

# Family preservation, family reunification and related issues

## Recent news

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*This paper sets the context for a review of family preservation and family reunification research by briefly noting the national and international crisis that currently surrounds foster care. It then presents the recent family preservation and family reunification research from the US and Australia. Some of this material is drawn from the book by Maluccio, Ainsworth and Thoburn (2000), 'Child welfare outcome research in the United States, the United Kingdom and Australia'. The decision to focus on the US material stems from the fact that these terms originated there in the 1980s and this is where the major research studies are to be found. The final comments focus on the re-emphasis on permanency planning and adoption, at least in New South Wales (NSW), and the implications of this for family preservation and reunification services.*

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As family preservation services have focused primarily on 'preventing out-of-home placements' and family reunification services are about 'returning children from out-of-home care to parental care', they are inextricably linked to foster care (non-relative foster care, kinship care, group care). Regrettably, both nationally and internationally foster care is in crisis (Curtis, Dale & Kendall, 1999; Roche, 2000; Community Services Commission, 2000; Gunn & Walker, 2001). What has brought foster care to this point is the rise in the number of children being admitted to care (Pecora et al, 2001; Gunn & Walker, 2001). Accompanying this rise is the expectation that the most difficult children, especially adolescents with mental health, substance abuse, delinquent and other toxic behaviour problems can be served by foster care. Such expectations inevitably accentuate the difficulty of recruiting and retaining foster carers (Rindfleisch, Bean & Denby, 1998; Rhodes, Orme & Buehler, 2001; Vollard, Baxter & Da Costa, 1993). Put simply foster care services are faced with an insatiable demand for placements and a population of children and adolescents whose behaviours may well make delivering a 'stable alternative placement to parental care' too difficult. Research evidence about multiple placements and the breakdown of placement (Webster, Barth & Needell, 2000; Barber, Delfabbro & Cooper, 2000; Gunn & Walker, 2001) certainly suggests that this is the 'promise' that foster care is now unable to deliver. At least this is the case in many contexts.

It is against this background that family preservation and family reunification

services must be examined. While there is independent justification based on sound research evidence about the importance of family and socio-cultural ties for children in out-of-home care (Ainsworth & Maluccio, 1998a; Ainsworth & Maluccio, 1998b), the imperative for these services is strongly associated with the foster care crisis. If foster care places are few and hard to find, two things are essential: you try to reduce the number of children coming into care, and you try to get children out of care and return them to their families as quickly as possible. The policy of encouraging kinship care also fits comfortably with the notion of family preservation and family reunification provided you broaden your definition of who constitutes family, and that obviously has considerable utility for Aboriginal groups (Ainsworth & Maluccio, 1998b; Geen, 2000).

These policy imperatives are nicely illustrated in Western Australia by the research project 'Family reunification and drug use by parents' currently under way for the Care for Children Advisory Committee. Here the research emphasis is on finding safe ways to return children to these parents as an inability to do so may lead to the potentially insoluble problem of finding long-term placements for these children.

## FAMILY PRESERVATION SERVICES

In the US and in Australia the term family preservation covers an array of programs with diverse philosophies, types and intensity of services, and target groups. Services range from highly specialised, time-limited and

intensive programs like 'Homebuilders' (Bath & Haapala, 1993) to generic family support programs. Moreover, the US outcome research does not always identify the specific nature of the services provided to families. In Pecora's (1994) analysis of a range of studies involving primarily intensive services, he reports mixed findings in regard to placement prevention rates, ranging from 0 to 40 per cent. In fact, in most of the studies he cites there were no significant differences in outcomes between the treatment groups – that is, those who received intensive family preservation services (IFPS), and the control groups or those who received a regular agency service (RAS).

Adding further to this uncertainty about the outcome of family preservation services is an extensive study that involved a state wide and multi-faceted evaluation of the Families First initiative, a placement prevention program focusing on families officially reported for child abuse and neglect throughout Illinois (Schuerman, Rzepnicki & Littell, 1994). The program was administered by the state, with services provided on a contractual basis by 60 private agencies to 6,522 families.

The study design involved:

1. collection of descriptive data on all Families First cases and programs;
2. an experiment testing program effectiveness, with 995 families randomly assigned to a Families First group receiving intensive services and 569 families assigned to a control group receiving regular agency services;
3. a longitudinal survey of parents in a representative sample of cases and programs, to assess the impact on child and family functioning.

