child Other Contact (not Face-to Face)” were combined due to the previous activity types not differentiating between face-to-face visits and other child contact.

### **Measurement**

An analysis was conducted to see which variables are correlated. Data reduction was utilized to assess groupings of variables. This demonstrated which outcomes are associated with which CASA activity types. Outcomes include (1) time to achieving permanency, measured by the length of the case, and (2) exit type, measured by which case closure type the case falls under. CASA involvement was measured by the frequency, or number of times, each of the CASA activity types occurs. This resulted in 24 total variables being measured to find correlations between specific activity types and specific outcomes. The impact of intensity, as defined by the number of CASA activities per case per month, as well as the impact of intensity per child, as defined by the number of CASA activities per child per month, was utilized to determine the impact of CASA on the duration of cases. Correlational analyses, ANOVA tests, and LSD post-hoc tests were used to analyze and interpret the data.

## CHAPTER IV

### FINDINGS

#### **Introduction**

Frequency analyses were completed to provide a description of the sample. This description includes length of time of the case, number of children, race, and ethnicity. Findings are discussed in two sections. The first section will include a description of the sample and key demographic data. The second section will include findings on each hypothesis being tested in this study. Hypotheses were tested and interpreted using Pearson correlation, analysis of variance (ANOVA), and LSD post-hoc tests.

#### **Description of the Sample**

Big Country CASA's database, Optima, identified a total of 87 cases that had closed in FY 2021. However, 12 of these cases were excluded from this study due to partial closures with only some of the children on the case exiting care or CASA assignment as a formality with CASA involvement lasting for less than 2 months on a case. Once these cases were removed, a total of 75 ( $N = 75$ ) closed cases were included in this study.

#### **Race and Ethnicity**

About 40 percent of the cases in this study involved non-White children ( $n = 32$ ) while the remaining cases involved White children ( $n = 43$ ). Of the cases involving non-White children, 1 case involved African children ( $n = 1$ ), 8 cases involved Black or African American children ( $n = 8$ ), 16 cases involved Hispanic or Latino children ( $n =$

16), 4 cases involved children of two or more races ( $n = 4$ ), and the remaining 3 cases involved children of multiple racial groups ( $n = 3$ ). This racial breakdown is not disproportionate to the racial makeup of Taylor County (*Taylor County Quick Facts*; see Table 1), suggesting that the child welfare system in Taylor County is not disproportionately impacting minority communities. In terms of ethnicity, the only distinction made in the database is between Hispanic and non-Hispanic cases. Two thirds of cases involved non-Hispanic children ( $n = 50$ ) while the remaining cases involved some or all Hispanic children ( $n = 25$ ) (see Table 1).

**Table 1**

*Race and Ethnicity*

	Race/Ethnicity	Study Frequency	Study Percent	Taylor County Percent
Race	Black or African American	9	12.0	8.4
	Hispanic/Latino	16	21.3	25.0
	Two or More Races	7	9.3	3.0
	White	43	57.3	62.7
Ethnicity	Hispanic	22	29.3	
	Both Hispanic and Non-Hispanic	3	4.0	
	Non-Hispanic	50	66.7	
	Total	75	100.0	

**Case Means**

For each case, there was a mean of 1.96 children per case, with the lowest number of children on a closed case being 1 and the highest being 5 (see Table 2). The mean number of months in case was 21.19, with the shortest time spent in care being 5 months and the longest being 59 months (see Table 2). For total activities, there was a mean of 203.89 activities per case, with a low of 35 activities and a high of 707 activities over the duration of a case (see Table 2). The mean intensity of activities per month per case was 10.42, while the lowest intensity was 2.729 activities per month per case and the highest



was 21.222. The mean intensity of activities per month per child dropped slightly, falling to a mean of 6.83. The lowest intensity per child was .655 activities per month and the highest was 17.286 (see Table 2).

**Table 2**

*Key Case Means*

	Number of Cases	Minimum	Maximum	Mean	Std. Deviation
Children per Case	<i>N</i> = 75	1	5	1.96	1.144
Months in Care	<i>N</i> = 75	5	59	21.19	12.408
Total Activities	<i>N</i> = 75	35	707	203.89	119.699
Intensity Per Case	<i>N</i> = 75	2.729	21.222	10.42	4.192
Intensity Per Child	<i>N</i> = 75	.655	17.286	6.83	3.876

**Exit Type**

Among the cases that closed in FY 2021, there were eight different exit type outcomes (see Table 3). For two of these cases (2.7%), CASA requested dismissal. Ten cases (13.3%) concluded with children aging out of care. Seven cases (9.3%) resolved with children being adopted by a non-relative, and 4 cases (5.3%) ended with PMC going to a non-relative. For one case (1.3%), PMC was granted to CPS. Nearly half of the cases (45.3%) that closed ended in reunification. Nine (12%) cases ended in PMC being given to a relative while four cases (5.3%) ended in the children being adopted by a relative. The remaining four cases (5.3%) had mixed outcomes, with children on the same case leaving care to different exit types. These findings were further synthesized and placed into five categories: (1) care to relative, (2) care to non-relative, (3) age out, (4) CASA requested dismissal, and (5) mixed outcomes. This means that 49 cases (65.3%) ended with children being permanently placed with their parents or another family member, and only 12 cases (16%) ended with children being placed with non-family members (see Table 3).

