Child Protective Services Program

Child Protective Services protects children from harm by their parents or others responsible for their care as mandated by Title 2 of the Texas Family Code. Through this program, the Department of Human Services (DHS) encourages parents and other family members to solve problems that led to abuse or neglect. The program's main objective is to prevent further harm to children while preserving the family unit. If this is not possible, DHS may petition the court to remove the children from their homes and temporarily place them with substitute families or caretakers. If DHS and the family cannot resolve the problems so the children can return home, DHS may recommend to the court that the parent/child relationship be terminated and the children placed with other permanent families or caretakers.

History of the Program

On March 20, 1848, a law was enacted in Texas designating apprenticeship as a form of guardianship for dependent and neglected children. In 1907, the Texas Legislature enacted the Texas Juvenile Act, which defined dependency and neglect and allowed court-appointed guardians of neglected children. Statewide intervention began with the creation of the Division of Child Welfare under the Board

of Control in May 1931. Eight years later, the division was transferred to the newly created Department of Public Welfare.

During the next three decades, federal, state, and county participation in services to abused and neglected children increased gradually. The Texas Family Code, created in 1974, gave the Department of Public Welfare more responsibility for services to abused and neglected, truant, and runaway children. Under the code, the failure to report suspected abuse or neglect of children became a misdemeanor offense. Later that year, the department began a public awareness campaign which in 1975 resulted in a two-fold increase in reports of suspected child abuse and neglect received the previous year.

Program Organization

State Office (Austin)

The Protective Services for Families and Children branch of DHS manages the Child Protective Services, Family Violence, and Services to Truants and Runaways programs.

Its two divisions are:

Policy and Program Development, which develops policies and procedures for program services and provides consultation and training to regional staff to ensure the effectiveness and responsiveness of the program, and

■ Program Management and Support, which develops, maintains, and evaluates management practices. The division maintains a 24-hour hotline that handles reports of abuse and neglect of children and the elderly and manages the Interstate Compact on the Placement of Children, an agreement that allows the placement of children across state lines.

Regional Offices

DHS divides the state into 12 regions with 10 administrative headquarters. Regional directors implement and manage the program according to applicable state and federal laws. Each regional administrator and regional director organizes the program delivery system to meet regional needs and ensures that the service delivery system complies with policies.

Regional and state office child protective services employees during fiscal year 1987 included 1,602 direct-delivery workers and case aides, 1,089 support and clerical staff, 229 supervisors, 49 program directors, and 10 regional directors.

The Family Violence program purchases services through 50 local shelter centers, and the Services to Truants and Runaways program purchases services through 16 community-based providers. Regional contract managers monitor the programs under the supervision of the regional directors.

Definitions of Child Abuse and Neglect

Definitions of abuse and neglect apply to children under 18 who are not married or have not had the disabilities of minority removed by a court. The definitions apply to actual or threatened abuse or neglect. Threatened abuse or neglect means that there is substantial risk of abuse or neglect, including any reasonably foreseeable harm to the child.

The abuse and neglect situations addressed by child protective services involve abuse or neglect of children by persons responsible for their health or welfare. This includes a child's parents, guardian, or caretaker to whom the parent or the court has delegated responsibility for providing care to the child.

Abuse is non-accidental infliction or threat of infliction of physical, emotional, or mental harm to a child by a person responsible for the child's health or welfare. Examples include burns, bruises, fractures, sprains, welts, poisoning, exposure, confinement, exploitation, and starvation.

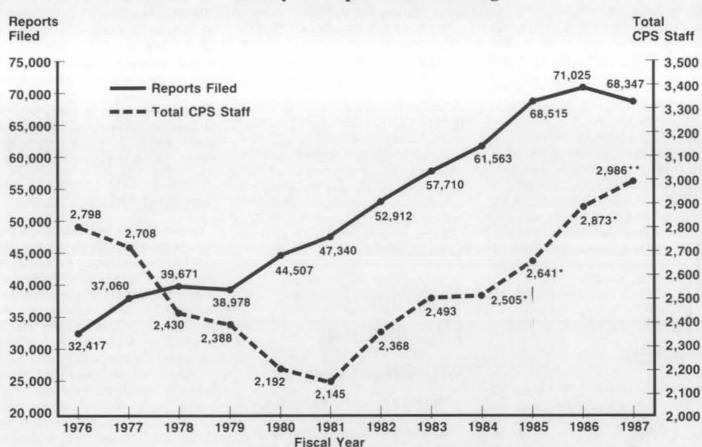
Exploitation occurs when a person responsible for a child's health or welfare does, or threatens to do, one of the following:

- involves the child in illegal or immoral activities, or
- forces the child to perform work, in or outside the home, that interferes with the child's health or causes the child to violate state education or child labor laws.

Sexual abuse is any sexually oriented act or practice by a person responsible for the child's health or welfare that threatens or harms the child's physical, emotional, or social development. Examples include fondling, sexual intercourse, sodomy, incestuous family relationships, prostitution, rape, sexual exploitation, and sexual molestation.

Sexual exploitation occurs when a per-

History of Reports and Staffing



^{*}Includes three Truant and Runaway Services staff and two Family Violence Services staff.

^{**}Includes two Truant and Runaway staff, two Family Violence Services staff, and three Children's Trust Fund staff.

son responsible for the child's health or welfare allows or encourages a child to engage in prostitution, as defined by state law, or in the obscene or pornographic photographing, filming, or depicting of the child in illegal acts.

Neglect is non-accidental failure or threatened failure to provide a child with the physical, medical, or emotional requirements for life, growth, and development by a person responsible for the child's health or welfare. Examples include inadequate food, inadequate housing and clothing, lack of needed medical attention, abandonment, lack of supervision or guidance, and inadequate hygiene.

Intake and Investigation Services

The department is mandated by state law to investigate reports of suspected child abuse or neglect. Upon receiving the initial report, workers determine the urgency of the situation using priority groups. Investigations of Priority I reports are begun immediately or within 24 hours after receipt of the report. Investigations of Priority II reports are initiated within 10 days. Priority III reports are reports of those situations that involve some harm to children that is not actually abuse or neglect; these reports are investigated only if there is sufficient staff to do so. The department also receives many calls reporting situations that do not involve harm to children or requesting information and referral. These calls require no further staff action.

To comply with provisions of the Texas Family Code, all Priority I and II reports are referred to the appropriate law enforcement agency, which determines if a criminal investigation is needed. The law enforcement agency is solely responsible for deciding to conduct a criminal investigation, which may lead to the arrest of persons believed to have harmed the child. DHS conducts a civil investigation to protect children from abuse or neglect.

After a report is assigned a priority, a caseworker contacts the family to determine if abuse or neglect has occurred, to determine if there is further risk to the child, and to initiate action to protect the child if necessary. Before reaching a conclusion about the validity of the report, the caseworker may contact friends, relatives, neighbors, medical and school personnel, and others who may have knowledge of the child and family. The final disposition of each report is reviewed and approved by the worker's supervisor.

To balance the need for protection of children with prevention of unwarranted intrusion into a child's and family's life, the department enacted a new policy that allows staff to assess reported information when there is some question about whether the information actually is a report of child abuse and neglect. Effective the last two months of fiscal year 1987, the assessment process allows staff to gather enough information to determine if an investigation is necessary before beginning a full investigation. If staff determine that the information is not a report of child abuse or neglect, no further action is taken, and the referral is considered as an "Assessment Only."

