

The Growing Toll

Non-Family Residential Care for Youth Linked to Delinquency; Costing 50 Percent More

Executive Summary

The evidence continues to grow that Maryland is placing more and more abused, neglected and delinquent children in non-family, group residential care, and that overuse of group care is endangering public safety, harming children and wasting money. To achieve Maryland's stated desire to end overuse of group care, the State will need to expand evidence-based services that treat children in their own homes and communities.

Introduction

Abused, neglected and delinquent children in Maryland are often removed from their homes for extended periods of time. They are sometimes placed with relatives or in other family-based settings, including foster homes. With increasing frequency, they are placed in group care--non-family-based settings with a large number of other children.¹

New Study Links Group Care, Delinquency

For the first time, researchers have linked group home placement to increased delinquency for abused or neglected children. They found that children placed in group care were arrested at *two-and-a-half times* the rate as comparable children in foster homes. The impact was both immediate and long lasting.²

This link between group care and delinquency adds to the growing list of negative outcomes associated with unnecessary placement in group care. Children remain in out-of-home care for longer periods of time than children in family-based settings. Delinquent youth in group care are more likely to be re-arrested than those served by effective programs in their own communities. This means that children should be in group care only if they cannot be helped in their own homes, with relatives or in family foster homes.

¹ Group care means any placement that is not family based, including group homes, residential treatment centers and state-run facilities.

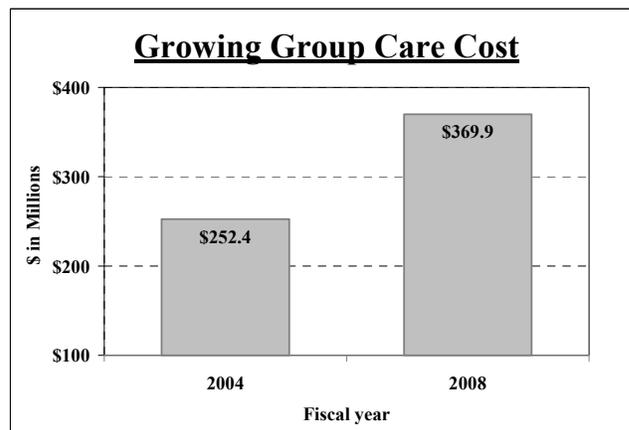
² Joseph P. Ryan *et al*, "Juvenile Delinquency in Child Welfare: Investigating Group Home Effects" (2008).

Analysis: Growing Group Care Financial Cost

Contrary to best practice, Maryland has increasingly relied on group care for abused, neglected and delinquent youth. The percentage of child welfare children in group care has doubled from 14 to 29 percent in 10 years and is several times the level recommended by national experts.

The increased use of group care is costing more and more money. Advocates for Children and Youth has calculated this growing cost using the most recent available caseload and cost data, combining placements for abused, neglected and delinquent children.

Just in the past four years, spending on group care has increased by nearly 50 percent, meaning that the State is spending an extra \$118 million each year. During this same period, spending on children in family-based settings has remained flat.³



³ The analysis combines group care expenditures by the Departments of Juvenile Services (DJS) and Human Resources (DHR). DJS group care expenditures are based on actual data from state budget documents and include contracted residential as well as state-run facilities. DHR group care spending is calculated using caseload data from the Department's monthly management and StateStat reports. Group care costs for FY 2004 are from the *DJS Gap Analysis*, (Dec. 2004). The FY 2008 costs come from Casey Strategic Consulting Group, *Maryland Child Welfare Assessment* (Dec. 2007).



State Seeks To Reduce Group Care

Human Resources Secretary Brenda Donald has set a goal of reducing the number of abused or neglected children in “group homes” from 1,900 down to 1,000. There are an additional 1,000 children in other non-family placements.⁴

Juvenile Services Secretary Donald DeVore wants to serve an additional 129 youth in non-group settings.⁵ This is a conservative estimate, and the Department says that its success depends in large part on raising private funds.⁶

Additional Steps Needed

Only by reducing the *need* for group care can Maryland achieve, and even exceed, the laudable goals identified by the Departments of Human Resources and Juvenile Services. Reducing the need will require expanding evidence-based community practices, including:

Family Team Decision Making: In this collaborative approach, child welfare caseworkers partner with families to help them identify their needs and the best way to address those needs. FTDM has substantially reduced the need to remove children from their homes, increased placements with relatives, and shortened stays in out-of-home placements for those children who are removed. Fewer children entering foster care and remaining there for less time expands the availability of foster homes for children who might otherwise enter or remain in group care.⁷

Support for Foster Parents: Many children have entered group care because of a lack of available foster homes. As Maryland lost thousands of foster homes, the number of children in group care increased. It is essential to do everything possible to retain existing foster parents. Caseworkers play an essential roll by providing the support foster parents need to care for youth, particularly older children and those with special needs. As a result, foster parents remain in the system and can even become strong recruiters of new foster parents.

The Department of Human Resources is taking some important steps to recruit and retain foster parents, including increasing reimbursement rates and restoring child care. However, more strategies are needed to increase substantially the overall number of foster homes.⁸

Multi-Systemic Therapy: In this intervention, youth at risk of removal from the home receive intensive therapy that involves their families and builds a support network to address future needs. MST serves youth who have engaged in delinquent, anti-social, or substance-abusing behaviors. It reduces arrests by up to 70 percent and residential placements by as much as 64 percent.⁹

Functional Family Therapy: This program provides in-home services to youth who are delinquent or at risk of delinquency. Services are similar to those provided by MST but are somewhat less intensive.¹⁰

Multi-Dimensional Treatment Foster Care: This program is available for youth who cannot remain with their parents. One or two children are placed in a very structured and professionally supported foster home while intensive efforts are made to engage the family to which the youth will return.¹¹

Conclusion

Fortunately, these evidence-based community services are not only more effective, but they also cost less than group care. For example, \$8 million for community-based services for delinquent youth will save \$20 million in the very same fiscal year.¹² This means that even in a tight state fiscal situation, Maryland can end overuse of group care for abused, neglected and delinquent children.

⁴ Department of Human Resources, *1000 by 10* (2007).

⁵ Department of Juvenile Services, *DJS Plan To Reduce Out-Of-Home Placement* (2008).

⁶ See Advocates for Children and Youth, *The Real Need* (Feb. 2008).

⁷ See Advocates for Children and Youth, *Family Team Decision Making* (Jan. 2008).

⁸ See Advocates for Children and Youth, *Moving the Child Welfare Reform Train Faster* (Jan. 2008).

⁹ S.W. Henggeler *et al*, Center for the Study and Prevention of Violence, *Multi-Systemic Therapy: Blueprints for Violence Prevention* (1998).

¹⁰ Maryland Disability Law Center, *Evidence-Based Practices for Delinquent Youth* (Jan. 2007).

¹¹ *Id.*

¹² See Advocates for Children and Youth & the Maryland Budget & Tax Policy Institute, *Juvenile Services Budget* (Feb. 2008).