



DAVE THOMAS
FOUNDATION
FOR ADOPTION®

Finding Forever Families for Children in Foster Care

A national evaluation of



— signature program —

DAVE THOMAS
FOUNDATION FOR ADOPTION™

Evaluation Report Summary

*The Impact of Child-Focused Recruitment on Foster Care
Adoption: A Five-Year Evaluation of Wendy's Wonderful Kids*

October | 2011

Prepared by:



AUTHORS

This Evaluation Report Summary was prepared by Karin Malm and Sharon Vandivere of Child Trends. Co-authors include Tiffany Allen and Kerry DeVooght of Child Trends and former colleagues Raquel Ellis, Amy McKlindon, and Eric Williams. In addition to Child Trends authors, Jacqueline Smollar, project consultant, and Andrew Zinn of Chapin Hall at the University of Chicago contributed to the evaluation report.

ACKNOWLEDGEMENTS

This report of the evaluation of the Wendy's Wonderful Kids (WWK) initiative represents many years of hard work and dedication of president and CEO Rita Soronen, and the program managers, Angela Marshall and Connie Ackert, of the Dave Thomas Foundation for Adoption. In addition, it recognizes the diligence and dedication of the many WWK recruiters, supervisors, and public child welfare agency caseworkers, program managers and administrators in the WWK grantee sites without whom we would have no data and information to present. To date, WWK recruiters have submitted well over 100,000 monthly updates on more than 7,400 children who have been served by the WWK program.

We want to spotlight a few of the Child Trends' staff members without whom we could not have conducted this evaluation. In particular, we want to thank the former principal investigator, Rob Geen, whose enthusiasm and commitment made the study possible. The entire project team, including former colleagues Erin Bishop, Lillian Bowie, Lindsay Giesen, Allison Metz, Timothy Ross, and Brooke Wilson, assisted with database responsibilities and qualitative data collection and analysis. Carol Emig, Child Trends' President, provided insight and suggestions for the final report.

Thanks also go to members of our Advisory Group, who provided feedback on all facets of the evaluation, including the final reports and products. Advisory Group members included Richard Barth, Cassie Statuto Bevan, David Cordray, Rob Geen, Brenda Jones Harden, Joe Kroll, Thomas Marris, Pat O'Brien, Renette Oklewicz, Laura Radel, Cedric Riley, Debbie Riley, Gary Stangler, and The Honorable William Thorne. We also wish to extend our thanks to Penelope Maza for her helpful feedback on early drafts of the reports.

Finally, we want to express our gratitude to the older children and prospective and current adoptive parents who participated in our interviews. It is for them and the many thousands of children and families in their situations that we do this work.

We submit this report with high hopes that it will improve the odds that waiting children will find forever families and that our research will spark continued growth in the knowledge base on how to ensure permanency for all children.

SUGGESTED CITATION

Malm, K., Vandivere, S., Allen, T., DeVooght, K., Ellis, R., McKlindon, A., Smollar, J., Williams, E. and Zinn, A. (2011). Evaluation Report Summary: The Wendy's Wonderful Kids Initiative, Child Trends, Washington, D.C.

TABLE OF CONTENTS

Introduction	2
Wendy's Wonderful Kids (WWK)	3
Program effectiveness	9
Cumulative likelihood of adoption over time	12
Likelihood of adoption among children with differing characteristics	13
Differences in WWK impacts across different groups of children	14
Program outcomes among all children served by WWK	15
Adoption disruption and dissolution	16
Implementation of WWK	17
Client perspectives	20
Study implications and conclusions	22

INTRODUCTION

Despite recent increases in annual adoptions, the number of children waiting in U.S. foster care to be adopted has consistently exceeded the number of finalized adoptions in each year for which national data are available. At the end of 2010, state child welfare agencies classified 107,000 children in foster care as available for adoption. While the overall numbers of adoptions ticked up in the years following the 1998 implementation of the Adoption and Safe Families Act (ASFA), the increase in adoptions of younger children has outpaced those of older children.¹ At the same time, the numbers of older youth aging out of foster care continue to rise. In 1998, approximately 17,300 youth were emancipated from care, compared with more than 27,000 in 2010. Indeed, one study that found little evidence that ASFA has increased adoptions for older children also concluded that a child's age is the most crucial factor affecting his or her likelihood of being adopted.²

Adoption is an important goal for children who cannot be reunified with their birth families. Not only might adoption be a path to avoid the negative outcomes frequently experienced by youth who age out of the system without a permanent family,³ it also represents a cost savings to taxpayers.⁴

To recruit adoptive parents, agencies must do more than persuade the general population to call adoption hotlines. Child welfare agencies need strategies to attract or identify individuals who would be interested in the children who need families, who are able and willing to complete the logistical requirements of the adoption process, and who have the capacity to make a permanent commitment to a child. Given the large numbers of “waiting” and emancipating children each year, traditional adoption recruitment services have not been sufficient. For this reason, some agencies have been turning to more targeted strategies aimed at recruiting specific groups of people and finding families for specific children.

Despite the need for evidence-based adoption recruitment programs, however, prior research has failed to provide hard evidence about what works to increase the number of foster care adoptions. Until now, no recruitment program has been

METHODOLOGY

Child Trends' research includes both an impact and process evaluation. The impact evaluation uses experimental methods to identify program impacts — that is, to assess whether, and the degree to which, the program improves permanency outcomes for children waiting to be adopted, as compared to children receiving traditional adoption services. The process evaluation is designed to explain the results of the impact evaluation by documenting how services are implemented and the context in which the program operates. Given the existing evidence and substantial lack of rigorous studies focusing on child-specific recruitment, the WWK program evaluation presents the most rigorous empirical study of child-specific adoption recruitment completed to date.

The analyses conducted as part of this study relied on a variety of data sources. WWK recruiters entered child-level information into a web-based case-management system, the WWK Online Database, on a monthly basis. Research staff conducted visits to program sites twice during the evaluation period. During these visits, staff conducted interviews and focus groups with WWK and child welfare agency staff and managers. WWK recruiters and supervisors also completed surveys upon beginning their work with WWK and at annual conferences with WWK staff. We also conducted in-person interviews with older children and telephone interviews with prospective and current adoptive parents. For the impact analyses, local child welfare administrative data on child outcomes were obtained and analyzed.

evaluated using methods that yield rigorous evidence that they work differently than the status quo.⁵ This report summarizes findings from the first such evaluation of an adoption recruitment model — specifically, the child-focused Wendy’s Wonderful Kids (WWK), a signature program of the Dave Thomas Foundation for Adoption — carried out over the last five years. The evaluation shows that WWK is substantially and significantly more effective than other services in terms of achieving adoptions for foster youth. Furthermore, its impact on adoption is strongest among older youth and those with emotional disorders, groups that have traditionally waited the longest for adoption or that are least likely to achieve adoption. Additionally, the evaluation yielded rich information on how the program was implemented in sites across the nation. More detailed descriptions of the evaluation and findings can be found in two technical reports: **WWK Program Description and Implementation** and **WWK Impact Findings**.

WENDY’S WONDERFUL KIDS

Since its inception in 1992, the Dave Thomas Foundation for Adoption (DTFA) has aimed to increase the numbers of adoptions for children waiting in the U.S. foster care system. In 2004, DTFA launched the Wendy’s Wonderful Kids initiative to further this goal. The WWK program is unique for several reasons, one of which is the fact that it represents a corporate/philanthropic commitment to solving a social problem. DTFA employs a business model in its philanthropy through its emphasis on producing measurable results in terms of the numbers of children matched with prospective adoptive families, placed pre-adoptively, and adopted. At the same time, with its particular focus on harder-to-place children, DTFA recognizes that adequate time and resources are needed to achieve adoption.⁶

To support the program, Wendy’s restaurants and their customers raise funds for DTFA, which in turn issues grants to local adoption organizations in the neighborhoods where the funds are raised. The agencies hire WWK adoption recruiters who spend 100 percent of their time finding permanent, loving families for children in their local foster care systems. Of the WWK recruiter positions funded through April, 2010, 86 percent were employed by private adoption agencies and 14 percent by public child welfare agencies. Agencies with WWK recruiters are not required to have custody of the children in foster care who they serve; however, they must have access to these children and the children’s files, for example, through contracts or other agreements with the public agency.

The program has grown substantially since its founding. Between 2004 and 2010, 122 recruiters reported to work in all 50 states and the District of Columbia, as well as in four Canadian provinces. Figure 1 displays the locations of WWK recruiters, as of April, 2010. (Some grantee agencies oversee multiple WWK recruiters, and some recruiters operate out of the same location, so fewer than 122 locations are shown on the map.) As child welfare systems are typically run at the state or county levels, the national (and international) implementation of this program makes it fairly unusual.⁷