Workers are required to inform the com-

plainant, if known, of the disposition of the report.

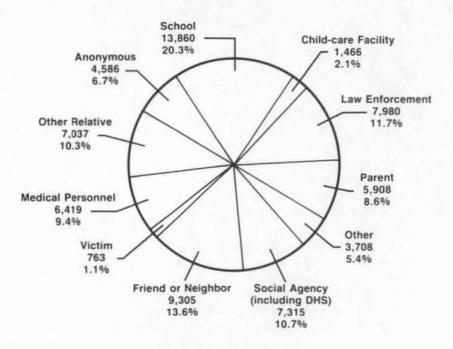
The number of reports of suspected child abuse or neglect investigated by DHS more than doubled from fiscal year 1976 to fiscal year 1987, while the total number of child protective services staff fluctuated from a low of 2,145 in fiscal year 1981 to a high of 2,986 in fiscal year 1987. Texas' fiscal year is September 1 through August 31. Fiscal year 1987 was the first year in the past 12 that the number of reports investigated decreased while the number of staff increased. Still, as Figure 1 indicates, staffing levels have not kept pace with the overall increase in the number of reports requiring investigation.

In some states, only certain categories of professionals are required by law to report suspected child abuse or neglect. Texas law requires that any person who suspects that a child has been abused or neglected must report it to DHS and the appropriate law enforcement agency. The varied sources of reports reflected in Figure 2 indicate that professionals and the

Figure 2

Reports of Child Abuse and Neglect by Source of Report

FY 1987



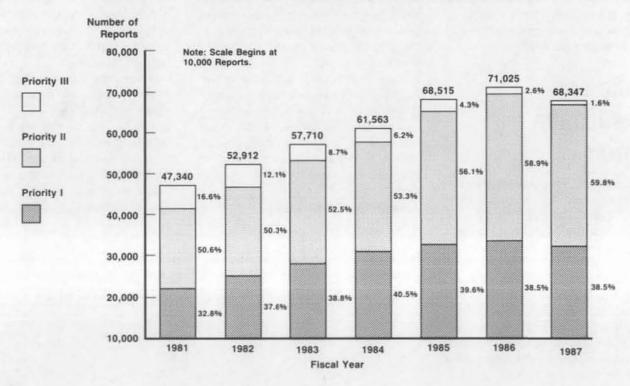
Total Reports Filed: 68,347

general public comply with the law and are willing to become involved.

As Figure 3 shows, the percentage of Priority I investigations has fluctuated from a low of 32.8 percent in fiscal year 1981 to a high of 40.5 percent in fiscal year 1984, while the percentage of Priority II

investigations has increased over the past five years. However, the percentage of Priority III investigations has decreased markedly from 16.6 percent in fiscal year 1981 to 1.6 percent in fiscal year 1987. The increase in Priority I and II investigations and insufficient staffing levels have severely limited the department's ability to investigate Priority III reports. Fortunately, this service constraint has been partially allayed in some communities by the establishment of local child abuse and neglect prevention programs and other volunteer programs that provide services

Reports of Abuse and Neglect by Priority at Intake



Intake and Investigation Priorities

Priorities have been established to provide protective services to as many children as possible. The priorities are based on:

- staff evaluation of the severity and immediacy of the harm or danger to the child as presented in the referral information;
- the legal base for providing the services; and
- available DHS and community resources.

Priority I intake is for children alleged or found to be abused or neglected to the extent that they are in immediate threat of serious physical harm or death, or for whom court-ordered services must begin immediately.

Priority II intake is for other children alleged or found to be abused or neglected or for whom a court orders service.

Priority III intake is for children reported to be at risk of

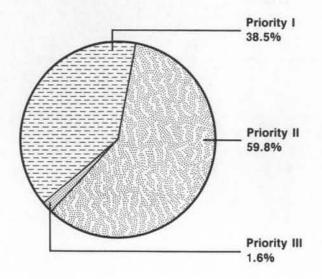
abuse or neglect but have not actually been harmed, for whom services are not court-ordered, or for whom services are ordered by an out-of-state court.

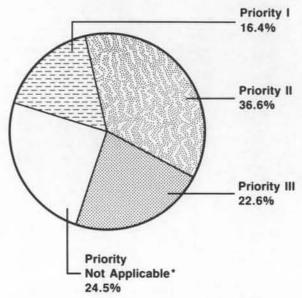
Referrals are assigned a priority based upon the information provided by the complainant. When an investigation is conducted, the caseworker may be unable to confirm that abuse or neglect occurred. Additional facts may indicate that the report is unfounded, or the family may have moved prior to the completion of the investigation. In these instances, the priority upon investigation is changed to Priority III, or the priority is not applicable. Sometimes a Priority I referral may be a Priority II situation when investigation shows that the abuse or neglect is not as serious as originally reported.

Figure 4

Priority Assigned at Intake to Abuse and Neglect Reports

Actual Priority Upon Investigation FY 1987





^{*}A priority code upon investigation is not applicable if staff are unable to locate the family or if it is an unfounded report in which no potential for risk of future abuse and neglect is identified.

Child Abuse and Neglect Investigation Dispositions

The categories used to record the findings of child abuse or neglect and their definitions are:

Adjudicated. The worker has documented that a civil or criminal court has made an affirmative finding of child abuse or neglect in the reported situation.

Reason to Believe. The worker and supervisor have concluded, by applying logical reasoning to available information, that abuse or neglect has occurred. This does not include situations in which staff are uncertain about the findings, cannot determine if abuse or neglect occurred, or find no actual abuse or neglect or threat of abuse or neglect.

Unfounded. The worker and supervisor have concluded that abuse or neglect did not occur, or they are unable to conclude that abuse or neglect occurred.

Moved. The individuals involved in the reported situation moved and could not be located before any conclusion could be reached. to the children and their families.

Total reports filed by staff in FY 1987 decreased 3.8 percent from FY 1986, slightly less than the number filed in FY 1985. In addition, the proportion and the actual number of confirmed (Adjudicated and Reason

to Believe) reports has continued to decline (see Figure 5) since FY 1985 and is in line with recent national trends.

Only three regions experienced an increase in the number of investigated reports, which was outweighed by a decrease in the other regions.

Figure 6 illustrates that all but one region experienced a decrease in the numbers of both alleged and confirmed victims. This reflects the tendency of more reports to be unfounded.

