

SPEA UNDERGRADUATE HONORS THESIS

Nonprofits and the Foster Care System

A Case Study of Creating a Cross-Sector Solution

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Abstract

While the United States federal government has provided foster care for children whose lives are in danger for the last half century, the government only contains the resources and structure, in and of itself, to care for approximately one out of five children in a dangerous home. The structure of the foster care system is allowing the government to only remove children from their homes and place them with a foster family when their home situation is life-threatening. There is a time before this situation arises where intervention is more effective. This thesis looks at the role nonprofit organizations have in addressing this need, by providing early intervention foster care. Against a backdrop of the theories of nonprofit existence and the history of the foster care system, the paper looks at the changing role of the nonprofit sector in this system. In addition, this thesis takes an in depth look at Safe Families for Children, one such nonprofit organization. An analysis of Safe Families for Children provides an example of how a nonprofit comes into being to meet an unmet social need – specifically in preventative, early intervention foster care. Based on this analysis, nonprofit organizations that focus on early intervention foster care are found to effectively reunite children with their families, at a higher rate than the federal foster care system alone.

Introduction

The nonprofit sector, the third sector, the not-for-profit sector, the charitable sector, the independent sector; these are all terms that describe the sector that makes up 6.2% of the U.S. economy. In the 21st century, the nonprofit sector is widely participated in and studied.

Over 13 million people work for the nonprofit sector, which makes up about 10% of the total U.S. workforce (Worth, pg. 23). The nonprofit sector has over 600 billion dollars of revenue each year. There are an estimated 1.9 million nonprofit organizations in the U.S (Worth, pg. 23). Needless to say, it is a substantial part of the United States economy, but how did it come about? Why aren't those 1.14 million organizations part of the business or public sector? In short, why do nonprofit's exist?

To answer this question, one must first define a nonprofit organization. Author Michael J. Worth describes the nonprofit sector as, "large, complex, and diverse, including organizations very different from one another in purpose, size, and other characteristics" (Worth, pg. 3). The sector is, by all means, broad in scope. Very specific qualifications differentiate a nonprofit organization from the other two sectors. All of the following must be true of an organization for it to qualify as nonprofit; it must be an organized entity, private, non-profit distributing, self-governing, voluntary, and of public benefit (Worth, pg. 42-44). An organization must have all of these characteristics to be tax exempt under the tax code in Section 501 (c).

Now that it is clear what defines the nonprofit sector, one must ask how it originated. One theory of how nonprofit organizations came about is called the *failure theory*. This theory states that nonprofit organizations arose because the market and government could not provide some good or service. The market and government may have not been able to provide it for various reasons, including lack of resources or the service is politically controversial. In other words, the market and government "fail" at providing some necessary good or service, and nonprofit organizations step in. According to this theory,

nonprofits take on the role of “gap fillers”. Michael J. Worth puts it this way: “In the context of the failure theories, nonprofit organizations are essentially gap-fillers – they fill the gaps left by market failure and government failure, providing goods and services that the other two sectors, for whatever reasons, could not” (Worth, pg. 35). Hence, there arose the *third sector*.

The rest of this report will look more closely at one specific service that the government currently provides, foster care. It will zoom in on the gap provided by this government service, a gap that is leaving countless children cared for a little too late. Nonprofit organizations have stepped in to fulfill the role of “gap filler,” putting this theory in practice.

Foster Care

Foster care is defined as “a temporary arrangement in which adults provide for the care of a child or children whose birthparent is unable to care for them” (National Adoption Center 2016). This is an essential service for any country, but it is not a service that is profitable. Therefore, foster care is not directly apart of the for-profit sector. Nonprofit organizations and the government have historically provided this service.

Today the public sector is primarily responsible for the foster care system, but this has not always been the case. Prior to the 20th century, when parents could not care for their children, the children would be placed in an orphanage. Orphanages were run by third sector organizations, including various religious organizations and private charities. Some “fostering” was taking place as an alternative to institutional care, but it was a less common

second option to orphanages. Reformer Henry Dwight Chapin, a pediatrician who studied the impacts of orphanages on children, challenged the accepted orphanage system in the early 1900s. He started to spread the shocking statistics of child mortality within orphanages. He studied eleven institutions in New York and found that the average mortality rate for children under two was 422.5 per 1,000 children, well above the state average at that time of 87.4 per 1,000 (University of Oregon 2012). He believed strongly that “a poor home is often better than a good institution” (University of Oregon 2012). While Chapin started the initiative, it would still be years before foster care spread throughout the nation and became the primary way abused and neglected children were cared for. At this time, around 1910, there were over 1000 orphanages in the United States (University of Oregon 2012). In the early 20th century, the term “foster child” was used to indicate a legally adopted child. With the advancement of developmental science and psychology, it became more and more clear that children would have greater health and welfare if they were placed in a home instead of an institution. Society began to evolve with this new understanding. The early 1900s were a time of growing popularity of foster care and adoption. In 1935, government became more involved when the Social Security Act, later known as the Aid to Families with Dependent Children Act, was passed. State governments actually began shutting down orphanages in the mid 1900s for violations of health codes. By 1950, history was made. For the first time, there were more children in foster care than orphanages (University of Oregon 2012). In the 1960s, the Aid to Families with Dependent Children Act was amended to include federal funding for foster care (University of Oregon 2012). This marked the beginning of the transition of foster care into the government sector. In 1970, there were over 500,000 children in foster care. This

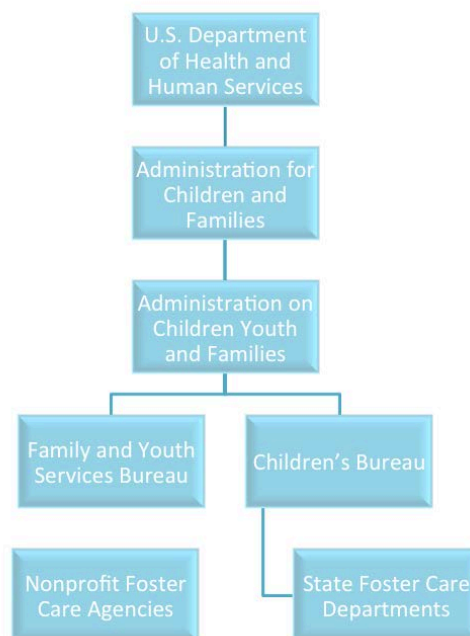
number has not changed substantially since. Today, there are about 400,500 children in foster care (ACF 2015).