The findings indicate that family preservation services did not produce a significant effect on the risk of placement, subsequent maltreatment, child and family functioning, or case closure. In short, although the authors conclude that the message 'is one of caution but not despair' (p. 229), the Families First program did not achieve the objective of prevention of placement in out-of-home care.

Not surprisingly given its complexity, this study can be criticised on methodological grounds. For example, the experimental variable (the nature of services) was inadequately defined and operationalised and within broad parameters each agency was allowed to define what constituted family preservation services. As a result, while the experiment was rigorously conducted,

the large and interrelated differences among sites, programs and families create problems in assessing service effectiveness for sub populations, to such an extent that it is unclear what was being tested (Nelson, 1996, p. 118).

In addition, there is a question about the extent to which 'family preservation' was actually being evaluated as many of the hallmarks of family preservation services, such as time-limited service and the mutual setting of goals by workers and families, were not observed (Nelson, 1996).

Because of these negative evaluations, some researchers have suggested that outcome criteria beyond placement prevention should be incorporated into family preservation studies, including improvements in child, parent and family functioning (Pecora, 1994; Rzepnicki, 1994). In that respect a study by Meezan and McCroskey (1996) and McCroskey and Meezan (1997) is useful. They examined the outcomes of family preservation services provided by two agencies for abusive and neglectful families in Los Angeles. This study, conducted between 1989 and 1994, focused on changes in family functioning during the three-month service period and one year after case closing.

The key questions were (Meezan & McCroskey, 1996, pp 10-11):

1. Is there a change in the functioning of abusive/neglectful families over time, and can such changes be attributed to the programs of the two agencies under study?
2. What factors are associated with positive outcomes for families and children participating in the experimental programs?
3. Do ratings of family functioning differ when practitioners rather than

research interviewers collect information?

4. To what extent is participation in the experimental programs associated with decreased need for other child welfare services, including out-of-home placement?

Families were referred to this research project by the county public welfare agency, on the basis of the caseworkers' judgment of the need for services rather than the more typical criterion of 'child at imminent risk of placement'. A total of 240 families were randomly assigned to either a group receiving IFPS from two private, non-profit agencies or a comparison group receiving regular (public) agency services, the latter consisting of limited contacts between caseworkers and family members. Data was collected primarily by means of an ecologically oriented and practice based Family Assessment Form covering most areas of child and family functioning. In addition, they used standardised instruments including an inventory of parent mental health, the Achenbach Child Behaviour Checklist (for children age 6 or over), the Home Observation for Measurement of the Environment (for children under age 6), and a caregiver satisfaction survey (Meezan & McCroskey, 1996).

Caseworkers and families reported small but significant improvements in family functioning for the IFPS group families, but not for the comparison RAS group families. The improvements occurred during the year after completion of the service, specifically in the area of living conditions and financial interactions. Parents also noted more concrete gains such as improved housing arrangements.

While these results are more positive, the authors themselves point out (Meezan & McCroskey, 1996, p. 15) the research design has limitations that mean that:

1. the absolute effectiveness of the service cannot be ascertained because they are not compared with a 'no service' condition;
2. the impact of the treatment may be underestimated, since comparisons are to a 'regularly' served rather than an unserved group;

3. the research questions are focused on comparative rather than absolute effectiveness.

In addition to these two large-scale studies there have also been various investigations of other brief IFPS programs. Blythe, Selley and Jayaratne (1994) examined twelve such studies, including program evaluation efforts as well as studies that used quasi-experimental and experimental designs. Their conclusions are more positive. They indicate, 'that with some notable exceptions, the 12 studies as a whole provide some support for the effectiveness of family preservation service' (p. 223). However, while positive, they identify a number of concerns that echo the limitation of both the Illinois and Los Angeles studies that are common to most evaluations of IFPS. In summary these are:

- that subjects included in some studies may not have been at 'imminent risk' of out-of-home placement;
- the unclear nature of the intervention provided to experimental and control groups;
- an inability to make comparisons with other studies, due to lack of uniformity in relation to definition of such variables as child placement, intensity and nature of services, and variation in follow up intervals.