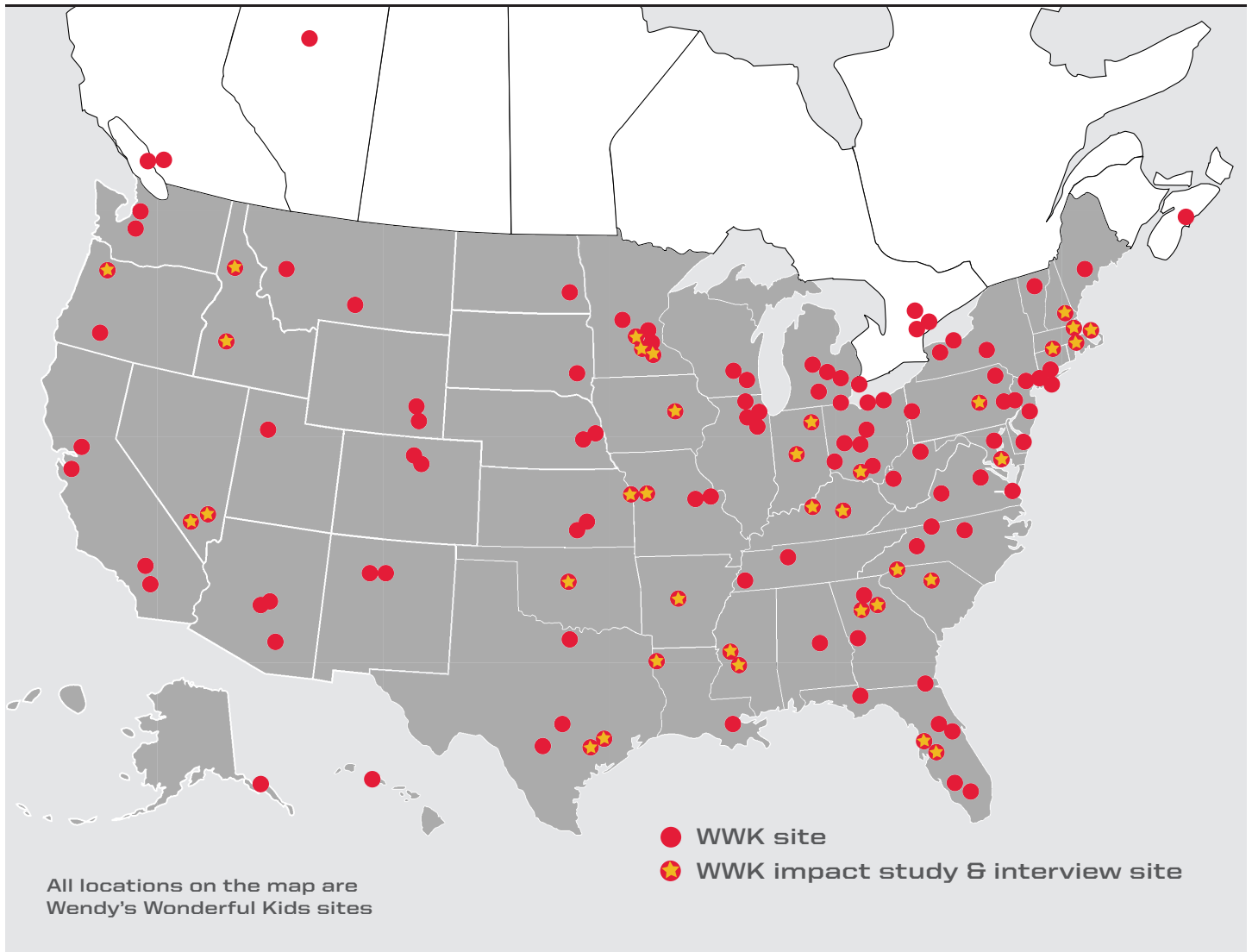


Figure 1. WWK recruiter locations, as of April, 2010

The program is also relatively unusual in its approach to adoption recruitment. Unlike many efforts, WWK is designed to identify specific parents who meet the specific needs of each child awaiting a permanent family. In addition, because WWK recruiters carry small caseloads — they actively serve only 12 to 15 children at a time⁸ — and focus exclusively on adoption recruitment, they can more easily provide a comprehensive and intensive recruitment effort. Through the end of the study in April, 2010, WWK had served 5,645 children, including 1,438 who have had adoptions finalized.⁹ Since then, nearly 1,000 more children in the program have been adopted.

The Dave Thomas Foundation for Adoption describes the Wendy's Wonderful Kids model of adoption recruitment as “child-focused,” requiring WWK recruiters to focus exhaustively on an individual child’s history, experiences, and needs in order to find an appropriate adoptive family. Children are eligible for WWK services if they have a permanency goal of adoption, or are free for adoption, and do not have an identified adoptive family. The program is designed to serve children who are considered challenging to place in adoptive homes due to age, sibling group membership, or disability.

Children served by WWK can be in any type of out-of-home care placement setting, including family foster care, group care, and residential settings. In addition, children are eligible regardless of their interest in being, or desire to be, adopted. Finally, in order to allow for the fact that the recruitment and adoption finalization process can take two years or more from the time of referral, no time limit is set for provision of services, and very rarely do recruiters remove children from their caseload.

“Restoring hope and building that relationship. Getting the child invested. I always laugh when people give me credit for a finalization — I did nothing. When you think about all the things the kid did, the risks that they take, opening up to trust you...it’s mind-boggling...they’re incredibly resilient. — WWK recruiter

The program model components include the initial case referral, building a relationship with the child, conducting a case record review, assessing the child, ensuring the child and prospective family are prepared for adoption, network building, developing and updating a recruitment plan, and performing a diligent search for adoptive resources. Table 1 contrasts the child-focused recruitment activities expected and required by the WWK model with the traditional child-specific/targeted recruitment activities frequently used in child welfare agencies. In addition to the model’s components, the child may be included in other general adoption recruitment efforts; however, general efforts such as internet photo listings and media profiles are not permitted to be the initial or predominant recruitment effort for the child.

Recruitment activity	Child-focused WWK model	Child-specific
Initial child referral	Recruiters contact the child’s caseworker to introduce the role of WWK, gather initial referral information, establish a date to begin review of the child’s case file, and schedule an initial meeting with the child.	Summary of child’s history only
Relationship with child	Recruiters meet with the child monthly, at a minimum, to develop trust and openness and facilitate their assessment of the child’s adoption readiness, prepare the child for adoption, and develop an appropriate recruitment plan, preferably in person and one-on-one.	Contact with child focused on recruitment activities
Case record review	Recruiters conduct an in-depth review of the existing case file. An exhaustive case record review may take several days.	Summary of child’s history only
Assessment	Recruiters determine the child’s strengths, challenges, desires, preparedness for adoption and whether the child has needs that should be addressed before moving forward with the adoption process.	Not typically the job of the recruiter
Adoption preparation	Recruiters ensure that the child is prepared for adoption. During the matching process, the recruiter is expected to assure that the prospective adoptive family is adequately prepared to meet the needs of the child.	Assumed to have been completed when recruitment begins

Table 1. WWK child-focused recruitment compared to child-specific recruitment

Recruitment activity	Child-focused WWK model	Child-specific
Network building	Recruiters meet with significant adults and maintain regular and ongoing contact with the child’s caseworker, foster parent, attorney, CASA volunteer, teacher, therapist, relatives, etc. Monthly contact with the child’s caseworker is expected.	Minimal involvement beyond approval of recruitment activities
Recruitment plan	Based on the case file review, interviews with significant adults, and the input of the child, recruiters develop a comprehensive customized recruitment plan or enhance the existing recruitment plan.	Existing recruitment tools used for children as appropriate
Diligent search	Recruiters conduct a diligent search for potential adoptive families and identify connections to additional resources. Recruiters conduct aggressive follow-up with contacts identified, with the approval of the child’s caseworker.	Assumed to have been completed when recruitment begins

Children served by WWK

The WWK program serves the children it was designed to serve. Almost half of the children served by the WWK program are age 12 or older, and 42 percent of the children are African American (non-Hispanic). More males are served by the program than females (58 versus 42 percent), approximately four in 10 children have a sibling in the program, 45 percent have at least one disability, and close to one quarter (23 percent) have more than one diagnosed disability. (See Figure 2.) The most common disabilities are mental health disorders and/or learning disabilities.

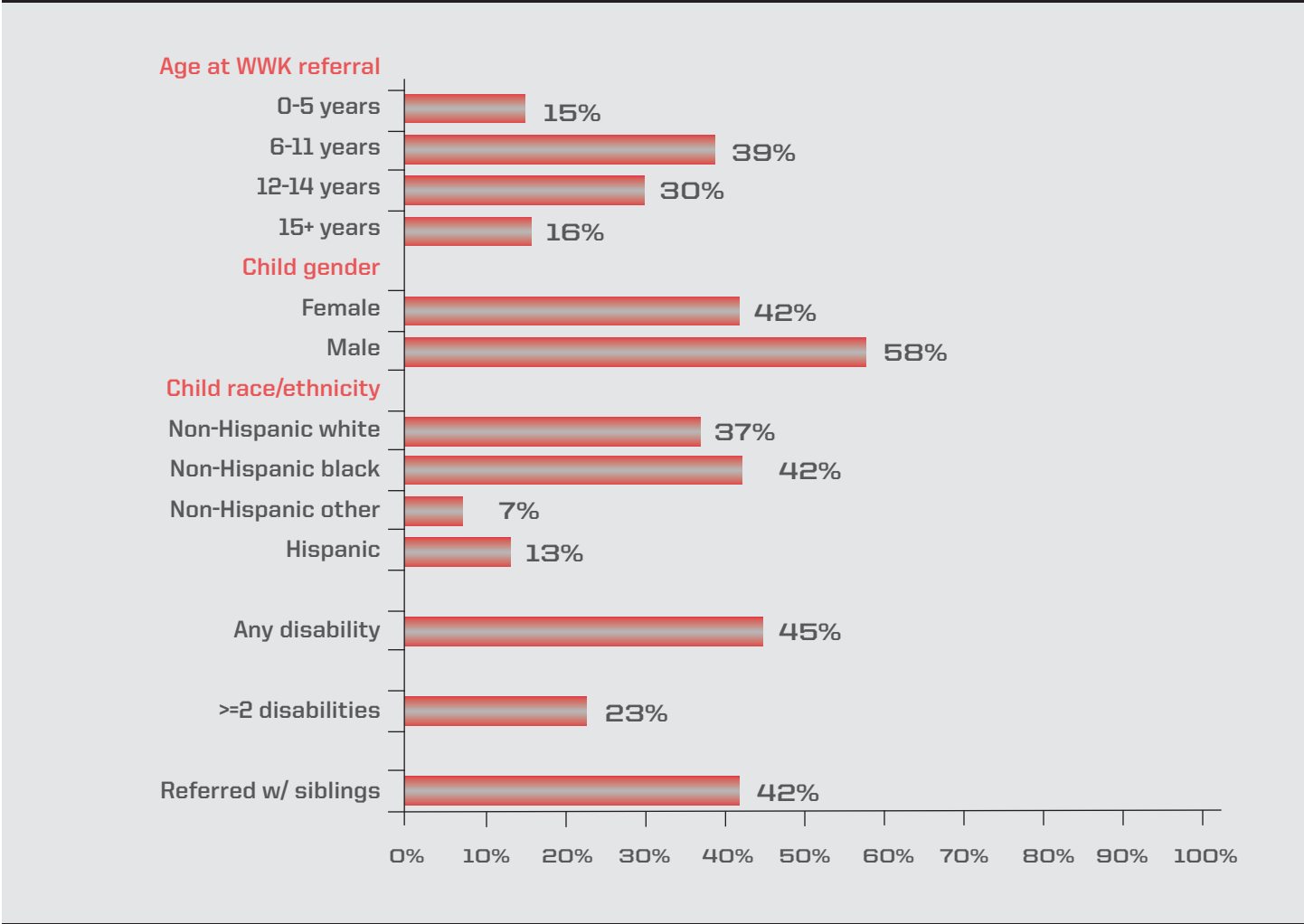


Figure 2. Characteristics of children served by WWK, as of April, 2010

Most children served by WWK (70 percent) entered the child welfare system due to neglect, and most have had their parents' rights terminated (78 percent). (See Figure 3.) At the time of referral to WWK, most children (74 percent) were living in a non-relative foster home, and 20 percent were living in a group home, institution, or supervised independent living placement. The majority of children served by WWK had lived in up to five placements at the time of referral, 20 percent had lived in six to 10 placements and nine percent had lived in 10 or more placements.