Figure 5

Filed and Confirmed Reports of Child Abuse and Neglect by Region

		FY 1985			FY 1986			FY 1987	
Region	Total Investigated	Confirmed	Percent Confirmed	Total Investigated	Confirmed	Percent Confirmed	Total Filed*	Confirmed	Percent Confirmed
1/2	5,283	2,594	49.1	5,125	2,523	49.2	5,392	2,555	47.4
3/12	4,947	2,221	44.9	5,692	2,439	42.8	5,354	2,360	44.1
4	3,094	1,613	52.1	3,103	1,635	52.7	3,143	1,662	52.9
5	14,175	8,884	62.7	12,583	7,584	60.3	12,184	6,971	57.2
6	7,486	3,762	50.3	7,134	3,345	46.9	6,330	3,079	48.6
7	3,990	2,250	56.4	5,687	2,828	49.7	5,438	2,422	44.5
8	6,159	3,141	51.0	6,145	3,091	50.3	5,718	2,839	49.7
9	6,440	3,791	58.9	7,297	4,242	58.1	7,323	3,994	54.5
10	4,406	2,275	51.6	4,209	2,029	48.2	4,029	1,922	47.7
11	12,535	8,092	64.6	14,027	8,342	59.5	13,406	8,036	59.9
State Office**				23	8	NA	30	10	NA
Total	68,515	38,623	56.4	71,025	38,066	53.6	68,347	35,850	52.5

^{*}Includes reports that were investigated or assessed

Figure 6

Total Alleged Victims and Confirmed Victims by Region

	FY	1985	FY	1986	FY 1987		
Region	Total Alleged Victims	Confirmed Victims	Total Alleged Victims	Confirmed Victims	Total Alleged Victims	Confirmed Victims	
1/2	9,308	4,662	8,999	4,430	9,632	4,690	
3/12	8,669	3,866	10,320	4,450	9,318	4,143	
4	5,054	2,619	5,169	2,735	5,013	2,731	
5	20,780	13,049	18,202	10,899	17,451	9,887	
6	11,913	5,973	11,230	5,317	9,733	4,649	
7	6,628	3,693	9,526	4,843	9,114	4,082	
8	11,172	5,643	11,231	5,559	10,176	5,119	
9	10,087	6,134	10,862	6,444	10,742	5,908	
10	7,953	4,125	7,415	3,515	6,768	3,309	
11	19,442	12,511	22,092	12,954	21,094	12,534	
State Office*			27	10	44	15	
Total	111,006	62,275	115,073	61,156	109,085	57,067	

^{*}In FY 1986, DHS licensing staff began investigating some reports of child abuse and neglect in licensed child-care facilities. Some of these investigations were conducted by State Office licensing staff rather than regional staff.

^{**}In FY 1986, DHS licensing staff began investigating some reports of child abuse and neglect in licensed facilities. Some of these investigations were conducted by state office licensing staff rather than regional staff.

The rate of total alleged victims per 1,000 children in Texas increased from 21.4 in fiscal year 1984 to 23.5 in fiscal year 1986 and has now decreased to 21.9 in fiscal year 1987 (see Figure 7). This is below the national rate of 27.3 for calendar year 1984, 30.8 for 1985, and 34.5 in 1986, as cited in *Highlights of Official Child Neglect and Abuse Reporting 1986*, published by the American Association for Protecting Children.

The Texas rate of confirmed victims per 1,000 children declined from 12.9 in fiscal year 1985 to 11.5 in 1987. The only national data available was published in 1981 in *The National Study of the Incidence and Severity of Child Abuse and Neglect* (U.S. Department of Health and Human Services, Publication No. (OHDA)81-30325). Then, the national rate was estimated to be 7.6.

Figure 8 provides regional and statewide data on both reported and confirmed incidence of child abuse and neglect. Regions 3/12, 7, and 10, which have considerably higher incidence rates than the statewide average, are mostly rural areas. Regions 5 and 11, which have lower incidence rates than the statewide average, include the urban areas of Houston and the Dallas-Fort Worth metroplex.

Although all types of abuse or neglect can be put into one of three major categories (abuse, neglect, and both), the department collects data on 31 specific types of abuse and neglect. Caseworkers may report from one to four different types of harm for each confirmed victim. Because the number of specific types of harm exceeds the number of victims, the data in Figure 9 is presented in proportion to the total types of harm reported for confirmed victims.

Figure 7

Reported Incidence of Child Abuse and Neglect per 1,000 Children

	1984	1985	1986	1987
Texas*	21.4	23.0	23.5	21.9
National**	27.3	30.8	34.5	NA

^{*}Fiscal Year (Sept. 1-Aug. 31)

Figure 8

Reported and Confirmed Incidence of Child Abuse and Neglect by Region

FY 1987

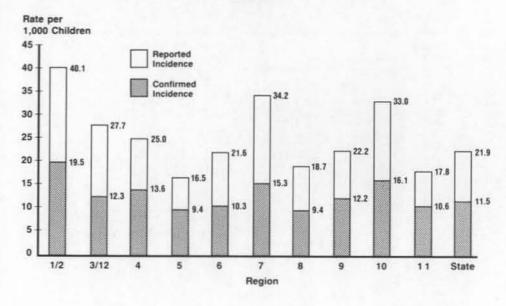
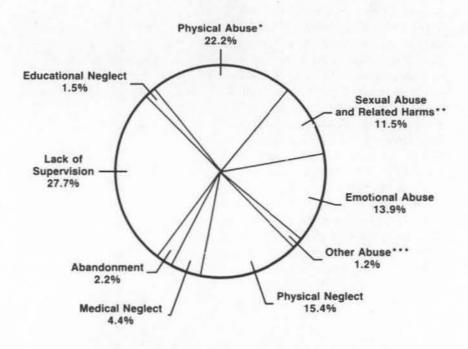


Figure 9

Types of Abuse and Neglect Sustained by Confirmed Victims FY 1987



^{*} Under the category of physical abuse, bruises are by far the most frequent type of injury.

^{**}American Association for Protecting Children Inc., Highlights of Official Child Neglect and Abuse Reporting 1986.

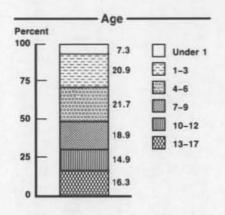
^{.. &}quot;Related harms" refers to child prostitution and child pornography

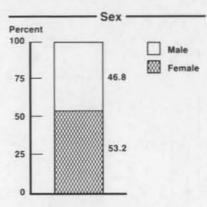
^{*** &}quot;Other abuse" includes confinement, exploitation, exposure, and malnutrition

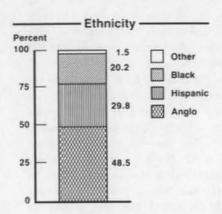
Figure 10

Characteristics of Confirmed Victims by Age, Sex, and Ethnicity

FY 1987







Total Confirmed Victims: 57,067

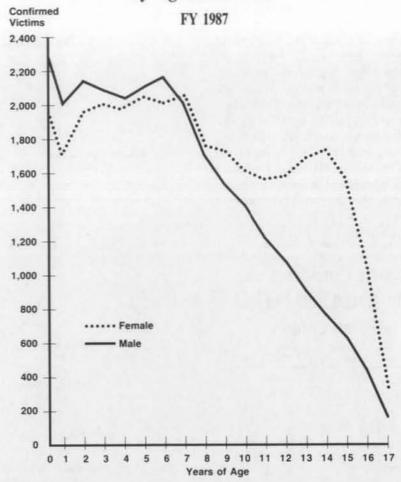
The percentage of confirmed physical neglect reports has been declining over the past several years, but that decrease has been offset by an increase in confirmed reports of physical and sexual abuse. DHS continues to see more cases in which children have been seriously harmed. These cases more frequently involve sexual abuse and physical injuries resulting from abuse.