In contrast to these between-program studies reviewed so far, there is clearer evidence of positive outcomes when within-program evaluations of IFPS services are made. For example, in an earlier study Bath and Haapala (1993) reported differential outcomes in an examination of 530 families from the Homebuilders management information system database for the period 1985-1988. The families were classified into three maltreatment groups based on the reason for referral, whether because of physical abuse, neglect, and mixed physical abuse and neglect. The results indicated that the majority of the 854 children, ranging in age from 7.1 to 10.1 years, from these families avoided placement. Thus,

...(at) 12 months post intervention the placement rate was 13.9%, which means that 86.1% of all the children remained with their family ... using the placement

of the oldest child at-risk in each family as the basis for calculations the rates are 11.5% for the physical abuse group, 20.9% for the neglect group, and 31.0% for the mixed physical abuse and neglect group, with an overall placement rate of 17.1% (Bath & Haapala, 1993, p. 220).

This evidence shows that this particular family preservation program is most successful with families referred because of physical abuse only. The majority of children in neglecting families and those with a history of serial maltreatment were also able to avoid placement, but the risk of failure was considerably greater for them than that for physically abused children. The age of the children in this sample was 7.1 to 10.1 years and as a consequence it is important to note that this outcome may not be good for either younger or older children, particularly adolescents.

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In a more recent, one group, pre-test, post-test and one year follow-up study of 53 families from a large metropolitan child protection agency who were served by an IFPS Homebuilder type program, Berry, Cash and Brook (2000) confirm these results. They indicate that 'child neglect continues to show itself to be less remediated by IFPS, than its counterpart, physical abuse' (p. 202). Based on the results of this study this agency now offers two types of service. The first is a short-term intensive approach for families with acute conditions, while the second is a longer-term but still intensive model for more chronic conditions such as child neglect.

By comparison to the US studies, the Australian evaluations of services described as family preservation services, although not necessarily conforming to the established models (Campbell, 1994; University of Melbourne, 1993; Voigt & Tregear, 1996), have been small scale and limited in terms of methodological sophistication. A case study approach has been used and there has been an attempt to describe different models of family preservation or family reunification (Campbell, 1997; Jackson, 1996). Jackson (1996) describes two such models auspiced by the Canterbury Family Centre in Melbourne:

1. a Reconnections Program, in which the child is placed in a residential setting while the family is provided with home-based reunification services, and
2. a Family Admissions Program, in which the family is placed in a residential setting and receives services with the aim of reunification and/or placement prevention.

Descriptive data shows that, during the first two years of each program, over half of the families were successfully reunited. As yet a follow-up study of these families to examine the durability of this outcome has not been published.

Given the diversity of these research results Berry (1997) comments that programs such as family preservation must become more 'mature' before their effectiveness can be adequately tested. To reiterate what others have said, specific components need to be clearly delineated, tested, and refined before these programs may be replicated and compared to one another in a systematic fashion. It is only when:

a program is relatively certain of performing not only consistent but also quality operations, an evaluation of whether these operations affect clients in the theoretically expected manner is appropriate, *but not before this time* (italics added) (Berry, 1997, p.160).

Unfortunately, these conditions do not appear to have been met prior to many of the evaluations reported here. Possibly, as a consequence of this, the US and Australian evaluations of family preservation services do not provide sufficient evidence that they are

any more, or less, effective than other forms of family work. The case is not proven.

## MEASUREMENT ISSUES

On a different note, a recent study involving a small purposive sample of 31 families served by a family preservation program reported that consumers and caseworkers were satisfied with the outcome of the service (Walton & Dodini, 1999). The study also reported that a positive therapeutic relationship between the worker and client family, along with skill training and concrete services 'contributed most to the success of the program' (p. 3). In that regard the Kapp and Vela (1999) review of a large number of instruments used to measure satisfaction that may be useful to family preservation services is timely. Although it has to be said firmly that measures of client-worker satisfaction should not be confused with measures of effectiveness.

