SYNTHESIS OF FINDINGS

Assisted Guardianship
Child Welfare Waiver Demonstrations

September 2005

U.S. Department of Health and Human Services
Administration for Children and Families
Administration for Children, Youth and Families
Children's Bureau

Table of Contents

Letter of Introduction

Executive Summary

History and Legislative Context for Waivers

Growth of Interest in Assisted Guardianship Waivers

Key Characteristics of Assisted Guardianship Demonstration Projects

Evaluation Methodologies

State Process Evaluations - Summary of Key Findings and Issues

State Outcome Evaluations - Summary of Key Findings and Issues

Lessons Learned from States' Experiences with Assisted Guardianship

Next Steps

List of Tables

Table 1 - Features and Eligibility Criteria for Assisted Guardianship Programs
Table 2 - Evaluation Designs of Assisted Guardianship Demonstrations
Table 3 - Assisted Guardianships Awarded
Table 4 - Exits to Permanency by State
Synthesis of Findings from the State Assisted Guardianship Title IV-E Waiver Demonstration Projects Executive Summary

Since 1996, seven States have implemented assisted guardianship waiver demonstrations: Delaware, Illinois, Maryland, Montana, New Mexico, North Carolina and Oregon. Montana and New Mexico's demonstrations offered a guardianship option for children in either Tribal or State custody. In two States - North Carolina and Oregon - assisted guardianship was one component of a larger, flexible funding waiver demonstration. The number of States implementing guardianship demonstrations reflects growing interest nationally in the use of guardianship as an
alternative permanency option for some children in foster care, particularly children placed with relatives, who cannot be safely reunified with birth parents or who cannot or do not wish to be adopted. Families may choose not to pursue adoption for many reasons, including reluctance to terminate parental rights for fear of the detrimental effects on family relationships, rejection of adoption by the child, and cultural opposition to termination of parental rights.

Although all guardianship waiver demonstrations were similar in that they provided financial support for guardians of children who have previously been in foster care, the States' demonstrations varied in the amount of subsidy payments provided and in the eligibility criteria for guardianship. Eligibility criteria considered by the States included the caregiver's relationship to the child, the caregiver's status as a licensed or unlicensed foster care provider, the child's age, the child's IV-E eligibility status, and the child's length of time with the caregiver.

All States with assisted guardianship waiver demonstrations were required to conduct process and outcome evaluations, as well as a cost analysis. The States' evaluations used widely varying approaches in terms of research designs, sample sizes, and case assignment procedures. Four States - Illinois, Maryland, Montana, and New Mexico - implemented random assignment designs for their evaluations. North Carolina and Oregon conducted a descriptive analysis of their guardianship programs and examined differences in permanency and child safety outcomes at an aggregate, county-wide level. New Mexico used a comparison group design for the smaller Tribal component of its assisted guardianship program, while Delaware relied on a pre-post test model to examine differences in permanency and child and family perceptions of well-being before and after implementation of the waiver.

Major Process Findings

- States varied greatly in terms of the scope and magnitude of their assisted guardianship programs. The number of guardianships awarded through the waiver demonstrations ranged from fewer than 30 in Delaware to over 6,800 in Illinois.
- All seven States reported mixed reactions from caseworkers regarding the role and appropriateness of guardianship in case decision making. Issues raised by caseworkers included the effectiveness of guardianship in ensuring permanency, concerns that guardianship would decrease adoptions, and objections to the additional time, effort, and paperwork required to process guardianships.
- Inadequate worker training and information dissemination on guardianship contributed to misconceptions and implementation problems in some demonstrations. States that expanded and strengthened their training programs - notably Illinois and North Carolina - observed a gradual increase in acceptance of guardianship as a legitimate permanency option among caseworkers and child welfare supervisors.
- An important issue raised by some of the assisted guardianship demonstrations was whether caregivers were willing or able to accept lower subsidy payments in return for the advantages of having expanded decision-making authority and reduced government oversight when children exit foster to guardianship. Results from the Maryland and North Carolina evaluations suggested that guardianship was not an attractive option for many families when guardianship subsidies were set at rates significantly below those paid
while the children were in foster care, since accepting guardianship meant a net loss in family income available to support the children.

- The States reported several challenges in working successfully with the courts. Examples of these challenges included excessive petitions for additional permanency hearings, confusion regarding the legal definition of guardianship, and the pre-existing preferences and biases of judges and attorneys.
- Concerns about assisted guardianship expressed by caregivers included lack of knowledge about the rules and procedures governing guardianship, the lengthiness of the guardianship process, and the potential loss of financial subsidies and support services once a youth turns eighteen. These findings suggest that prospective guardians may need more training regarding the definition, goals, advantages, and limitations of guardianship.

**Major Outcome Findings**

- **Placement Stability:** Available data from the Illinois and Maryland evaluations indicate that experimental group children (i.e., those eligible for a guardianship subsidy) had comparable rates of placement stability - defined as the number of placements experienced over time - as children in other placement arrangements.
- **Placement Duration:** Although most States did not track data on placement duration, available data from Maryland and New Mexico suggested that the availability of assisted guardianship as a permanency option may decrease the length of out-of-home placements.
- **Permanency Rates:** Illinois found strong, statistically significant evidence that the availability of assisted guardianship increased net permanence, defined as exits from foster care placement to reunification, adoption, or guardianship. To date, no other State has found conclusive evidence that assisted guardianship improves permanency outcomes for children.
- **Maltreatment Recurrence:** Findings from Illinois suggested that children placed with guardians were at least as safe from repeat maltreatment as children in other permanent settings. No other States have reported findings regarding the effects of assisted guardianship on maltreatment recurrence.
- **Foster Care Re-Entry:** Two States - Illinois and Oregon - tracked specific data on the number of children who re-entered foster care following assignment to guardianship. Both States reported very small rates of foster care re-entry. In Illinois, of the 6,820 children statewide who entered subsidized guardianship between April 1997 and March 2002, only 117 (1.7 percent) required a return to child welfare public agency custody. In Oregon, only 4 of 133 children (3 percent) re-entered substitute care during the first year following award of guardianship.
- **Child Well-Being:** Data from Maryland, Montana, and Illinois' evaluations suggested that children in guardianship fare as well as those in other permanency settings on several measures of well-being, including school performance, engagement in risky behaviors, and access to community resources.
- **Youth Perspectives on Guardianship:** Evaluation findings from the Illinois, Delaware, and Montana's demonstrations indicated overall satisfaction on the part of children with their guardianship arrangements. Advantages of guardianship mentioned most frequently
by youth included shedding the social stigma of foster care, an enhanced sense of stability, and more freedom to engage in normal childhood activities.

- **Caregiver Perspectives on Guardianship:** Once guardianships are established or in process, foster caregivers in many States - including Delaware, Illinois, Montana, and Oregon - expressed satisfaction and support for this placement arrangement. In Montana and Oregon, caregivers cited their enhanced ability to make decisions regarding the child (e.g., around health care, family visits, and education) as a principal advantage of guardianship over foster care.

- **Caseworker Perspectives on Guardianship:** In several States, including Illinois, Maryland, Montana, and North Carolina, caseworker support for guardianship increased over time. Most child welfare workers in these States came to view guardianship as an option that is as permanent as adoption, particularly for older children or for families and children that resisted termination of parental rights.

