

Improving Outcomes for Foster Care Youth With Complex Emotional and Behavioral Needs: A Comparison of Outcomes for Wraparound vs. Residential Care in Los Angeles County

by Michael Rauso, Tran M. Ly, Ming H. Lee, and Christopher J. Jarosz*

The Challenges of Foster Care

Over the past decade, there has been a considerable increase in the proportion of foster children and adolescents (referred to hereafter as “youth”) with serious behavioral and emotional challenges (Clark et al., 1996; Simms & Halfon, 1994). According to recent accounts, foster youth have exceptionally high rates of mental health and behavioral challenges (Bruns et al., 2006; McMillen et al., 2004; Persi & Sisson, 2008), and foster youth are also at a higher risk for homelessness and criminal placement (Dishion et al., 1999; Ryan et al., in press). One potential explanation for these high rates, beyond the original need for entering foster care, is the impact that being removed from their community has on foster youth. When removed from their caregivers, foster youth are often placed with strangers, usually outside of their community. They frequently change schools, lose contact with friends, and must adapt to a new placement and community.

These changes, coupled with the original trauma of being removed, can exacerbate behavioral and emotional challenges, resulting in hospitalizations and more restrictive settings, such as residential care. Within residential care, placement instability is a common occurrence that is associated with various negative outcomes such as child

behavior problems (Keil & Price, 2005) and juvenile delinquency (Ryan et al., in press). The social and economic costs associated with such placement disruptions are substantial (Keil & Price, 2005). For example, although residential care placements in California made up approximately 11% of the foster care population in 2000, they constituted more than one-half of foster care expenditures (California Department of Social Services, 2001).

“Residential care” and “group home care” are terms that are sometimes used interchangeably within the research literature, with no consensus on a single definition (Curtis et al., 2001; Wells, 1991). Residential care is a term applied to a diverse array of services that are provided to youth living in such congregate care settings as apartments, emergency shelters, half-way homes, secure settings, and group homes (Child Welfare League, 2005; Curtis et al., 2001). Group homes provide continuous staff supervisory making them an expensive placement option within the child welfare system (Ryan et al., in press). In California, all group home providers are categorized into Rate Classification Levels (RCLs) based on the level of care and services provided, with RCL 14 being the most restrictive (California Alliance of Child and Family Services, 2008).

The purpose of this paper is to compare the placement outcomes and associated costs for youth receiving residential care (defined as group home care in this study) versus a community-based intervention known as Wraparound. Wraparound is a team-based planning process that provides individualized, coordinated, family- and community-driven care to meet the complex needs of youth who are involved with one or more child- and family-serving systems (i.e., child welfare, mental health, juvenile justice, and special education; Walker et al., 2008). Please see www.wrapinfo.org for more information and resources on Wraparound.

Wraparound in Los Angeles County

Wraparound has provided Los Angeles County with an alternative to residential care, consistent with a recommendation made by the Cole Report (1998), a national review panel report based on observations at MacLaren Children’s Center (MCC), Los Angeles County’s children’s shelter:

[The review panel identified a fragmentation and a lack of coordination of support to] effectively meet the needs and challenges of children with severe emotional, mental, and behavioral disturbances and their families [and recommended] an integration of efforts to meet the needs of individual children and their families through new organization initiatives. [Specifically, the panel identified the need to] develop a common plan of care . . . that actively and dynamically documents the strengths and needs of the child and that identifies the development and deployment of resources to meet those needs.

These recommendations essentially mirror core values, principles, and procedures of the Wraparound process.