Previously, orphanages and fostering were run by the church. It has only been in the last half century that foster care has been associated with the government-run system, with the passage of the aforementioned Aid to Families with Dependent Children Act. The current system is often referred to as the child welfare system, which is an over-arching term that includes foster care along with other services to families. Foster care is under the Administration for Children and Families (ACF) which is a division of the Department of Health and Human Services. One of the offices of the ACF is called the Children's Bureau. The Children's Bureau carries out the foster care system from the federal level. It provides "board and care payments for eligible children who are under the supervision of the state and placed in foster family homes or childcare institutions that are safe and licensed" (ACF 2015). Each of the 50 states, the District of Colombia, and Puerto Rico run their own foster care program at the state level.

Eligible children are children who are removed from their homes and become wards of the state due to "maltreatment, lack of care, or lack of supervision" (ACF 2015).

This chart shows a complete breakdown of the federal child welfare system. Foster care, which

Child Welfare Organizational Chart



will be the focus of this essay, is one of many aspects of child welfare in the United States. Foster care falls under the jurisdiction of the state governments. State-level departments of child services enact the foster care system from the state. Foster care is regulated by the Children's Bureau, shown in this chart. Nonprofit foster care agencies are also a part of the child welfare system, though they are not a part of the public sector.

Much has changed since Henry Dwight Chapin was first leading the charge toward foster care. What was once a grass-roots movement, is now a complex system that involves both public and nonprofit sector organizations. What was once almost completely run by nonprofit organizations and churches, has evolved to also involve the government as well. This cross-sector foster care system has proved to be a successful alternative to orphanages. Foster care has grown much more popular, almost completely replacing orphanages.

The Gap

Although great strides have been made, there is still work to do. The foster care system is not perfect by any means. There is one thing orphanages provided that the foster care system lacks: stability. A child was rarely moved from one orphanage to another.

Alternatively, as a child's length of stay in the foster care system increases, so does the number of their foster care placements. In 2012, the Children's Bureau set a goal to decrease the number of foster placements. Their goal was no more than two placements during a child's stay in the foster care system. In other words, a child would be moved only once from one foster care home to another. The following chart summarizes the connection

between how long a child stays in the foster care system and the percent that met the goal of two or less placements.

This chart does not show how many placements the children have, it only summarizes how many foster children

have less than two

placements. The amount

of children with two or

more placements

decreases as the length

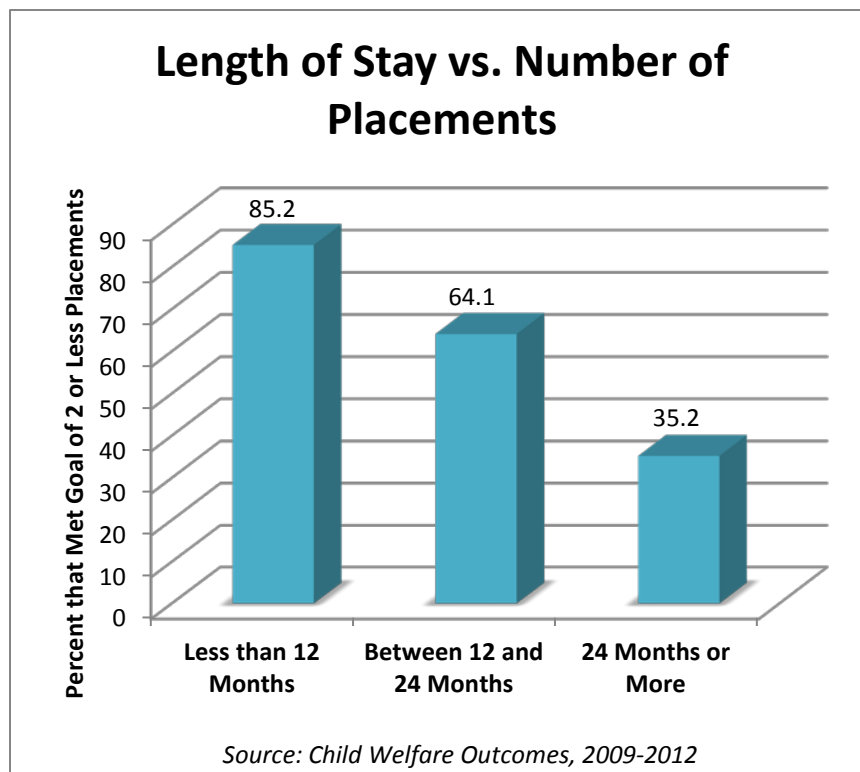
of stay increases (Child

Welfare Information

Gateway 2012).

According to the

Children's Bureau, in



2013, the average length of stay was 13.5 months. This lack of stability, associated with longer stays in the foster care system, is known to affect various other parts of a child's life.