**Lessons Learned from the Assisted Guardianship Waiver Demonstrations**

- Caseworker buy-in and support are essential to the successful implementation of assisted guardianship programs.
- Child welfare staff need adequate training to understand policies and procedures regarding assisted guardianship. Thorough training on guardianship that is institutionalized as a standard part of caseworkers' professional preparation may increase utilization of this permanency option.
- States will make guardianship a more attractive option if they offer financial subsidies at a level equal or comparable to those available through long-term foster care or adoption, along with additional post-permanency services and supports similar to those available to adopted children.
- Close and early collaboration with the courts is essential to the development of streamlined procedures that promote the timely and efficient establishment of guardianships.
- States and local governments should explore the implementation of specific placement review procedures to ensure that guardianship receives reasonable consideration as a permanency option. (For example, Delaware created a Permanency Committee to review each case in placement for more than nine months to ensure consideration of guardianship as a permanency option).
- Evaluations of guardianship waiver demonstrations will be strengthened by more detailed tracking of offers and acceptance of guardianship. Because States may have expected more workers and families to pursue guardianship, they gave little initial consideration to collecting basic information regarding the number of children eligible for guardianship, the number of guardianships offered, the number of caregivers who accepted guardianship, the reasons for accepting or declining guardianship, and the number of guardianships eventually established. Future evaluations that track these statistics will help answer fundamental questions regarding the implementation of guardianship demonstrations, such as why more eligible children do not exit foster care to guardianship, and what barriers, such as caseworker or court opposition, impede the establishment of guardianships.
**Next Steps**

Final evaluation reports are still forthcoming from New Mexico and Montana in December 2005 and March 2007, respectively. Their studies will include more data on the implementation of assisted guardianships; worker, child, and caregiver attitudes toward guardianship; and child and caregiver functioning and well-being. Both North Carolina and Oregon have received five-year extensions of their waiver demonstrations into 2009 that will include assessments of the permanency and safety outcomes of children in guardianship arrangements. Illinois is currently implementing a second phase of its demonstration to test the efficacy of an enhanced guardianship option that offers post-permanency transition services to older wards who exit to guardianship or adoption after age 14.

In addition to the continuation of these existing demonstrations, two States - Minnesota and Wisconsin - have recently received approval to implement new waiver demonstrations involving assisted guardianship. Wisconsin's demonstration, scheduled to begin no later than February 2006, will provide licensed relative and non-relative foster care providers with a guardianship subsidy based on the foster care payment in effect for a child at the time he or she enters guardianship. Minnesota's demonstration, scheduled to begin in October 2005, will allow for expanded eligibility and services within the State's title IV-E foster care program to support an increased subsidy level and a continuous set of benefits for foster families who adopt or accept permanent legal custody of children in their care.

**History and Legislative Context for Waivers**

Public Law 103-432, authorized by Congress in 1994, introduced the concept of Federal waivers to child welfare programs. Conceived as a strategy for generating new knowledge about innovative and effective child welfare practices, waivers grant States flexibility in the use of Federal funds for alternative services and supports that promote safety and permanency for children in the child protection and foster care systems. The 1994 law authorized the Department of Health and Human Services to approve a total of ten child welfare waiver demonstration projects. The Adoption and Safe Families Act (ASFA) of 1997 extended and expanded the authority to use waivers for child welfare programs, authorizing the Secretary of Health and Human Services to approve up to ten new demonstration projects each year. Through the waivers, States may spend Federal funds in a manner not normally allowed under current Federal laws and regulations in support of innovative child welfare practices. Knowledge gained through these waivers provides a valuable source of information to inform changes in policy and practice aimed at improving service delivery and enhancing the achievement of national child welfare priorities.

Federal child welfare waivers primarily affect the use of funds under title IV-E of the Social Security Act, which applies to payments for foster care. Available on an unlimited entitlement basis, title IV-E reimburses States for a portion of foster care maintenance expenses paid on behalf of eligible children and for related administrative costs. Among the requirements for eligibility is that children be removed from a family that would have qualified for the former
AFDC\(^1\) grant under guidelines in effect in July 1996. Through the child welfare waiver legislation, States may apply to use title IV-E funds for supports and services other than foster care maintenance payments that protect children from abuse and neglect, preserve families, and promote permanency. Under a waiver, States may also expend title IV-E funds on non-IV-E eligible children. When implementing a waiver project, States must remain in compliance with the following provisions of title IV-E:

- All requirements relating to the conduct of periodic foster care reviews;
- Requirements specifying safeguards for children during out-of-home placement;
- Required permanency hearings for children in State custody; and
- Requirements governing information to be included in a foster child's case plan.

The Department of Health and Human Services typically approves child welfare waivers for up to five years, although at the discretion of the Secretary they may be extended beyond five years. In addition to the provisions described above, waiver demonstrations must remain cost neutral to the Federal government (i.e., States cannot receive more in Federal reimbursement than the State would have received in the absence of the demonstration) and they must undergo rigorous program evaluation to determine their efficacy. Since 1996, 17 States have implemented 25 child welfare waiver demonstration components through 20 title IV-E agreements.\(^2\) Some States have multiple waiver agreements, and some waiver agreements have multiple components. These projects examine innovative child welfare service strategies in several areas, including:

- Assisted guardianship/kinship care;
- Capped IV-E allocations and flexible funding to local agencies;
- Managed care payment systems;
- Services for caregivers with substance use disorders;
- Intensive service options;
- Enhanced training for child welfare staff;
- Adoption services; and
- Tribal administration of IV-E funds

This issue paper focuses specifically on the experiences and issues faced by States that have implemented assisted guardianship waivers.

**Growth of Interest in Assisted Guardianship Waivers**

Since 1996, seven States have implemented assisted guardianship waiver demonstrations: Delaware, Illinois, Maryland, Montana, New Mexico, North Carolina and Oregon. Montana and New Mexico's demonstrations offer a guardianship option for children in either Tribal or State custody; procedures for processing the cases of children in Tribal custody are determined by appropriate Tribal government authorities. In two States - North Carolina and Oregon - assisted guardianship is one component of a larger, flexible funding waiver demonstration. Delaware, Illinois, Maryland, North Carolina, and Oregon have completed their initial five-year demonstration projects. Delaware and Maryland have now ended their waiver demonstrations, while Illinois, North Carolina and Oregon have been granted approval to extend their waiver demonstration projects for an additional five years.
The number of States implementing guardianship demonstrations reflects growing interest nationally in the use of guardianship as an alternative permanency option for some children in foster care, particularly for children who are placed with relatives, who cannot be safely reunified with birth parents and who cannot or do not wish to be adopted. Although many children are adopted by relatives each year, families may choose not to pursue adoption for many reasons:

- **Reluctance to terminate parental rights:** Relatives caring for the child of a daughter or son, sister, brother, or cousin may fear the detrimental effects on family relationships of terminating parental rights. In its waiver proposal, Illinois described focus group discussions with relative caregivers who revealed hesitation to participate in termination of parental rights (TPR) for fear of alienating relatives. The conflicts created among family members by pursuing TPR may prove more harmful to a child and his/her relatives than remaining in long-term foster care with relatives.

