During 2002, Oregon changed the state definition of foster care to be consistent with the federal definition as a result of the Adoption and Safe Families Act (ASFA). This change in definition is reflected in program performance measures required by the federal Child and Family Services Review. For the purposes of federal reporting, foster care includes:

- 24-hour substitute care for children outside their own homes.
- Children who have physically left a foster care placement under state agency supervision and have been returned to the principal caretaker on a trial home visit, usually up to six months.

Children who have physically returned home have not always been reported in this report as “still in foster care.” Therefore, the total number of children in foster care shows an increase, starting in 2002, as a result of this change in definition.

Best practices

Child Centered, Family Focused, Community Based

DHS remains committed to strengths/needs-based practice, which has been a foundation of Oregon’s child welfare system for the past several years. This practice emphasizes keeping children in their immediate families and with extended relatives. When children are not able to remain with their families or relatives, neighborhood or community-based services are utilized. Keeping children within their communities whenever possible continues to be a guiding principle in serving children and families.

Services supporting best practice, such as Team Decision Making meetings, improve the department’s decision making process by encouraging the support and inclusion of the family, extended family, and the community. The goal of all services provided to the family is to develop specific, individualized and appropriate interventions for children and families in a strengths/needs-based manner.

DHS child welfare continues to develop community resources by working closely with community partners, schools, hospitals and communities of faith. In addition, the department continues to coordinate services for children and families through formalized relationships with organizations such as the Oregon Foster Parent Association, Oregon Post Adoption Resource Center, Annie E. Casey Foundation, Court Appointed Special Advocates (CASA), Citizen Review Boards (CRB), and the Juvenile Rights Project (JRP).
Children in foster care

Children who need foster care may be infants, toddlers, preschoolers, grade-schoolers or teenagers. Foster children come from many backgrounds and types of families. Many children needing foster care have been emotionally, physically or sexually abused. As a result, they may have emotional, behavioral, mental or physical problems that require special services.

Foster Care Settings Include:
- Nonrelative family foster homes.
- Relative care homes.
- Family group homes.
- Emergency shelters.
- Residential treatment programs.
- Child care institutions.
- Pre-adoptive homes.

<table>
<thead>
<tr>
<th>Age of Children in Foster Care</th>
<th>Race of Children in Foster Care during FFY 2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5</td>
<td>Asian</td>
</tr>
<tr>
<td>6-12</td>
<td>African American</td>
</tr>
<tr>
<td>13+</td>
<td>Caucasian</td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
</tr>
<tr>
<td></td>
<td>Native American</td>
</tr>
<tr>
<td></td>
<td>Pacific Islander</td>
</tr>
</tbody>
</table>

Total served during FFY 2003. The race of 14.3 percent of children in foster care was not recorded.

CHILDREN ENTERING/LEAVING FOSTER CARE

<table>
<thead>
<tr>
<th>Year</th>
<th>Children entering foster care</th>
<th>Children leaving foster care</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>4,675</td>
<td>4,681</td>
</tr>
<tr>
<td>2001</td>
<td>4,524</td>
<td>4,676</td>
</tr>
<tr>
<td>2002</td>
<td>4,729</td>
<td>4,851</td>
</tr>
<tr>
<td>2003</td>
<td>4,946</td>
<td>4,443</td>
</tr>
</tbody>
</table>

Data are for federal fiscal years.

Reversing a three-year trend, more children entered foster care than exited foster care in FFY 2003.
Children in foster care (cont.)

Children who cannot live at home enter foster care for various reasons. These children most often enter foster care as a result of their parents’ actions and not as a result of the child’s behavior.

PARENTAL DRUG AND ALCOHOL ABUSE CONTINUES TO BE A DRIVING FACTOR IN THE REASONS WHY CHILDREN ENTER FOSTER CARE.

IN FFY 2003, PHYSICAL ABUSE AND PARENTAL INCARCERATION SHOWED SIGNIFICANT INCREASES AS REASONS CHILDREN ENTER FOSTER CARE.

MOST CHILDREN (63 PERCENT) WERE REUNIFIED WITH THEIR FAMILIES.

REASONS CHILDREN ENTER CARE (INCLUDES ALL TYPES OF FOSTER CARE)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Abuse</td>
<td>3,414</td>
<td>17.0%</td>
</tr>
<tr>
<td>Parental Drug Abuse</td>
<td>3,316</td>
<td>16.6%</td>
</tr>
<tr>
<td>Parental Alcohol Abuse</td>
<td>3,195</td>
<td>16.0%</td>
</tr>
<tr>
<td>Parent’s Inability to Cope</td>
<td>2,862</td>
<td>14.3%</td>
</tr>
<tr>
<td>Child’s Behavior</td>
<td>2,181</td>
<td>10.9%</td>
</tr>
<tr>
<td>Neglect</td>
<td>2,106</td>
<td>10.5%</td>
</tr>
<tr>
<td>Inadequate Housing</td>
<td>1,550</td>
<td>7.7%</td>
</tr>
<tr>
<td>Child’s Disability</td>
<td>494</td>
<td>2.5%</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>447</td>
<td>2.2%</td>
</tr>
<tr>
<td>Parental Incarceration</td>
<td>129</td>
<td>0.6%</td>
</tr>
<tr>
<td>Child’s Alcohol Abuse</td>
<td>127</td>
<td>0.6%</td>
</tr>
<tr>
<td>Abandonment</td>
<td>105</td>
<td>0.5%</td>
</tr>
<tr>
<td>Child’s Drug Abuse</td>
<td>96</td>
<td>0.5%</td>
</tr>
<tr>
<td>Parental Death</td>
<td>4</td>
<td>0.02%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>10,000</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

Children can have more than one reason for entering care. 327 children had no reason recorded.