In the Children's Bureau's 2012 report to Congress, placement stability was so important that it was one of their top seven goals, alongside other significant goals like reducing child abuse and neglect (Child Welfare Information Gateway 2012). One obvious effect of multiple placements is poorer performance in school. Sometimes moving from one foster care family to the next involves moving schools, which means a different teacher with a different schedule. School-age children in foster care are twice as likely to miss school compared to the average student (National Working Group on Foster Care and Education

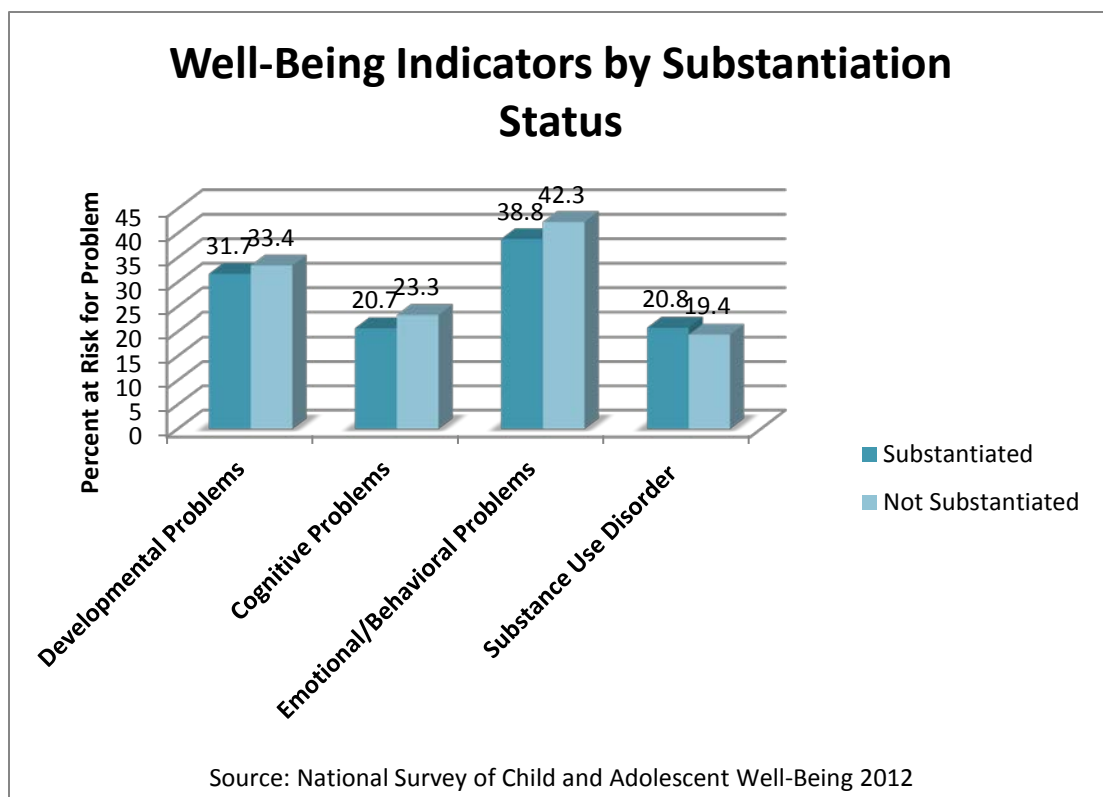
2014). Only 50% of foster youth complete school by age 18. Foster children who are between the ages of 17 and 18 are twice as likely to get suspended, three times more likely to get expelled and 2.5 to 3.5 times more likely to receive special education(National Working Group on Foster Care and Education 2014). An increased length of stay in the system in addition to various other factors, including the trauma of the neglect and abuse these children experienced, are possible causes for this poorer performance. If a child is in the foster care system longer, it likely also means that they have a more serious case or have experienced more severe abuse or neglect. There is no debating that children who spend extended amounts of time in the foster care system are more likely to perform poorly in school and be more likely act out. In this case, what needs to be added to the system, or the “gap”, is preventative care that would eliminate the need to remove the child from the home and prevent the trauma of abuse and neglect as well as decrease the length of stay outside the home.

The previous statistics only apply to children who entered the foster care system. Another gap in this government-run system is the number of children who never entered the system and received care because their situation did not prove life-threatening, though some may have come close.

Dr. Anderson, the founder of Safe Families for Children wrote, “State child welfare emergency hot lines throughout the nation reportedly receive over five million calls each year of suspected child abuse or neglect. Of those calls, about one million meet the State’s criteria for abuse, thus activating services” (Anderson 2012). What happened to the other four million children whose situation didn’t qualify as abuse? There are no statistics showing how they performed in high school. An adult somewhere in the country had

reason to believe that a child was being abused or neglected, but the child's maltreatment was not severe enough for the state to remove them from their household and place them in a safe home. Understandably, a situation must meet high criteria in order to warrant removal by the government.

In 2012, the Administration for Children and Families conducted the National Survey of Child and Adolescent Well-being. In this survey, they compared the risk for poor outcomes, from substance abuse to behavioral problems, of the one in five qualifying, or substantiated, cases versus the other 80% that was unsubstantiated, or didn't meet the criteria for child abuse and neglect. The survey showed, "children with unsubstantiated reports of abuse or neglect experience the same risk of negative outcomes as children with substantiated reports. Children in both groups were at risk for severe developmental and cognitive problems, as well as emotional or behavioral problems and substance use disorders" (National Survey of Child and Adolescent Well-Being 2012). See the following chart for a summary of the survey's findings.



Drug abuse is the only area that unsubstantiated children have a lower risk. In the other three areas, emotional/behavioral problems, cognitive problems, and developmental problems, children who did not meet the criteria for child abuse or neglect have a higher risk of developing these problems. This data has the potential to lead to numerous conclusions. The research can be used to resolve that the foster care system is successful at reducing the risk of problems in the children it intervenes with. One may also look at this collection of data and desire for the government to intervene in even more situations, specifically the 80% of situations that were unsubstantiated. Another may look at this data and note that all of these percentages are way above the norm. These are all notable conclusions, but the survey itself claims that the two groups of children have relatively the “same risk” of negative outcomes. In other words, the approximately four million children who did not meet the government’s criteria for child abuse or neglect, have a comparably high risk of problems. One important thing to note is that the children whose home situations did not meet the criteria are still experiencing high risks of negative future outcomes. The source of the research did not identify any government intervention or services given to the 80% who did not meet the criteria. In order to decrease this risk, there must be some kind of help and intervention offered to the four million children who didn’t qualify for government intervention.

These are the two main gaps in the government-run foster care system. Children who enter the system and remain in it for long amounts of time are more at risk for various problems. In addition, there are several million children who never enter the system, and still remain in threatening homes leading to increased risk of problems. If the goal of the government’s foster care system is *child welfare*, there is clearly a gap. It is not the fault of the

government or even the Department of Health and Human Services. This is a gap that cannot be filled by government alone. This is a gap that beckons the nonprofit sector.