- **Rejection of adoption by the child:** Many children, particularly teenagers, may resist adoption because they want to maintain a connection to their biological parent(s) and siblings.

- **Cultural opposition to termination of parental rights:** In some communities, TPR may conflict with deeply-rooted cultural traditions, particularly with respect to child-rearing practices and the definition of families. Cultural opposition to TPR is particularly evident in some American Indian communities; waiver proposals from Montana and New Mexico both cited cultural norms against TPR as a motivation for pursuing alternatives to adoption. Other States' waiver proposals cited reluctance in some African American communities to adopt the children of family members (North Carolina) and African American cultural norms that support the "informal adoption" of children by extended family members (Maryland) as reasons to explore other permanency options.

While it is possible for families to go to court to seek legal guardianship of the children placed in their care, many families that might wish to pursue this option cannot manage without the ongoing financial assistance and access to supportive services available through State foster care programs, especially in situations involving children with special needs. For these families "assisted" guardianship (also often referred to as "subsidized" guardianship) offers another option that may be more viable. While providing a permanent home for a child in the least restrictive setting possible, assisted guardianship gives families a regular financial payment while affording caregivers enhanced decision making authority regarding a child's education, medical care, and other needs. Under assisted guardianship, there is also reduced legal oversight and intrusion by the child welfare system.

A barrier to implementation of these programs, however, is that while Federal title IV-E payments help States to pay for the maintenance of a child in a foster care setting or, for special needs children, in an adoptive home, title IV-E funds cannot normally be used to pay subsidies to legal guardians. The guardianship demonstrations approved under the child welfare waiver authority granted participating States authority to use title IV-E funds for this purpose.

While support for guardianship as a permanency option for children in foster care has grown, some concerns have also been raised:
• **Perception that guardianship is less permanent:** Some child welfare professionals and advocates believe that guardianship is "less permanent" than reunification or adoption. For example, they fear that parents may eventually contest a guardianship order and that the courts will revoke the order, thereby returning a child to a potentially unsafe home. Furthermore, some adoption advocates fear that if given a choice, caregivers will choose guardianship over adoption, thereby decreasing the number of "more permanent" adoptions.

• **Safety concerns:** Some child welfare advocates have expressed concerns about biological parents' access to their children in guardianship arrangements. Without agency supervision, they fear that relatives will be more likely to informally return a child to the care of a biological parent, even when child safety remains an issue.

The guardianship waiver demonstrations have provided a means to explore the extent to which guardianship offers a permanent, safe placement environment for children, comparable to adoption, at a cost equal to or less than long-term foster care. This paper presents key findings from these demonstration projects.

**Key Characteristics of Assisted Guardianship Demonstration Projects**

In addition to meeting the requirements and limitations applicable to all waiver demonstrations (e.g., continuing to provide all procedural and safety protections for children in foster care, conducting a rigorous evaluation and ensuring Federal cost neutrality), States implementing assisted guardianship projects must ensure also that:

- Children placed in guardianship arrangements will be able to remain in their placements, to the extent they remain appropriate placements, at the end of the demonstration; and
- Children who are eligible for Medicaid while in foster care will retain that eligibility when moving to guardianship.

Although all guardianship waiver demonstrations are similar in that they provide financial support for guardians of children who have previously been in foster care, the demonstrations have varied in other respects, such as the eligibility criteria for determining which children and families will be considered for guardianship and the amount of subsidy payments. Table 1 provides a summary of State guardianship program characteristics. Key differences among States include:

**Caregiver Relationship and Licensing Status**

Although many States have expressed particular interest in relative or "kin" providers as guardians, six States opened their guardianship demonstrations to both relatives and non-relative caregivers. Only Maryland limited its demonstration to either "kinship" caregivers, defined as unlicensed relative caregivers funded through TANF, or licensed relative foster care providers. Three States - Delaware, Montana, and New Mexico - limited receipt of guardianship subsidies to licensed or otherwise approved foster care providers, whether relatives or non-relatives.

**Payment Amount and Support Services**
Five States offered assisted guardianship subsidies equal to or similar to the monthly foster care or adoption payment. Maryland's guardianship subsidy is substantially lower than that State's monthly foster care payment, but is higher than the TANF child-only payment made to kinship caregivers. North Carolina originally had a guardianship payment lower than the foster care payment, but later raised it to equal foster care subsidies. All States have offered a varying array of post-guardianship services that are similar to post-adoption services, including individual and family counseling, parenting skills training, mental health and medical assessments, caseworker assistance and emergency stabilization, and payment of one-time court costs and legal fees associated with the establishment of guardianships.

**Child Age**

Many States have preferred to restrict the assisted guardianship option to older children, particularly for those in non-relative foster care. Illinois and Oregon established a minimum age of 12 for children in non-relative placements to enter into a guardianship arrangement; Delaware and Montana restricted participation to children 12 and older in all placement settings, although Montana later eliminated this age requirement. The remaining States offered guardianship to all ages. Some States' interest in limiting participation to older children reflects the assumption that adoption is still the preferred permanency option - and more likely to succeed - for younger children, while recognizing that adolescents face more barriers to adoption and need expanded options for achieving permanency.

**Child's IV-E Eligibility**

Three States (Illinois, Maryland, and North Carolina) opened their guardianship demonstrations to both IV-E and non-IV-E eligible children; Delaware, Montana, New Mexico, and Oregon restricted their guardianship waiver projects exclusively to IV-E-eligible children.

**Length of Time with Caregiver**

States also differ on the minimum length of time a child must reside with a single caregiver before becoming eligible for assisted guardianship: three States (Delaware, Illinois, and North Carolina) established one year with a single caregiver as a minimum threshold for participation, whereas, two States (Maryland and Montana) set the length of stay at six months. Children in Oregon's demonstration must have resided in out-of-home placement for at least 12 months and lived with the same prospective guardian for at least 6 months. New Mexico set no minimum time in out-of-home placement to participate in its waiver demonstration.
### Table 1
Features and Eligibility Criteria for Assisted Guardianship/Kinship Permanence Programs