**Table 3***Exit Type*

Exit Type	Frequency	Percent
Adopted by Relative	4	5.3
Adopted by Non-Relative	7	9.3
Adopted by Non-Relative/PMC to Relative	1	1.3
Age Out	10	13.3
Age Out/PMC to Non-Relative/PMC to Relative	1	1.3
CASA Requested Dismissal	2	2.7
PMC to CPS	1	1.3
PMC to Non-Relative	4	5.3
PMC to Relative	9	12.0
PMC to Relative/Reunification	2	2.7
Reunification	34	45.3
Total	75	100.0

**Findings on Hypotheses**

Five hypotheses were testing using the data collected from Optima, Big Country CASA's database. A combination of Pearson Correlation tests and ANOVA tests was used to confirm or disconfirm each of the hypotheses. LSD Post-Hoc tests were used to help interpret the findings.

**Hypothesis One**

Hypothesis one predicted that there would be no relationship between the frequency of all activities by the CASA and the time to achieving permanency. A Pearson Correlation test was utilized to test this. The positive correlation from the test disconfirms the null hypothesis (see Table 4).

**Table 4***Months in Care and Total Activities*

	Months in Care	Total Activities
Months in Care	1	.679
Pearson Correlation		
Sig. (2-tailed)		.000
<i>N</i>	75	75

## Hypothesis Two

Hypothesis two predicted that there would be no relationship between the intensity of activities per case by the CASA and the time to achieving permanency. This was tested using a Pearson Correlation test. The negative correlation is not highly predictive, but statistically significant (see Table 5). This disconfirms the hypothesis, suggesting that the greater intensity of activities per month per case, the lower amount the time in care.

**Table 5**

*Months in Care and Intensity Per Case*

		Months in Care	Intensity Per Case
Months in Care	Pearson Correlation	1	-.328
	Sig. (2-tailed)		.004
	<i>N</i>	75	75

## Hypothesis Three

Hypothesis three predicted that there would be no relationship between the intensity of activities per child by the CASA and the time to achieving permanency. This was tested using a Pearson Correlation test. No statistically significant correlation was found between the intensity of CASA activities per child and time in care (see Table 6), suggesting that there is no relationship between the intensity of CASA activities per child and the length of a case. This supports the researcher's hypothesis.

**Table 6**

*Months in Care and Intensity Per Child*

		Months in Care	Intensity Per Child
Months in Care	Pearson Correlation	1	.046
	Sig. (2-tailed)		.693
	<i>N</i>	75	75

These contrasting findings between intensity per case in hypothesis two versus intensity per child in hypothesis three leave many questions. To address these questions, an ANOVA test was conducted to analyze the correlation between the number of children on a case with the months per case. Initially, the ANOVA test was conducted with cases grouped by the exact number of children, yielding a range in mean number of months, but no statistically significant differences. However, when this test was conducted comparing cases with one child to cases with multiple children, significant differences were found. The mean length of case for cases with one child was 25.28 months, while the mean length of case for cases with two or more children was 17.41 months. The standard deviations were large, but it was found that the means were statistically significant (see Table 7).

**Table 7**

*Number of Children and Length of Case in Two Groups*

Number of Children in Case	<i>N</i>	Mean	Std. Deviation	Std. Error	F	Sig.
1	36	25.28	13.950	2.325	8.265	.005
2-5	39	17.41	9.492	1.520		
Total	75	21.19	12.408	1.433		

While these findings were helpful, another ANOVA test was conducted to break down the results even further. In this test, cases were grouped by having one child, two children, or three to five children (see Table 8). This further revealed statistically significant correlations between the number of children on a case and the number of months spent in care, and broadened the difference in means, with a high mean of 25.28 months in care for cases with one child and a low mean of 16.68 months in care for cases with three to five children.

**Table 8***Number of Children and Length of Case in Three Groups*

Number of Children in Case	<i>N</i>	Mean	Std. Deviation	Std. Error	F	Sig.
1	36	25.28	13.950	2.325	4.181	.019
2	17	18.35	8.200	1.989		
3-5	22	16.68	10.513	2.241		
Total	75	21.19	12.408	1.433		

An LSD post-hoc test was run to establish statistical significance between each group. While no statistically significant differences were determined between cases with two children and cases with 1 child or three to five children, there was a significant difference between cases with 1 child and cases with three to five children (see Table 9). Cases with two children approach statistical significance with cases with one child.