The Solution

There is no perfect way to care for a child who was neglected or abused by their birth parents. Although the United States has made huge strides in providing safe care for children through foster care, there are still “gaps” in the system. It is an incredibly complex task to protect and raise hundreds of thousands of children throughout the country. The foster care system serves as a prime example of the *failure theory*. Please note that the failure theory does not suggest that some entity is doing something wrong. Rather, it suggests that the problem is too complicated to be solved by just one sector. As previously mentioned, the for-profit sector cannot provide foster care because there is no profit to be made. The public sector has been effectively conducting foster care, but child welfare as a whole is a far too weighty goal to successfully achieve solely within the bounds of government. This “gap” that arises does not imply that the government is failing altogether, rather it highlights the value of cross-sector collaboration.

What value does the nonprofit sector bring to the table? How does the nature of nonprofit organizations make them a suitable solution for the proposed “gaps”? Nonprofit organizations have many unique attributes that make them adept at solving these kind of issues, including decentralization, less market constraints, and access to volunteers.

One gap associated with the *failure theory* is a “supply–demand gap between the homogeneous governmental services and the heterogeneous citizen preferences” (Liu

2016). The services government provides are by nature more homogenous, or uniform, thus they can't meet all the needs of a varied community. This is where decentralization becomes valuable. If a government tends to be more centralized, or consolidated to a specific area and task, nonprofit organizations can be characterized as more decentralized. Decentralization refers to greater organizational flexibility which allow nonprofits to more quickly change to the shifting circumstances and opportunities. The decentralization of the nonprofit sector allows it to be more efficient and diverse (Liu 2016). Decentralized, or community-based, nonprofit organizations would benefit the child welfare system by addressing specific needs of a community or group of children on a community by community basis. Addressing the specific needs of a group allows nonprofit organizations to effectively supplement the foster care system.

The second benefit of nonprofit organizations is that they have less market constraints. In charitable nonprofit organizations, contributions are tax exempt. In addition, most of the income of a nonprofit organization is exempt from income taxes. Nonprofit organizations also have additional access to funds. Nonprofit organizations can apply for grants and aid instead of simply taking out loans (NPO Central 2016). These exemptions and access to funds are available to nonprofit organizations to help them pursue their mission and improve the greater good. Additional funds will also aid a child welfare nonprofit organization in pursuing its mission.

Another asset of nonprofit organizations is the volunteer base. Nonprofit organizations have access to people from various professions and walks of life willing to donate their time to a cause. Volunteers are an asset because they are motivated by values and

principles rather than money. Volunteers often times have a greater sense of ownership and commitment to an organization (Worth pg. 6). Nonprofit organizations offer passion and commitment to a problem when they bring along volunteers, not to mention the money saved by a strong volunteer base.

Decentralization, access to funds, and volunteers make nonprofit organizations very valuable. While the government is centralized, receives its funds from taxes and has a long process and many restrictions that determine where money can be spent, and is run by politicians or career civil servants, the nonprofit sector offers assets that make a cross-sector partnership significant. Nonprofit organizations are uniquely designed to allow them to fill a niche that the government can't fill on its own. The government can do and has done many important things for children experiencing neglect and abuse, but the nonprofit sector offers resources that will move this country one step closer to greater child welfare.

Several nonprofit organizations are already involved in the foster care system. There are 1,656 nonprofit foster care organizations classified as P32, or foster care nonprofits under the umbrella of children's and youth services, in the National Taxonomy of Exempt Entities (NTEE) (GuideStar 2016). These organizations would function like a state run foster care agency through the Department of Health and Human Services. This means that they fulfill all of the state requirements to take their own foster cases, provide their own caseworkers, and place the foster children assigned to them with one of their trained foster parents. The state Department of Health and Human Services oversees these private nonprofit foster care organizations as well as the government-run foster care agencies, by setting forth the requirements and qualifications for the organizations. A nonprofit foster care organization

would meet all the laws and regulations the state puts forth for foster care. They would work in conjunction with the local child services branch. Most nonprofit foster care organizations receive government funding and also collect donations for additional funding. This additional funding allows them to give further support to the foster parents in their organization. This extra support would ideally alleviate some of the stresses associated with foster care and enable foster parents to serve their child better, perhaps decreasing the number of placements per child. In addition, nonprofit foster care agencies also receive some of the harder cases, children who would require more intensive care, and can give the child and the parents additional resources and support. Nonprofit foster care agencies are also able to devote some of their resources to recruiting more foster parents and giving them more training.

Not every nonprofit organization involved in child welfare is providing foster care. Nonprofit foster care organizations help fill the “gap” in the government system by providing additional recruiting of foster parents and more training and resources given to these parents to decrease the risk of problems in the children’s futures. But there is still another gap, the children that are experiencing some sort of neglect or abuse, but not enough to warrant removal from their home. Some nonprofit organizations are stepping up to provide care and resources for these families as well. Chicago is an example of a community that is attempting to fill both of these gaps through a joint collaboration between the Chicago nonprofit sector and the government-run system. The next section will dive deeper into this city as a case example.