Of similar importance is the development by Bickman and Doucette (2000) of a 'therapeutic alliance' measurement scale. Clearly, given the Walton and Dodini (1999) findings that the alliance between worker and client family was an important factor in effecting change, the capacity to quantify this alliance would be valuable. In this instance, the therapeutic alliance scale assesses the emotional bond between the client and the caseworker, agreement on therapeutic tasks, agreement on goals of the intervention, as well as the perceived openness/truthfulness of the caseworker-client relationship. Thus the scale assesses the process of treatment or service and provides a way of examining the relationship between the service process and service outcomes. Currently, this scale is being trialed by the Casey Foundation in their foster care services. If adapted this scale may have the potential to clarify the contribution of the elusive caseworker-client family relationship to the success, or otherwise, of family preservation programs.

## A FINAL CAUTION

Finally, there is some information about family preservation services obtained not from a research study, but from the US Department of Health and

Human Services, Administration for Children and Families database ([www.acf.dhhs.gov](http://www.acf.dhhs.gov)) that, while difficult to interpret, is worth having. In 1998 in the US there was a total of nearly 3 million notifications of child abuse and neglect cases to the relevant state child protection services. Substantiations for the same year were 903,000 or 30.1% of the notifications. There were also in the same year 1,100 child deaths or 0.12% of substantiations. While not all families where a child died were known to the child protection services, a significant number were known to these agencies. In almost a fifth of the cases (18.7%) where a fatality occurred, the family had received family preservation services in the 5 years prior to the child's death.

The question is, what should we make of this data? Remember, this is an unusual sample. This is a group of families already known to the child protection services and it is not unreasonable to assume that children left with these families were in increased danger of harm, indeed death. Apart from the fatality statistic, we do not know about the length and type of family preservation service these families received, or even if they completed the planned service or received other on going services. Regardless of this, these figures are a reminder of the considerable care that is needed when 'referring families to FPS services' rather than deciding to advocate for the removal of a child. They are also a reminder of the 'risk factor' that is inherent in deciding to refer to family preservation services – a 1 in 5 chance of a child death across a 5 year time period. The question this raises and one which should be exercising the minds of policy makers is, for how long should we expect a single episode of time-limited intensive family preservation services to be effective before further services are needed? One year? Two years? Five years, or forever?

## FAMILY REUNIFICATION

The family reunification research in the US has recently been summarised by Thomlison, Maluccio and Wright (1996) and Maluccio (1999) with a focus on studies that examine patterns of exit from care, follow-up services

and supports, parent-child visiting, recidivism and re-entry of children into care, and the relationship between a child's psychosocial functioning and reunification outcomes. Their findings reflect the following themes (Thomlison, Maluccio & Wright, 1996, pp. 129-130).

- Reunification rates vary from 13% to 90%, and re-entry rates from 10% to 33% are reported for children in both short and long term out-of-home care.
- Factors affecting exit from care are complex, indicating the importance of targeting interventions on the basis of the different types of exits that children experience.
- Intensive and brief family-centred services positively affect reunification rates.
- Children are more likely to be reunified when parental visits to their out-of-home placement at the level recommended by the courts occur.
- When low levels of both parenting skill and social supports are present, children are most likely to experience re-entry into foster care within one year of discharge.
- Children with behavioural or emotional problems are half as likely to be reunited as children without these problems.

As reflected in the studies reviewed, central to the success of family reunification services and the avoidance of further abuse and neglect is the provision of services and supports to the birth family before and after a child's discharge from care (Festinger, 1994; 1996). Attempts to address deficits in parenting practices are especially crucial, as confirmed by a research study of 210 children in New York who exited from foster care, and those who re-entered following failed family reunification efforts. This study found that the key predictors of a child's return to care were the parents' limited parenting skills, insufficient knowledge of child development, poor behaviour management skills, and lack of support from family, friends and community (Festinger, 1994, 1996).

A somewhat different Californian study of re-entry to out-of-home care is of a random sample of 88 infants under the age of one year (Frame, Berrick & Brodowski, 2000). These children first entered care between 1990 and 1992 and had experienced a second spell of out-of-home care by 1996. Using a comprehensive set of variables that covered case and service characteristics as well as child, parent and family characteristics, and careful statistical analysis, these authors developed two models of re-entry to out-of-home care. Model 1 contains three variables as predictors of re-entry – maternal criminal history, child's age at placement and type of placement (kin or non-kin) prior to reunification. Children of mothers who had a criminal history by comparison to those where criminality was not present were about four times more likely to re-enter care. Children who were less than one month old (0-30 days) at the time of their initial placement in care (n=40) were nearly three times as likely to re-enter care as children aged 2 to 12 months (n=48); those placed with kin prior to reunification (n=26) were about 80% less likely to re-enter care than those whose placement was with non-kin (n=62). Model 2 substitutes maternal substance abuse for maternal criminal history. In this model the odds ratios for re-entry to care associated with child age and placement type do not significantly change. On the other hand, maternal substance abuse, as with criminal history, is associated with a manifold increase in the likelihood of a child's re-entry to care compared to situations where substance abuse is absent (Frame, Berrick & Brodowski, 2000). Somewhat surprisingly, re-entry in this sample was not influenced by type of maltreatment, history of domestic violence, parental visiting pattern, the age of the mother, race, family size, or gender of the child.

