Introduction
Integration of many early childhood social service systems in the United States, notably Early Care and Education (ECE) and Child Welfare, is poor. Efficient system integration has the potential to reduce the estimated $70 billion annually in indirect costs of child maltreatment (Cicchetti, 2007; Heckman & Masterov, 2007) by streamlining service provision and capitalizing on the potential of early interventions to promote long-term development.

Child care subsidies, in particular, may:
- Enable foster parent employment (thereby increasing foster family income), provide respite care, and link parents to information and support (Geen, 2004; Owens-Kane, 2007).
- Encourage selection of center care, which is likely to be more stable and higher quality than other arrangements (Johnson, et al., in press).
- Facilitate positive teacher-child attachments and thereby improve foster care outcomes and decrease child and parental stress, if used to support high quality, stable care (Phillips & Lowenstein, 2010).

Foster placement instability compounds the adverse developmental outcomes associated with child maltreatment (Lewis, et al., 2007; Rubin, et al., 2007). Yet, placement instability is common—one to two thirds of placements disrupt at least once within the first two years (Webster, et al., 2000).

Taken together, child care subsidies have the potential to improve foster placement stability and improve children’s developmental outcomes both directly and indirectly, when subsidized care is stable and of high quality.

Data/ Sample
Obtained by merging data from the Illinois Department of Human Services’ Child Care Tracking System (CCTS) and the Illinois Department of Child and Family Services’ (DCFS) Child and Youth Centered Information System (CYCIS). The Child Care Tracking System contains information on all subsidies issued via the Child Care Development Fund in the State of Illinois, including type of care being subsidized. The merged CCTS/CYCIS Illinois dataset contains a total sample size of 21,320 children (11% of the study sample) received a CCDF subsidy.

Results
Results (Table 1) show that children who enter foster care at an older age are more likely (27% per year) to receive subsidized child care while in foster care, as are African American children and children of “other” race (54% and 57% more likely than white children). Children in kinship foster care arrangements are also more likely (41% more than those in traditional foster care) to receive subsidized child care. Finally, children with diagnosed disabilities are 42% less likely to receive subsidized child care while in foster care than typically developing children.

Table 1: Contribution of foster care and child factors and likelihood of subsidy receipt in foster care

- Odds Ratio
- SE

<table>
<thead>
<tr>
<th>Age at entry into foster care</th>
<th>1.270***</th>
<th>0.019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ever in kinship foster care</td>
<td>1.412***</td>
<td>0.070</td>
</tr>
<tr>
<td>Black</td>
<td>1.542***</td>
<td>0.090</td>
</tr>
<tr>
<td>Hispanic</td>
<td>0.759</td>
<td>0.097</td>
</tr>
<tr>
<td>Other</td>
<td>1.168*</td>
<td>0.204</td>
</tr>
<tr>
<td>White</td>
<td>1.022</td>
<td>0.049</td>
</tr>
<tr>
<td>Disability</td>
<td>0.583***</td>
<td>0.046</td>
</tr>
</tbody>
</table>

Results (Table 2) also indicate that a subsidized foster care arrangement while in foster care increases placement stability by 4.4% (p=0.000, Effect size = 0.282). Amount of subsidized child care also predicted placement stability, such that children who received more subsidized care (b=0.014 per year, SE0.003, p=0.000), and children with a larger proportion of months in foster care during which child care subsidies were received (b=0.005, SE=0.002, p=0.025) had more stable placements.

Interaction terms were included in the model presented in Table 2 to test the joint effect of subsidy receipt and age into entry into foster care, as well as being in a kin foster care arrangement. When subsidy’s age of entry was included in the model, the main effect of being in a subsidized child care arrangement on placement stability was no longer significant. Rather, children who entered care at an older age and in a more stable foster care placement if they were in subsidized child care (b=0.025, SE=0.002, p=0.000). When subsidy/kinship care was included in the model, the main effect of being in subsidized care remained, and children who were in kin care arrangements had more stable placements if they were also receiving a subsidy (b=0.14, SE=0.007, p=0.042).

Discussion
Only 11% of children who entered foster care before their fifth birthday in Illinois between 2003 and 2009 and remained in care for at least three months received subsidized child care while in their out-of-home foster placements. Yet, receiving subsidized care was associated with more stable foster care placements. In addition, children in kinship care arrangements and older children were more likely to be in subsidized child care, and in both cases, when these children were in subsidized care, their placements were more stable.

This suggests that increasing eligibility for and uptake of child care subsidies among foster children, particularly foster parents of preschoolers and kin caregivers, could increase foster placement stability for young children. The mechanism that drives this relationship is unclear. For example, it could be that receiving child care subsidies results in better placement stability, improving family income, thereby making foster parents more able to continue fostering the young children in their care. Alternatively, foster parents with higher levels of self-efficacy and motivation might be more likely to both work and seek out child care subsidies and be more stable. This alternative explanation could be especially true for certain types of caregivers (e.g. kin). Understanding the mechanism of these relationships presents an important avenue for future research.

The data presented here do not include information on the type of care being subsidized (and preclude comparison to non-subsidized child care experiences), which could be important, given that our hypotheses regarding the mechanism at work in relationship between subsidy receipt and placement stability should hold for higher quality (e.g. licensed, center-based) arrangements more than lower quality and informal care. Future analysis of this data will include type of childcare and will utilize survival analysis to determine the effect of subsidy receipt (and timing of that receipt) on the likelihood of foster placement disruption for young children.

References