**Table 9***LSD Post-Hoc Test of Number of Children and Months in Care*

Number of Children	Siblings	Mean Difference	Std. Error	Sig.	Lower Bound	Upper Bound
<b>1</b>	2	6.925	3.504	.052	-.06	13.91
	3-5	8.596	3.222	.009	2.17	15.02
<b>2</b>	1	-6.925	3.504	.052	-13.91	.06
	3-5	1.671	3.845	.665	-5.99	9.34
<b>3-5</b>	1	-8.596	3.222	.009	-15.02	-2.17
	2	-1.671	3.845	.665	-9.34	5.99

**Hypothesis Four**

Hypothesis four predicted that CASAs who had more parent contact during the duration of their case were more likely to see reunification as the exit type. This was tested using an ANOVA test as well as an LSD post-hoc test. Cases on which CASA requested dismissal were excluded from this specific analysis because that exit type does not indicate a permanent outcome for the child, but rather the ending involvement of

CASA in the case. A wide spread in mean parent contacts was found between exit types, with the highest mean parent contact (19.26) happening for cases ending in reunification or mixed exit outcomes of PMC to a relative and reunification. The lowest mean parent contact (1) occurred for cases with a combined exit type of PMC to a non-relative and PMC to CPS. Frequency of parent contact was found to be statistically significant in exit types for closed cases, which supported the researcher’s hypothesis (see Table 10).

Statistically significant differences between groups were identified.

**Table 10**

*Exit Type and Parent Contact*

Exit Type	<i>N</i>	Mean	<i>F</i>	Sig.
Reunification; PMC to Relative/Reunification	35	19.26	3.217	.012
Adopted by Relative	3	1.67		
PMC to Relative; Adopted by Non-Relative/PMC to Relative; Age Out/PMC to Non-Relative/PMC to Relative	12	3.33		
Adopted by Non-Relative	8	5.50		
PMC to Non-Relative; PMC to CPS	4	1.00		
Age Out	10	5.60		
Total	72	11.43		

An LSD post-hoc comparison was completed to analyze the statistical significance between cases with an exit type of reunification and all other exit types. All exit types except for being adopted by a relative reached statistical significance, while an exit type of “Adopted by Relative” approached statistical significance (see Table 11). Because this hypothesis only focuses on reunification, the LSD post-hoc test table only includes the relationships between reunification and each other exit type.

**Table 11***LSD Post-Hoc Test of Reunification; PMC to Relative/Reunification with Other Exit**Types*

<b>Exit Type</b>	<b>Mean Difference</b>	<b>Std. Error</b>	<b>Sig.</b>	<b>Lower Bound</b>	<b>Upper Bound</b>
<b>Adopted by Relative</b>	17.590	9.805	.077	-1.99	37.17
<b>PMC to Relative; Adopted by Non-Relative/PMC to Relative; Age Out/PMC to Non-Relative/PMC to Relative</b>	15.924	5.452	.005	5.04	26.81
<b>Adopted by Non-Relative</b>	13.757	6.387	.035	1.00	26.51
<b>PMC to Non-Relative; PMC to CPS</b>	18.257	8.602	.038	1.08	35.43
<b>Age Out</b>	13.657	5.844	.022	1.99	25.33

**Hypothesis Five**

Hypothesis five predicted that CASAs will have a greater intensity of activities on their case for cases involving multiple children. This was tested using an ANOVA test. There were differences in mean values (see Table 12) with the lowest mean intensity of activities (9.7009) existing on cases with 1 child and the highest mean (15.2205) occurring on cases with 5 children. Despite these differences, an analysis of variance reveals that these differences in means are not statistically significant, therefore disconfirming the hypothesis. No statistical differences were found between means.

**Table 12***Number of Children and Intensity*

<b>Number of Children in Case</b>	<b>N</b>	<b>Mean</b>	<b>Std. Deviation</b>	<b>Std. Error</b>	<b>F</b>	<b>Sig.</b>
1	36	9.7009	3.2815	.5469	1.366	.255
2	17	10.4497	4.8808	1.1838		
3	14	10.9473	3.8245	1.0221		
4	5	11.1305	3.3203	1.4849		
5	3	15.2205	10.3471	5.9739		
<b>Total</b>	<b>75</b>	<b>10.4194</b>	<b>4.1923</b>	<b>.4841</b>		

## CHAPTER V

### DISCUSSION

#### **Summary of Results**

Because previous research had indicated mixed impact of CASA (Jaggers et al., 2018; Litzelfelner, 2007), this study sought to assess the impact of CASA involvement on child welfare cases in Taylor County, TX. Cases that closed during the 2021 fiscal year (September 1, 2020 to August 31, 2021) were analyzed to test five hypotheses: (1) There will be no relationship between the frequency of all activities by the CASA and the time to achieving permanency; (2) There will be no relationship between the intensity of activities per case by the CASA and the time to achieving permanency, (3) There will be no relationship between the intensity of activities per child by the CASA and the time to achieving permanency; (4) CASAs who had more parent contact during the duration of their case were more likely to see reunification as the exit type; (5) The intensity of CASA activities on a case will increase as the number of children on the case increases. While some findings fell in line with previous research, other findings differed from previous studies, suggesting that there is a way to manipulate CASA's programming and CASA's partnership with the case management system and the court system.