A Closer Look: Chicago

As a large, well-known city in the United States, Chicago serves as a great location to study the intersection between the foster care system and the nonprofit sector on a relatively smaller scale. Chicago is the third largest city in the United States, known for its rich culture and also for its poverty. In 2013, the U.S. Census Bureau reported that 10.8% of the residents of Chicago live in extreme poverty (Terpstra, 2013). In 2014, there were 17,140 children in foster care in Illinois (Children's Bureau, 2015). As the largest city in Illinois, Chicago disproportionately cares for many of these children. In 2014, there were 26,785 children abused or neglected in Illinois. Cook County, where Chicago is located, was home to 8,014 of these children (Illinois DCFS, 2014). In other words, almost 30% of the abused and neglected children from Illinois lived in the Chicago area. Cook County had the largest amount of child abuse and neglect in the state by a landslide. This is a large burden for one city to bear. The Illinois Department of Child and Family Services runs the foster care system in Illinois. It has ten offices in Chicago. In collaboration with the state-run foster care system, there are four nonprofit organizations that offer foster care in Chicago. These organizations are fairly large, all with annual incomes of well over four million dollars. These four nonprofit organizations are summarized in the following chart:

Nonprofit Organization	Nonprofit Classification	Target Clientele	Founding Year
SOS Children's Villages	P32 (Foster Care); P30 (Children's and Youth Services); P40 (Family Services)	Sibling groups; complex foster child cases	1990
Lakeside Community Committee	P32 (Foster Care); P70 (Group Home); P60 (Emergency Assistance)	Foster children with relatives desiring custody	1964
Kaleidoscope, Inc.	P32 (Foster Care); I70	Foster children with	1973

	(Protection/Prevention of Neglect, Abuse, Exploitation); P31 Adoption	trauma, illness, or disease	
Safe Families for Children	P32 (Foster Care); P30 (Children's and Youth Services); P40 (Family Services)	Families in situations that limit their ability to care for their children	2003

This chart breaks down each Chicago nonprofit organization into its NTEE classification and identifies its target clientele. All of these organizations provide services beyond foster care, but for the sake of this study, we will just look at their foster care services. Also notice that each of these organizations fill a different niche in the foster care system. A deeper look into each of these organization's attempt to care for the many foster children in Chicago will give greater clarity to the value of nonprofit organizations in the foster care system.

SOS Children's Villages is an innovative nonprofit providing foster care. It began in Chicago 20 years ago as a branch off of an organization that was started in Europe. The organization built houses in a "village" in Chicago. It then professionally trained foster parents to live in these homes providing them with a wealth of resources. The nonprofit organization is able to do programs above and beyond the normal foster care program provided by the state, which allows it to take harder cases and see greater successes. SOS Children's Villages reports serving over 700 children and seeing a 100% high school graduation rate, as compared to the 54% graduation rate for foster children nationally (SOS 2016). It also prides itself in serving sibling groups and providing in-home family services. Because of the

nature of this nonprofit organization, it is able to mobilize its resources to lessen the demand of Chicago foster care system.

Lakeside Community Committee is another nonprofit organization providing foster care in Chicago. Lakeside Community Committee was founded as a social service agency in Chicago in 1964. It specializes in training relatives of foster children to become foster parents.

Lakeside Community Committee has “developed a variety of effective strategies to engage relative caregivers in a hands-on-approach that involves them more quickly in the dynamics of the care giving process and that assists them in meeting DCFS standards for child caregivers” (Lakeside Community Committee 2012). This nonprofit collaborates with Illinois’ Department of Child and Family Services to raise up more foster parents from the relatives of the children in the system. In so doing, Lakeside Community Committee helps provide more stability for the foster child and more resources for the state.

Kaleidoscope, Inc. also plays a crucial role in Chicago’s foster care system. Kaleidoscope, Inc. was founded in 1973 as a part of an initiative to treat children with emotional and behavioral challenges near their home. Kaleidoscope, Inc. provides a unique service known as “therapeutic foster family care”. This nonprofit organization specializes in caring for children “who require more intensive services due to a history of trauma, debilitating physical illness, or disease” (Kaleidoscope 2016). Kaleidoscope has a specialized care team that conducts various additional programs to serve these children’s complex needs. Due to the nature of the children they are serving, many have poor behaviors and have moved from placement to placement in the foster care system. Kaleidoscope intervenes to give the

child and the foster parents the additional resources they need to properly care for the children.

Without a nonprofit sector in Chicago working alongside Illinois' Department of Child and Family Services, it would look very different. More children would be separated from their siblings, less relatives would feel equipped to become foster parents, and difficult foster children would continue to move from home to home. Through these three nonprofit organizations, the "gap" of increased risk for children in the foster care system is being filled. But there is still one more "gap", the children who didn't enter into the system that are in threatening home situations. Thankfully there is one more nonprofit organization in Chicago that we have yet to look at that is attempting to tackle this very problem, Safe Families for Children, also known as Safe Families or SFFC. The rest of this essay will look at Safe Families for Children to see the ins and outs of how a nonprofit organization can supplement the federal foster care system to pursue a solution to this gap.

Safe Families: A Case Study

Dr. David Anderson started Safe Families for Children in Chicago, Illinois in 2003. Prior to starting Safe Families, Dr. Anderson was a psychologist. One day he was approached by a woman in a crisis. She asked him to care for her children until she could get back on her feet. Dr. Anderson replied that he could only help her, by directing her to the local department of child services, if her children were being abused or neglected. Although her situation was dire, this was not yet true of her children. She continued to beg him to care for her children temporarily and he, along with his wife, finally agreed to do so. Dr.

Anderson described this moment as “defining” in his life. The upside-down nature of the situation struck him and he soon became determined to create an organization that would do what his family just did, willingly and temporarily take a child into their home without any sort of compensation because of the request of a parent. Today, Safe Families “create(s) extended-family-like support for desperate families through a community of devoted volunteers who are motivated by faith to keep children safe and to reunite families” (Safe Families website). Safe Families in Chicago is managed as a program of the Lydia Home Association, a family assistance agency in Chicago. Since Safe Family’s founding, over 4,100 families have stepped up to become host families. These host families have hosted over 21,300 children, which has been possible because of Safe Families’ children’s traditionally shorter length of stay of 21 days (Safe Families website). In the past 13 years, Safe Families has extended across the country and the world. There are now Safe Families chapters in 80 U.S. cities, the United Kingdom, Canada, and one is currently being launched in Japan (Lydia Home Association)!