The "lack of supervision" category is large because it reflects acts of omission that did not result in actual harm as well as situations in which children not adequately supervised were harmed, such as drowning or sexual abuse perpetrated by a non-caretaker. In some cases, lack of supervision can result in serious physical injuries or death, so although it is sometimes viewed as a less serious type of neglect, this is not always true.

Educational neglect is a very small category because only the most extreme forms fall within the purview of the department. School districts have the responsibility of dealing with most instances of unexcused or excessive absences and the failure to enroll children in school.

Figure 11

Distribution of Confirmed Victims by Age and Gender



As Figure 11 indicates, the number of male victims is slightly larger than the number of female victims through age 6. Beginning at age 7, however, the number of female victims exceeds male victims through age 17. The number of female victims more than doubles the number of male victims in the 13–17 age category (see Figure 12), which is primarily attributable to sexual abuse. Although boys are also victims of sexual abuse, it is much more likely for girls to be reported as victims.

The data in Figure 10 reflects a disproportionate number of black victims compared with the general child population. Texas Department of Health projections indicate that in 1987, black children accounted for an estimated 13.1 percent of the total child population; Hispanic children composed 30.3 percent; and Anglo, Oriental, and American Indian children accounted for 56.6 percent.

As shown in Figure 13, mothers constitute the greatest percentage of alleged perpetrators in confirmed reports. This reflects the reality that most single-parent families are headed by women and that, even in two-parent families, women are still the primary caregivers of children in most instances. Therefore, they are more vulnerable to stresses that can lead to child abuse or neglect.

The stepparent category has continued to increase, and in fiscal year 1987, 87 percent of stepparent perpetrators were stepfathers.

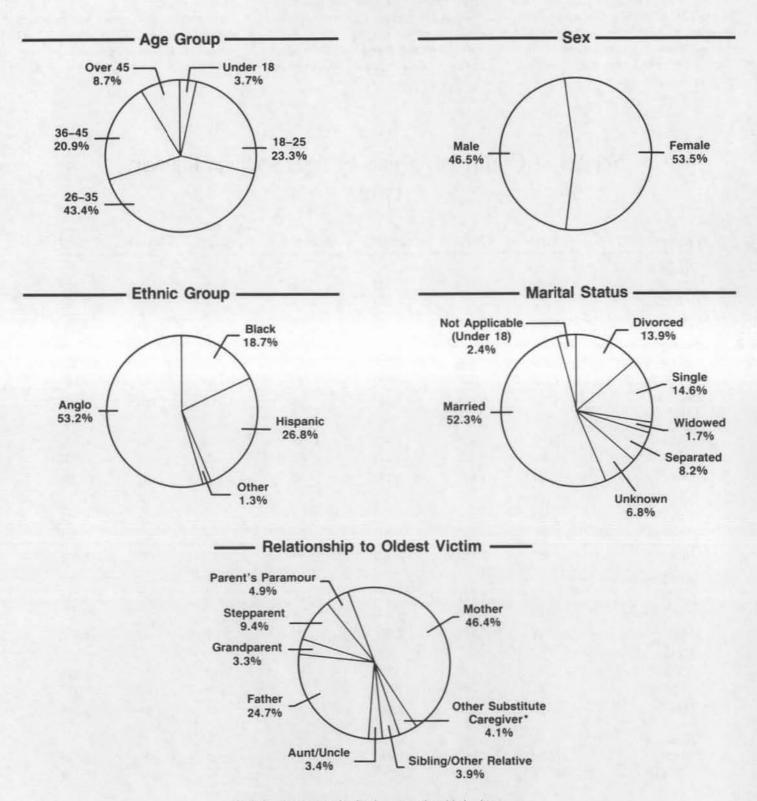
Number of Confirmed Victims by Age, Sex, and Ethnicity
FY 1987

Age	Anglo	Black	Hispanic	Oriental	American Indian	Other	Total
Under 1							
Male	968	588	656	14	3	23	2,252
Female	883	435	565	8	6	35	1,932
Total	1,851	1,023	1,221	22	9	58	4,184
1-3							
Male	3,082	1,335	1,727	27	8	64	6,243
Female	2,783	1,201	1,593	29	13	62	5,681
Total	5,865	2,536	3,320	56	21	126	11,924
4-6							
Male	2,955	1,338	1,929	33	10	50	6,315
Female	2,882	1,238	1,843	43	9	38	6,053
Total	5,837	2,576	3,772	76	19	88	12,368
7-9							
Male	2,494	1,139	1,555	24	11	40	5,263
Female	2,589	1,120	1,765	21	6	40	5,541
Total	5,083	2,259	3,320	45	17	80	10,804
10-12							
Male	1,822	691	1,155	24	5	15	3,712
Female	2,293	920	1,505	26	3	23	4,770
Total	4,115	1,611	2,660	50	8	38	8,482
13-17							
Male	1,585	478	824	15	4	12	2,918
Female	3,353	1,049	1,873	53	10	49	6,387
Total	4,938	1,527	2,697	68	14	61	9,305
Total							
Male	12,906	5,569	7,846	137	41	204	26,703
Female	14,783	5,963	9,144	180	47	247	30,364
Grand Total	27,689	11,532	16,990	317	88	451	57,067

Figure 13

Characteristics of Alleged Perpetrators in Confirmed Reports FY 1987

Total Alleged Perpetrators: 45,176



Includes day-care and school personnel and babysitters, among others.

Sexual Abuse Investigations

As Figure 14 illustrates, more than half of the confirmed sexual abuse victims were under 10 years old, while 47.6 percent were ages 10 through 17. More than five times the number of girls than boys were identified as victims of sexual abuse in fiscal year 1987, which suggests that sexual abuse of males is underreported. These figures may also reflect the fact that girls are more likely to be abused by adult family members, while boys are more likely to be abused by individuals outside the

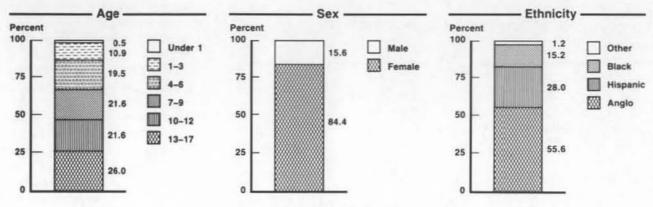
home. Abuse by persons not responsible for the child is investigated by law enforcement agencies, rather than child protective services.