#### **Frequency of Activities**

In exploring a potential relationship between the frequency of all activities per case by the CASA to the time of achieving permanency, a positive correlation indicates that the greater number of activities is correlated to a higher number of months in care.



Because this hypothesis predicted for randomness and a positive correlation was found, the hypothesis was disconfirmed. Activities are linearly associated with time in care: the more time one spends in care, the more activities occur. While there is no impact in reducing time in care, these activities also do not increase time. This demonstrates that the involvement over time with cases does not drop off. CASA volunteers are involved in the cases over the course of time, which might be partially tied to quarterly activity standards held by Big Country CASA. Because CASA was founded to address the lack of knowledge about a case when there is not a CASA on the case (National CASA/GAL Association for Children, n.d.), this provides support for the idea that CASA is accomplishing its original purpose in offering additional knowledge on a case for the entirety of a case's duration. The idea that more CASA activities leads to more time in care, which is not well-researched, was challenged by the findings of this study.

### **Intensity of Activities**

In comparing findings between intensity per case and intensity per child, there is ambiguity. While findings from the intensity per child Pearson Correlation test did not establish a statistically significant relationship between intensity per child and length of case, the findings from the intensity per case test found that the higher the intensity of activities per case, the shorter the length of the case. Based on these findings that correlated cases with higher intensity to fewer months spent in care, as well as the post-hoc findings which show that cases with more children have shorter durations than those with fewer children, it can be inferred that CASA is beneficial to cases provided that one invests in the family system as a whole.

There is not a correlation found between investing in an individual child and shorter time in care, but there is a correlation to investing in a case and shorter time in care. This differentiation is crucial in understanding the necessity of advocating for a family system rather than simply the child or children involved in the case. While maintaining activity requirements per child is important, increasing the activity requirements per case, especially with activities related to networking among family members, may help close cases more efficiently.

### **Parent Contact**

Multiple studies have identified parent contact as being positively correlated to shorter time in care (Cheng, 2010; Pennell et al., 2010; Wang et al., 2012). This study reflects this, with findings indicating that there is a positive correlation between more frequent parent contact and shorter case length. While studies have identified collaboration between caseworkers and parents as an effective way to increase opportunity for reunification (Cheng, 2010), this is the first study to suggest that a strong collaborative relationship between a CASA and a parent might also contribute to positive reunification outcomes for children in foster care. Because support for early family engagement has been found in multiple studies (Pennell et al., 2010; Wang et al., 2012), early parent engagement should likely be prioritized in CASA's activity requirements.

It is also important to acknowledge the time-order caveat that exists within these findings. Does a CASA's increased involvement with a parent contribute to a higher likelihood of reunification on that case, or does a strong reunification case lead to greater frequency of CASA's contact with parents? Once this is answered, further implications can be drawn from these findings.

### **Intensity for Cases with Multiple Children**

While it was hypothesized that cases with more children would have a higher intensity of activities in comparison to cases with one child, no statistically significant difference in intensity was found. A possible reason for this lack of statistical significance is that, aside from child visit requirements, activity requirements for CASAs are established and tracked by case rather than by child. This means that many activities are not replicated for each child, but rather happen once monthly or quarterly to meet the requirement for the case as a whole rather than for each individual child. However, the question remains: Should Big Country CASA track activities by case or by child?

## CHAPTER VI

### CONCLUSION

#### **Summary of Research**

This study identified correlations between CASA activities and exit outcomes for children in foster care. Previous research on the impact of CASA has been inconclusive and offered mixed findings, so this study sought to build off of previous research while also exploring new areas of research that have not yet been investigated. Big Country CASA's database, Optima, was utilized to retrieve data on cases that closed during the 2021 fiscal year (September 1, 2020, to August 31, 2021). Through an analysis of these cases to test five different hypotheses, it was found that higher intensity of CASA activities per case is correlated with shorter case length, but no statistically significant relationship was found between higher intensity of CASA activities per child and case length. Additionally, more frequent parent contact is associated with higher likelihood of reunification. No statistically significant differences were found in intensity between cases with multiple children versus cases with one child. These findings have the capacity to inform policy and future research, although this study was not without limitations.

