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Neighborhood-Based Foster Care: A Critical Examination of Location-Based Placement Criteria

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Faced with large caseloads and poor outcomes for children, child welfare agencies across the country are developing new strategies for serving vulnerable families. Many of the recent approaches move the locus of services from centralized, distant bureaucracies to local neighborhoods, where families at risk are most likely to reside. Current innovations in part suggest that treatment interventions such as foster care should also be located in children's communities of origin. This article offers a critical examination of the neighborhood approach to foster care placement. Although neighborhood foster care placements have potential benefits for some children, the research reviewed here does not fully support the existence of these benefits for the development and well-being of many children. An evidence-based practice approach that takes into account many factors besides neighborhoods thus is more likely to produce beneficial outcomes for children placed in out-of-home care.

Child welfare agencies are in crisis in many jurisdictions across the United States. Although caseloads have leveled or declined in some of the large states, many agencies continue to report significant problems with worker retention, insufficient caseworker supervision, and unprepared staff (Curry, McCarragher, and Dellmann-Jenkins 2005; Mitchell et al. 2005; Strand and Badger 2005; Ellett and Leighninger 2006). In addition, children's outcomes have been assessed through the Child and Family Services Reviews (mandated by the Adoption and Safe Families Act of 1997, or ASFA; U.S. Public Law 105-89; USDHHS n.d.) and a number of recent state-level consent decrees. This evidence suggests that the system is deeply flawed.

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Crises often spawn opportunities for change, and child welfare administrators in many jurisdictions are responding to features of the current environment by developing practice innovations that might improve outcomes for children and families. The emphasis in many new approaches is on evidence-based practices that connect research findings with program elements (Chaffin and Friedrich 2004; Kessler, Gira, and Poertner 2005). One aspect of the focus on evidence is represented in research showing that a large proportion of families needing preventive child welfare services live in distressed communities (Coulton et al. 1995; Drake and Pandey 1996; Coulton, Korbin, and Su 1999).¹ This has led to a renewed focus on the neighborhood. The new approach shifts the locus of services from centralized, distant bureaucracies to local neighborhoods, where community members can join with social work professionals to address child and family needs.

The Ascendancy of the Neighborhood

Social workers have long been interested in using neighborhoods as the locus for service provision. Jane Addams based the U.S. Settlement House Movement on the notion that supportive services should be readily accessible and close to home (Brown 2004). Early social work initiatives in the African American community also were community focused and community driven (Gordon 1991). The legacy of Addams is still evident in current child welfare initiatives that harness the efforts of multiple agencies and actors to bring voluntary family support services to distressed communities (Hornberger and Briar-Lawson 2005). These services may offer a vital resource to families struggling with parenting and other stressful life events.

Concern about raising children in some of America's neighborhoods is well substantiated. Such concern is founded on ecological theory (Garbarino 1976; Belsky 1980) and grounded in evidence (Coulton et al. 1995). The now-ample accumulated evidence suggests that children touched by the child welfare system come from some of the most distressed neighborhoods in America. According to a study conducted by Joy Ernst (2000, 560), neighborhoods with low "economic resources" (i.e., high rates of poverty, low property values, and housing stress) are associated with all types of child maltreatment. Similarly, neighborhoods with few "social resources" (i.e., disproportionately high rates of female-headed households, women working outside of the home, families moving more than once in a single year, new arrivals to the neighborhood, and low proportions of single-family dwellings) are associated with higher rates of physical and sexual abuse reports, compared with neighborhoods with many social resources. Similar results arise from the work of Gay Young and Tamra Gately (1988), who examine poverty rates and neighborhood mobility. Brett Drake and Shanta Pandey (1996) also find

an association between neighborhood poverty and all forms of maltreatment, but most prominently neglect. Similarly, Claudia Coulton and colleagues (1995) find that maltreatment is associated with neighborhood poverty, mobility, concentrations of female-headed households, and concentrations of children, respectively. Expanding upon Ernst's characterization of social resources, research conducted by Bridget Freisthler (2004) shows that neighborhoods with a high density of alcohol outlets, bars, and police-related drug or alcohol incidents are the same neighborhoods where children are most likely to be maltreated by parents.

If some neighborhoods pose corrosive risks to families, it may be appropriate to align an array of local place-based preventive services. These might include income and employment services, parent support, drug and alcohol treatment, mental health services, and school supports. The notion that place-based services are likely to be more culturally relevant, convenient, and familiar than centralized alternatives suggests that local services provide greater access for parents and, therefore, greater levels of service utilization (Chahine, van Straaten, and Williams-Isom 2005). Assuming the effectiveness of these offerings, one would expect local services to lead to increased economic and social resources in the neighborhoods and decreased child maltreatment.