<table>
<thead>
<tr>
<th>State</th>
<th>Program Features</th>
<th>Payment Amount</th>
<th>Eligibility Requirements</th>
<th>Caregiver Licensin g/ Approv al Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delaware</td>
<td>• Implemented 7/1/96.</td>
<td>Equal to monthly foster care payment</td>
<td>Length of Time with Caregiver: 1 year</td>
<td>Child Age: 12+</td>
</tr>
<tr>
<td></td>
<td>• Family and child were eligible to receive case management, child health care, mental health care, and “post-adoption” services.</td>
<td></td>
<td>Child’s Age: 12+ for child with unrelated foster care provider</td>
<td>Kin or non-relatives</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Caregiver Relationship: Kin or non-relatives</td>
<td>IV-E only</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Child’s IV-E Eligibility: IV-E only</td>
<td>All ages for kinship care</td>
</tr>
<tr>
<td>Illinois</td>
<td>• Implemented 5/1/97.</td>
<td>Equal to monthly adoption assistance payment</td>
<td>Length of Time with Caregiver: Originally 2 years Changed to 1 year in July 2001</td>
<td>Child’s Age: 12+ for child with unrelated foster care provider</td>
</tr>
<tr>
<td></td>
<td>• Legal guardianship offered to eligible relative caregivers and licensed foster parents for children in their care.</td>
<td></td>
<td>Child’s Age: 12+ for child with unrelated foster care provider</td>
<td>Kin or non-relatives</td>
</tr>
<tr>
<td></td>
<td>• Support services offered: home study; preliminary screenings</td>
<td></td>
<td>Child’s Age: 12+ for child with unrelated foster care provider</td>
<td>Kin or non-relatives</td>
</tr>
<tr>
<td>Maryland</td>
<td>Illinois plans to implement an enhanced guardianship option for youth aged 14 and older offering independent living and transitional supports.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| • Implemented 3/1/98.  
• Offered kinship caregivers and relative foster parents the option of becoming legal guardians.  
• $300 subsidy for Greater than TANF payment for kinship caregivers but less than payment for relative foster | 6 months  
All ages  
Relatives or “kin” only  
IV-E and non-IV-E  
Licensed and unlicensed relatives |
| Montana | **Kinship caregivers and relative foster parents.**
| | - Participating guardians continued to receive financial assistance and support services.
| | - Guardians given priority for receiving services, including individual and family counseling, parent training, medical support, and mental health assessments.
| | - Implemented 6/21/01.
| | - Allows caregivers to assume guardianship of child while retaining the child’s IV-E eligibility.
| | - Guardianship families in the demonstration | **Parents** | $10 less than monthly foster care payment | 6 months | **Kin or non-relatives** | IV-E only | Licensed foster care provider s only (both relatives and non-relatives) |
on may access social and mental health services typically available to adoptive families.

<table>
<thead>
<tr>
<th>New Mexico</th>
<th>Similar to but does not exceed monthly adoption assistance payment</th>
<th>No minimum time required</th>
<th>All ages</th>
<th>Kin or non-relatives</th>
<th>IV-E only</th>
<th>Licensed foster care provider s only</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Mexico</td>
<td>Implemente d 7/1/00.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Mexico</td>
<td>Provides permanency for children who might otherwise linger in out-of-home care.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Mexico</td>
<td>Two components: (1) Tribal assisted guardianship; and (2) State assisted guardianship</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>North Carolina</td>
<td>Implemented 7/1/97.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>North Carolina</td>
<td>Experimental counties participating in the State’s capped IV-E allocation demonstration had the option to provide assisted</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>North Carolina</td>
<td>Original ly less than monthly foster care paymen t.</td>
<td>1 year</td>
<td>All ages</td>
<td>Relative or unrelated caregivers</td>
<td>IV-E and non-IV-E</td>
<td>Both licensed foster care and unlicensed relative care</td>
</tr>
<tr>
<td>North Carolina</td>
<td>Increase d in October 2002 to equal</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Oregon**

- Implemented 7/1/97.
- Both kin caregivers and non-relative foster parents were eligible to receive a subsidy payment that did not exceed the regular out-of-home care payment.

<table>
<thead>
<tr>
<th>Oregon</th>
<th>foster care payment</th>
<th>1 year in custody, 6 months with prospective guardian</th>
<th>Any age if placed with relative</th>
<th>Kin or non-relatives</th>
<th>IV-E only</th>
<th>Both licensed foster care and unlicensed relative care</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Equal to basic monthly foster care rate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1 Aid to Families with Dependent Children, the predecessor to the current Federal Temporary Assistance to Needy Families (TANF) program.

2 In 2004 and 2005, three additional States - Arizona, Minnesota and Wisconsin - received approval for, but have not yet implemented their child welfare waiver demonstrations.

**Evaluation Methodologies**

As with all waiver demonstrations, States with assisted guardianship waivers are required to conduct process, outcome, and cost-effectiveness evaluations. Most States have provided limited cost effectiveness data and have focused instead on their process and outcome evaluations. States have used widely varying approaches in terms of research designs, sample sizes, and case assignment procedures. Four States - Illinois, Maryland, Montana, and New Mexico - implemented random assignment designs for their evaluations; of these, Illinois had the largest sample size and adhered most strictly to random assignment protocols. Two States that implemented guardianship as part of flexible funding demonstrations - North Carolina and Oregon - provided only descriptive analysis of their guardianship programs. These States examined differences in permanency and child safety outcomes at an aggregate, county-wide level. In addition, New Mexico used a comparison group design for the smaller Tribal
component of its assisted guardianship program. Delaware relied on a simple pre-post test model to examine differences in permanency and child and family perceptions of well-being before and after implementation of the waiver. Table 2 briefly summarizes the States' approaches to evaluating their assisted guardianship demonstrations.

Table 2
Evaluation Designs of Assisted Guardianship Demonstrations

<table>
<thead>
<tr>
<th>State</th>
<th>Research Design</th>
<th>Sample Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delaware</td>
<td>Pre-post test</td>
<td>Approximately 10 children per year. As of 3/02, 28 IV-E eligible children were enrolled in the waiver project.</td>
</tr>
<tr>
<td>Maryland</td>
<td>Random assignment</td>
<td>1,021 children in experimental group and 737 children in control group.</td>
</tr>
<tr>
<td>Montana</td>
<td>Random assignment</td>
<td>109 children assigned to experimental group and 24 to control group as of 9/30/03.</td>
</tr>
<tr>
<td>New Mexico</td>
<td>Statewide component: Random assignment</td>
<td>Statewide component: 5,040 children in experimental group and 4,876 in comparison group</td>
</tr>
<tr>
<td></td>
<td>Tribal component: Comparison group design.</td>
<td>Tribal component: 17 youth in experimental group and 85 in comparison group as of 10/03.</td>
</tr>
<tr>
<td>North Carolina</td>
<td>Descriptive analysis only.</td>
<td>38 assisted guardianships established in participating counties.</td>
</tr>
<tr>
<td>Oregon</td>
<td>Descriptive analysis only</td>
<td>Guardianships implemented in 24 of Oregon’s 42 child welfare service branches. 133 subsidized guardianships opened between 7/1/99 and 12/31/01.</td>
</tr>
</tbody>
</table>

States have faced several issues in implementing case assignment protocols for their evaluations. In some states, (e.g., Maryland), the pool of families available for the evaluation sample declined when workers delayed or failed to complete eligibility determinations or when caregivers did not return research consent forms. Other States such as New Mexico have encountered challenges with the timing of assignment to experimental and control groups and the offer of guardianship. New Mexico chose to assign cases to the experimental or control groups immediately upon entry into the child welfare system, leading to high rates of sample attrition as children returned home or otherwise become ineligible for guardianship. The increased statistical "noise" caused by including children ineligible for guardianship in the research sample makes it more difficult to
measure the effects of subsidized guardianship on those children who do receive the guardianship subsidy.

As the rigor and scale of States' evaluations have differed, so have the strength of their evaluation results. The following sections explore some of the most important process and outcomes findings that have emerged from States with assisted guardianship waivers.

**State Process Evaluations - Summary of Key Findings and Issues**

**Number of Guardianships Awarded**

States have varied greatly in terms of the scope and magnitude of their assisted guardianship programs. As Table 3 illustrates, the number of guardianships awarded through the waiver demonstrations has ranged from fewer than 30 in Delaware to over 6,800 in Illinois.