Figure 15 indicates that child victims of sexual abuse accounted for 14.7 percent of the statewide total number of confirmed victims of all abuse and neglect in fiscal

Figure 14

Characteristics of Confirmed Victims of Sexual Abuse by Age, Sex, and Ethnicity

FY 1987



Total Confirmed Victims of Sexual Abuse: 8,404

Figure 15

Confirmed Victims of Sexual Abuse Compared to Total Confirmed Victims

		FY 1986			FY 1987	
Region	Number of Sexually Abused Victims	Total Confirmed Victims	Percent of Victims Who Were Sexually Abused	Number of Sexually Abused Victims	Total Confirmed Victims	Percent of Victims Who Were Sexually Abused
1/2	447	4,430	10.1	429	4,690	9.1
3/12	392	4,450	8.8	373	4,143	9.0
4	427	2,735	15.6	448	2,731	16.4
5	2,207	10,899	20.2	2,054	9,887	20.8
6	815	5,317	15.3	735	4,649	15.8
7	734	4,843	15.2	623	4,082	15.3
8	796	5,559	14.3	696	5,119	13.6
9	963	6.444	14.9	991	5,908	16.8
10	398	3,515	11.3	348	3,309	10.5
11	1,725	12,954	13.3	1,698	12,534	13.5
State Office*	7	10	NA	9	15	NA
State Total	8,911	61,156	14.6	8,404	57,067	14.7

^{*}In FY 1986, DHS licensing staff began investigating some reports of child abuse and neglect in licensed child-care facilities. Some of these investigations were conducted by State Office licensing staff rather than regional staff.

year 1987, very similar to the figure for fiscal year 1986. It is important to note that victims of sexual abuse may also be victims of other types of abuse or neglect.

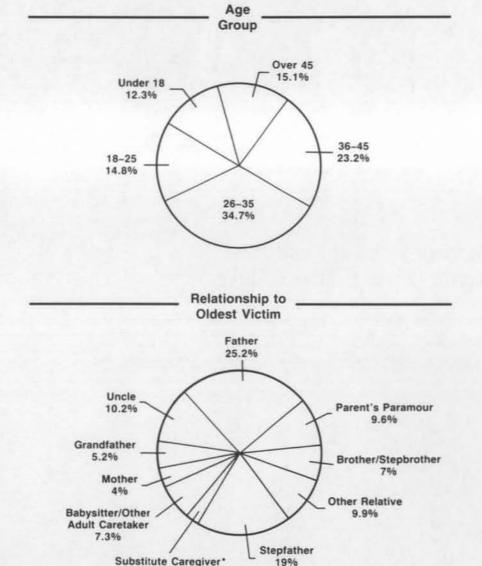
In the majority of sexual abuse reports confirmed by the department, the alleged perpetrator is a male relative of the child—usually the father or stepfather (see Figure 16). Although the category of "parent's paramour" is almost always male, sexual abuse of children is not exclusively perpetrated by males. Almost 7 percent of the alleged perpetrators in confirmed reports of sexual abuse are female.

It is interesting to note that a larger proportion of alleged perpetrators of sexual abuse are under 18 or over 45 years of age compared to alleged perpetrators of all types of abuse and neglect.

Figure 16

Characteristics of Alleged Perpetrators of Sexual Abuse in Confirmed Reports

FY 1987 Alleged Perpetrators of Sexual Abuse: 6,810



^{*}Includes day-care, school, and 24-hour child-care personnel and foster and adoptive parents.

2 60%

In-home Services

When the need for continuing protective services has been identified but there is no need to remove a child from the home, a service plan is developed with the family to prevent further abuse or neglect. By providing in-home services, workers try to strengthen the family's ability to meet the child's needs. Workers focus on problems that contributed directly to the abuse or neglect. Often the parents do not employ appropriate and effective discipline methods, have minimal knowledge of child development, and do not know how to handle a crisis. Some may have emotional disturbances or deficiencies and require more intensive services from medical or mental health professionals. Where available, a variety of community resources are used to plan services for the family.

DHS workers often must deal with meeting the concrete needs of the family so parents can focus on their abusive or neglectful behavior. Early in the service delivery phase, caseworkers address such immediate needs as income, employment, and housing by referring the family to department resources, including income assistance and family self-support programs, and other community resources.

As Figure 17 indicates, the statewide percentage of cases opened for ongoing services dropped from 37.7 percent in fiscal year 1985 to 29.1 percent in fiscal year 1987, a continuing trend for the past several years. This decrease is at least partly attributable to the department's need to direct an increasing proportion of staff resources to investigative and substitute care services.

Figure 18 shows the number of children in confirmed reports who need services after investigation vs. the actual number of children who receive services. The department estimates that 70 percent of families on whom a report of abuse or neglect is confirmed actually need services. Figure 18 shows only the 70 percent of children in confirmed reports, including both victims and their siblings, that the department estimates need services following investigation. The percentage of children who receive services after investigation has continued to decrease over the past several years.

Figure 17
Confirmed Reports Opened for Ongoing Services

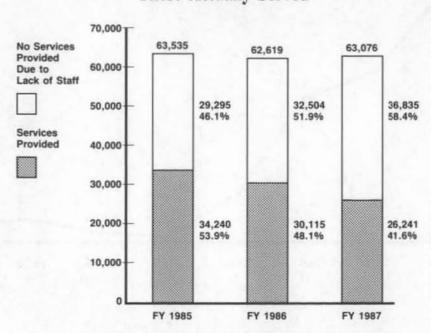
		FY 1985			FY 1986			FY 1987		
Region	Total Confirmed Reports	Total Opened	Percent Opened	Total Confirmed Reports	Total Opened	Percent Opened	Total Confirmed Reports	Total Opened	Percent Opened	
1/2	2,594	931	35.9	2,523	882	35.0	2,555	734	28.7	
3/12	2,221	1,026	46.2	2,439	1,008	41.3	2,360	898	38.1	
4	1,613	684	42.4	1,635	608	37.2	1,662	425	25.6	
5	8,884	2,462	27.7	7,584	2,747	36.2	6,971	1,937	27.8	
6	3,762	1,067	28.4	3,345	830	24.8	3,079	671	21.8	
7	2,250	991	44.0	2,828	954	33.7	2,422	728	30.1	
8	3,141	1,561	49.7	3,091	1,227	39.7	2,839	986	34.7	
9	3,791	1,224	32.3	4,242	896	21.1	3,994	877	22.0	
10	2,275	625	27.5	2,029	510	25.1	1,922	467	24.3	
11	8,092	3,999	49.4	8,342	3,153	37.8	8,036	2,715	33.8	
State Office*	NA	NA	NA	8	NA	NA	10	NA	NA	
State Total	38,623	14,570	37.7	38,066	12,815	33.7	35,850	10,438	29.1	

^{*}In FY 1986, DHS licensing staff began investigating some reports of child abuse and neglect in licensed child-care facilities. Some of these investigations were conducted by state office licensing staff rather than regional staff.

Figure 18

Children in Confirmed Reports Needing Services After Investigation

Those Actually Served



Foster Care Services

When a child's safety is believed to be seriously endangered by remaining in the home, the caseworker and supervisor seek court approval to place the child temporarily in foster care. In the past, foster care was often the only means of protecting children from further harm, and children sometimes remained in substitute care a long time without permanent parental figures. In recent years, child protective services has emphasized permanency planning for children in foster care; that is, resolving the unsafe conditions in the home and returning children home as quickly as possible or, if that is not feasible, making alternate permanent plans for children so they can grow up in a family with whom they can have a sense of identity. Staff activities and services in this area are supported and reinforced by case reviews required by licensing standards, by sixmonth court reviews of children in care, and by court-appointed attorneys ad litem, foster parents, and other groups and individuals.

The implementation of the Foster Care, Adoption, and Conservatorship Tracking System (FACTS) in 1980 has increased the amount and improved the quality of information on children for whom DHS is responsible. In addition, FACTS generates reports to various levels of staff to assist them in implementing permanent plans for children.