But enthusiasm is deepening within the child welfare community for the value of neighborhoods. Rather than viewing neighborhoods primarily as settings for family support and preservation services, child welfare professionals also are seeing neighborhoods as appropriate settings for foster care (Mattingly 1998; Lery, Webster, and Chow 2004; Chahine et al. 2005; Annie E. Casey Foundation n.d.). These efforts to consider neighborhoods in placement decisions have precedents. The Adoption Assistance and Child Welfare Act of 1980 (U.S. Public Law 96-272) specifies that agencies are to find "the least restrictive (most family-like setting) and most appropriate setting available and in close proximity to the parents' home, consistent with the best interest and special needs of the child." In philosophy and practice, neighborhoods are now seen as assets to be sheltered and celebrated. The literature on community context now almost exclusively focuses on neighborhood strengths and resources; there is only infrequent mention of community deficits and risks (see, e.g., Hornberger and Briar-Lawson 2005). But many questions arise. Do distressed neighborhoods provide foster children and families with essential services, sufficient strengths, and adequate resources? Is the new paradigm of place-based foster care likely to promote children's safety and well-being? Focusing on neighborhoods as one of the central organizing principles for placement decisions, without sufficient regard for children's best interests, may reconstruct the intent of federal guidelines.

The Benefits of Neighborhoods

Certain benefits may be associated with placing children in their neighborhoods of origin. Academic disruptions can be minimized. Children can maintain continuous peer relationships and will not be burdened by the challenges of developing new friendships. Indeed, there is evidence that children placed in out-of-home care often experience academic disruptions. Penny Johnson and Carol Yoken's (1995) study of 11- to 14-year-olds finds that most changed schools upon entry to out-of-home care. Retrospective studies also document children's experience of and frustration with educational instability (Festinger 1983; Barth 1990; Fanshel, Finch, and Grundy 1990). The few relevant studies suggest that disruptions of children's peer relationships can be stressful. Johnson and Yoken (1995) find that about one-third of children identified friends as those they missed most after entering foster care.

Neighborhood foster care placement may also encourage cultural continuity. Children may absorb and retain the sights and sounds, cultural or religious rites, holiday celebrations, and linguistic traditions of the communities in which they live. In addition, available evidence suggests that parents who visit their children in foster care are more likely to regain custody than those who do not make such visits (Simms and Bolden 1991; Leathers 2002). Of course, parents' visits to their children are facilitated when the children live nearby. Neighborhood placements may likewise enable children in care to access siblings and extended family members.

Is the Neighborhood Right for Everyone?

The possible benefits of neighborhood placement safeguards for children are real and should not be minimized, but questions remain as to whether they are universal advantages that necessarily apply to most children, most of the time. A review of the data on foster children in one state is instructive. Over the past decade, rates of young children's entrance to foster care have been relatively stable in California. In 2005, about 50 percent of all children who entered care in that state were under age 6.² Almost one-quarter of children were infants, 15 percent were toddlers, and 17 percent were preschoolers (Needell et al. 2006*a*).

Arguably, maintenance of family ties is important, regardless of the age of the child, but stability of school settings is not relevant for very young children, and peer relationships become influential developmental constructs in later childhood (Cincotta 2002; Hay, Payne, and Chadwick 2004). An emergent literature suggests that children's ethnic identity development is most prominent and most vulnerable to assault in adolescence (Phinney, Ferguson, and Tate 1997; Helms 2003), but the literature does not yet suggest that very young children use the

complex conceptual processes of adolescents or adults to understand issues of race, ethnicity, community, and culture. Further, children's understanding of these concepts is known to be mediated by the attitudes of key adults in their lives, most notably, by those of parents and other primary caregivers (Garcia Coll and Vazquez Garcia 1995).

Even if further empirical work is needed, it may be fitting at present to question whether school, peers, community, and culture should be considered fundamental principles for optimizing young children's growth and development. And, thus, questions arise as to whether place-based principles should be used as central placement criteria for up to half of the population entering foster care. These neighborhood principles may have significance for some young children, but it may be premature to suggest that location is a critical intervention lever for all such children.

Neighborhood-based placements may be most critical for children with a high likelihood of a rapid return home. These youths, particularly if they are school-age or teens, could benefit from maintaining school and peer connections. Certainly, close ties to family are likely to help minimize the intense feelings associated with this unsettling experience. But not all foster children are reunified with their parents.