<table>
<thead>
<tr>
<th>State</th>
<th>Number of Guardianships Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delaware</td>
<td>28</td>
</tr>
<tr>
<td>Illinois</td>
<td>6,822</td>
</tr>
<tr>
<td>Maryland</td>
<td>Approximately 326</td>
</tr>
<tr>
<td>Montana</td>
<td>38 as of September 2003</td>
</tr>
<tr>
<td>New Mexico</td>
<td>Approximately 120 as of October 2003</td>
</tr>
<tr>
<td>North Carolina</td>
<td>38</td>
</tr>
<tr>
<td>Oregon</td>
<td>133</td>
</tr>
</tbody>
</table>

**Procedures for Establishing Guardianships**

Processes for establishing guardianships vary considerably among States with assisted guardianship waivers. This section summarizes the procedures that States have instituted to implement their assisted guardianship programs.

**Illinois**

Illinois' final evaluation report provides an overview of that State's guardianship procedures. Before meeting with a potentially eligible family, the caseworker completes a Permanency Planning Checklist to assess the caregiver's appropriateness and readiness to assume guardianship and a separate criminal background check to ensure that the potential guardian has no felony convictions. At the initial meeting with the caregiver and possibly the biological parent(s), the caseworker facilitates a discussion among participants to develop a permanent care
plan that is in the best interests of the child. The caseworker carefully reviews all details of adoption and guardianship, as well as the responsibilities of each for the caregiver. The worker first discusses the option of adoption, as it must be ruled out prior to considering subsidized guardianship. After the caseworker has fully disclosed all components and implications of each permanency option, the caregiver can make a fully informed decision as to whether guardianship best meets the needs of the family. Consent to enter into guardianship is also obtained from any children aged 14 or older.

Once a permanency decision of guardianship has been made and the subsidy and legal screening paperwork are completed and approved, the Illinois Department of Children and Family Services' (DCFS) Office of Legal Services files a petition in the Circuit Court to award guardianship to the caregiver. The court appoints an attorney or Public Guardian to represent the child's interests at the guardianship hearing. If the circuit court judge determines that it is in the best interest of the child, an order appointing guardianship is entered.

A variety of administrative and clinical support services are available in Illinois to support and maintain guardianships. As with its adoption assistance program, the State assigns a caseworker from its Post-Guardianship Unit to a family following the award of guardianship. The guardian may contact the worker when difficulties arise regarding subsidy payments, private health insurers, community resources, or Medicaid. When the issues are therapeutic in nature, the caseworker may transfer the case to a social worker for brief crisis intervention, referrals, and phone-based assistance and information. If the Post-Guardianship Unit believes that a subsidized guardianship case is at risk of disruption or has special needs, the case is referred to a Subsidized Guardianship Specialist for extra attention and more intensive services.

Oregon

For the assisted guardianship component of its waiver demonstration, Oregon established Community Involvement Teams made up of representatives from State agencies, advocacy groups, service providers, and parent groups; these Teams meet regularly to receive updates and to provide input and feedback on the guardianship program. Oregon also established a guardianship training program for child welfare caseworkers; trainings consist of informal question-and-answer sessions to address questions about guardianship policies and procedures, including the use of funds.

Delaware

To ensure that the guardianship option receives due consideration, Delaware established a Permanency Committee to review the case of each child in out-of-home care for more than nine months. When a child is deemed eligible for guardianship, a child protection worker prepares a petition to the Family Court to approve the guardianship; this petition outlines the specific roles and responsibilities of the prospective guardian. According to Delaware's final evaluation report, the process for establishing a guardianship lasts an average of nine months.

Maryland
In Maryland, the process of establishing an assisted guardianship begins with a comprehensive home assessment; this assessment covers the quality of the relationship between the caregiver and the child, the caregiver's ability to provide a safe, stable, healthy home environment, and the caregiver's ability to meet the child's educational, health and mental health needs. The assessment includes an inspection of the caregiver's home to identify any potential health or safety hazards. Following a mandatory criminal background check and a review of the caregiver's child welfare case records, the caseworker develops a service agreement specifying the services the family will receive upon approval of the guardianship. Services may include individual and family counseling, child development and parenting skills training, educational services, health care referrals, mental health assessments, and child care referrals. Once guardianship is awarded, the child and family's child welfare case remains open for up to 60 days after initiation of the waiver subsidy. The local social services department monitors guardianships by maintaining all relevant case records through annual guardianship reviews.

**North Carolina**

North Carolina has developed several forms and guidelines to assist staff members in establishing guardianships under its waiver demonstration. They include a kinship care assessment tool for assessing relatives as potential guardians as well as an on-line manual on options for child permanency.

**Montana**

According to Montana's September 2002 progress report, the identification of youth eligible for guardianship originally began with the periodic generation of an ad hoc report from the State's child welfare information management system. Child welfare field staff reviewed this list for possible guardianship candidates. Although child welfare staff still use this list, the preferred approach has been for permanency planning specialists to work directly with social workers to identify candidates during periodic case reviews.

Despite similarities, each of Montana's five child welfare regional offices has established a different approach to implementing the assisted guardianship demonstration. Based on population density, geography, and number of staff, each region has flexibility in assigning placement and permanency planning duties to its staff, which includes a Regional Administrator, supervisors, social workers, family resource specialists, and a permanency planning specialist. The State child welfare agency's assisted guardianship project manager works with each regional office to set up the processes for establishing guardianships, training workers, and making regional adaptations to the program. The State also conducts annual trainings to address changes in policy regarding guardianship and to review the process for establishing guardianships.

**Caseworker Perspectives on Guardianship**

Because no other professionals have as much regular and intensive contact with families in the child welfare system, the attitudes, assumptions, and perspectives of caseworkers exert great influence on the implementation and ultimate success of assisted guardianship initiatives. Caseworkers' awareness and knowledge about guardianship varies widely, and States have
reported mixed reactions from them regarding the role and appropriateness of guardianship in case decision making. Doubts have persisted among child welfare professionals about the permanency of assisted guardianships and their impact on other important child welfare outcomes. Some caseworkers have tended to view guardianship as a less permanent alternative to adoption or reunification; other child welfare professionals have expressed the related concern that promotion of guardianships will lead to decreased adoptions. Site visits to county agencies in North Carolina revealed that caseworkers considered adoption to be the overriding goal for children who could not be reunified with their families. Many child welfare staff did not believe that assisted guardianship offered a stable placement option for children or regarded meeting the therapeutic needs of children through continued foster care as a higher priority than securing permanency through guardianships.

Illinois also experienced initial resistance to assisted guardianship, which necessitated a concerted State effort to secure caseworker "buy-in" to the concept. As in North Carolina, caseworker concerns in Illinois centered on the effectiveness of guardianship in ensuring permanency, as well as on a belief that guardianship would lead to decreased adoptions. In Delaware, evaluators attributed the infrequent use of guardianships to caseworkers' failure to discuss guardianship with caregivers, although it was unclear whether this omission was due to caseworkers' philosophical opposition or to a lack of awareness and training about guardianship. In New Mexico and Oregon, concerns about guardianship had less to do with philosophical objections than with the time, effort, and paperwork required to process them.

