

Do better at identifying how to help abused and neglected children heal.



Whether we as a state get it right for a child, from the moment he or she comes into the child welfare system, helps determine a lot of what happens next—both during that kid's time in foster care and later in life.

When child victims of abuse or neglect get appropriate services and a suitable placement right at the beginning of their time in the child welfare system, it has a proven, positive effect on their success, both during and after their time in the system. First, though, the people working with that child need good information to make the right decisions about what's best, and, for that to happen, they need accurate assessments. Child Protective Services (CPS) uses psychological, developmental, neuropsychological, and psychiatric assessments now to help judges, caseworkers, and providers determine what services children need, what medications to prescribe them, and where to place kids removed from their homes. What's missing is standardized, quality-control measures and accountability in these assessments.

What to Know:

- **Identifying developmental and behavioral challenges in children and providing them with early interventions and services is vitally**



important, according to professional organizations like the American Academy of Pediatrics (AAP), the Child Welfare League of America, and the American Academy of Child and Adolescent Psychiatry (AACAP).¹

- **Trauma inherent in entering the child welfare system affects many parts of a child's life**, from behavior and emotions, to relationships, beliefs about the world, ability to concentrate and succeed in school, and physical and mental health.² In addition to whatever form of abuse or neglect foster children may have experienced prior to entering foster care, removal from home is itself a painful and potentially traumatic experience. Yet not all kids entering the child welfare system receive the type of trauma-informed assessment that leads to helping kids recover from the experiences they've been through. When professionals don't know how to identify trauma, they may misdiagnose a child, leading to a child receiving the wrong treatment for their needs.
- **Service providers report not having all they need to feel like they're making informed decisions about what's best for kids.** Right now, a clinician performing an assessment can use any sort of tool. That, in turn, can get in the way of caseworkers, foster parents, or judges understanding how to interpret an assessment's results. Variance in the variety of tools clinicians use, as well as in the quality of those assessments and their content, formatting, length, and depth of analysis, have all been cited as serious problems in Texas.³

How to Make it Happen:

- **Make assessments accurate.** Trauma-informed assessments that consider the psychological and developmental consequences of exposure to traumatic events give a more accurate assessment than assessments that overlook how trauma might affect a child's state and development.
- **Make assessments comprehensive.** A multidisciplinary approach considers how different factors in a child's life interact, instead of using a single lens or person working alone to make important decisions. Instead, teams of professionals, along with the child and appropriate caregivers and caseworkers, have a role in providing the information that informs service planning and placement.
- **Ensure assessments are useful.** Reports are helpful for their non-clinical audiences only when they have some level of analysis or recommendations of ways caregivers, including foster parents, educators, and case workers, can best meet a child's needs.
- **Standardize the assessments.** Follow-up assessments should be completed using a standardized format that builds upon initial assessment. A menu of assessment tools should be developed and periodically updated to provide clinicians sufficient flexibility to select the most appropriate tool for each child, while also limiting approved tools to those proven to be effective.

For more on this, see: <http://tinyurl.com/assessingkids>

Thinking About Costs

In 2007, the direct costs to Texas of mental health services for children in the child welfare system was \$32.4 million. Making sure today's services to children are effective and their placements appropriate would bring down Texas' spending on adult mental health, criminal justice, and substance abuse challenges in the future. Even more directly, providing one quality, useable assessment when a child enters the system could potentially reduce the need for multiple reassessments. Also, in getting a child placed appropriately the first time, there is much greater likelihood of their finding success in the foster care system, rather than languishing in the system.

Sources

Thinking about Costs

- *Findings From the 2008-2009 Evaluation of Child Abuse and Neglect Prevention Programs and Services*, (Austin: The Interagency Coordinating Council for Building Healthy Families, 2006), http://www.dfps.state.tx.us/documents/HealthyTxFamilies/2009-12-01_ICC_Report.pdf.
- 1 *Placement Stability in Child Welfare Services: Issues, Concerns, Outcomes, and Future Directions Literature Review*, (Davis, CA: The Center for Human Services, The University of California, Davis, Extension, August 2008), <http://www.dss.cahwnet.gov/cfsweb/res/pdf/PlacementStability.pdf>.
- 2 "CWLA Statement on Optimal Child Welfare Service Delivery". (Child Welfare League of America), <http://www.cwla.org/advocacy/financingoptimaldeliv.htm>.
- 3 "Child Protective Services Handbook, Section 8242: Evaluation". (Texas Department of Family and Protective Services), accessed April 30, 2012. http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_8242.jsp#CPS_8242.
- 4 Leslie, L.K., Gordon, J. N, Lambros, K., Premji, K., Peoples, J., and Gist, K. Addressing the Developmental and Mental Health Needs of Young Children in Foster Care. *Journal of Developmental and Behavioral Pediatrics*. 2005 April; 26(2): 140-151. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1519416/>
- 5 "Supporting High Quality Mental Health Services for Trauma: Family, Youth and Consumer Involvement," (The National Child Traumatic Stress Network) Policy Brief, September 2008, http://www.nctsn.org/sites/default/files/assets/pdfs/PolicyBrief_FYCI2008.pdf
- 6 Findings by "The Assessment Improvement Circle," a group facilitated by Texans Care for Children that included providers and provider associations who rely on the information in assessments to provide foster children with services. http://texanscareforchildren.org/Images/Interior/partners-in-child-protection-reform/assessment_circle_report_nov_2010.pdf