Safe Families is comparable to foster care, but it has some notable differences. For one, the organization is formed on the fact that the biological parents of the child maintain full custody. Safe Families does not intervene in situations where the government has already taken protective custody. In these situations, a child will enter the foster care system. Safe Families does not attempt to compete with state-run foster care, but rather supplement it. Safe Families instead directs its resources towards the approximately four million children who do not meet state regulations for removal from home. This makes Safe Families not an alternative to foster care, but an organization that collaborates with foster care to improve the welfare of children. Another mark of the Safe Families model is that the host families

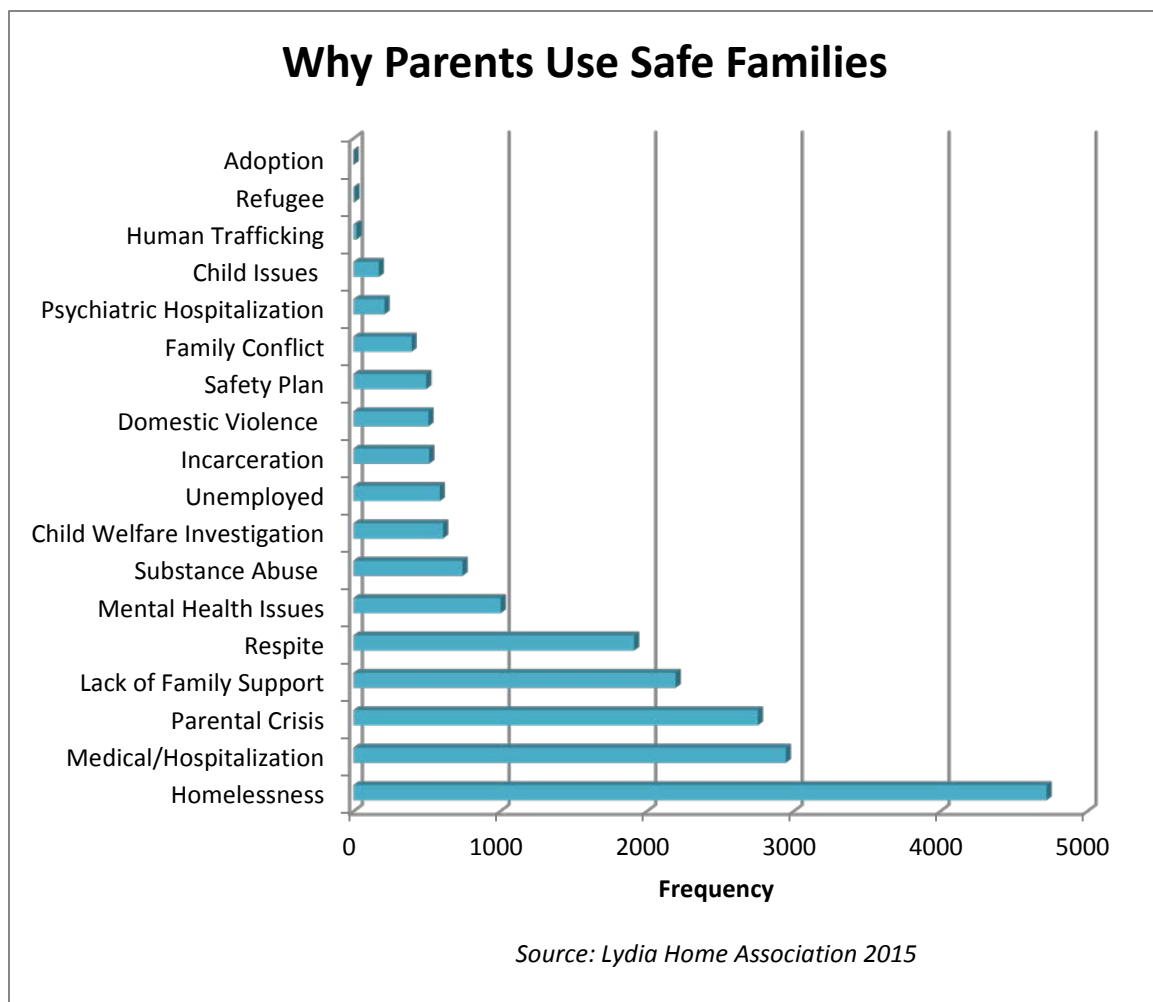
are volunteers. Though they receive no compensation, they receive extensive support from the organization, including training and personal support, and are motivated by their faith to serve the family in crisis.

Safe Families for Children is made up of host families, family coaches, and family friends. The host families are screened and approved in a way similar to foster parents. They are given a background check, interviewed, and a study is conducted of their home. The process for becoming a certified host family is so comparable to the foster family process that if a foster parent wishes to also be a Safe Families host, many of the requirements transfer over. A host family welcomes a child into their home and works very closely with the biological family. Since Safe Families is completely voluntary, the biological parents still have full custody of their child. The parents chose to allow their child to stay in a host home until they are able to get back on their feet. Host families regularly take the child to visit their parent and help the parent take the needed steps to regain stability in their life. The second role in Safe Families is the family coach. The family coach “supports the host family, monitors the safety and care of the child, provides resources to the placing parent to help them get back on their feet, and facilitates the relationship between the host and placing parent” (Volunteer Family Coach Manual pg. 7). The family coach plays a critical role. They would be comparable to a case worker in the foster care system. The next role is the family friend. Since Safe Families is faith-based, many family friends come from the host family’s church. A host family normally has numerous family friends. A family friend mentors the parent, babysits for them, provides resources for them, and helps with transportation. All of these components make up a Safe Families placement.

Safe Families has three primary objectives: child welfare deflection, child abuse prevention, and family support and stabilization (Lydia Home Association). One of their primary goals is to keep families together. They hope to limit the number of parents losing custody of their children and thereby limit the number of children entering the foster care system. By pursuing this goal, they are aiding the government system by not adding to its workload and demand for services. Safe Families prevents child abuse by placing an at-risk child in a safe home until the parent can regain stability. The children entering Safe Families are leaving a potentially abusive or neglectful home. Safe Families intervenes in the situation and provides resources and time for the parents while keeping the child safe. The last objective, family support and stabilization, is at the heart of the Safe Families model. Many of the families involved with this organization have no extended family or friends to turn to for help. Safe Families hopes to provide the kind of support an extended family member would normally provide in this kind of situation. The biological parents feel less threatened by the host families, because the biological parents willingly gave up their child, maintain regular communication with their child, and are told upfront that the goal of the host family is to reunite the family as soon as possible.