**Caseworker Training**

Inadequate training and information dissemination on guardianship has contributed to some misconceptions regarding this permanency option. During site visits in North Carolina, staff in several counties expressed confusion regarding assisted guardianship rules, especially with regard to waiver regulations, Medicaid eligibility, and receipt of Supplemental Security Income payments. Montana and Oregon reported similar concerns about caseworkers' limited knowledge of assisted guardianship rules and procedures. Illinois' final evaluation report cited caseworker turnover, supervisors' failure to disseminate information on guardianship to front-line staff, and under-use of training manuals as obstacles to workers fully understanding and utilizing the guardianship option. States that have expanded and strengthened their training programs have observed a gradual increase in acceptance of guardianship as a legitimate permanency strategy among caseworkers and child welfare supervisors. For example, staff's experience with assisted guardianship in one North Carolina county led to changes in agency norms regarding the use of guardianship in general; staff began to value guardianship, subsidized or not, as a way of expediting permanency without eliminating future options for reunification or adoption. 5(2)

States must balance the need for guardianship training with other demands placed on caseworkers' time. Maryland planned extensive training initially, but found that caseworkers had little time to attend because of other mandated trainings, court appearances, and the day-to-day crises of families on their caseloads. Rather than trying to change workers' attitudes about guardianship through training, another strategy involves the implementation of organizational procedures to ensure that guardianship is given reasonable consideration. In response to workers' failure to discuss guardianship with caregivers, Delaware's Division of Family Services created a
Permanency Committee to review each case in placement for more than nine months and to ensure consideration of guardianship as a permanency option.

**Guardianship Subsidy Amounts**

Families that assume legal guardianship often require financial supports and services to support children in their care. An important issue that has arisen with assisted guardianship waivers is whether prospective guardians are willing or able to accept lower subsidy payments in return for expanded decision-making authority and reduced government oversight. Five States - Delaware, Illinois, Montana, New Mexico, and Oregon - began with the assumption that foster care providers would not consider guardianship without a subsidy at least equal to that available to foster or adoptive families. Other States hoped that a lower payment would be sufficient when coupled with the increased autonomy and freedom from child welfare agency oversight offered by guardianship. Maryland offered guardians a $300 monthly stipend, greater than the $188 monthly TANF payment for kinship care providers but $300 less than the $600 monthly payment available to licensed relative foster care providers. North Carolina initially took a similar approach, providing guardians with a $250 monthly stipend that left caregivers with between $65 and $165 less per month, depending on the child's age, than they would have received in foster care payments.

The results of evaluations in Maryland and North Carolina suggest that for many caregivers, financial considerations ultimately outweigh other benefits of guardianship. During the first three years of North Carolina's demonstration, no counties established a single assisted guardianship; county child welfare agency staff reported that many licensed relative foster care providers were reluctant to absorb the financial loss that would result from assuming guardianship. Due in part to these anecdotal findings, North Carolina increased the guardianship subsidy payment to equal the foster care board rate in October 2000 in hopes of making assisted guardianship a more attractive option. Similarly, child welfare administrators interviewed for Maryland's interim evaluation report expressed concern that the payment differential between relative foster care and guardianship could discourage some relative foster parents from choosing guardianship. Evaluation findings from these States suggest that guardianship is not an attractive option for many caregivers if it entails a substantial net loss in family income.

**Role of the Courts**

Because of their authority to grant or deny the establishment of legal guardianship, local courts have played a vital role in the implementation and success of assisted guardianship waiver projects. States have reported several challenges and have developed a variety of strategies for working successfully with the courts. The experiences of these States reveal the importance of close and early collaboration with the courts in developing streamlined procedures for establishing guardianships. In Illinois, a Subsidized Guardianship Specialist advises the court on the particulars of each family's circumstances that have a bearing on the decision to transfer guardianship. Oregon faced a problem with excessive petitions for additional hearings, which were necessary to ensure a continuous stream of funding to a caregiver while the court considered guardianship. On the suggestion of a judge, the State revised its assisted guardianship
procedures to conform to adoption procedures, a change that reduced paperwork, streamlined court procedures, and reduced the number of hearings.

Delaware faced difficulties regarding the legal definition of guardianship and the accompanying rights and responsibilities of legal guardians. In that State, the cooperation of the family courts and the State's department of justice was important to the drafting and passage of an updated guardianship statute that clearly defines the rights, roles, and responsibilities of guardians, specifies eligibility criteria for prospective guardians, and delineates the circumstances under which a guardianship may be dissolved.

Maryland's interim process evaluation revealed that the preferences and prejudices of judges and attorneys often exert considerable influence on the permanency options available to children in out-of-home placement. According to senior social service managers and officials interviewed by the State's evaluators, some judges expressed uneasiness about placing children with relatives because they believed they were too similar or too close to the biological parent(s) of the child in question. Others reported that judges and attorneys often advised relative caregivers to seek foster care because of the increased funds available, thereby making it difficult for the child welfare system to divert children to other permanency options like guardianship. One interviewee described attorneys in Maryland as telling foster parents to "go for the money."

State Outcome Evaluations - Summary of Key Findings and Issues

The key questions regarding assisted guardianship relate to its potential effect on child welfare outcomes, namely, the ultimate goal of keeping children in safe, stable home environments that provide for their physical, emotional, and developmental needs. Questions that have arisen with respect to child welfare outcomes include:

- Does the availability of subsidized guardianship result in a greater number of children achieving permanency?
- Does the availability of guardianship result in children exiting to a permanent placement more quickly?
- Are children in guardianship as safe from abuse and neglect as children in other permanency arrangements?
- Are children in guardianship less likely to re-enter foster care than children who are reunified or adopted?
- Does the availability of guardianship increase placement stability, i.e., does it reduce the number of placement episodes a child experiences over time?
- Is guardianship as effective as other permanency arrangements in providing for the physical, emotional, and developmental well-being of children?

Achievement of Permanency

Achievement of permanency is one of the most important outcomes of interest with respect to assisted guardianship programs. Table 4 below summarizes available findings from States' evaluation reports regarding the impact of assisted guardianship on permanency. Although findings across States are not strictly comparable, the available data compare permanency rates,
defined as eventual exits to guardianship, adoption, or reunification for experimental and control group children.

### Table 4 Exits to Permanency by State

<table>
<thead>
<tr>
<th>State</th>
<th>% of Children Achieving Permanency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delaware</td>
<td>No data reported</td>
</tr>
<tr>
<td>Illinois</td>
<td>77.9% in the experimental group</td>
</tr>
<tr>
<td></td>
<td>71.8% in the control group</td>
</tr>
<tr>
<td>Maryland</td>
<td>42% in the experimental group</td>
</tr>
<tr>
<td></td>
<td>43% in the control group</td>
</tr>
<tr>
<td>Montana</td>
<td>No data available to date</td>
</tr>
<tr>
<td>New Mexico</td>
<td>48.3% in the experimental group</td>
</tr>
<tr>
<td></td>
<td>44.5% in the control group (data are from State guardianship component only)</td>
</tr>
<tr>
<td>North Carolina</td>
<td>No data reported</td>
</tr>
<tr>
<td>Oregon</td>
<td>No data reported</td>
</tr>
</tbody>
</table>

Illinois' evaluation provides the most conclusive data regarding the impact of guardianship on permanency. In that State, the availability of assisted guardianship boosted net permanency in the experimental group by a statistically significant 6.1 percent. Although reunification rates were statistically equivalent in both the control and the experimental groups, by March 2002 25.7 percent of children in the control group had aged out or still remained in long-term foster care, compared with only 19.7 percent in the experimental group. Permanency data from other States are less conclusive. Maryland found no statistically significant differences between the experimental and control groups in net permanency outcomes, with 42 percent of children in the experimental group achieving permanency compared with 43 percent in the control group. To date, New Mexico's evaluation of its State guardianship program shows a somewhat higher rate of net permanency for children in the experimental group (48.3%) compared with those in the control group (44.5%).