These efforts have significantly reduced

the number of foster children in care. Children are staying for shorter periods, and they are returning home or moving to other permanent placements more quickly. The relatively small number of children in foster care is consistent with the view of foster care as a temporary alternative rather than a means of permanently protecting children.

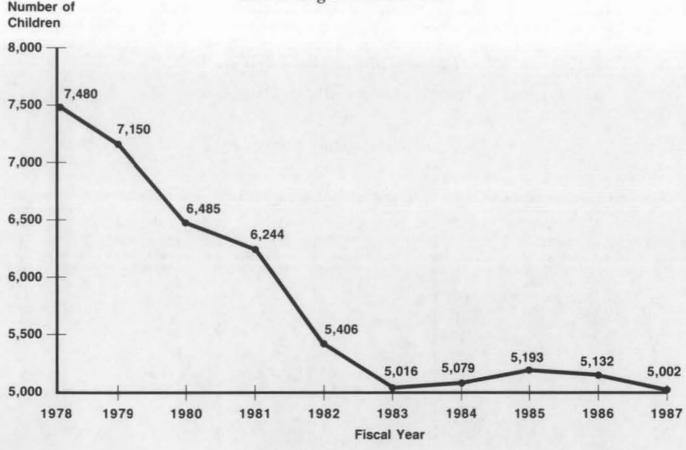
Foster care depends on the services provided by foster parents and others in the private child-care sector. Rates paid for the care of foster children do not reimburse the actual cost to providers. The low rate structure and the demands of being a foster parent attest to the dedication of those who open their homes to foster children.

Despite a continuing increase in the Texas child population and an overall in-

Figure 19

Foster Care Population

Number of Children in Care at the
End of August of Each Year



crease in the number of investigated reports, the number of children in foster care declined from 7,480 in August 1978 to 5,016 in August 1983 (see Figure 19). It has fluctuated only slightly since then.

Figure 20, "Children for Whom DHS Has Legal Responsibility," includes children in foster care and children who have been discharged from care but who are still in the managing conservatorship of the department. The category also includes children who were never placed in care by DHS but for whom a court designated the department as managing conservator. As Figure 20 indicates, the number of children

Figure 20

Children for Whom DHS Has Legal Responsibility and Children in Foster Care at the End of Each Fiscal Year

	FY 1	FY 1985 FY 1986		1986	FY 1987		
Region	Children in DHS Legal Responsibility	Children in Foster Care*	Children in DHS Legal Responsibility	Children in Foster Care*	Children in DHS Legal Responsibility	Foster Care*	
1/2	544	349	622	404	530	350	
3/12	459	270	462	258	482	294	
4	403	227	453	256	397	227	
5	1,859	1,122	1,986	1,136	1,855	1,069	
6	945	599	735	421	639	388	
7	682	403	677	381	665	367	
8	686	414	643	368	504	338	
9	519	318	576	389	645	427	
10	396	249	390	241	362	213	
11	2,320	1,242	2,245	1,278	2,383	1,329	
State	8,813	5,193	8,789	5,132	8,462	5,002	

^{*}The number of children in foster care placement is a subset of the total number of children in the legal responsibility of the department.

A county table containing similar data may be found in Appendix D.

Figure 21

Legal Status of Children in DHS Legal Responsibility

	August 1985	August 1986	August 1987
Legal Status	Percent of Total	Percent of Total	Percent of Total
Managing Conservatorship/ Parental Rights <i>Not</i> Terminated	78.3	76.7	74.5
Managing Conservatorship/ Parental Rights Terminated	18.1	19.8	21.3
Voluntary Relinquishment of Parental Rights	1.0	0.6	0.6
Voluntary Placement Agreement	0.8	0.5	0.3
Other Legal Basis for DHS Responsibility	1.8	2.4	3.3
Total	100.0	100.0	100.0

in DHS legal responsibility and the number of children in foster care has continued to decrease over the past three years.

When DHS accepts a voluntary relinquishment of parental rights, a court order must be obtained terminating parental rights and appointing DHS as managing conservator before the child can be placed for adoption. When DHS enters into a voluntary placement agreement with a parent, that agreement can remain in effect for no more than 60 days. If a child needs to remain in placement beyond that time, DHS must petition the court for managing conservatorship.

The data in Figure 21 does not indicate the percentage of children who entered care through either of these ways—only those whose current legal status is "voluntary relinquishment" or "voluntary placement."

The category "Other Legal Basis" includes children for whom DHS is the possessory conservator and children who have been placed in Texas by public agencies in other states through the Interstate Compact on the Placement of Children (ICPC).

As Figure 22 indicates, most children in DHS legal responsibility are in some type of foster care, but a significant percentage (29.5 percent in August 1987) are living at home or with relatives. As explained earlier, DHS usually retains legal responsibility for a time after the child leaves foster care and returns home to assure a smooth transition back to the family. In some cases when children cannot be returned home because their safety cannot be assured, other relatives are able and willing to provide an alternative to foster care.

As reflected in Figure 23, the permanency plan for the majority of children in DHS legal responsibility calls for them to return home and for conservatorship to be dismissed. The department believes the problems that led to the removal of the child from the home often can be resolved so the child can be with the family. In situations when the child's family cannot assure protection, adoption is the most frequently selected permanency plan, and the proportion of children whose plan is adoption has increased over the last three years. There are a number of other children for whom neither return home nor adoption is feasible, and these children remain in long-term foster care until they reach emancipation at age 18. To help ensure that these youths have adequate life skills, the department provides a Preparation for Independent Living Program. This program includes counseling to help pre-

Figure 22

Children in DHS Legal Responsibility by Type of Placement

	August 1985	August 1986	August 1987
Living Arrangement	Percent of Total	Percent of Total	Percent of Total
Own Home	17.9	18.3	15.8
Relative's Home	12.3	12.3	13.7
Foster Care	59.0	58.5	59.7
Adoptive Home	6.1	6.8	6.9
Other*	3.1	2.9	2.8
Unauthorized Absence	1.6	1.2	1.1
Total	100.0	100.0	100.0

^{*}Includes detention facilities, hospitals, nursing homes, and independent living, as well as other unspecified living arrangements.

Permanency Plan Definitions

Return Home/Dismiss Conservatorship. This plan returns the child from foster care to the home of the biological parents or to other family members. Services are provided to the family so a recommendation can be made to the court to return conservatorship to the family.

Adoption. After termination of parental rights, the child is placed with a selected family with plans for adoption.

Permanent Foster Care. A formal, court-approved agreement is made with a foster family who has an ongoing relationship with a foster child who cannot be placed with his own family or adopted. This agreement helps ensure that the child receives long-term, continuing care. Transfer of Conservatorship. Under this plan, the court is asked to transfer managing conservatorship of the child to substitute parents, such as relatives or foster parents. This plan is implemented when adoption or a return home is not feasible.

Permanent Custodial Care. This plan is used when a child is so severely handicapped that life in a family setting is impossible. It is then necessary to place the child in a structured setting, such as a state school for the mentally retarded.

Emancipation. A child under this plan remains in foster care until age 18, until legally married, or until the disabilities of minority are removed by the court.

pare the youths emotionally for adulthood, training in basic living skills, and educational or vocational training.