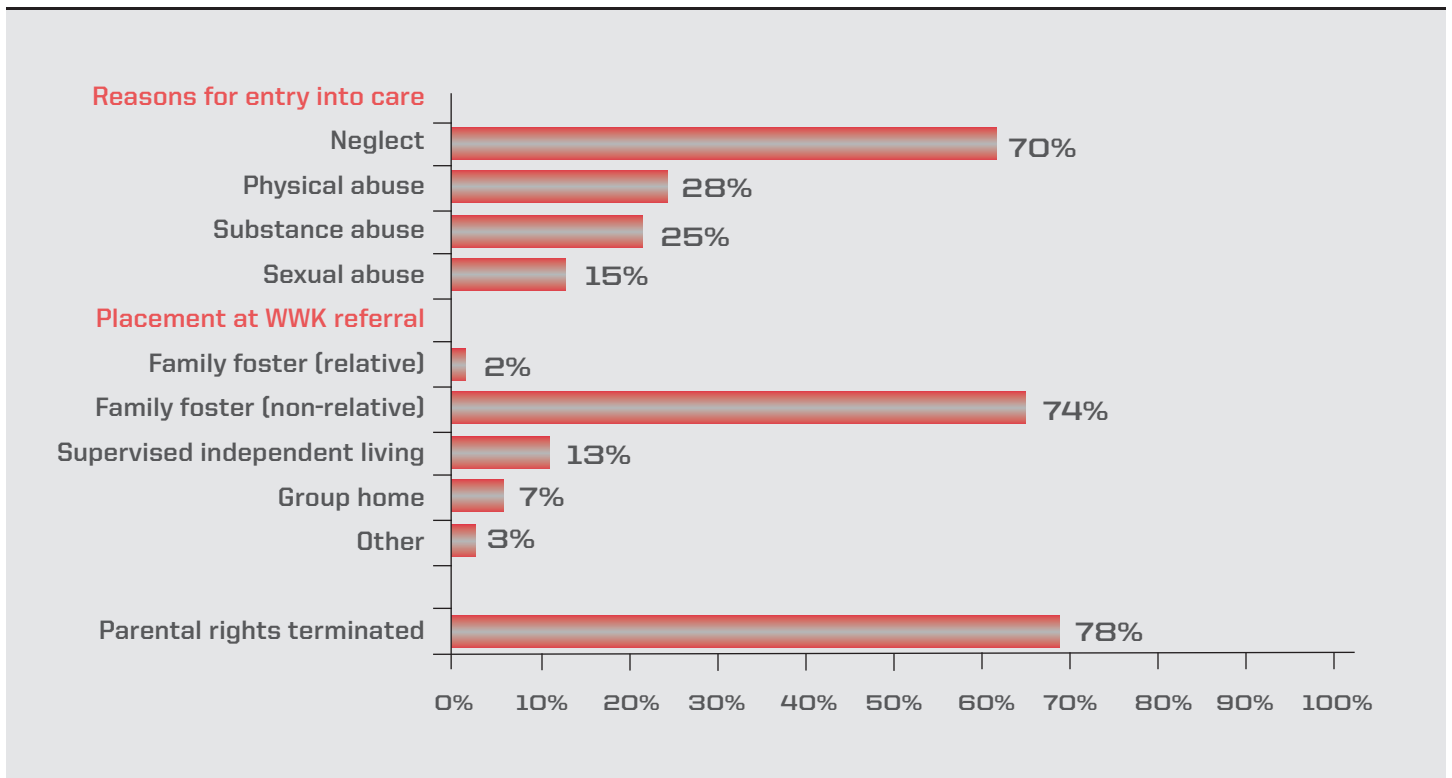


Figure 3. Child welfare history of children served by WWK, as of April, 2010

The children referred to the program had typically received minimum recruitment efforts, with only four percent of children having experienced intensive child-specific recruitment. Some children served by the program also experienced prior failed adoptions; 14 percent had a pre-adoptive placement disrupt pre-finalization, and eight percent had an adoption dissolve post-finalization. (See Figure 4.)

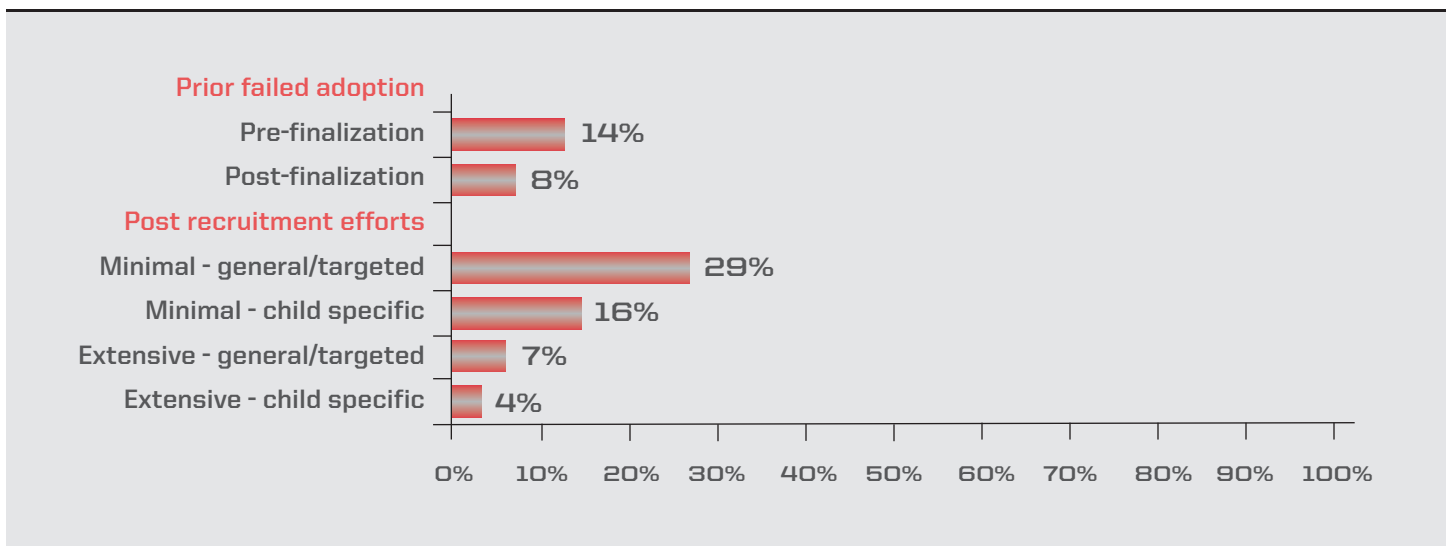


Figure 4. Child welfare history of children served by WWK, as of April, 2010

For detailed information on program implementation, including the relationship between WWK and the public agency, and barriers and facilitators encountered by WWK grantees, see the **WWK Program Description and Implementation** technical report.

PROGRAM EFFECTIVENESS

In order to determine the effectiveness of WWK, we compared the outcomes of 517 children served by 30 recruiters in a subset of 21 WWK grantee agencies (i.e., the treatment or intervention group) to the outcomes of 497 children receiving services that children would receive as a matter of course in the same localities (i.e., the control group).¹⁰ We refer to these typical services as traditional services. Essentially, if the percentage of WWK children who were adopted is larger than the percentage of children not served by WWK who were adopted, and if this difference is large enough to be considered not due to chance, then the WWK program has a “positive program impact,” which indicates that it improves adoption outcomes for children.

And in fact, this is what we found with WWK: Overall, and without controlling for child characteristics, nor recruiter, agency, or jurisdiction, a larger share of children in the WWK group were adopted than in the control group (31.4 percent compared with 22.5 percent).¹¹ More detailed analyses that control for small differences between the two groups and that account for the site-level commonalities support this initial finding. They show that the likelihood of adoption for children served by WWK is more than one-and-a-half times greater than the likelihood for children not receiving WWK services.

Because the WWK impact is assessed relative to the outcomes of children not receiving WWK services, an understanding of what traditional services are is important in order to interpret the substantive significance of the impact findings. Children assigned to the evaluation’s control group received only the traditional services, while children assigned to the WWK program received both traditional services and the services provided by the WWK recruiter. Thus, the program’s impact can be seen as the improvement in outcomes above and beyond what would have been obtained through traditional services alone.

Traditional “typical” services

Recruitment process

In most localities, adoption recruitment begins after termination of parental rights when the child’s case goal officially changes to adoption. In almost half the sites, the child’s caseworker has responsibility for adoption recruitment efforts, while in slightly more than half the localities a secondary worker has primary responsibility for recruitment. Only a few localities report their adoption recruitment efforts mirror the WWK program’s components, though one-third report recruitment efforts include some of the WWK program elements. Almost half of the localities do not conduct any child-centered recruitment activities as part of their recruitment process. All localities report using the media in their recruitment efforts (e.g., Wednesday’s Child television broadcasts, photos of children in a Heart Gallery). In addition, about half report internal networking, and almost all use external networking with private adoption agencies to identify potential adoptive families. Almost all localities also use community resources such as faith-based programs.

Child preparation

Localities participating in the impact evaluation were almost equally divided in terms of the individual with primary responsibility for preparing a child for adoption among the child's caseworker, adoption worker, and therapist. However, about one-third report other child team members (e.g., the foster parent, GAL [guardian *ad litem*] or CASA) also prepare the child for adoption. Only a few localities conduct assessments of children's readiness for adoption and only one site conducts adoption preparation groups for children. Almost one-third of the sites have no formal preparation process. While the localities vary within regard to the age at which children must consent to adoption, over half report recruitment efforts continue even if children of consent age say they do not want to be adopted.

Family preparation

The majority of localities have a team approach to preparation of prospective adoptive families. In less than one-third, one person is responsible for preparing the family. In most localities, preparation typically consists of training for prospective adoptive parents, as well as providing information about the child to the family and assisting the family with the homestudy and paperwork. In addition, more than half of the localities give the prospective adoptive family the opportunity to talk with members of the child's team. Few localities keep the prospective family informed of the status of the adoption process.

Information about traditional services is also important for understanding the presence and size of the program impacts. The more similar typical services are to the WWK model, the less likely WWK is to have a positive impact on adoption above and beyond the effect of typical services. During site visits, we collected information on services provided to children not participating in the WWK program through interviews and focus groups with non-WWK child welfare agency staff. The text boxes regarding traditional services provide syntheses of that information regarding the typical recruitment process, as well as regarding the typical child and family preparation processes. Overall, among localities involved in the evaluation of WWK effectiveness, non-WWK services varied in terms of their similarity to WWK services. Only a few localities provided child-focused recruitment services (outside of WWK) to waiting children, although the use of this approach seemed to become somewhat more common during the several years of the study period.