**Time to Foster Care Exit**

Another dimension of permanency explored by some States is whether assisted guardianship facilitates more timely exit from out-of-home care. Among States that tracked time in foster care, the available evidence suggests that guardianship may decrease the length of out-of-home placements. For children in kinship care in Maryland's demonstration, eligibility for guardianship reduced the proportion of children still in care two years after foster care entry by between 10 percent (Cohort 1) and 26 percent (Cohort 2). Preliminary data from New Mexico suggest that children in guardianship exit out-of-home placement more quickly than youth waiting for adoption, with guardianship youth spending an average of 519 days in foster care.
prior to permanent placement compared with 616 days for adopted youth. Delaware, Illinois, North Carolina, and Oregon did not examine length of time in placement as part of their evaluation, while data on placement duration are still pending from Montana.

**Maltreatment Recurrence**

Some child welfare professionals have raised concerns about guardianship putting children at greater risk of maltreatment due to the withdrawal of administrative oversight and casework services, coupled with the greater potential access of abusive and neglectful parents to the guardian's home. Findings from Illinois' evaluation suggest that guardianship protects children from recurring maltreatment at least as well as other permanency options. In its final report, Illinois stated that subsequent abuse and neglect was lowest among children who were discharged to private guardians: 3.0 percent compared to 3.9 percent for adopted children, 7.7 percent for children who aged out or remained in foster care, and 8.8 percent for children reunified with their birth parents. Although the small difference in subsequent maltreatment between children discharged to private guardians and adopted children was not statistically significant, these results suggest that at a minimum, children in guardianship are just as safe as those who are adopted.

Maryland, North Carolina, and Delaware did not include data on maltreatment recurrence in their final evaluation reports. To date, New Mexico and Montana have not provided data on maltreatment recurrence, although New Mexico listed re-allegations of abuse and neglect as an outcome measure in its original waiver proposal. Oregon reported no safety data for the first phase of its waiver demonstration; however, it does plan to track subsequent maltreatment reports among children who exit to guardianship and other permanency arrangements during its demonstration's second phase.

**Foster Care Re-entry**

Children who experience maltreatment recurrence or another personal or family crisis may need to return to the custody of a public child welfare agency and subsequently to foster care. Few States reported specific data on the number of children who re-entered foster care following assignment to guardianship. States that examined this outcome generally reported very small rates of foster care re-entry. In Illinois, of the 6,820 children statewide who entered subsidized guardianship between May 1997 and March 2002, only 237 (3.5 percent) were no longer living in the home of the original guardian because of the death or incapacitation of the guardian or due to the legal dissolution of the guardianship. Of these 237 children, 117 (1.7% percent of all children exiting to guardianship) required a return to child welfare public agency custody; the remainder were appointed a new guardian, returned to the biological parent, or were adopted. In Oregon's demonstration, only 4 of 133 children (3 percent) re-entered substitute care during the first year following award of guardianship.

**Placement Stability**

Related to the issue of foster care re-entry is placement stability, the degree to which children experience multiple placements over time. In the case of guardianship, placement stability may
be affected by disruptions, defined as situations in which the child leaves guardianship due to the
caregiver's death or incapacitation, or dissolutions due to a finding of child maltreatment or
because the guardian cannot meet the child's physical or developmental needs. Available data
from State evaluations suggest that children with access to a guardianship subsidy experience
comparable rates of placement stability as children in other placement arrangements. For
children ever assigned to the Illinois guardianship demonstration prior to January 1999, the
proportion of experimental group children still living in the same home in which they resided at
the time of original assignment was 68.7 percent compared with 67.3 percent of children in the
control group. Maryland's evaluation found that both experimental and control group children
had an average of less than one placement change between December 2000 and January 2003,
while almost all children placed in guardianship through Oregon's waiver demonstration
remained in the same placement twelve months later.

**Caregiver Perspectives on Guardianship**

The experiences, perspectives, and attitudes of caregivers provide valuable insights into the
effects of guardianship on child and family well-being. As with child welfare professionals,
many of the attitudes of current and prospective guardians have arisen from a lack of knowledge
about the goals of and the processes for establishing guardianship. The Illinois and Delaware
evaluations found that many foster caregivers did not know about the guardianship option. For
example, Illinois noted in its interim evaluation report that caregivers for 23 percent of children
in the experimental group said they were never told about the guardianship option. In addition,
foster parents in Illinois expressed initial skepticism stemming from their belief that guardianship
was being promoted to save money rather than to promote safety, permanency, and well-being.
Once guardianships are established or in process, many foster caregivers express satisfaction
with this placement arrangement; in Montana and Oregon, for example, caregivers cited the
guardian's enhanced ability to make decisions regarding the child (e.g., around health care,
family visits, and education) as a principal advantage of guardianship:

One future Montana guardian noted that with guardianship it will be "easier to discipline and
plan for the youth to be part of the family when you know he is going to stay with us until he
goes to college."  

A relative guardian of two children in Oregon stated that under guardianship "we deal with
them like they were our own. Just like the parent would do. This is rewarding because I know I
am helping and hopefully they will remember when they are older … We give them consistency
and stability which they did not have."  

Despite improvements, guardians in the Illinois study continued to express confusion about the
availability of assistance payments and the role of caseworkers following the award of
guardianship. Illinois' interim evaluation found that whether or not caregivers decided to enter
guardianship, the majority believed their caseworkers would continue to contact them. In
addition, most caregivers in the experimental group believed they could vacate the guardianship
if the relationship with the child did not work out. These caregivers' attitudes about giving
children back raise questions about the manner in which caseworkers explained the parameters
and responsibilities of guardianship.
Caregivers in other States have raised additional concerns about guardianship. Some guardians in the Delaware, Montana, and Oregon studies objected to the lengthiness of the guardianship process. Guardians in Montana and Oregon cited the loss of financial subsidies and support services when a youth turns eighteen, as well as poor access to mental health and therapy services for children in their care, as major disadvantages of guardianship. These findings suggest that prospective guardians may need more initial and ongoing training regarding the definition, goals, advantages, and limitations of the guardianship option.

Child Well-Being

Child welfare professionals have questioned whether guardianship promotes the psychological and intellectual development of children as well as other permanency options, and have asked whether special-needs children are better off with the supports and resources available through the traditional foster care system. Although few States have reported systematic findings on the developmental and well-being outcomes of children in guardianship, the available evidence suggests that children with access to assisted guardianship fare as well as those without access to assisted guardianship. Maryland and Montana have reported no significant differences between experimental group children (eligible for guardianship) and control group children on several measures of well-being, including school performance and attendance, engagement in risky behaviors, access to supports and services, and overall quality of life. Similarly, Illinois found no statistically significant differences between experimental group children and control group children in scales that measure self-efficacy, depression, connectedness to the community, social support from caregivers, physical health, and substance abuse.