As with most aspects of child welfare services, there are gaps in the research on family reunification, especially in relation to the need to identify effective practice strategies and promote services that lead to positive outcomes. Given the predictors of a child's return to care identified by Festinger (1994; 1996) and by Frame, Berrick and Brodowski (2000), some of the questions research needs to address are as identified earlier

by Thomlison, Maluccio and Wright (1996, pp. 133):

- For what population of children or youth does family reunification work best?
- Are there more or fewer benefits in family reunification for some children at different points in their lives?
- What are the critical factors that promote family connections and the effectiveness of reunification? For example, changes in family circumstances, attitude of family members and/or practitioners, types of out-of-home care visitation pattern.
- What are the most effective strategies for specific populations (eg, race, ethnicity, younger-older children, neglected, sexually abused and others) that should be utilized by practitioners?
- What intensity and duration of services are needed to produce positive outcomes?
- What role(s) can foster parents play in reunification? Is there a continuing supportive or other role for foster parents after reunification?
- What services are required for children and families following reunification?

Unfortunately, there is an absence of formal Australian studies of family reunification. This is in spite of the fact that there is overwhelming evidence that most children placed in out-of-home care are eventually reunited with their families (Department of Community Services, 2000; Department of Family and Children's Services, 2000). Some brief data about reunification rates can be obtained from the evaluations of Australian family preservation services (Campbell, 1994; University of Melbourne, 1993; Voigt & Tregear, 1996). However, these evaluations were not designed to identify the factors which contribute to the success, or otherwise, of family reunification.

## DIVERSION OR NEW DIRECTION?

Just as we appeared to have reached the point where research and evaluation studies might influence future service developments, a new diversion or development is occurring. In NSW this is heralded by an attempt by the Department of Community Services (DoCS) to revitalise permanency planning as an overarching approach to service planning and a renewed emphasis on adoption (DoCS, 2001). This development is not based on research or evaluation studies of service effectiveness. Rather, it is a hurriedly formed political response to an increase in the number of children entering care and the acknowledged crisis in foster care (Community Services Commission, 2000; Gunn & Walker, 2001).

The Department's paper (DoCS, 2001) that details the proposals contained in the Children and Young Persons (Care and Protection) Amendment (Permanency Planning) Bill 2000 provides interesting reading. One of the contentions in the paper is that child care and protection agencies, through the emphasis on family preservation and family reunification, have in recent years allowed parental rights to take priority. This is stated in spite of the fact that in NSW recent child protection legislation (Children and Young Person's (Care and Protection) Act 1998) has broadened the basis for reporting, and evidence that suspected child abuse and neglect reports are running at record levels, as is the number of children being taken into care (Association of Children's Welfare Agencies, 2001; Gunn & Walker, 2001). The paper can be read as implying that notions of family preservation and family reunification only reflect parental rights. This is both curious and false. Worse still it creates a false dichotomy between parental rights and children's rights. Nevertheless, this false dichotomy underpins the argument for legislative amendments to promote permanency planning and to revise the adoptions process to make it easier for children from foster care to be adopted. It also needs to be noted that if this false dichotomy gains credence, it has the potential to undercut family preservation and family reunification efforts in the future, since

they risk being presented simply as a manifestation of parental rights – not children's rights. This may return us to an earlier era in child welfare when, if a parent proved to be unable to care for their child, the child was removed and given permanently to another more deserving adult (Fox Harding, 1991). Not surprisingly, it was the children of poor parents who bore the brunt of that approach to child welfare and this may well be the same again.