Despite the fact that the children come from a subset of all WWK agencies, children in the analysis group have generally similar demographic characteristics and prior child welfare experiences compared to the full population of children served by WWK in many ways.¹² This similarity strengthens our ability to generalize the findings from the group of children involved in the present analysis to children served in other sites by WWK. Had marked differences existed between the study group and the broader group of children served, we would have been much more cautious in assuming that the effectiveness observed in the present study likely holds true for the WWK program as a whole.

In order to infer that the intervention caused the observed difference in outcomes between children served by WWK and those not served by WWK, it is important to rule out the possibility that differences in the characteristics of the children in the two groups were responsible for the impact. Group differences might explain the impact if, for example, workers were inclined to refer children who are motivated to be adopted, rather than those opposed to adoption, to receive WWK

services. If this happened, then it could be the willingness and interest in adoption of the children served by WWK, rather than the intervention itself, that resulted in better outcomes among children served by WWK. To rule out this possibility from the outset, along with other confounding factors, we randomly assigned children either to receive WWK services or not to receive WWK services via an automated “lottery” process in the WWK case management data system. The random assignment of children generally made the two groups statistically comparable, with the groups differing only slightly on a few characteristics.¹³

As we noted above, overall, 31.4 percent of children served by WWK were adopted, compared with 22.5 percent of those not served by WWK. However, a more robust estimate of the program impact requires that we examine recruiter-specific (or within-recruiter) differences, because of the fact that the enrollment of children into the impact study occurred separately for specific WWK recruiters within separate agencies and localities. (When enrolled into the impact study, children were referred to a WWK recruiter. The WWK recruiter then used an automated feature in the WWK online database to randomly assign each child either to his/her own caseload, or not to receive WWK services. Thus, the jurisdiction of the WWK recruiter determined children’s eligibility to be enrolled into the impact study, regardless of whether or not the child ultimately was assigned to receive WWK services.) It is important to account for the possibility that children within the locality served by a particular WWK recruiter shared characteristics and/or common experiences that might affect their likelihood of adoption. To account for these possible cross-recruiter differences, we estimated the difference in the likelihood of adoption for all children receiving WWK services, relative to the likelihood of adoption for the control group, while accounting for average differences in adoption rates across localities. This analysis shows that the likelihood of adoption for children served by WWK is more than one-and-a-half times greater than the likelihood for children not receiving WWK services.¹⁵ For more detailed information on methods and findings, see the **WWK Impact Findings technical report**.

KEY FINDING:

The likelihood of adoption for children served by WWK is more than one-and-a-half times greater than the likelihood for children not receiving WWK services.

One additional adjustment was necessary to ensure the robustness of our estimates of the WWK program impact. To account for the possibility that differences that occurred by chance between the treatment and control groups partially explain the apparent impact of WWK on adoption, we recalculated the impact estimate while holding constant child-level characteristics, including child age, gender, race, ethnicity, disability status, whether the child had experienced more than one spell in foster care, and reason for removal into foster care. First, we re-calculated the relative difference in the likelihood of adoption for the treatment and control groups, accounting for mean differences in adoption rates across agencies. The resulting estimate is comparable to the estimate described in the prior paragraph. Even after controlling for differences in child characteristics between the experimental groups, we see that the likelihood of adoption is still more than one-and-one-half times higher for WWK children than that for the children not receiving WWK services.

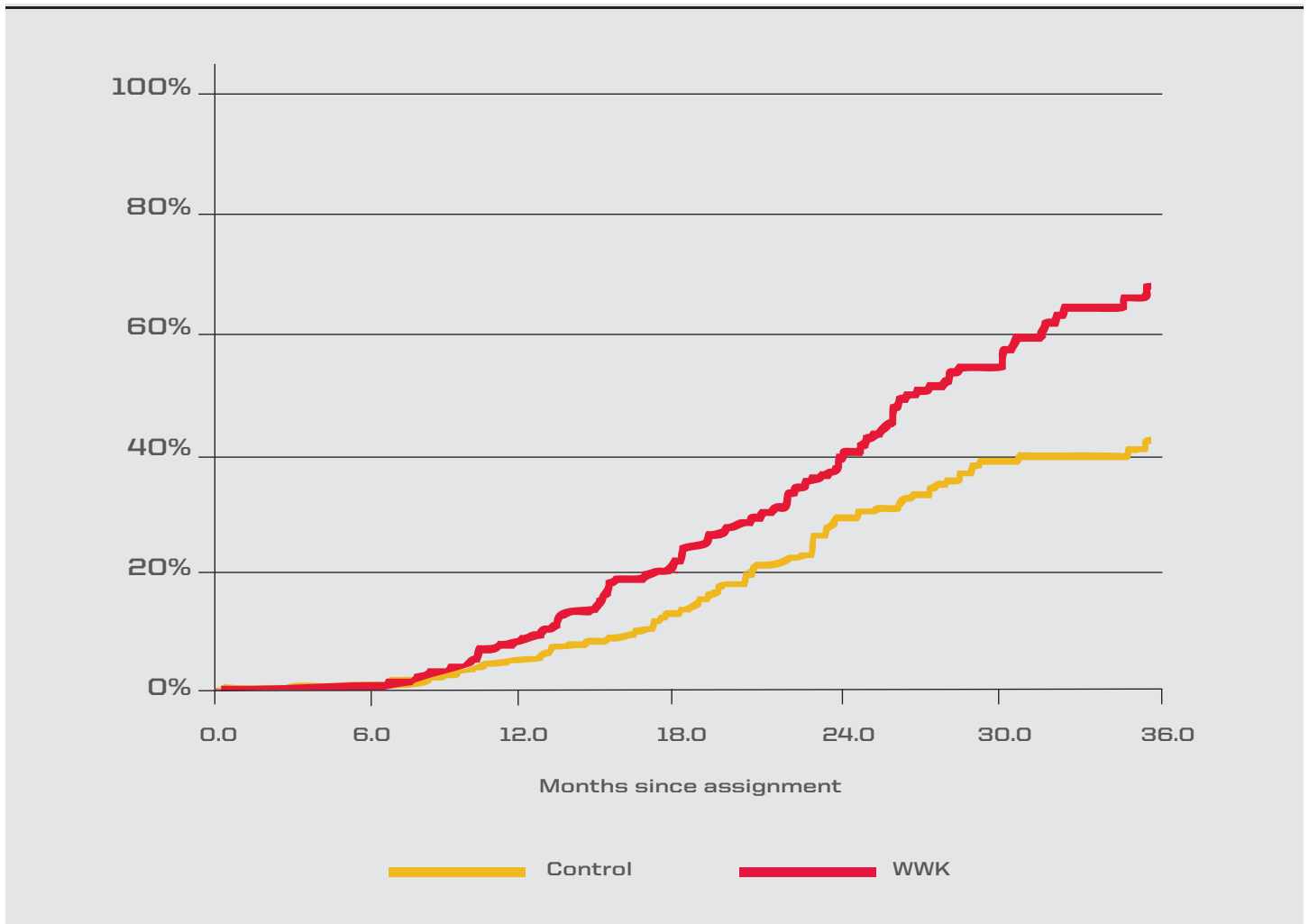


Figure 5. Cumulative percentage of children adopted, by membership in experimental group

We were also interested to see how the likelihood of adoption changes over time, following the assignment of children either to receive or not receive WWK services, and we wanted to know if the timing differed for the two groups of children. Figure 5 shows how the cumulative likelihood — or the “hazard” in statistics — of adoption increases over time for the WWK and comparison groups.¹⁶ In showing the cumulative hazard rate, Figure 5 describes, at each point in time, the rate of adoption over varying periods of time from enrollment into the study (i.e. 0 months since assignment). The rate of increase in the cumulative hazard of adoption between 6 and 18 months after group assignment is higher for WWK children than it is for children in the control group, suggesting the rate of adoption was higher for WWK children than for control group children. Between 18 and 24 months, however, the two lines appear to be approximately parallel, which suggests that rates of adoption were the same during this time period. That is, the cumulative likelihood of adoption for children served by WWK consistently exceeded, but did not increasingly exceed, the likelihood of adoption among control group children, suggesting that the rate of adoption of children served by the two groups is similar during this time period. Finally, after 24 months, the rate of increase in the cumulative hazard drops off among control group children, but remains relatively constant among WWK children. This suggests that the higher likelihood of adoption for children who received WWK services is unlikely to have diminished if children had been followed for a longer period of time in this study.

Likelihood of adoption among children with differing characteristics

As noted previously, the WWK intervention was designed specifically to increase adoptions among children typically considered harder to place. Prior research, as well as analyses of the children involved in the effectiveness analysis and the broader group of children served by WWK, shed light on the characteristics linked with the likelihood of adoption. A review of the literature¹⁷ indicates that most studies of permanency find that children in foster care who are older, who are African American, or who have physical or mental health problems are less likely to be adopted than other children. This review also found that most studies have not found gender to be associated with permanency, but those that do find an association identify girls as having a higher likelihood than boys of achieving permanency. One recent study also found the likelihood of adoption to be higher when children's foster parents are married or unmarried couples rather than single, and for children who are girls, and who are Asian American/Pacific Islander or white, who do not have a diagnosed physical disability, and who do not have an emotional disturbance. However, the same study found that the effects of these characteristics sometimes vary, depending upon the state in which a child resides. Also, the effect of foster family structure on the likelihood of adoption may vary depending upon child characteristics.¹⁸

While a good deal of information about correlates of adoption has already been developed in prior research, this study provides an opportunity to add to prior research and to determine whether correlates among WWK children are similar to those identified in other populations. Our first set of analyses examining correlates of adoption excluded children not receiving WWK services but included all children receiving WWK services — including those not involved in the impact study.¹⁹ Among this group, the likelihood of adoption is lower among older groups of children than among younger groups,²⁰ lower among children with disabling conditions than for those without disabling conditions,²¹ and lower among non-Hispanic black children than among non-Hispanic white children.²² Children who had experienced six or more placements had a lower likelihood of adoption than those who had been in one placement at referral.²³

We also examined how the likelihoods of adoption vary across child characteristics within the random assignment sample of children — that is, those involved in the impact study, including the children not receiving WWK services. These findings are generally consistent with analyses we carried out with the entire sample of children served by WWK.²⁴ We carried out this analysis so that we could identify characteristics associated with lower versus higher likelihoods of adoption in the random assignment sample and subsequently test whether the intervention's impact differs for subgroups of children with such characteristics.

As expected, several characteristics, including child age, race, mental health disorders, having a disability, having a prior spell in foster care, and entry into foster care for several reasons are associated with the likelihood of adoption among the sample of children involved in the impact study. Specifically, the likelihood of adoption is smaller for older children than for younger children. Children who are white are one-and-a-half times more likely than non-white children to be adopted, but Hispanic children are neither more nor less likely to be adopted than non-Hispanic children. Children reported to have an emotional disorder are about one-third as likely to be adopted as children who do not have such a disorder, and children with a diagnosed disability are about two-thirds as likely to be adopted. The likelihood of adoption for children who have had two or more spells of foster care is half that of children with only one spell of foster care.