The ASFA specifies that families be given 12 months of services prior to a permanency planning hearing. During that hearing, the child's long-term care arrangements are ostensibly decided. In California, on average, 37 percent of children reunify with their parents during the first 12 months of care (Needell et al. 2006*c*). Even in counties with high reunification rates, the rates rarely exceed 50 percent. Extending the data to 4 1/2 years (well after permanency decisions should be made), Barbara Needell and colleagues (2006*b*) find that just over half of all children ever reunify with their birth parents.

Some children are less likely to reunify with parents than others. Probabilities are not the same as eventualities (Munro 2004), but they give an indication of risk that should not be disregarded. A number of studies suggest that parental factors often play a role when children do not return home. Substance-abusing parents are less likely to reunify with children than non-substance-abusing parents (Rzepnicki, Schuerman, and Johnson 1997; Eamon 2002). The chances that parents will be reunified with their children diminish if the children have been previously removed by child protective services (Fraser et al. 1996); if the parents fail to visit while their children are in care (McMurtry and Lie 1992; Leathers 2002; Testa and Slack 2002); or if the parents face serious material hardship (Courtney 1994; Courtney and Wong 1996; Eamon 2002).

Child-related factors are also relevant. Children who have suffered neglect are less likely to be reunified with their parents than those who have suffered other kinds of maltreatment (Courtney 1994; Courtney

and Wong 1996; Davis et al. 1996; Wells and Guo 1999). Chances of reunification are also negatively affected if the child is a minority (McMurtry and Lie 1992; Courtney 1994; Barth 1996; Courtney and Wong 1996; Davis et al. 1996; Berrick et al. 1998; Wells and Guo 1999) or is very young (Courtney 1994; Courtney and Wong 1996; Berrick et al. 1998; Smith 2003).

System-based variables also play a role. Delays in holding jurisdictional-dispositional court hearings decrease the likelihood that children will reunify (D'Andrade 2004). To be sure, recent work by Bridgette Lery, Daniel Webster, and Julian Chow (2004) suggests that distance also affects chances of reunification. In that study, children placed less than 1 mile from their birth home were somewhat more likely to reunify than children placed more than 10 miles from home. Although these last findings are tantalizing, they do not necessarily point to an endorsement of neighborhood-based placements. Indeed, adjacent neighborhoods located in close proximity may be distinctly different in quality and characteristics (Kiel and Zabel 1998). Further, numerous unmeasured family effects, maltreatment severity effects, or effects of other variables, such as those listed previously, might have contributed more substantially to family reunification.

About half of foster children do not return home (Wulczyn 2004; Needell et al. 2006*b*), and research increasingly enables social workers to consider the probabilities of reunification for children with certain characteristics. But it is not clear what role this information plays in making placement decisions, particularly when overriding principles, such as the benefits of neighborhood-based placements, prevail.

If half of children do not reunify, where do they go? As briefly mentioned above, California data suggest that, 4 1/2 years after entry to care, over 50 percent of foster children are reunified, 1–14 percent are transferred to legal guardianship (both kin and nonkin), 2–4 percent emancipate, 14–16 percent are adopted, and 12–13 percent remain in long-term foster care (Needell et al. 2006*b*). The one-quarter of children who are adopted or remain in long-term foster care do not return to their parents. Should the neighborhood be a central placement criteria for these children, or, in selecting foster homes, should other principles be employed that might improve children's development and well-being?

Neighborhoods Matter

Formal and informal resources can be found in every community, and many children in distressed neighborhoods emerge from youth safe, healthy, and prepared for adulthood. But the odds for vulnerable children are not favorable in some neighborhoods. Although parental prac-

tices, income, education, and employment all exert substantial influence on children's development (Furstenberg and Hughes 1997), neighborhoods also have direct and indirect effects on children's well-being. High poverty rates, unemployment rates, rates of welfare receipt, proportions of single-parent families, crime rates, and poor schools affect children's outcomes. More profoundly than those in any other age group, young children (ages 0–5) are affected by the neighborhood in which they live (Brooks-Gunn, Duncan, and Aber 1997).