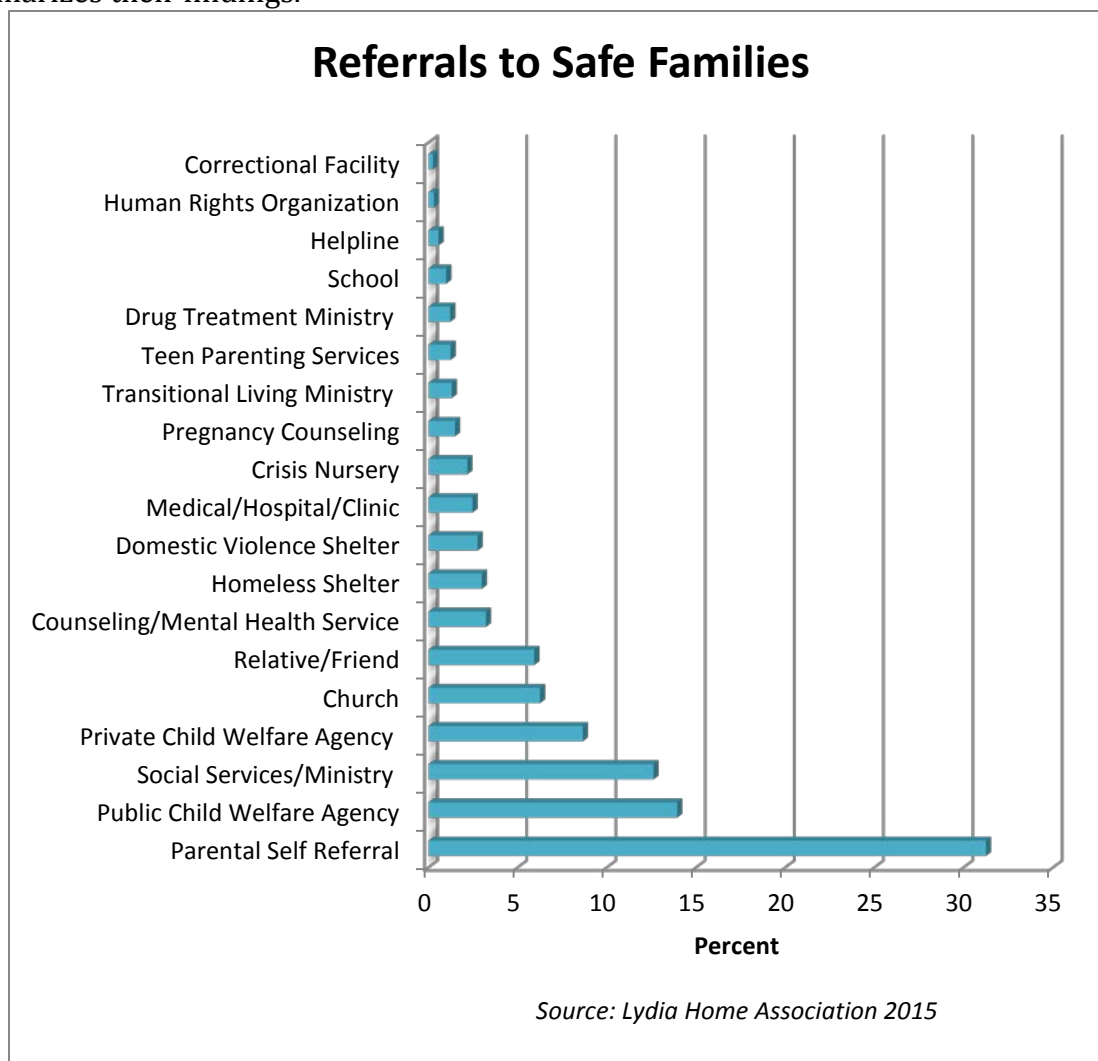
Due to its design, mission, and goals, Safe Families is naturally different than the foster care system. This difference is seen not only in their policies, but also in the type of situations they address and children they serve. Like was previously mentioned, Safe Families is seeking to supplement the public foster care system, not compete with it. Safe Families addresses cases where the parents know and admit that there is a problem. Therefore, Safe Families generally serves families with situations that are less severe. The situations are temporary in nature and often times fixable. This difference is seen most clearly in the

average age of children in Safe Families versus the public foster care system. The average age of children in Safe Families is four years old. Nearly 70% of children in Safe Families are below the age of five (Volunteer Family Coach Manual pg. 6). On the other hand, the average age of a child in public foster care is 8.7 years old (AFCARS Report 2014). That is twice the age of a child in Safe Families. This demonstrates how Safe Families is addressing different situations and different families than the public foster care system. Safe Families is dealing with younger families and younger children, before poor behaviors have become habits and before the situation is dire enough to warrant intervention by the government. The connection between Safe Families and the child welfare system is clear when looking at two things: the reasons children enter Safe Families and who refers the families to Safe Families. First let's look at why parents decide to utilize Safe Families. In 2015, the Lydia Home Association, a large family assistance agency that conducts a Safe Families program, combined research to determine why families come to Safe Families for help. In conducting this research, the Lydia Home Association looked at all regional Safe Families chapters. The following chart summarizes what parents identified was the primary reason they came to Safe Families.



The top three reasons parents turn to Safe Families for help are homelessness, medical problems or hospitalization, and parental crisis. There is a strong relationship between family homelessness and foster care. One study published in the American Journal of Public Health reported that “almost half of the birth parents of the foster children has experienced homelessness” (Zlotnick 1998). By providing temporary care for the children of parents experiencing homelessness, Safe Families prevents children from entering the foster care system. The next two reasons parents use Safe Families are medical problems or parental crisis. These two reasons, along with nearly all the rest of the stated reasons, could lead to a child being neglected or abused. By providing this service, Safe Families is partnering with the public child welfare system to improve the well-being of children around the country.