Reasons for removal from their homes are also linked with children's likelihoods of being adopted. Specifically, among reasons for removal into foster care, parental abuse of alcohol, parental abuse of drugs, and parent incarceration all are associated with relatively higher likelihoods of adoption. Parent abandonment is marginally associated with having a lower likelihood of adoption than those who entered foster care for other reasons.²⁵

Differences in WWK impacts across different groups of children

The analyses in this section explore the possibility that the impact of WWK is different for different subpopulations of children. We were particularly interested to learn whether the intervention works for those children who have traditionally been seen as harder to place for adoption, including older children, those in sibling groups, and those with disabilities or other special needs. Indeed, we found that the impact of WWK is stronger for older children, as well as for children with an emotional disorder, than it is for other children. To identify these differential impacts, we estimated models with interaction terms that allow the effect of assignment to WWK to vary depending on child characteristics.²⁶ These interaction models were estimated for those child characteristics that are (1) found to be significantly related to the likelihood of adoption, as noted in the prior section, and (2) sufficiently prevalent to support these additional analyses.

We found that the likelihoods of adoption between the WWK group and control group change among children of different ages at referral, with the impact of the WWK program greater among older children. For instance, the likelihood of adoption is similar for children referred at age 4, regardless of whether or not they are served by WWK. However, for referral at age 8, the probability of adoption is 0.18 for children in the control group, but 0.27 for children in the WWK group. (Probability values can range from 0, indicating no chance of the outcome occurring, to 1, indicating that the outcome will certainly occur.) Among children referred at age 15, the probability is 0.04 for children in the control group, but 0.12 for children in the WWK group. In short, the relative difference in the likelihood of WWK and treatment group children to be adopted increases among children referred at older ages. While it is true (as shown in previous research²⁷) that the likelihood of adoption is lower among children referred at older ages, and that this is true both for the treatment and comparison groups, among older youth, the likelihood of adoption is greater for those served by WWK than for those not receiving WWK services. For example, among children referred to WWK at age 8, the likelihood of adoption is 1.7 times higher for the experimental group than the control group; among those referred at age 11, the likelihood is twice as high; among those referred at age 15, the likelihood of adoption is three times as high.

KEY FINDING:

While the likelihood of adoption is lower among children referred at older ages, among older youth, the likelihood of adoption is greater for those served by WWK than for those not receiving WWK services.

Another group difference in the impact of the WWK program is apparent among children with and without mental health disorders. Children with mental health disorders are those who have clinical diagnoses of emotional disturbances; they are likely to have behavior problems that may be challenging (or daunting, at the least) for parents.²⁸ The likelihood of adoption for children who are emotionally disturbed is lower than the likelihood of those who are not, regardless of receipt of the intervention. However, among those who have mental health disorders, those served by WWK are more than three times as likely to be adopted as those not served by WWK. In comparison, among children without mental health disorders, those served by WWK are not quite one-and-a-half times as likely to be adopted as those not served by WWK.

KEY FINDING:

Among children who have mental health disorders, those served by WWK are more than three times as likely to be adopted as those not served by WWK.

No differential impact is found across child gender, race, and Hispanic origin. This finding suggests there is no evidence that that the WWK intervention is differentially effective for boys and girls, for white and non-white children, and for Hispanic and non-Hispanic children.

In summary, the evaluation identified that WWK has a positive impact on adoption — that is, it represents a significant improvement over other services by increasing the likelihood of adoption for children in foster care. Furthermore, the impact of the program is stronger for older children, as well as for children with mental health disorders. These are some of the children least likely to be adopted and thus in greatest need of something different than traditional services. Our analyses confirmed prior research showing that their odds of adoption are lower than the odds for younger children and children without substantial behavior problems. It remains true that the likelihood of adoption is lower among older and children with mental health disorders than among other children, whether or not they are served by WWK — indicating the need for continued work to improve recruitment for these children, even when child-focused strategies are used. However, it is important to note that the odds of adoption are markedly greater for older children and for emotionally disturbed children when they are served by WWK.

For detailed information on the research methods and findings, see the [WWK Impact Findings technical report](#).

PROGRAM OUTCOMES AMONG ALL CHILDREN SERVED BY WWK

In this section, we expand our view to examine outcomes achieved among all children served by all WWK recruiters through April of 2010. Here, we do not address the relative effectiveness of WWK compared with other services. Rather, we report on the overall percentages of children achieving various outcomes, as well as correlates of those outcomes. Findings are based on analyses of information that recruiters entered about each child served by WWK in a case management system developed specifically for the intervention, called the WWK Online Database.

Among children with closed WWK cases, most received services for at least one year. Six percent of cases remained open for three or more years. Adoption is the most common reason for case closure, and almost half of children with closed cases have been adopted. (See Figure 6.) Among these children, nearly one in 10 (nine percent) had a

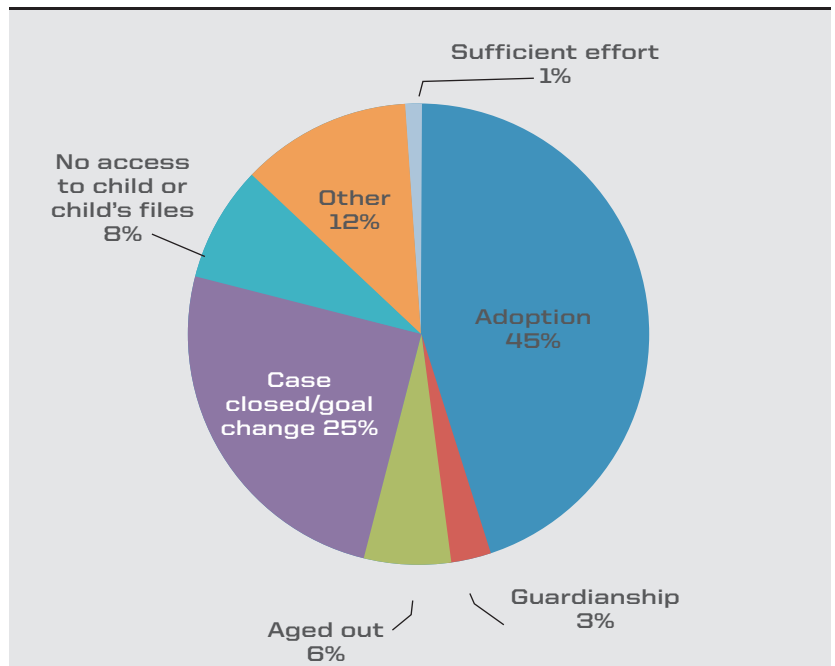


Figure 6. Case closure reasons among children with closed cases, as of April 1, 2010 (n=3,340)

recruiter report that the child had been adopted either by someone who previously knew the child or by someone who was related to the child. It is not clear from available data how many of these children were already living with the families that ultimately adopted them.

For one in four children, the reason for case closure is that the public child welfare agency closed the child's case or changed the child's goal. Overall, the overwhelming majority of cases are closed either because a child achieves permanency, or due to reasons outside of the WWK program's control, such as the child's case closes or the goal changes to something other than adoption. Only a small minority of children (one percent) have cases closed because recruiters have expended every possible effort over at least a two-year period.

For 12 percent of the children, the recruiter selected "other" in the WWK Online Database as the reason for case closure. Other reasons for which recruiters typed individual responses had to do with unique case circumstances, such as children who want to stay with a family but do not want to be adopted, reunification with members of the child's birth family, and specific reasons for which the child is not available (e.g. incarceration, long-term hospitalization).

Adoption disruption and dissolution

One measure of the "success" of an adoption is whether it dissolves or disrupts, but both events have been difficult to study in prior research. The field has not come to a consensus on a concrete, universally accepted definition of adoption disruption. Not only do data systems define these events differently across localities, but they also do not adequately capture these events when they do occur. Information on adoption dissolution — that is, adoptions that fail after finalization — is particularly difficult to obtain, given the privacy and confidentiality of adoptive families after legal finalization. The available research finds disruption rates to be between 10 and 25 percent for children adopted from foster care.²⁹ Rates of adoption dissolution appear far lower, with a recent study finding a seven percent figure.³⁰ Prior research has shown that rates of disruption and dissolution increase with the age of the child,³¹ and families in which children display behavioral or emotional problems are more likely to disrupt.³²

It is not possible to track dissolutions among children served by WWK, because at this point, the children's cases would be closed and data no longer would be entered into the WWK Online Database. However, recruiters are asked to enter information about disruptions that children on the caseload experience. Among all children ever served through April 1, 2010, and children who had ever experienced a pre-adoptive placement through WWK, two out of 10 (21 percent) have had a recruiter report a disrupted placement while the child was on the WWK caseload.

Given that the rate of disruptions found in prior research is 10 to 25 percent, and given the fact that the disruption rate is expected to be on the higher end for older children and children with behavioral problems — specifically the groups targeted for services by the WWK intervention — the rate of 21 percent found among WWK children who had been placed pre-adoptively seems within the range of what might be expected.

However, the observed rate of disruption depends on how much time has passed since the adoptive placement, and if children were recently placed, then they had a lower risk of disruption. That is, if children are examined only a short time after moving in with a pre-adoptive family, researchers may "miss" some disruptions that occur later in time, after the child has lived with the pre-adoptive family longer.³³ For this reason, we also looked specifically at the subset of children served

by WWK whose cases were closed within the subsequent 11 months among those served by April, 2010, and who had experienced a pre-adoptive placement; among this group, we found a disruption rate of 17 percent. However, of these children, 41 percent were later adopted through the WWK program.

In analyses not reported here, we have also seen that while many children served by WWK are matched, not all matches result in pre-adoptive placements, and some children experience multiple matches. A challenge for WWK program staff is determining how aggressively to move forward with matches and pre-adoptive placements. It seems likely that the more aggressive the search, the greater the chance that a child may experience a failed match or a disruption, an experience that is likely disappointing and potentially traumatic for children (and one reason reported in some of the site visits for the reluctance in making matches and pre-adoptive placements in the traditional services framework). But moving forward less aggressively with matches and pre-adoptive placements means that some children may be less likely to find themselves in a permanent adoptive family, or if they do, they may achieve permanency more slowly.

It is interesting to consider that much of the extant research on factors linked to the success or failure of adoptions focuses on child and family characteristics, rather than agency-related factors. However, some evidence indicates that lack of parent preparation and misinformation or lack of information about the child is common in failed adoptions; additionally, the availability of social supports and informal supportive services and formal post-adoption supports, agency and staff turnover, and having different staff responsible for preparing the child and family are other factors that may be associated with disruptions or dissolutions.³⁴ Given this, the design of the WWK model exhibits some components that may be well-positioned not only to make adoptive matches, but to reduce the likelihood of disruption or dissolution of those adoptive matches.