Although there are benefits for some children who remain in their neighborhood of origin, the hazards are considerable. Children's safety is more likely to be compromised if they live in distressed neighborhoods with high rates of violent crime, drug trafficking, and juvenile delinquency (Taylor et al. 1992; Richters and Martinez 1993; Coulton et al. 1995; Buka et al. 2001). Educational opportunities may also be jeopardized as poor children are more likely than their counterparts in other socioeconomic groups to attend poor schools (Ferguson and Ladd 1996; Lee and Burkam 2002). Health risks are also high for children raised in distressed neighborhoods. High rates of acute and chronic disease are found in challenged communities, as environmental toxins and other forces affect children's health (Shonkoff and Phillips 2000; Epstein 2003). Children's mental health is affected by exposure to community violence (Martinez and Richters 1993; Singer et al. 1995). Adolescents' and young adults' job prospects are significantly diminished in distressed communities, as the spatial mismatch between economically viable jobs and poor communities has been recognized for decades (Wilson 1987).

Literature about each developmental period in childhood suggests that the effects of neighborhood are strongest on infants, toddlers, and preschoolers, even though their understanding of the neighborhood in which they live is uncertain at best. Neighborhoods are known to exert an influence on young children's cognitive development and academic preparedness (Chase-Lansdale et al. 1997; Vartanian and Buck 2005). Pathways to poor outcomes may include lack of parental access to supportive institutions, lack of access or exposure to outside activities and learning opportunities, and poor-quality day care (Brooks-Gunn, Duncan, Leventhal, et al. 1997). Young children's behavior problems may be exacerbated in distressed neighborhoods, regardless of their parents' socioeconomic status (Kohen et al. 2002).

In part because the literature base is thin, the evidence is less clear for school-age children. However, it appears that, as is also true with young children, neighborhoods exert influences primarily on the academic success of school-age children (Ellen and Turner 1997). Children's affiliations with "deviant peers" may also be aggravated by problematic neighborhoods (Brody et al. 2001, 1231). Negative effects are

probably due to children's exposure to poor school environments, the increasing influence of peers over parents (Ellen and Turner 1997), and declines in parents' nurturant caregiving (Brody et al. 2001).

Among the age groups of youth, adolescents have been studied most heavily. This may be largely due to the assumption that adolescents' mobility and access to peer networks leads to direct connections to the neighborhood. Neighborhoods appear to affect development in four domains: educational achievement, employment opportunities for youth transitioning to adulthood, sexual activity and pregnancy, and the likelihood of delinquent behavior (for a review, see Levanthal and Brooks-Gunn 2000).

Researchers have not yet examined which youth are most and least affected by the neighborhood. However, it seems likely that the children who are least affected are the most resilient. These also may be children from the strongest, most nurturing families; parents in these families may use their social capital to make up for the poor schools and depleted environments. They may also be extremely vigilant about supervision and safety. But the average foster child may not be resilient and strong.³ The child's birth parents may not be supportive or nurturing.⁴ To be sure, resourceful foster parents might be able to buffer some of the effects of neighborhoods on these very vulnerable children.

Moving to a Better Place

If distressed neighborhoods have noxious qualities, children who reside in them may benefit from moving. Although moving is accompanied by initial transitions that can be stressful, children may eventually derive worthwhile outcomes from moving out of distressed neighborhoods and into better ones. Studies to test the effects of high-poverty neighborhoods include the Gatreaux program (Rosenbaum and Popkin 1991), the Housing Opportunities for People Everywhere (HOPE VI) program (Popkin, Eiseman, and Cove 2004), and, most rigorously, the Moving to Opportunity (MTO) study conducted in New York, Boston, Baltimore, Chicago, and Los Angeles (for a review, see Goering and Feins 2003). Each study shows that benefits accrue to children who move. In the MTO research, low-income families volunteered to participate in the study in hopes that they would be selected to move. According to the study results, their principal reason for volunteering was to offer their children a greater degree of safety and security than that available in their neighborhoods of origin (Rosenbaum 2001). In the MTO study by Emily Rosenbaum (2001), families were randomly assigned to one of three housing conditions. Some were offered vouchers and social service assistance to locate housing in low-poverty neighborhoods. Others were offered vouchers only, and the control group remained in its high-poverty neighborhoods of origin. Results of the effects of moving

are mixed. Nevertheless, the results do suggest that children who move from high-poverty to low-poverty neighborhoods may experience positive change in a number of areas. Although results vary somewhat depending on the city, children who so move are more likely to experience increased safety, reduced victimization, fewer injuries, better health (Del Conte and Kling 2001), and improved academic performance (Ludwig, Duncan, and Ladd 2001), compared with children who remain in high-poverty neighborhoods. Mothers who move may enhance their parenting skills. Their well-being, physical health, and mental health may also improve. They may be less harsh with their children and may employ more structured child-rearing strategies than parents who do not move (Levanthal and Brooks-Gunn 2001).