The individual experiences and perspectives of children may reveal the most about the success of guardianship as a permanency option. Evaluation findings from the Illinois, Delaware, and Montana demonstrations indicated overall satisfaction on the part of children with their guardianship arrangements. Interviews with youth in Montana provide some of the deepest insights into the attitudes of children about guardianship. Youth in Montana's study identified several reasons for pursuing the guardianship, such as maintenance of strong ties with the biological parent, providing relatives with the financial support to keep the extended family together, giving parents time to address personal and legal problems, and providing stability to children who do not want to be adopted. The advantages of guardianship mentioned most frequently by youth include shedding the social stigma of foster care; experiencing an enhanced sense of stability; and gaining more freedom to engage in normal childhood activities, like spending time with friends, having sleepovers, getting a driver's license, or playing sports. Youth interviewed for the Montana evaluation offered these poignant observations on the positive effects of guardianship in their lives:

"Now I can go over and spend the night with my friends just like other people. I tried it once when I was in foster care and they wanted to investigate my friends' parents. It is a lot easier to have friends now." 8

"One of the best things about guardianship is that no social worker shows up at school." 9
"I used to have nightmares before every court hearing and I could not concentrate in school for a month before each hearing. I was afraid I would have to move. Now I don't have to do that anymore." 10

Although Illinois' demonstration was implemented statewide, the evaluation was conducted in only three geographic regions: Cook Central Region, Peoria Sub-region, and East St. Louis Sub-region.

These numbers refer to the total number of children ever assigned to the experimental or control group in the geographic regions in which the evaluation was implemented. A much larger number of children participated in the demonstration statewide, with 6,822 children entering private guardianship throughout the State between May 1, 1997 and March 31, 2002.

Figures represent numbers reported in final evaluation reports or most recent progress reports for demonstrations that have not yet completed their initial five-year demonstration period.

The rationale for guardianship was quite different in North Carolina than in other States, which have used guardianship only when adoption and reunification have been ruled out as permanency options.

In reviewing the issues explored in this paper, several important lessons emerge that serve as useful guidelines to other States studying assisted guardianship as a permanency option:

- Caseworker buy-in and support are essential to the successful implementation of assisted guardianship programs. For example, Delaware's final evaluation report noted that more guardianships were awarded when program managers actively promoted guardianship and caseworkers consistently discussed the guardianship option with eligible caregivers.
Child welfare staff need adequate training to understand policies and procedures regarding assisted guardianship. Thorough training on guardianship that is institutionalized as a standard part of caseworkers' professional preparation may increase utilization of this permanency option. Illinois noted in its final evaluation report that workers who received training in subsidized guardianship were more likely to complete subsidized guardianship cases (71 percent) than workers who did not receive the training (51 percent). Useful training topics include procedures for assessing eligibility and preparing case files for court hearings.

Many caregivers considering guardianship cannot or will not absorb a loss of financial resources. States will make guardianship a more attractive option if they offer financial support at a level that is equal or similar to that available through long-term foster care or adoption.

Caregivers and children in guardianship need services and supports similar to those available to children who are adopted. The physical, intellectual, and behavioral needs of the child should be considered in determining whether guardianship is the most appropriate permanency option.

Close and early collaboration with the courts is essential to the development of streamlined procedures that promote the speedy and efficient establishment of guardianships.

States and local governments should explore the implementation of specific placement review procedures to ensure that guardianship receives reasonable consideration as a permanency option (for example, Delaware's establishment of a Permanency Committee).

Evaluations of guardianship waivers will be strengthened by more detailed tracking of offers and acceptance of guardianship. States that implemented random assignment designs operated on an "intent to treat" principle, with the assumption being that most families that received a subsidized guardianship offer would accept it. Because States may have expected more workers and families to pursue guardianship, they gave little initial consideration to collecting basic information regarding the number of children eligible for guardianship, the number of guardianships offered, the number of caregivers who accepted guardianship, the reasons for accepting or declining guardianship, and the number of guardianships eventually established. Future evaluations that track these statistics will help answer fundamental questions regarding the implementation of guardianship demonstrations, such as why more eligible children do not end up in guardianship, and what barriers, such as caseworker or court opposition, impede the establishment of guardianships.

States should explore the potential impact of assisted guardianship on a family's eligibility for other public benefit programs, such as food stamps and child care. To mitigate potentially harmful effects from a loss of these benefits on families with children in guardianship, States must resolve any outstanding eligibility issues when considering implementation of new or expansion of existing guardianship waiver demonstrations.

**Next Steps**

Final evaluation reports are still forthcoming from New Mexico and Montana in December 2005 and March 2007, respectively. Their studies will include more data on the implementation of assisted guardianships; worker, child, and caregiver attitudes toward guardianship; and child and
caregiver functioning and well-being. Both North Carolina and Oregon have recently received five-year extensions of their waiver demonstrations into 2009 that will include assessments of the permanency and safety outcomes of children in guardianship arrangements. In addition, Illinois is currently in the process of implementing a second phase of its guardianship program to evaluate innovative strategies for pursuing permanency for older wards. Building on its original assisted guardianship waiver, Illinois will test the efficacy of an enhanced guardianship option that offers post-permanency transition services to children who exit to guardianship or adoption after age 14. Fewer older youth than expected exited to guardianship during the first five years of Illinois' demonstration. One possible explanation supported by anecdotal evidence is that some older youth and their families choose foster care rather than opting for guardianship because exiting to guardianship would cause them to lose eligibility for independent living and transitional supports available to youth who "age out" of foster care. The "enhanced guardianship" component of Illinois' waiver will test whether offering these services to older wards who exit to adoption or guardianship improves overall permanency outcomes, as well as whether the enhanced intervention improves measures of self-sufficiency and well-being for these youth.

In addition to the continuation of these existing demonstrations, two States - Minnesota and Wisconsin - have recently received approval to implement new waiver demonstrations involving assisted guardianship. Through Wisconsin's Guardianship Permanency Initiative, licensed relative and non-relative foster care providers will receive a guardianship payment based on the foster care payment in effect for the child at the time he or she enters guardianship. Support services during and after transition to guardianship will parallel those offered to adoptive families. Other demonstration components include training for case managers, court staff, and attorneys to promote understanding of guardianship, educational outreach to families regarding guardianship, and increased licensing activities. Wisconsin plans to implement its guardianship demonstration no later than February 2006, pending legislative changes to the State's guardianship statutes and necessary budget approvals.

Minnesota's demonstration, scheduled to begin in October 2005, will allow for expanded eligibility and services within the State's title IV-E foster care program to support a continuous set of benefits for foster families who adopt or accept permanent legal custody (i.e., assume guardianship) of children in their care. Foster caregivers who adopt or accept a transfer of legal custody of a child will be offered a monthly payment that is equal to the child's existing monthly foster care maintenance payment (currently such payments are substantially lower). Minnesota's demonstration will place particular emphasis on American Indian children in long-term foster care and children with special needs (e.g., older children, children who are part of a sibling group, or children with intense psychological, physical, and behavioral problems).

Results from these future and ongoing evaluations will add to the knowledge base on assisted guardianship and will shed further light on the issues presented in this paper.