#### **Limitations**

The limitation that perhaps most impacted this study was an unanticipated barrier to collecting complete data. This resulted in a change being made to how intensity was defined in this study, shifting from the collective number of hours spent on each activity type during the duration of each case to the number of activities per month per case and

the number of activities per month per child. This shift in defining intensity meant that comparisons were not able to be drawn between intensity as originally defined and frequency.

A second limitation was that due to activity types being standardized at the end of the 2021 fiscal year, certain activity types were merged and grouped together which may have skewed or impacted this study's findings. Perhaps the most notable activity types that were merged were "Contact: Child Face-to-Face" and "Contact: Child Other Contact (not Face-to-Face)." Not being able to distinguish between face-to-face contact and other contact with children hindered the researcher's ability to establish a valid relationship between a CASA's consistent physical presence in a child's life and specific exit outcomes.

Because National CASA is relatively decentralized and the impact of CASA can be tied to the specific state and county court system within which it operates, the specifics of this study may not be applicable to all CASA programs across the country. However, it might be possible to establish broadly applicable best practices for activity requirements based on the findings of this study.

### **Implications for Practice**

Since the findings suggest that cases with high intensity of activities close faster, changes to monthly and quarterly activity requirements might be made. However, the challenge is balancing a reasonable time commitment for community volunteers with quality services being offered to children and families involved with the child welfare system. Because Big Country CASA is actively working to recruit more volunteers to serve a greater percentage of the children in Taylor County's child welfare system,

increasing activity requirements significantly could discourage new volunteers from working with CASA and might lower volunteer retention rates.

Because the study found that higher levels of parent contact are correlated with higher rates of reunification, it is suggested that parent contact requirements are increased from once quarterly to once monthly. By increasing requirements for parent contact, the goal would be to see stronger working alliances formed between parents and CASAs as well as the long-term outcome of higher rates of reunification. To promote this increase in collaboration between CASA and biological parents, CASA should offer more trainings for volunteers on engaging with parents and providing support that promotes successful reunification following the close of a case.

Not only should CASA increase the frequency of required parents contact; CASA should be utilizing the organization's Collaborative Family Engagement (CFE) approach to engage with the family system as whole. CFE seeks to place children with family members whenever possible. Through extensive family searching and networking, many children are able to be placed with extended family members, maintaining or regaining connections to their family of origin. By removing the focus from the individual child, which findings suggested prolonged time in care, and shifting focus to the family unit, stronger alliances and better outcomes for families will be promoted by CASA's involvement in child welfare cases.

### **Implications for Policy**

This study reveals a need for a greater focus on family systems within the child welfare system as a whole. As shown in the findings of this research, cases close quicker when there is more involvement from CASA, and multiple studies indicating that

collaborating with family systems aids in positive outcomes for child welfare system involved children and families (Cheng, 2010; Pennell et al., 2010; Wang et al., 2012) point to a similar need. At present, CASA focuses heavily on advocating for children, but there is a deficit in advocating for the family and in connecting with parents. CASA's current activity requirements state that children must be contacted face-to-face at least once monthly, while parents only need to be contacted once quarterly. In contrast, 2INgage, the child welfare case management system in Taylor County, requires once monthly visits not only with the child, but with the family as well (*2INgage Region 2 Stage II Practice and Procedure Manual*, 2021). While this is improved from CASA's family engagement measures, there remains a need to place more emphasis on engaging with the family and children as a unit whenever possible, thereby promoting family reunification and consistent familial connection even while children are in care. If parents can maintain relationships with their children and feel supported by their case worker, maintaining hope and vision for family reunification is more easily attainable.

### **Future Research**

Because this study was not able to analyze the impact of the amount of time spent on each CASA activity with the exit type, research should be conducted to assess this relationship. Comparisons could be drawn between the number of times and the amount of time spent on each activity to identify if there are any significant differences between these two measures of activity. Studies focusing on specific activity types aside from parent contact also might be analyzed to find correlations. Furthermore, studies should be conducted to identify the optimal intensity for engaging with families involved in the child welfare system. This will help establish the point at which there are diminishing

returns on increased intensity. This study did not investigate correlations between removal reason and exit type, so further research might be conducted to assess any relationship between those two variables. Lastly, because there was a low satisfaction rate with CASA from parents (Litzelfelner, 2007), studies discussing the impact of greater contact between CASA and biological parents on parental satisfaction with CASA should be conducted.



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## APPENDIX A

### Institutional Review Board Approval Letter

**ABILENE CHRISTIAN UNIVERSITY**  
*Educating Students for Christian Service and Leadership Throughout the World*  
Office of Research and Sponsored Programs  
320 Hardin Administration Building, ACU Box 29103, Abilene, Texas 79699-9103  
325-674-2885



January 6, 2022

Grace Hill  
Department of Social Work  
ACU Box 27592  
Abilene Christian University

Dear Grace,

On behalf of the Institutional Review Board, I am pleased to inform you that your project titled "Child Removal Reasons, Exit Types, and Permanency Outcomes in Foster Care",

(IRB# 21-155 ) is exempt from review under Federal Policy for the Protection of Human Subjects.