The partnership between Safe Families and the child welfare system is also seen in the way a parent hears about Safe Families. The aforementioned study by the Lydia Home Association also researched who refers parents to Safe Families. The following chart summarizes their findings.



This chart shows that most often parents self-refer themselves to Safe Families. This is in tune with the design of the nonprofit. It hopes to serve families that voluntarily request help. Note that the second and fourth most common source of referrals is child welfare agencies. Together, public and private child welfare agencies make up over 20% of the referrals for Safe Families. This is a significant sign of the valuable public-nonprofit

partnership. If a parent comes to a child welfare agency asking for help with his/her children or if someone calls an agency reporting suspected neglect, the agency can now recommend the parent to Safe Families. This is a clear example of the “gap” in the public child welfare system being filled by a nonprofit organization. Where before, without the nonprofit sector, the public foster care system would have to turn away someone seeking help, because their resources are better suited to more severe cases, now the public system can recommend a nonprofit program for the family to enter.

Since it is established that Safe Families was formed because of the “gap” in the public child welfare system and it is now partnering with the public system to fill this gap, this question arises: how successful is Safe Families at this task? Success in foster care and preventative child services, like Safe Families offers, is hard to measure. There are two pieces of information that traditionally measure success in foster care: length of stay and percent of children reunified with their parents. These measures of success can be translated to Safe Families to see how effective it is at supplementing public foster care. The average length of stay for a child in Safe Families 21 days (Volunteer Family Coach Manual pg. 6). In comparison, the average length of stay of a child in the foster care system is 13.5 months (Child Welfare Information Gateway 2012). This is a remarkable difference. An average child in Safe Families is outside of their home for less than a month; that is almost 20 times less time outside of the home. The length of stay is a measure of success because of what it suggests. For one, the longer a child is outside their home, the more likely they are to have multiple placements and experience additional trauma. In addition, the length of stay in the system is how long it took the child’s parents to regain stability and provide a healthy and safe home. A short length of stay is very successful if it means a mother or father were able

to provide this home for their children. If this never happens, the length of stay is how long it took for the child to leave foster care by either aging out or being adopted. That is why the length of stay alone is not enough to measure success. It must be coupled with the reunification rate.

The reunification rate for Safe Families is 96% (Volunteer Family Coach Manual pg. 6). That means that 96% of the children that enter Safe Families will go back to their parents. The other 4% will enter the foster care system. In comparison, the reunification rate for children in foster care is 55% (AFCARS Report 2014). The other 45% will either be adopted, age out of foster care, or go to live with another relative or guardian (AFCARS Report 2014). Safe Families has a relatively high reunification rate that, when paired with the average length of stay, demonstrates that Safe Families is successful at fulfilling its mission, “to keep children safe and to reunite families” (Safe Families website).

It is important to note that this information does not imply that Safe Families is more “successful” than the public foster care system. It clearly reunites families more often and quicker, but it is also dealing with very different situations. Imagine there are two families, both are single moms with one child. In the first family the mother loses her job and can’t make her rent. She is one week away from being kicked out of her apartment and has no family or friends she can call. The other mom is severely addicted to drugs. Her addiction leads her to poorly care for her child and put her child in very dangerous situations. Both of these circumstances can quickly lead to the child being taken away and put in foster care. In the first situation, the mother knows that she is about to become homeless so she is able to call Safe Families. A host families can care for her child while she looks for new work and

lives in a shelter. She can easily regain her stability in a matter of weeks and get her child back. The second situation is not nearly as simple. The second mother may not agree that she is putting her child in danger and therefore she may not call for help. Her child will likely be taken away by her state's department of child services and be put in a foster home. The mother will then enter into a long journey of rehab which may or may not lead her to becoming drug free and living somewhere where she can care for her child. The child is likely to stay in foster care for a long time, perhaps more than a year, and then be reunited with her mother or be put up for adoption. This illustration is meant to demonstrate how both services are necessary. Safe Families and the public foster care system are working together toward a common end. If Safe Families had not been present, the first child might eventually have been in foster care and the public system would have fewer resources to care for the second child. By effectively providing preventative child care, Safe Families is supplementing the public foster care system and filling an unmet need.

Conclusion

Safe Families in Chicago demonstrates what nonprofit organizations regularly do. Nonprofit organizations come into being to help fill a "gap" in government services. Because of their decentralization and their access to resources like funding and volunteers, nonprofit organizations can fill a niche not filled by government. This is seen clearly in the foster care system. The foster care system is succeeding in many ways, but it cannot care for every child perfectly. It is only able to intervene in more severe circumstances, and even then the system may not have all the time and resources to pour into a child's life to help

them with their specific situation. Nonprofit organizations can supplement the foster care system by providing services like additional foster care training to relatives, counseling services to troubled foster children, and programs that ensure sibling groups are kept together. In addition, nonprofits can intervene before the child is in foster care. Nonprofit organizations that focus on early intervention foster care are found to effectively and quickly reunite children with their families. These nonprofits are able to do so at a higher rate than the federal foster care system is able to do alone.

One Safe Families advocate put it like this: “It’s the concept of putting a fence at the top of a mountain rather than an ambulance at the bottom. In our societies we need the ambulances, we need to be able to pick up where families have fallen apart, where there is abuse and neglect of children. But how wonderful would it be if the church could intervene and provide help and support to a family that hasn’t fallen down the hill yet, and hopefully we can keep them from ever getting to that place” (Christ’s Place 2015). This is a perfect picture of the collaboration between nonprofit organizations and the public sector. The government is providing the much needed ambulance at the bottom of the hill. Nonprofit organizations, like SOS Children’s Villages, Lakeside Community Committee, and Kaleidoscope Inc. are providing additional ambulances with specialized care. Meanwhile, other nonprofit organizations, like Safe Families, are at the top of the mountain building a fence. All of these actors are necessary!

Collaboration between the public sector and the nonprofit sector has positively impacted the lives of countless families. Both sectors provide a service that the other would not be able to provide on their own. Together public and nonprofit services are more effective.

There is hope for a brighter future and greater well-being for children in the United States because of cross-sector partnerships!

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