In the past, DHS was able to maintain a child in foster care to age 21 if the child was enrolled in school. Federal regulations now permit federally reimbursed foster care assistance for children to age 19 only, and state-funded foster care assistance eligibility requirements have been changed accordingly. These changes account for the overall decrease in the "18+" category since fiscal year 1983 (see Figure 24). There has also been a gradual increase in the proportion of children in the 6-9 age category since fiscal year 1984. Children in the 14-17 age group still represent the largest age category of children in foster

Figure 25 reflects the percentage of children in the foster care system who have been in care for more than 24 months. The percentage decreased from fiscal year 1982 to fiscal year 1985, but increased during fiscal years 1986 and 1987. There are several reasons for this.

Many of the children currently in care for more than 24 months are children who are in long-term placements and are not expected to leave DHS conservatorship. This group includes children in long-term foster care because they were unable to return to their own homes, and adoption is not a feasible alternative; or they need long-term, specialized care such as that provided in a state school or nursing home. Since these children will continue in the foster care system until they reach age 18, and children will continue to be placed in long-term care, this portion of the foster care population remains relatively stable.

In the past, children who were going to be returned home or moved into adoption remained in foster care longer than is generally true now. The majority of children currently entering the system are returned home or moved into adoption long before they have been in care more than 24 months. This factor, combined with the fact that the total number of children in foster care at any given time in both fiscal years 1986 and 1987 has decreased from previous fiscal years, means that the children in care for longer periods of time are over-represented in any point-in-time calculations. Therefore, when the entire foster care population is examined, the percentage of children in care more than 24 months is increasing compared to previous years.

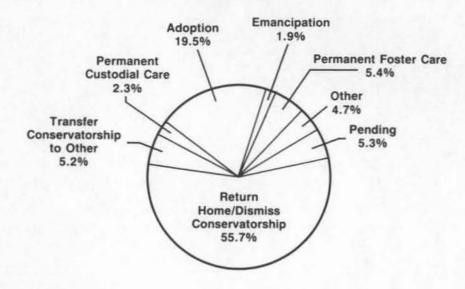
This percentage, however, does continue to remain below the ceiling established in riders to legislative appropriations bills, although it is currently closer to that ceiling than at any time in the past.

As reflected in Figure 26, the number of children placed in residential treatment centers and therapeutic camps continues to increase, while the number of children in public institutions has declined. The increase in the number of children placed in private facilities for the emotionally dis-

Figure 23

Permanency Plan of Children for Whom DHS Has Legal Responsibility

August 1987



turbed suggests that children removed from their families now require more specialized care than perhaps was true in the past.

Aid to Families with Dependent Children (AFDC) Foster Care is a federally matched foster care assistance program, funded by Title IV-E of the Social Security Act, for children who meet the categorical requirements for the department's AFDC program. Benefits include Medicaid coverage and foster care payments. The proportion of children eligible for AFDC foster care increased from August 1985 to August 1987, perhaps due to the continuing economic problems in Texas. AFDC foster care now pays for the care of more than 50 percent of all children in foster care (See Figure 28).

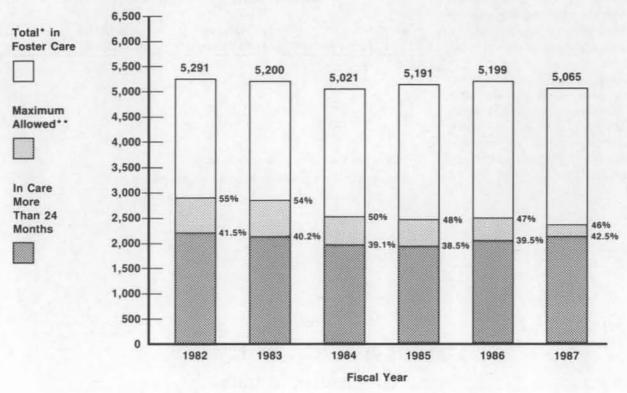
State-paid foster care is a foster care assistance program fully funded by the state for those children who do not qualify for AFDC Foster Care. It provides the same benefits. Since implementation of statepaid foster care in 1979, counties have assumed financial responsibility for fewer children in foster care, but the percentage of children for whom counties are financially responsible did increase in fiscal year 1987.

As the data in Figures 27 and 29 indicates, the statewide total of DHS foster family and foster group homes has remained stable over the past four years, although the licensed capacity has fluctuated and was about 150 less in August 1987

Characteristics of Children in Foster Care at the End of Each Fiscal Year

	FY	1983	FY	1984	FY	1985	FY 1	986	FY	1987
	Number	Percent of Total								
Age										
Birth-2	879	17.5	944	18.6	997	19.2	941	18.3	798	16.0
3-5	849	16.9	869	17.1	942	18.1	921	17.9	887	17.7
6-9	877	17.5	877	17.3	917	17.7	968	18.9	1,011	20.2
10-13	956	19.1	939	18.5	927	17.9	950	18.5	921	18.4
14-17	1,361	27.1	1,367	26.9	1,354	26.1	1,309	25.5	1,339	26.8
18 and over	94	1.9	83	1.6	56	1.1	43	0.8	46	0.9
Sex										
Male	2,368	47.2	2,515	49.5	2,560	49.3	2,540	49.5	2,559	51.2
Female	2,648	52.8	2,564	50.5	2,633	50.7	2,592	50.5	2,443	48.8
Ethnic Group										
Anglo	2,514	50.1	2,539	50.0	2,506	48.3	2,485	48.4	2,320	46.4
Black	1,279	25.5	1,359	26.8	1,377	26.5	1,299	25.3	1,397	27.9
Hispanic	1,056	21.1	1,040	20.5	1,187	22.9	1,206	23.5	1,151	23.0
Oriental	14	0.3	21	0.4	17	0.3	26	0.5	24	0.5
American Indian	30	0.6	21	0.4	23	0.4	18	0.4	14	0.3
Other	123	2.5	99	1.9	83	1.6	98	1.9	96	1.9
Total Children in Foster Care	5,016		5,079		5,193		5,132		5,002	

Figure 25
Children in Foster Care More Than 24 Months



^{*}Monthly average.

Figure 26
Living Arrangements of Children in Foster Care

Type of Facility	August 1985 Percent of Total	August 1986 Percent of Total	August 1987 Percent of Total
Foster Family Homes*	67.3	68.1	66.3
Foster Group Homes*	4.0	3.8	3.8
Emergency Shelter Facilities**	3.7	3.2	4.1
Private Basic Child-care Facilities	6.5	6.2	6.1
Public Institutions for Mentally Retarded or Emotionally Disturbed	3.1	2.4	1.9
Private Institutions for Mentally Retarded	2.4	2.3	2.4
Residential Treatment Centers and Therapeutic Camps	12.4	13.3	14.7
Other Living Arrangements	0.6	0.7	0.7
Total	100.0	100.0	100.0

^{*}Includes DHS and non-DHS homes. Also includes homes that offer specialized care for handicapped children.

^{**}Limits established in riders to legislative appropriations acts.