If at any time the details of this project change, please resubmit to the IRB so the committee can determine whether or not the exempt status is still applicable.

I wish you well with your work.

Sincerely,

*Megan Roth*

Megan Roth, Ph.D.  
Director of Research and Sponsored Programs

APPENDIX B

Agency Approval Letter



**Lee Ann Millender, LMSW-IPR**  
*Executive Director*

**Board of Directors**

**Jeannette McQueen**  
*President*  
*Foster/Adoption Minister*

**Shanna Kevill**  
*Vice President*  
*Arrow Dealerships*

**Jasmine McCabe-Gossett**  
*Secretary*  
*Community Foundation of Abilene*

**Carolyn Beckham**  
*Treasurer*  
*Community Volunteer*

**Jay Capra, MD**  
*Family Practice Physician*

**Dillon Cobb**  
*First Financial Trust & Asset Management Company*

**Leah Doty**  
*Excelsior Foundation*

**Laura Dyer**  
*Community Volunteer*

**LaQuiera Gantt**  
*Abilene Education Foundation*

**John Graham**  
*Taylor County Sheriff's Dept.*

**Marcus Wilson**  
*FOLIC*

**Dr. David Young**  
*Abilene ISD- Superintendent*

**Matthew Zimmerman**  
*Blizzard & Zimmerman, P.L.L.C.*

**CASA Friends- Chair**  
**Mari Kay Morrison**  
*Community Volunteer*

September 14, 2021

To Whom It May Concern:

I am aware that Grace Hill is conducting a research study. Grace is an intern with Big Country CASA and has requested to use our agency's data for her study. This study focuses on the impact of CASA involvement on child exit types and permanency outcomes in foster care. Grace Hill has shared with me the details of her project.

I give Grace Hill permission to conduct her study at our agency. Big Country CASA requests that identifiers of its clients be kept completely confidential in the research results.

Sincerely,

Lauren Anderson

*Program and Community Development Director*

## APPENDIX C

### Referral Reason

<b>Referral Reason</b>	<b>Definition</b>
<b>Emotional Abuse</b>	The systematic diminishment of a child. It reduces a child's self-concept to the point where the child feels unworthy of respect, friendship, love, and protection
<b>PHAB</b>	Physical Abuse; intentionally harming a child, using excessive force or reckless endangerment
<b>SXAB</b>	Sexual Abuse; engaging a child in any activity for an adult's own sexual gratification
<b>Neglect</b>	The failure of a person responsible for the child's welfare to provide necessary basic needs, care, or medical attention
<b>NSUP</b>	Neglectful Supervision; the failure of the person responsible for the child's care to adequately supervise them
<b>Physical Neglect</b>	The failure of the person responsible for a child's care to meet the child's physical needs for food, clothing, shelter, etc.
<b>Medical Neglect</b>	The failure of the person responsible for the child's welfare to meet their medical needs
<b>Domestic Violence</b>	Violent or aggressive behavior within the home, typically involving the violent abuse of a spouse or partner
<b>Drug Abuse</b>	Habitual use of drugs not needed for therapeutic purposes, solely to alter one's mood, affect, or state of consciousness, or to affect a body function unnecessarily
<b>Refusal to Accept Parental Responsibility (RAPR)</b>	The failure by the person responsible for a child's care, custody, or welfare to permit the child to return to the child's home without arranging for the necessary care for the child after the child has been absent from the home for any reason, including having been in residential placement or having run away

## APPENDIX D

### Court Closure Reason

<b>Court Closure Reason</b>	<b>Definition</b>
<b>Adopted by Relative</b>	The legal process through which a child joins a relative family, different from their birth parents
<b>Adopted by Non-Relative</b>	The legal process through which a child joins a non-relative family different from their birth parents
<b>Age Out</b>	Happens when a child subject reaches their 18th birthday and leaves foster care
<b>Case Transferred Jurisdiction</b>	A case filed in one jurisdiction is transferred by the court to another jurisdiction
<b>Child Ran Away</b>	Child left placement unauthorized and cannot be located
<b>Death</b>	Child subject of the suit perished
<b>Dismissed from COS</b>	Case was dismissed in the COS phase
<b>Joint Managing Conservator</b>	Two persons are named Joint Permanent Managing Conservators in final order
<b>Non-Suit</b>	Court concludes a case with no findings
<b>Transferred to Family Based Services</b>	DFPS files an emergency or non-emergency removal, and at Adversary hearing, pleads the case to Court Ordered Services or Family Based Services
<b>PMC to Non-Relative</b>	Transfer of Permanent Managing Conservatorship to a non-relative (most often fictive kin)
<b>PMC to Relative</b>	Transfer of Permanent Managing Conservatorship to a relative
<b>Reunification</b>	Return of child to the person(s) they were removed from, or biological parent
<b>Family Preservation</b>	(For COS cases only) Court closed COS case without further intervention.