IMPLEMENTATION OF WWK

In recent years, program funders and evaluators in the field of child welfare have increased their attention not only on identifying the outcomes achieved by child welfare programs, but also on the process of implementing those programs. This increase in attention grew out of concerns in the field about the lack of evidence regarding what is and is not effective in achieving specific goals for children and families in the child welfare system. Experimental evaluations have been described as “black boxes” because they identify the presence or absence of causal impacts. That is, they provide information about whether and the degree to which an evaluated program is more effective than some comparison. However, they do not explain why an observed impact occurred. An analysis of implementation processes allows for identification of factors that may have contributed to success or have been barriers to achieving success. In addition, when research finds a program to be effective, results of implementation analyses can yield important considerations for model replication and expansion.

Because of the non-experimental nature of the analyses presented in this section, it is important to keep in mind that findings about how implementation is linked with positive outcomes must be considered tentative and exploratory. Nevertheless, taken together, evidence regarding both outcomes and implementation can aid program funders and developers in maximizing resources to achieve desired outcomes.

In summary, we found that the WWK model was implemented unevenly across children. We also found evidence that children who receive more of the component services are more likely to be adopted than are those for whom the model is

implemented with less intensity. Lastly, we found evidence worthy of further exploration indicating that some model components — in particular, relationship building with the child and diligent search — may be more important than others for successful outcomes.

Model component	Optimum practices
Component 1: Initial case referral	<ul style="list-style-type: none"> • Recruiter met with child in person within or before first month of the child’s active status. • Recruiter began review of the case record within or before the first month of the child’s active status. • Recruiter contacted the child’s case worker within or before the first month of the child’s active status.
Component 2: Case record review	<ul style="list-style-type: none"> • Recruiter spent at least six hours reviewing the child’s case file. • Recruiter used a standard instrument to review the case file.
Component 3: Relationship with child	<ul style="list-style-type: none"> • Recruiter met with child at least once per month while case was on active status.* • Recruiter communicated with the child by phone or e-mail at least once per month while the case was on active or monitoring status.
Component 4: Assessment	<ul style="list-style-type: none"> • Recruiter developed the child’s assessment within three months of the child’s first active date.* (While the model proscribes that the assessment be carried out “initially,” it can be inferred from the fact that quarterly updates are required that the initial assessment should occur in the first quarter.) • Recruiter updated the child’s assessment every quarter, beginning in the second quarter that the case was on active status.* • Recruiter used a standardized instrument to conduct assessment.
Component 5: Recruitment plan	<ul style="list-style-type: none"> • Recruiter worked on developing a recruitment plan within or before the first three months of active status.* (While the model proscribes that the recruitment plan be carried out “initially,” it can be inferred from the fact that quarterly updates are required that the initial recruitment plan should occur in the first quarter.) • Recruiter updated the recruitment plan every quarter, beginning in the second quarter that the case was on active status.*
Component 6: Diligent search	<ul style="list-style-type: none"> • Recruiter identified at least two potential adoptive resources within the first three months that the case was on active status. • Recruiter contacted at least two potential adoptive resources within the first six months that the case was on active status.
Component 7: Adoption preparation	<ul style="list-style-type: none"> • Component could not be included in analysis due to lack of data. This component pertains to ensuring that the child is prepared for adoption, and assuring during the matching process that the prospective adoptive family is adequately prepared to meet the needs of the child.
Component 8: Network building	<ul style="list-style-type: none"> • Component could not be included in analysis due to lack of data. This component involves maintaining monthly contact with adults significant to the child.
<p>* Denotes practices for which the Dave Thomas Foundation for Adoption has defined specific time frames as part of the program model. (All practices are relevant model components but the Foundation has not specified time frames for all.)</p>	

Table 2. Model components and quantifying implementation

To gain evidence about how the WWK program model contributes to program success, our first step was to calculate an implementation score for each child that reflected the extent to which the model was implemented for each child.³⁵ Using data entered by recruiters in the WWK Online Database on children served across all program sites, we defined the implementation score as the WWK recruiters' use of specific practices identified across six components of the model (initial case referral, case record review, relationship with the child, assessment, recruitment plan, and diligent search).³⁶ Table 2 shows how we “operationalized,” or quantitatively defined, implementation. Essentially, children received one point for each bulleted item shown in Table 2. The points could be summed across all components for an overall implementation score or within components for component-specific scores. To the degree possible, our definitions were based on requirements established by DTFA.

For purposes of our analysis, program “success” was defined as either a child having a finalized adoption or guardianship or, more broadly, as a child having a finalized adoption/guardianship or having ever been placed in a pre-adoptive family.

The implementation assessment then tested the following hypothesis: If implementation practices are key contributors to program success in terms of adoption, then children who achieved finalized adoptions or pre-adoptive placements should have higher implementation scores than children who did not achieve these outcomes, net of other factors associated with positive outcomes (such as child characteristics that are associated with a greater or lesser likelihood of adoption). The assessment also looked at individual components of the program model to determine if some components were more highly associated with program success than others. See the **WWK Impact Findings technical report** for more information on the implementation assessment and the individual components examined.

KEY FINDING:

The extent of program implementation is significantly associated with program success.

Interpreting the associations between program success and the implementation scores is tricky, because implementation might vary depending on child characteristics, which are in turn associated with program success. For example, in thinking about how child characteristics and implementation might be interrelated, one might expect a recruiter to implement model components with the greatest rigor for a child seen as potentially challenging, with the belief that extra effort may be needed to place such children with adoptive families. Yet conversely, some “challenging” characteristics of children may indirectly hamper recruiters' efforts to implement the model components. For instance, older children may be resistant to meeting with yet another social worker, or they may simply be too busy with friends, school, and extra-curricular activities to meet with the recruiter. And while, on the one hand, older children could themselves serve as resources in aiding the recruiter with the diligent search, perhaps some recruiters feel that, for older children in particular whose child welfare cases may have been active for several years, someone else must have completed the diligent search already.

Our findings in this analysis will be biased to the degree that we have not accounted for all the factors related to children's “challengingness.” We have attempted to minimize such bias by accounting for child and recruiter characteristics that likely affect recruiters' implementation efforts in our multivariate analyses of the association between implementation and program success. Still, we cannot be certain that we have controlled for all relevant factors that confound the association between program implementation and program success.

Analyses of the relationship between outcome success and the overall implementation score indicated a positive association, net of child and recruiter characteristics. Specifically, the implementation score was higher for children with a finalized adoption or guardianship, on average, than for other children, and it was also higher for children who had been adopted, placed in guardianship, or who had a pre-adoptive placement, compared with children who had not. That is, with all other variables held constant, children who achieved outcome success had, on average, higher implementation practice scores than children who did not achieve outcome success. This finding is consistent with (but cannot prove) the hypothesis that the degree to which program implementation occurs contributes significantly to program success.

When we examined the association of individual model components with program success, we found two in particular — relationship building with the child and diligent search for adoptive resources — to be associated with adoption/guardianship and pre-adoptive placement. This finding corresponds with what program staff have told us in individual, in-person interviews: They overwhelmingly report that building a relationship with the child is the most important component of the WWK model, as it encourages children to open up about adoption and to become more receptive to it.³⁷

KEY FINDING:

Two WWK model components — relationship building and diligent search — are positively associated with program success.

Our analyses also showed great variation across children in the implementation of the WWK model components. In light of findings from this analysis, it is possible that more consistent implementation of the WWK model — particularly in the areas of relationship building and diligent search for adoptive resources — could yield even greater success.

Client perspectives

Older children for whom recruitment was conducted, as well as current and prospective adoptive parents working with WWK staff, were interviewed to examine client experiences of the WWK program.

Older children's perceptions.³⁸ Just under half of the children reported that no one else tried to help them find an adoptive home prior to participating in the WWK program. Among those who did report prior adoption recruitment, few reported having been asked about individuals in their lives that could potentially serve as an adoptive resource, and the majority of these children reported feeling that their voice was not heard in this process.

The children described the types of activities they participated in with their WWK recruiter, such as eating at restaurants, visiting the mall, zoo, or park, driving around town, or just simply taking a walk. Other activities included accompanying the recruiter to recruitment events, taking pictures of the children to be used in recruitment, and working on adoption books and life memory banners together. During their time together, the children and the recruiter talked about a number of different topics, including their future goals and overall well-being. Nearly all of the children reported that the recruiter discussed adoption with them, although the frequency with which this topic was discussed varied. A little over half of the children reported that the recruiter discussed adoption with them every time they met or most of the time, while the remainder reported they discussed adoption only some of the time.

KEY FINDINGS:

- Over three-quarters of parents reported that the recruiters prepared them very well or somewhat well (managed expectations, helped understand the process, educated about child's specific needs); the remaining parents explained they were already prepared and did not need assistance.
- Even though it is not part of the model, most parents reported that the recruiter continued to work with them post-placement.

The children also discussed their feelings toward adoption prior to working with the recruiter. Just over one third of the children reported not wanting to be adopted prior to working with the recruiter, and smaller minorities reported feeling unsure or conflicted about being adopted, as well as feeling indifferent or never having thought about adoption prior to working with the recruiter. Experiencing failed past placements and not having enough information about what adoption entails are reported as contributing to these conflicting feelings. Many children reported that their feelings about being adopted have changed after working with the WWK recruiter. Specifically, of the children previously opposed to being adopted, just under half reported feeling open to adoption after working with the recruiter.

Prospective and current adoptive parents' perceptions.³⁹ While assisting parents post-placement is not a formal component of the model, most parents who made it to the placement phase of the adoption process reported that the recruiter continued to work with them and the child or sibling group post-placement. Most commonly, recruiters routinely checked in (via phone, email or in person) with the parent and child post-placement. Parents noted that recruiters provide moral support, assess parent and child satisfaction with the match, provide referrals to services for the child or family, and observe parent-child interactions.

Parents also noted the benefit of sustained relationships between their family and the WWK program. For example, one family explained that their child had formed a relationship with another child on the WWK caseload, and the WWK recruiter and supervisor ensured that the children maintained their friendship after placement. The child's friend was ultimately placed out-of-state, but the recruiter and supervisor made sure that the child was able to talk with her friend over the phone prior to the move. This parent feels that the supervisor and recruiter "look after the hearts of the kids, not just the permanency."

KEY FINDINGS:

- Just under half of the children reported that no one else tried to help them find an adoption home prior to WWK.
- The majority of children reported feeling that their voice was not heard in the recruitment process prior to WWK.
- Of the children opposed to adoption before WWK, just under half reported feeling open to it after working with the recruiter.
- Nearly all the children reported that they have a different type of relationship with their recruiter than their child welfare worker, with this relationship being more informal, open and honest.