If moving to better neighborhoods can have beneficial effects for low-income children in general, some foster children also may be advantaged by moving out of high-poverty neighborhoods. Studies of foster youth who move suggest that the initial transition may be difficult but that changes to better schools can be favorable. In studies of children's perspectives on their foster care experience, many children describe their new school in positive terms. In one study, about half of children who moved say that they perceive the new school as better than the school they attended when living with their birth family (Johnson and Yoken 1995). In another (Wilson 1996), about three-quarters of children indicate a positive experience in their new school. In a nationally representative study of children touched by the child welfare system, over four-fifths of children over age 6 report moving to a new neighborhood as a result of placement into care. Over half indicate that the new neighborhood is "better" than their neighborhood of origin (Chapman et al. 2004, 297).

In addition to moving children out of their neighborhoods, some birth parents might welcome the opportunity to move as part of a reunification service plan. Particularly for drug-involved parents, old neighborhoods may include substance-involved friends and family members, as well as other geographic cues that hinder rather than help in recovery. Some evidence suggests that changes in adults' social life, activities, and residence may help to resolve and maintain reductions in addictive behaviors (for a review, see Blomqvist 1996). Successful recovery may require providing parents with links to housing agencies and services to help them move away from the communities that contribute to their addiction and to the maltreatment of their children.

Conclusion

For decades, social workers used the family's religious affiliation as the primary placement criterion for children in need of care (Bernstein 2001). Later, race predominated as a fundamental placement principle

(Bernstein 2001; Roberts 2002). Today, placements based on family relations are codified in law (ASFA). But family members are not always available, and the evidence for turning to the neighborhood as the next best placement criterion is dubious. Indeed, social workers should assess whether the neighborhood will minimize the likelihood of harm relative to other risks the child has and is likely to experience. They should also weigh the importance of the neighborhood in relation to other factors, including the child's age and likelihood of reunification.

An evidence-based approach harnesses what is known about how to promote child well-being. This research suggests that the odds for improving child well-being are increased when children are exposed to positive parenting practices, particularly when living with caregivers who use their social capital to the children's advantage (Furstenberg et al. 1998). In fact, the literature on neighborhood effects suggests that, although environmental context may play a role in children's outcomes, it only explains a relatively small proportion of overall effects. Instead, children's caregivers play a fundamental and persistent role in predicting future outcomes, whether those caregivers are birth parents, adoptive parents, or foster parents (Shonkoff and Phillips 2000). If we expect child welfare systems reform to have an appreciable effect on children's outcomes, we should be focused less on where children are placed and more on those with whom they are placed. Real foster care reform would emphasize high-quality caregiving as the essential building block for child and youth development. For children who must remain in distressed communities, agency administrators and social workers should be concerned about recruiting caregivers who will exercise an array of parenting strategies likely to promote safety and well-being (for a review, see Burton and Jarrett 2000).

Children entering foster care share neither a uniform nor a linear path through care. In fact, child welfare research in recent years highlights the heterogeneity of the foster care population and the population's dynamic path through the foster care system (Barth et al. 1994). The data tell a story that child welfare practitioners have always known: some children return home; some children take up new homes and new families. Because of this diversity, caution should be used in applying a single principle of practice with all families. Neighborhood-based foster care, although highly appropriate for older children who are likely to return home, may confer significant disadvantage on those younger children for whom adoption or long-term foster care may be the eventual outcome. For too long social workers have looked for a bed to place children needing care. Neighborhood-based placement criteria continue to focus on the place where children will sleep rather than on the family with which the child will live.

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Notes

1. There is a large body of literature on the effects of neighborhoods on child development and well-being. Some of this literature refers to "high-risk neighborhoods" (e.g., Garbarino and Sherman 1980, 189). More recent research has turned to utilize the term "distressed neighborhoods" to connote those communities that might pose threats to child and family well-being (e.g., Ellen and Turner 1997, 835). Distressed neighborhoods may be characterized differently by researchers, but many share the following characteristics as described by Ellen and Turner (1997, 848): "high poverty rates, the absence of affluent or well-educated neighbors, high unemployment, high rates of welfare reciprocity, and the absence of two-parent families."
2. Data are for first entries to care and include only those children who remained in care for 5 days or longer.
3. For a review of the health, mental health, and behavioral challenges of children and youth in foster care, see Dale, Kendall, and Schultz (1999).
4. For a review of the characteristics associated with birth parents, see Frame, Berrick, and Brodowski (2000).