Where children went after foster care

The majority of children entering foster care are reunified with their parents. But for other children, a plan to reunify them with their parents does not occur for many reasons. These children who exit foster care may move on to various other living arrangements and permanent plans, such as adoption or guardianship.

Data are for FFY 2003.
Foster parents care for children who have been abused or neglected and who cannot remain in their own homes. Foster parents come from all walks of life. They are essential partners on whom DHS child welfare depends to do the day-to-day parenting for these children until they can return home or, if that is not possible, be placed with a permanent family.

All foster homes must be certified as meeting safety standards. The safety standards are the same for relatives, nonrelatives and families considering adoption.

A significant factor contributing to the safety and stability of children is keeping them involved with their families, school, and communities as much as safely possible. DHS works toward keeping children in their neighborhoods by having an adequate number of families available for children in need throughout the state. The map below shows how many homes are available for children in each of the 16 DHS service delivery areas of Oregon.

FAMILY FOSTER HOMES BY DHS SERVICE DELIVERY AREA

ON AN AVERAGE DAILY BASIS, THERE ARE 6,371 CHILDREN IN FAMILY FOSTER CARE.

A TOTAL OF 11,086 CHILDREN WERE SERVED IN FAMILY FOSTER CARE IN FFY 2003.

DHS child welfare conducts complete assessment and background checks on prospective foster parents. This includes a home study, criminal records check, personal reference check, home safety and health inspection, and a check for previous child abuse/neglect charges.

THERE ARE MORE THAN 4,450 FAMILY FOSTER HOMES LOCATED ACROSS OREGON.
Residential treatment services

Residential treatment services are provided to a significant number of children in the DHS child welfare system. Children served require intensive supervision and treatment because they have experienced severe abuse and neglect and/or have emotional problems that cannot be managed in a family setting.

- **Professional shelter programs** serve children with behavioral and emotional problems in need of professional evaluation. Programs provide assessment and evaluation to assist DHS in developing a treatment or placement plan for each child.

- **Residential treatment services** include an array of counseling, skill building and interventions provided in facilities under the close supervision of highly trained, professional staff.

- **Therapeutic foster care programs** use trained professional foster parents to provide supervision and treatment under the direction of a licensed private child care agency. Children served have abuse histories and behavior problems that are more appropriately treated in a family setting, but who still require the intense level of services and back-up offered by residential treatment providers.

In addition, some children have problems so severe that they require psychiatric hospitalization or placement in a mental health psychiatric residential treatment program.

A typical child served in residential treatment:
- Has been severely abused and/or neglected.
- Is unable to be maintained at home or in family foster care due to uncontrollable behaviors and emotional problems.
- Has not responded to outpatient counseling services provided in the community.
- Has major school problems, has been expelled or refuses to attend school.
- Needs daily training, guidance and supervision in a highly structured living environment.
During the legislative session in 2003, Senate Bill 808 was passed, which requires DHS to develop a Comprehensive Transition Plan for youth who are receiving services through DHS as a result of dependency and report this plan to the court. These transition plans are to include assessing and planning for the needs and goals of the youth related to housing, physical and mental health, education, employment, community connections and supportive relationships.

- Teens comprise 29.5 percent of the foster care population.
- During FFY 2003, 3,973 teens spent at least one day in foster care.
- Over half of the teens who left foster care returned home (52.0 percent).
- 23 former foster care youth received scholarships for higher education through the Oregon Student Assistance Commission in 2003.

Foster care youth are eligible for Independent Living Programs (ILP). The number of youth receiving Independent Living Services rose from 903 served in FFY 2002 to 1,017 youth served in FFY 2003. ILP’s services are provided by 18 different community-based partners throughout the state. The ILP services are directed at youth to assist them in the following ways:
- Making the transition to self-sufficiency as an adult.
- Receiving the education, training and services necessary to obtain employment.
- Attaining academic and/or vocational education and preparing for post-secondary training and education.
- Obtaining personal and emotional support and promoting healthy interactions with dedicated adults.
Foster or Adoptive Parents:

• Are single, married or divorced.
• Live in a house or apartment.
• Work inside or outside their home.
• Are caring, patient and flexible.
• Are able to meet the needs of a child.
• Live in all communities and neighborhoods in Oregon

If you would like to become a foster or adoptive parent, call:

1-800-331-0503

If you have questions or need this document in a different format, please contact your local DHS office.

This Foster Care information is excerpted from the report, The Status of Children in Oregon’s Child Protection System 2003. A full copy of that report is available on the Web at <www.dhs.state.or.us/abuse/publications/childabusereports.htm>