## APPENDIX E

### Program Closure Reason

<b>Program Closure Reason</b>	<b>Definition</b>
<b>Adopted by Relative</b>	The legal process through which a child joins a relative family, different from their birth parents
<b>Adopted by Non-Relative</b>	The legal process through which a child joins a non-relative family different from their birth parents
<b>Age Out</b>	Happens when a child subject reaches their 18th birthday and leaves foster care
<b>Case Transferred Jurisdiction</b>	A case filed in one jurisdiction is transferred by the court to another jurisdiction
<b>Child Ran Away</b>	Child left placement unauthorized and cannot be located
<b>Death</b>	Child subject of the suit perished
<b>Dismissed from COS</b>	Case was dismissed in the COS phase
<b>Joint Managing Conservator</b>	Two persons are named Joint Permanent Managing Conservators in final order
<b>Non-Suit</b>	Court concludes a case with no findings
<b>Transferred to Family Based Services</b>	DFPS files an emergency or non-emergency removal, and at Adversary hearing, pleads the case to Court Ordered Services or Family Based Services
<b>PMC to Non-Relative</b>	Transfer of Permanent Managing Conservatorship to a non-relative (most often fictive kin)
<b>PMC to Relative</b>	Transfer of Permanent Managing Conservatorship to a relative
<b>Reunification</b>	Return of child to the person(s) they were removed from, or biological parent
<b>CASA Requested Dismissal</b>	CASA sought dismissal from an open case, that continued after CASA's dismissal
<b>Court Dismissed CASA</b>	Court dismissed CASA without request, and the case continued after CASA's dismissal
<b>Family Preservation</b>	(For COS cases only) Court closed COS case without further intervention.

## APPENDIX F

### Final Placement Type

<b>Final Placement Type</b>	<b>Definition</b>
<b>Own Home</b>	The family home the child was originally removed from
<b>Relative</b>	A child-care provider who only provides child care to children related to the provider in the provider's family home
<b>Kinship</b>	A child-care provider who only provides child care to children of people well-known to the provider in the provider's family home
<b>Foster Home</b>	A facility that provides care for not more than six children for 24 hours a day, is used only by a licensed child-placing agency or continuum-of-care residential operation, and meets department standards
<b>Adoptive Home</b>	A child's intended to be permanent family home
<b>GRO/RTC</b>	A child-care facility that provides care for seven or more children for 24 hours a day, including facilities known as residential treatment centers and emergency shelters
<b>Hospital</b>	Inpatient services at a medical or mental health hospital
<b>Age Out</b>	Happens when a child subject reaches their 18th birthday and leaves foster care
<b>Runaway/Homeless</b>	When a child leaves their care facility and their location is unknown
<b>Emergency Shelter</b>	A child-care facility that provides care for seven or more children for 24 hours a day for up to 90 days
<b>Supervised Independent Living</b>	A type of voluntary Extended Foster Care placement where young adults can live on their own, while still getting casework and support services to help them become independent and self-sufficient

<b>Final Placement Type</b>	<b>Definition</b>
<b>Home and Community-Based Services (HCS) Home/Facility</b>	A Medicaid long-term care waiver for persons with intellectual and developmental disabilities, which provides community-based medical and non-medical supports and services over the lifetime of an individual who would otherwise end up in an institution, nursing home, or hospital
<b>TDJJ</b>	Criminal confinement in Texas Department of Criminal Justice / Juvenile Justice

## APPENDIX G

### Activity Types

<b>Activity Type</b>	<b>Definition</b>
<b>Attend Hearing</b>	Preparation for and participation in statutory- or non-statutory court hearings/trial regarding case
<b>Attend Mediation / Settlement Conference</b>	Preparation for and participation in formal or informal mediation regarding case
<b>Case Records Review</b>	Review of case-related documents, CPS' official case file, and/or any pertinent records and information regarding the child
<b>Case Related Meeting: Child/Family</b>	Participation in statutory- or non-statutory meetings relating to child and/or family; including family group conferences, permanency planning meetings, staffings
<b>Case Related Meeting: For Youth 16+</b>	Participation in statutory or non-statutory planning meetings for youth 16+; including circles of support, transition plan meetings
<b>CFE Meeting</b>	Participation in any CFE-related meeting; type the sub-definition* (see below) into the Subject of the Contact Log
<b>CFE Tool Completed</b>	Completion of any CFE-related Tool; type the sub-definition* (see below) into the Subject of the Contact Log
<b>Contact: Child Face-to-Face</b>	In-person contact with child
<b>Contact: Child Other Contact (not Face-to Face)</b>	Any non-in-person contact with child (via virtual, mail, phone, email, text), or completion of a Courtesy CASA visit
<b>Contact: Parent</b>	Contact (via phone, virtually, email, in-person, text) with biological or adoptive parent of the child (if the child was removed from adoptive home)
<b>Contact: CPS/SSCC</b>	Contact (via phone, virtually, email, in-person, text) with CPS and/or SSCC personnel or attorneys
<b>Contact: Other Case Contacts</b>	Contact (via phone, virtually, email, in-person, text) with any entity not otherwise listed (kin/fictive kin, potential caregivers or adoptive family, parent's employers, landlords, etc.)
<b>Contact: Placement</b>	Contact (via phone, virtually, email, in-person, text) with child's placement
<b>Contact: Volunteer and CASA Staff</b>	Contact (via phone, virtually, email, in-person, text) between CASA volunteer and CASA staff
<b>Court Report: Prepare and/or Write</b>	Preparation of CASA written court report and/or oral report to the court