Parents also described recruiters preparing them for adoption. Over three-fourths of the parents reported that the recruiters prepared them to be adoptive parents very well or somewhat well. These parents noted that recruiters helped them manage their expectations (e.g., explaining that there would be a “honeymoon phase” when the child was placed), were open and honest, educated parents about the child’s specific needs and history, and helped them understand the adoption process, policies, and paperwork. When the recruiter did not assist them in adoption preparation, it was because the prospective parent did not seek assistance because they had previously adopted and were familiar with the process, or had received preparation from other individuals in the child’s network. Some parents also noted that they felt the recruiter’s role was to prepare the child, not the family, for adoption.

A small group of parents reported not receiving assistance from the recruiter after the child was placed in their home. Many of these parents said they did not need post-placement assistance because they had other agency supports (e.g., an adoption worker). In contrast, a few parents reported that they could have benefited from post-placement assistance. Specifically, these parents reported needing assistance in stabilizing the child in their home, sharing insights on what to expect during the finalization stage, and coordinating post-placement services. For example, a few parents reported that they needed assistance ensuring the appropriate mental health services were in place to minimize the chance of a placement disruption. Several of these parents also reported the child had been removed from their home.

STUDY IMPLICATIONS AND CONCLUSIONS

Overall, the evidence indicates that WWK does have a positive impact on adoption, particularly for the very children that some agencies and practitioners view as “unadoptable.” Below we summarize the most salient findings, discuss implications for development and replication of adoption recruitment programs, and present our conclusions.

The WWK program substantially and significantly increases adoptions of children from foster care. Among children adopted through the WWK program, the majority were adopted by someone who neither knew the child nor was related to the child prior to the adoption. These findings are instructive for those child welfare agencies and professionals who may be resistant to the idea of aggressive adoption recruitment for older foster children, or to those who continue to perceive that some children in foster care are “unadoptable,” and support DTFA’s vision that all children are adoptable. Several agencies were approached to become WWK program sites and declined to participate, believing either that they had sufficient adoption recruitment resources, or feeling that older children could not be adopted even with additional resources. Additionally, we heard the view voiced in some sites that some workers hesitate to risk disrupting a stable placement that is not an adoptive resource when finding an adoptive family is not assured. The positive impacts seen with WWK provide child welfare professionals with reason to be more hopeful about the prospects of finding forever families for waiting children. The findings might also be helpful to share with older children in foster care, particularly those who feel hopeless about the prospect of being adopted.

WWK substantially and significantly increases adoptions from foster care.

WWK yields the largest improvement in adoption outcomes for older children and those with mental health disorders. The fact that the impact is smaller among younger children and among those not reported to have mental health disorders implies that agencies may not need to fund intensive, child-focused

WWK yields improved adoption outcomes for older children and those with emotional disturbances.

programs such as WWK for every child needing an adoptive home, but may instead need to target these types of programs to certain groups of children.

The relationship between recruiters and children matters.

The evaluation findings highlight the importance of establishing relationships with children. Frequent contact between recruiters and children likely helps build a one-on-one relationship between the recruiter and child, which in turn furthers successful efforts to achieve adoptions. These findings are consistent with the implementation analyses which found that, net of child characteristics, relationship-building is more consistent among children who were adopted than among those who are not. In addition, WWK recruiters cite building a relationship with the child as the most important component of the model. The study's findings consistently point to the importance of these relationships to achieving adoptions. Agencies may need to examine how best to create environments in which at least one of the many professionals involved in the lives of children in foster care can carve out the time necessary to build these types of relationships with the children.

The identification of and contact with potential adoptive resources early on in the case is linked with the likelihood of adoption. Children who were adopted or had been placed pre-adoptively were more likely than children who had never been adopted or in a pre-adoptive placement to have recruiters who implemented diligent search practices. Thus, early identification of potential adoptive resources appears to contribute to program success. As child welfare agencies increasingly utilize family-finding techniques to engage extended family members, adoption recruiters will have more effective tools within their reach. Our findings indicate that identifying multiple potential adoptive resources translates into better outcomes for children.

Early and diligent search efforts contribute to more successful outcomes.

Clarity is needed on responsibility for preparing children for adoption. Findings indicate that responsibility for preparing children for adoption is often shared among different types of staff. Yet, having multiple staff at the public child welfare agency and private provider agencies share responsibility for preparing children for adoption may mean that children are not adequately prepared as no one staff person feels responsible. Findings suggest a clear designation of who holds responsibility for adoption preparation, along with an opportunity for that individual to meet with the child regularly to establish rapport and trust, are important contributors to program success.

Designating one person as being responsible for preparing children for adoption improves outcomes.

Our findings show a rate of adoption placement disruption similar to the range of rates identified in prior research. The incidence of adoption disruption among some children points to the continued need for adoption preparation both of children and prospective parents. According to interviews with prospective parents, parents need assistance in understanding children's needs and how best to work with the child both pre- and post-placement. Many recruiters report having helped prepare families and note the importance of their role in assisting parents in navigating the adoption process. Recruiter involvement in the adoption matching process appears inconsistent across sites. Many prospective parents we

Children and adults need better support before and after an adoption in order to ensure successful placements.

interviewed experienced barriers that ended the process prematurely, and some felt that the child had not been a good match. Given that the children served by WWK tend to be older children and those with significant needs — groups at particular risk for adoption disruption and dissolution — ensuring that appropriate supports are in place for parent preparation and for parent-child matching are potentially important contributors to the success of children adopted through WWK.

According to the WWK recruiters, many children they serve initially say they do not want to be adopted or express feeling unsure or conflicted about adoption. Our interviews with older children found that many changed their feelings toward adoption after working with the WWK recruiter. Nearly all the

children interviewed reported that their recruiter was helpful to them and that they have a different type of relationship with their recruiter than with their child welfare worker, with this relationship being more informal, open, and honest.

The WWK program changes child attitudes about adoption.

Findings from this evaluation of DTFA's signature program, the Wendy's Wonderful Kids initiative, are cause for excitement — both for the prospects of the development and expansion of child-focused recruitment programs, as well as for the future of rigorous evaluation of child welfare programs. Overall, the evidence indicates that WWK does have a positive impact on adoption. Perhaps even more impressive is that the biggest difference between the WWK intervention and other services is for older children and those with clinically diagnosed emotional problems. The very children that some agencies and practitioners may view as unadoptable are the children for whom the WWK program made the biggest difference.

However, the findings also show that adoption is still more likely for younger children and children without emotional problems than for older children and children with mental health disorders — even when served by an intensive, child-focused recruitment program like WWK. This finding points to the need for continued program improvement and a targeting of resources to these vulnerable groups of children. Also, the fact that disruptions occur among children served by the WWK program, both prior to being served by WWK as well as among those served, is a reminder both of the need for the type of adoption preparation that occurs within the WWK program, as well as the need for post-adoption support. In particular, older children, some of whom may initially resist being adopted, need intensive and focused attention to their feelings about adoption that continues after they are placed in adoptive families. In addition, as states serve children in foster care over the age of 18, preparing older children in foster care for independent living should not preclude adoption recruitment for this group. Increased attention should be paid to the services and supports needed for older child adoptions to be made and to succeed. We have identified clear evidence that adoption recruiters can provide services that result in adoption for older children.

This multi-year, multi-site evaluation of the Wendy's Wonderful Kids initiative shows that the WWK program substantially and significantly increases adoptions from foster care. These findings represent important evidence for policy makers, program planners, and public and private funders to consider when making decisions about services for children in foster care. Given the positive impacts found for older children and children with mental health disorders, we are optimistic that outcomes can be improved even further by building on the success of the WWK program. Future investments in continued rigorous evaluation could help us learn more about how to achieve adoption for those children in foster care at risk of aging out of the system without permanency.

For more information on the research, please visit davethomasfoundation.org/research. For more information on the Foundation, visit davethomasfoundation.org, or call 1-800-ASK-DTFA.

¹DeVooght, Kerry, Karin Malm, Sharon Vandivere, and Marci McCoy-Roth. (2011). Trends in adoptions from foster care in the wake of child welfare reforms. Retrieved from http://www.fosteringconnections.org/tools/assets/files/Connections_Adoption.pdf September 15, 2011.

²Maza, Penelope. (2009). A new look at the role of ASFA and children's ages in adoption. *The Roundtable*, 23(1).

³For a review, see: Wertheimer, Richard. (2002). Youth who age out of foster care: Troubled lives, troubling prospects. *Child Trends Research Brief #2002-59*. Retrieved from http://www.childtrends.org/Files/Child_Trends-2002_12_01_RB_FosterCare.pdf September 15, 2011.

⁴Barth, Richard P. Kwon Lee Chung, Judith Wildfire, and Shenyang Guo. (2006). A comparison of the governmental costs of long-term foster care and adoption. *Social Service Review*, 80(1):127-158. Hansen, Mary, and Bradley A. Hansen. (2006). The economics of adoption of children from foster care. *Child Welfare: Journal of Policy, Practice, and Program*, 85(3): 559-583; Hansen, Mary E. (2007). The value of adoption. *Adoption Quarterly*, 10(2): 65-87; Zill, Nicholas. (2011). Adoption from foster care: Aiding children while saving public money. Washington, DC: Brookings Institution. Retrieved from http://www.brookings.edu/~media/Files/rc/reports/2011/05_adoption_foster_care_zill/05_adoption_foster_care_zill.pdf September 15, 2011.

⁵That is, few have been evaluated rigorously, and prior to the evaluation of Wendy's Wonderful Kids, none had been evaluated experimentally using random assignment methods.

⁶Ostrower, Francie. (2010). From Awareness to Action: A Case Study of the Dave Thomas Foundation for Adoption's Philanthropic Strategy. The Urban Institute.

⁷The AdoptUSKids program is a nationwide adoption recruitment program, but it is a broad child-specific recruitment program aimed at the general population, whereas WWK is a child-focused program that in which adoption recruitment activities are intended to be tailored specifically to each child's needs.

⁸Because the WWK program is intended to be very intensive with regard to the recruitment activities provided by staff, WWK recruiters are expected to carry small caseloads. The recommended caseload size for each recruiter is 20, with a maximum of 25. At any given time the recruiter should be intensively recruiting for 12 to 15 children, or those in "active" status. The remaining children on the recruiter's caseload may be in a less intensive phase of the recruitment process, and would be classified as "monitoring" or "inactive" status.

⁹These numbers are current as of April 1, 2010.