The new emphasis on adoption is very evident in the US and Britain. Earlier in this paper, it was suggested that when foster care places are hard to find, it is essential to reduce the number of children coming into care, and return those in care to their families or kin as quickly as possible. The third option that has been somewhat out of favour is to increase the rate of adoption of children from the child welfare system.

In the US in 1999, 46,000 children were legally adopted out of foster care. This was a 28% increase over the preceding year (Roche, 2001). The US Adoption and Safe Families Act, 1997, that hastens the termination of parental rights, has contributed to this change, as have federal adoption bonuses of \$4,000 per child and \$6,000 per special needs child for each child adopted from foster care over the number of adoptions over the preceding year. In 2000, \$20m in bonuses was paid to 42 states under this arrangement.

Similarly, in Britain there is a re-emphasis on children being adopted from foster care. Following the intervention of the Prime Minister there is a commitment of £66.4m over three years, 2000-2002, to support this effort. A White Paper, 'Adoption a new approach', has been published and a new Adoption and Children Bill has had its first reading in Parliament. The target is an increase of 40% per annum in the number of adoptions from foster care (BAAF, 2000). Supporting these moves in some measure is a British Agencies for Adoption and Fostering (BAAF) study of 1800 of the 2000 adoptions from care in 1998-1999. This study shows that 24% of these adoptions were of children aged less than 1 year compared to only 20% who were over 5 years of age (BAAF, 2000). Moreover, 25% of these children had started to reside as foster children

with their adopters before the age of 1 year. Only 25% of the children adopted were children aged 5 years or over at the time of the first foster care placement. By comparison, these children were as a group younger and had spent a shorter period in care prior to adoption than similar children in 1996.

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*Indeed, if it is difficult to recruit foster parents for this group of adolescents, why should it be any easier to recruit adopters?*

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The study also showed that 58% of the birth parents whose children were adopted did not agree to the plan and in almost all cases the plan was contested in court. Moreover, the majority of birth parents were single and not in paid employment. In stark contrast to the birth parents, 95% of the adopters were married couples and single people adopted only 5% of children. All except 4 of the single adopters were female. This seems to confirm that the new approach to adoption may impact disproportionately on the children of poor parents as evident in an earlier era.

The question is, will this type of policy initiative or something comparable gain ground in Australia? It already has in New South Wales and the expectation is that the other states and territories will follow suit. But before we hurriedly welcome this development and see adoption from foster care as the new panacea, let us stop and think. What have we learnt from the past experience of the forcible removal of Aboriginal children from their parents, or the forced migration of children from Britain to distant places or from women given no option but to give up a child for adoption (Howe, 1991; Gill, 1997; Human Rights and Equal Opportunities Commission, 1997; NSW Legislative Council)? Will we hear the wailing of another stolen generation, or of a group of distressed adults, mainly women, who forever wonder about the child that was taken from them, or of a group of adults who were adopted as children

against their parents wishes now grieving this loss? Remember, in the BAAF study 58% of the birth parents did not agree to the adoption plan and in almost all cases the plan was contested in court.

Yet, no one can be against family preservation, family reunification or kinship care, or against the re-emphasis on adoption, if it provides a child with a permanent and stable place in which to grow to healthy adulthood. Unfortunately, it is too easy to see file entries with the listed service options – family preservation, family reunification, kinship care, and now, early adoption as the new choice. Adoption as a clear option – definitely, yes. As the option that becomes, by default, the first and only option because it seems to solve a problem – no. Let's be careful!

Finally, there is the question as to whether those who are proposing a stronger emphasis on adoption are ignoring the very issues that have contributed to the foster care crisis. The fact is that the children most likely to be adopted from foster care, as the BAAF study shows, are younger children (BAAF, 2000). Yet, it is older children, especially adolescents with mental health, substance abuse, delinquent and other toxic behaviours, who represent the real challenge and who are at the centre of the foster care crisis. Finding suitable adults willing to take on the very difficult task of adoption, other than for young children, and certainly for these difficult adolescents, is something that the current proponents of permanency planning and adoption may have underestimated. Indeed, if it is difficult to recruit foster parents for this group of adolescents, why should it be any easier to recruit adopters? Under the present circumstances, while welcome, the renewed emphasis on adoption, because it is not the product of careful research and evaluation studies, may be the wrong solution to the wrong problem! □

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