[&]quot;Includes emergency-receiving foster family and group homes.

than in August 1986. One of the major problems confronting DHS in assuring adequate placement resources is the high exit rate of foster homes each year. In fiscal years 1985 and 1986, the exit rate was 25 percent of the total foster homes active during those years, a figure which decreased only slightly to 23 percent in fiscal year 1987.

Developing adequate resources for children with special needs is another challenge. An effort to recruit and certify specialized homes has resulted in a significant increase in the number of therapeutic and habilitative foster homes over the past two years, as shown in Figure 27.

Figure 27

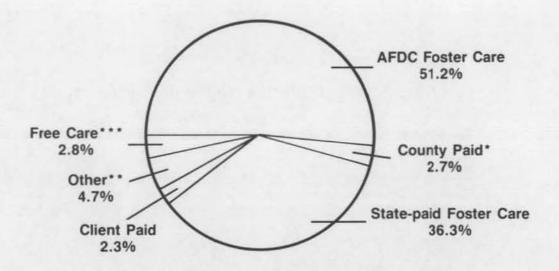
Foster Homes by Type of Facility at the End of Each Fiscal Year

FY	Foster Homes*	Therapeutic Foster Homes**	Habilitative Foster Homes***	Total DHS Foster Homes*
1984	2,567	1	3	2,571
1985	2,574	3	3	2,580
1986	2,544	28	8	2,580
1987	2,519	45	15	2,579

^{*}Includes both foster family and foster group homes.

Sources of Foster Care Payments for Children in Care

August 1987



^{*}Approximately half of these children also receive Medicaid benefits from the state.

^{**}A facility certified as a foster home for emotionally disturbed children.

^{***}A facility certified as a foster home for mentally retarded children.

^{**}Includes Supplemental Security Income and Social Security.

^{***}No payment made. Most of these children are in state or other public facilities.

Figure 29

Foster Homes and Total Licensed Capacity at the End of Each Fiscal Year

Region	FY 1985		FY 1986		FY 1987	
	DHS Foster Homes*	Licensed Capacity	DHS Foster Homes*	Licensed Capacity	DHS Foster Homes*	Licensed Capacity
1/2	191	467	229	627	237	668
3/12	121	331	133	370	147	450
4	155	405	155	422	162	445
5	567	1,674	584	1,779	570	1,681
6	348	857	311	792	292	713
7	225	715	231	704	228	698
8	185	706	177	695	186	657
9	152	394	138	382	173	440
10	167	499	168	527	165	507
11	469	1,624	454	1,577	419	1,463
Total	2,580	7,672	2,580	7,875	2,579	7,722

^{*}Includes foster family and foster group homes

Adoption Services

Although most children are returned to their parents or relatives from foster care, others cannot be returned for a variety of reasons. The department seeks termination of parental rights for many of those children to place them in adoptive homes. The purpose of the department's adoption services is to provide suitable homes for children in its conservatorship in need of adoption rather than to meet the needs of persons interested in adoption. Fortunately, these needs often coincide.

The abused or neglected child for whom

DHS is seeking adoption often:

- is older;
- has emotional, mental, or physical handicaps;
- is of a racial minority group; or
- needs to be placed with one or more siblings.

A child in the department's conservatorship needs an adoptive family who can deal not only with the child's sense of family loss, but also with the physical, emotional, or mental damage sustained as a result of abuse or neglect.

To expand adoption opportunities for these children, DHS has implemented an adoption subsidy program for the special needs child. Subsidy costs are less than maintaining a child in foster care and may be used to assist adoptive parents with placement and maintenance expenses. The department also purchases adoption services from private agencies and operates the Texas Adoption Resource Exchange to increase the pool of prospective adoptive families.

As reflected in Figure 31, the number of children placed for adoption decreased significantly from 1976 to 1984, due in part to the decline in the foster care population since the late 1970s. Also, children

in need of adoptive homes are considerably harder to place today than in the past, as illustrated by the data in Figure 32.

In the past, DHS often accepted infants voluntarily relinquished by their parents for adoption. In recent years, however, these families have increasingly been referred to private adoption agencies. Consequently, a much smaller percentage of children under age 1 were placed for adoption in 1986 than in 1976.

Another major difference is the significant increase in the proportion of children who are physically, mentally, or emotionally handicapped. Because of their special needs, more time and effort are required to recruit suitable homes.

Figure 30 reflects the number of adoptive placements by region for the last three years for which data is available.

Children Placed in Adoptive Homes by Region by Calendar Year

Region	1984	1985	1986
1/2	69	48	58
3/12	43	35	40
4	55	29	51
5	180	218	199
6	58	89	127
7	50	52	58
8	49	52	69
9	40	29	36
10	42	52	52
11	132	159	182
Total	718	763	872

Number of Adoptive Placements by Calendar Year

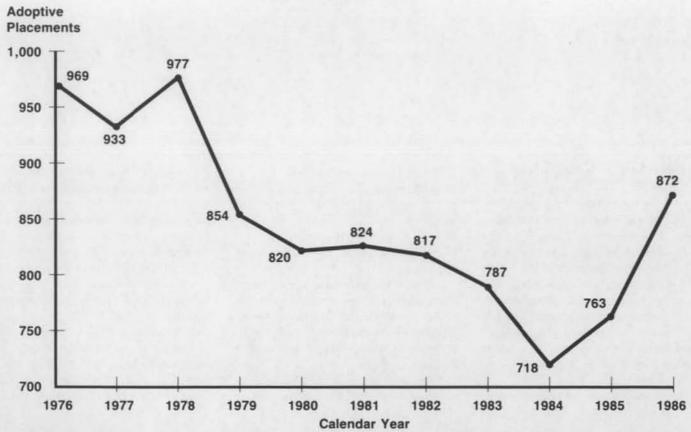
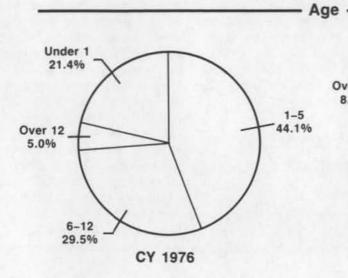
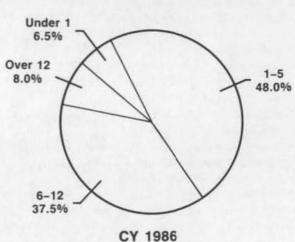


Figure 32

Characteristics of Children Placed in Adoption Calendar Year 1976 Compared With Calendar Year 1986





Percent of Total

CY 1976 CY 1986

Male 51.9 50.9

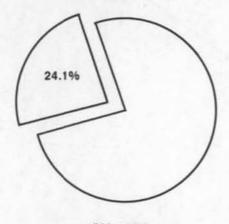
Female 48.1 49.1

Sex ·

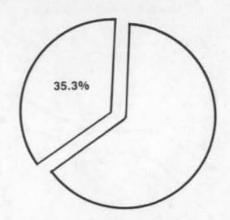
	Percent of Total		
	CY 1976	CY 1986	
Anglo	54.5	52.6	
Black	15.6	17.0	
Hispanic	23.7	21.6	
Other*	6.2	8.8	

Ethnic Group ·

Physically, Mentally, or Emotionally Handicapped



CY 1976 Total Placed: 969



CY 1986 Total Placed: 872

^{*}Includes children of mixed racial backgrounds in addition to Orientals and American Indians.