¹⁰Overall, 26 WWK grantee agencies in 23 states enrolled children into the random assignment evaluation. Not accounting for some anomalies with the random assignment procedure (described in detail in the technical report) 1,393 children were randomly assigned either to the treatment or control group between August 2006 and January 2010. The facts that 1) some localities did not provide us with outcome data, 2) some children (6 percent) experienced anomalies with their random assignment, 3) an inability to link the study child to any of the outcome data provided, 4) and the fact that two agencies provided only child-level demographics limited the sample to 1014. Data on covariates were not obtained for children referred to two agencies; analyses involving the full set of covariates is based on a total of 956 children (with 482 children in the treatment group and 474 n the control group).

¹¹All differences presented are statistically significant at $p < .05$, unless otherwise noted.

¹²Most of the differences between the children randomly assigned in the impact study and those in the broader population of children served by WWK are small and often seem to be an artifact of whether the recruiters knew information or not. The share of children with missing data on a number of the comparison variables is higher for the randomly assigned children than it is for the broader population of all children served by WWK. Details are available in the technical report.

¹³The average age in the WWK group is just over a half a year younger than in the control group (9.9 compared with 10.5 years; $p < .05$). Additionally, the share of Native American children is a very small minority in both groups, but is slightly smaller in the WWK group than in the control group (1.2 compared with 3.7 percent; $p < .05$). The differences in the percentages of the WWK group and control group children reported to have an "other" diagnosed condition (i.e., other than mental retardation or a visual/hearing, physical, or emotional disability) differ at a marginal level of significance (21.6 percent in the WWK group, compared with 28.4 percent in the control group; $p < .10$). None of the other child characteristics examined differ statistically significantly.

¹⁴This analysis consisted of a mixed-effects random-intercept logistic model regressing adoption on experimental group membership. This model viewed children as being "nested" in levels of WWK recruiters and agencies. (Regardless of whether served by a WWK recruiter, each WWK recruiter's and agency's jurisdiction determined the eligibility for children to be enrolled into the impact study.)

¹⁵Analyses on impacts presented here are intent-to-treat analyses, meaning that we examined the effect of assignment to the WWK intervention on adoption, compared to the effect of assignment to the control group. This means that, even if children were randomly assigned to the WWK intervention, but were never added to a WWK recruiter's caseload (i.e., "no-shows"), the child is still retained in the treatment group. Similarly, if children assigned not to receive WWK services are for some reason added to a WWK recruiter's caseload (i.e., "cross-overs"), they are retained in the control group. Intent-to-treat analyses are frequently used because they maintain the statistical similarities of the treatment and control group, thus maintaining our ability to attribute causality for any observed impacts on outcomes to assignment to the intervention. In social interventions, participant characteristics (such as motivation to achieve the desired outcome) are often related to the incidence of no-shows and cross-overs. Thus, if one compared the effect of receiving the intervention to the effect of not receiving the intervention, regardless of experimental assignment, it would not be clear whether observed outcomes between the two groups were due to differences in group characteristics or to the intervention.

¹⁶The timing of the impact of WWK on the rate of adoption was assessed by examining the cumulative hazard of adoption for each group of children. Results are shown in Figure X.

¹⁷Akin, Becci A. (In press.) Predictors of foster care exits to permanency: A competing risks analysis of reunification, guardianship, and permanency. *Children and Youth Services Review*.

¹⁸Snowden, Jessica; Leon, Scott; Sieracki, Jeffrey. (2008.) Predictors of children in foster care being adopted: A classification tree analysis. *Children & Youth Services Review*, 30(11): 1318-27.

¹⁹To look at factors independently associated with adoption and pre-adoptive placements, we used the sample of all children ever served by the WWK program through April 1, 2011. The final sample included 6,634 children. Analyses were based on a Cox proportional hazard model, a specific method for event history analysis. Standard errors in this model are adjusted for within-agency correlations. A good primer on censored data and the need for specific analytical methods to address them is: Allison, Paul D. 1984. *Event History Analysis: Regression for Longitudinal Event Data*. Sage University Paper Series on Quantitative Applications in the Social Sciences, series no. 07-046. Beverly Hills, CA: Sage.

²⁰Hazard ratios range from 0.77 for ages 6-8 to 0.38 for ages 12-14 with children ages 0-5 as the comparison group, $p < .01$. A hazard ratio is the probability that one subgroup of children will experience adoption at a particular time, given that the child has not yet been adopted, relative to the probability for a second subgroup of children.

²¹Hazard ratio=0.84, $p < .05$.

²²Hazard ratio=.78, $p < .01$.

²³Hazard ratio=0.70 for 6-10 placements and 0.49 for those who had been in more than 10 placements, $p < .01$.

²⁴This set of analyses was bivariate rather than multivariate; that is, they do not control for confounding relationships with other child characteristics. However, these analyses are informative because they show how the relative likelihood of adoption varies across different groups of children included in the random assignment evaluation, regardless of whether specific child characteristics are directly responsible for these differences.

²⁵The difference is marginally significant at $p < .10$.

²⁶These were mixed-effect random intercept logistic regression models. Additionally, a separate set of models was also estimated for subpopulations of children defined vis-a-vis different child characteristics. Findings from the two sets of models were consistent with each other across the child characteristics examined. Both sets of models control for the mean agency differences in adoption rates; the difference between the two sets is that the first is constrained so that the same mean agency rates of adoption are assumed for all children, whereas the second set of models allows for different mean agency differences in adoption rates for each subgroup of interest.

²⁷Snowden, K., Leon, S., & Sieracki, J. Predictors of children in foster care being adopted: A classification tree analysis. *Children and Youth Services Review*, 30(11), 1318-1327; Barth (1997). Effects of age and race on the odds of adoption vs. remaining in long-term out-of-home care. *Child Welfare*, 76(2), 285-308.

²⁸Children with emotional disturbances were defined in the study as those reported by their local child welfare agency to have a clinically diagnosed emotional disturbance.

²⁹See: Barth, R.P., and Berry, M. (1988). *Adoption and disruption: Rates, risks and resources*. New York: Aldine; Goerge, R. M., Howard, E. C., Yu, D., & Radomsky, S. (1997). *Adoption, disruption, and displacement in the child welfare system, 1976-94*. Chicago: University of Chicago, Chapin Hall Center for Children.; Festinger, T. (2002). After adoption: Dissolution or permanence? *Child Welfare*, 81(3), 515-533; Festinger, T. (2005). Adoption disruption: Rates, correlates and service needs. In G. P. Mallon & P. Hess (Eds.), *Child welfare for the 21st century: A handbook of children, youth, and family services—Practices, policies, and programs*. New York: Columbia University Press.

³⁰Coakley, J. & Berrick, J.D. (2008). Research Review: In a rush to permanency: preventing adoption disruption. *Child & Family Social Work*, 13(1), 101-112.

³¹Zill, N. (1996). Adopted children in the United States: A profile based on a national survey of child health (Serial 104-33, pp. 104-119). Washington, DC: U.S. Government Printing Office.; Barth, R.P., and Berry, M. (1991). Preventing adoption disruption. *Prevention in Human Services*, 9, 205-222; Festinger, T. (1986). *Necessary risk: A study of adoptions and disruptive adoptive placements*. Washington, DC: Child Welfare League of America.; Goerge, R.M., Howard, E.C., and Yu, D. (1996). *Adoption, disruption, and dissolution in the Illinois child welfare system, 1976-94*. Chicago: Chapin Hall Center for Children.; Groze, V. (1986). Special-needs adoption. *Children and Youth Services Review*, 8, 363-373; Smith, S.L., and Howard, J.A. (1991). A comparative study of successful and disrupted adoptions. *Social Service Review*, 65(2), 248-265.

³²Barth, R.P., and Berry, M. (1991). Preventing adoption disruption. *Prevention in Human Services*, 9, 205-222; Smith, S.L., and Howard, J.A. (1994). *The adoption preservation project*. Normal, IL: Illinois State University; Partridge, S., Hornby, H., and McDonald, T. (1986). *Learning from adoption disruption: Insights for practice*. Portland, ME: University of Southern Maine.

³³Even though our examination of disruption among children added to the WWK caseload by April, 2010, allows for a follow-up period of 11 months, it is important to note that one out of four had not had their cases closed by the end of the follow-up period, and some of these children may yet experience a disruption. Indeed, a survival analysis examining all children served through March, 2011, indicates that, the longer a case remains open, the more likely a child who has been placed pre-adoptively is to experience a disruption. Specific findings regarding these survival analyses are reported in the implementation technical report.

³⁴For reviews, see: Coakley, Jennifer F., and Jill D. Berrick. (2008). Research review: In a rush to permanency: Preventing adoption disruption. *Child and Family Social Work*, 13(1):101-112; Barth, Richard P., Marianne Berry, Mary Lou Carson, Regina Goodfield, and Barry Feinberg. (1986). *Child Welfare*, 65(4): 359-371; Child Welfare Information Gateway. (2004). Adoption disruption and dissolution. Retrieved from: http://www.childwelfare.gov/pubs/s_disrup.cfm September 15, 2011. See also: Smith, Susan Livingston, and Jeanne A. Howard. (1999). *Promoting Successful Adoptions: Practice with Troubled Families*. Thousand Oaks, CA, US: Sage Publications.

³⁵Each child included in the sample was assigned a score from 0 to 14 depending on the number of optimum practices the recruiter had achieved in serving the child. Each child also was assigned a score for each component, again depending on the number of optimum practices the recruiter had followed within that component.

³⁶Data were not available for two components of the model, network building and adoption preparation, so these components were omitted from the analysis.

³⁷We carried out in-person interviews to learn about program implementation with program staff in the sites participating in the impact evaluation.

³⁸A total of 74 children ages 12 to 18 from 18 different states participated in in-person interviews. Nearly half (49 percent) of the children who participated were between the ages of 16 and 18, slightly more males than females (55 percent vs. 45 percent), and the majority were African-American/black (65 percent) or white (31 percent). Half of the children were residing in a foster family home while the other half were living in a pre-adoptive/adoptive home (24 percent), group home (22 percent), or medical or mental health institution (4 percent). The children had spent an average of 8 years in out-of-home care and had an average of 7 placements. Prior to participating in the WWK program, one quarter of the children experienced a past adoptive placement disruption or dissolution.

³⁹A total of 101 parents from 19 states participated in phone interviews. The average age of the parents was 44 years old and nearly two thirds (63 percent) of the parents were married. The majority of participants identified as white (60 percent) or African-American/black (31 percent). The parents represent different stages of the adoption process with about half (52percent) either having finalized the adoption of a child or having a child placed with them pre-adoptively with finalization dates a few months to over a year from the time of the interview. A smaller percentage (15 percent) had pre-placement visits with a child or had inquired about a specific WWK child. One third of the parents were not in the process of adopting a WWK child.

NOTES:

NOTES:



DAVE THOMAS
FOUNDATION
FOR ADOPTION®

Finding Forever Families for Children in Foster Care

1.800.ASK.DTFA (1.800.275.3832)
davethomasfoundation.org