<b>Activity Type</b>	<b>Definition</b>
<b>Crime Victims Compensation Research / Referral / Follow Up</b>	CASA direct research or assistance with CVC, or referral of any case party to local CVC office; follow up on referral
<b>DFPS Hotline Referral</b>	CASA-initiated hotline referral on child(ren)
<b>Educational Advocacy</b>	Activities related to advocacy for child's educational needs (meeting with teacher/counselor, participation in ARD, etc.), review of educational records and assessments, participation in ARDs
<b>Legal Advocacy</b>	Contact (via phone, virtually, email, in-person, text) with attorneys, CAC/Multidisciplinary team, District Attorneys, law enforcement involved in child's case; CASA advocacy / support for youth in juvenile justice process (for youth in DFPS custody with TDJJ case)
<b>Medical Advocacy</b>	Activities related to advocacy for child's medical needs (reviewing Health Passport, meeting with doctor/therapist/ECI provider); advocacy related to parents' medical needs
<b>Safety Advocacy</b>	Activities related to advocacy for child's safety (Utilize assessment tools, document observed safety concerns and make court recommendation(s), conduct safety conversation with the child/caregiver)
<b>Youth 16+ Advocacy</b>	Activities related to advocacy for youth 16+ (research/assistance with obtaining a youth's ID documents, college/trade school/job fair visits, driver's education assistance, transitional living/housing assistance)
<b>Information and Referral</b>	CASA-initiated sharing information or referrals about community resources / supports with the child and/or individuals involved with the child or their care
<b>Non-CFE Family Finding</b>	Search for relatives / connections / family finding and related activities, for programs not participating in CFE
<b>Observe Court Ordered Visitation</b>	Observation of parent-child or sibling visitation

## APPENDIX H

### Synthesized Activity Types

<b>New Activity Type</b>	<b>Previous Activity Type(s)</b>
<b>Attend Hearing</b>	Attend Hearing
<b>Attend Mediation / Settlement Conference</b>	Attend Mediation / Settlement Conference
<b>Case Records Review</b>	Case Records Review
<b>Case Related Meeting: Child/Family</b>	Adoption Staffing, Case Related Meeting: Child/Family, Single Case Planning (SCP), Staffing Meeting, Treatment Plan Conference
<b>Case Related Meeting: For Youth 16+</b>	N/A
<b>CFE Meeting, CFE Tool Completed</b>	CFE
<b>Contact: Child Face-to-Face, Contact: Child Other Contact (not Face-to Face)</b>	Child Contacted
<b>Contact: Parent</b>	Contact: Parent
<b>Contact: CPS/SSCC</b>	Contact: CPS/SSCC, CPS Contacted
<b>Contact: Other Case Contacts</b>	Extended Family Contact, Fictive Kin/Friend, Placement Agency
<b>Contact: Placement</b>	Contact: Placement
<b>Contact: Volunteer and CASA Staff</b>	Contact: Volunteer and CASA Staff, Monthly Case Review, Quarterly Case Review
<b>Court Report: Prepare and/or Write</b>	Preparation of CASA written court report and/or oral report to the court
<b>Crime Victims Compensation Research / Referral / Follow Up</b>	Crime Victims Compensation Research / Referral / Follow Up
<b>DFPS Hotline Referral</b>	N/A
<b>Educational Advocacy</b>	Educational Advocacy
<b>Legal Advocacy</b>	Assistant District Attorney, Attorney for Family Member(s) Contacted, Legal Advocacy, Pre-Court Collaboration
<b>Medical Advocacy</b>	Medical Advocacy, Mental Health
<b>Safety Advocacy</b>	Child Care, Investigative Personnel, Law Enforcement, Personal Advocacy
<b>Youth 16+ Advocacy</b>	Driver's Ed CASA Payment
<b>Information and Referral</b>	Information and Referral
<b>Non-CFE Family Finding</b>	N/A
<b>Observe Court Ordered Visitation</b>	Observe Court Ordered Visitation