At the time of the Cole Report (1998), research was emerging that suggested a relationship between number of placement changes and emotional and behavioral disorders in youth (Cooper et al., 1987). However, few published research studies on the placement outcomes of Wraparound existed. The available research nevertheless demonstrated promising outcomes. In a study conducted by Clark and colleagues (1996), 132 children were randomly assigned to the Fostering Individualized Assistance Program (FIAP), a Wraparound intervention, or to a group that received traditional foster care services. The results indicated that children in the FIAP Wraparound group had substantially fewer placement

*Michael Rauso, Psy.D., M.F.T., is division chief of the Resources Management Division in the Los Angeles County Department of Children and Family Services (DCFS). Tran M. Ly, Ph.D., and Ming H. Lee, M.P.H., are research analysts III within the Research and Evaluation Section of DCFS, and Christopher J. Jarosz, Ph.D., is chief research analyst within the Research and Evaluation Section of DCFS. The authors wish to thank Cecilia Custodio, Pam Dubin, Rae Hahn, Ted Howard, Shu-Jiao Lin, Sherman Mikle, and Thomas Nguyen for their work to make this evaluation successful. Michael Rauso can be reached by email at rausom@dcfs.lacounty.gov.

changes two and a half years after entrance into the study.

Two additional studies examined the impact of Wraparound on subsequent living restrictiveness. Yoe, Santarcangelo, Atkins, and Burchard (1996) followed a cohort of 40 youth enrolled in community-based Wraparound in the state of Vermont for a minimum of 12 months. The results indicated that the percentage of youth living in community-based settings increased from 58% at intake to 88% at the end of the 12-month study period.

In the second study, Hyde, Burchard, and Woodward (1996) followed several groups of youth returning from, or at risk for, residential placement, some of whom received Wraparound services. Although the groups were not equivalent at baseline, after two years, almost half of the youth who received Wraparound services were living in the community. Conversely, only 8% of the youth who did not receive Wraparound were living in the community.

The 1998 Pilot Study. When Los Angeles County implemented Wraparound as a 10-child pilot study in 1998 as an alternative to residential care, the goals were to explore its impact on reducing the reliance on out-of-home care and to assess outcomes. The initial outcomes suggested that, compared to youth in residential care, youth involved in the pilot were more likely to return and stay at home. When MCC closed in 2003, as ordered by the interim director of child welfare in Los Angeles County, Wraparound was identified as a primary mechanism to help return youth to the community. Despite the closure of MCC and the availability of Wraparound, referrals were initially slow. Although there were several reasons for the slow start, the primary factors included the lack of understanding of Wraparound and a lack of research on its potential impact, which consisted of only a handful of controlled studies (see Suter & Bruns, 2008, for a review).

The 2004 Exploratory Study. To more fully evaluate Wraparound's potential for positive impact, Los Angeles County conducted an exploratory study in 2004 to compare the outcomes of Wraparound graduates with youth who were discharged from RCL 12 and 14 residential care placements and who went into less restrictive placements in fiscal year 2004–2005 (LA County DCFS, 2007). RCL 12-14 was chosen for the comparison group because Wraparound accepts youth currently in or at imminent risk of placement in residentially based institutional settings due

to emotional, behavioral, or mental health difficulties (Bruns et al., 2004; , 1996). The two groups in Los Angeles County were followed for two and a half years using available administrative data.

An analysis of the results suggested that the Wraparound group did substantially better than the RCL 12-14 group in key areas. The Wraparound graduates had fewer subsequent out-of-home placements and therefore considerably less financial cost to the county than the youth who were discharged from their RCL 12 and 14 placements. In addition, a greater percentage of Wraparound graduates exited the foster care system than did those in the RCL 12-14 group. At the end of the two-and-a-half-year period, 94% of the Wraparound graduates had exited the child welfare system in Los Angeles County while only 7% of the RCL group had done so.

The results of the study were presented within Los Angeles County and around the country. Locally, the study helped to promote the effectiveness of Wraparound and the potential impact on Los Angeles County's service delivery model. Since the 2004 study, the use of residential care has been reduced by over 60%. In 2004, approximately 2,400 foster youth were in residential care, while in 2009, the number decreased to just fewer than 1,000 foster youth. Conversely, Wraparound enrollment was under 200 in 2003 and expanded to more than 1,200 youth by 2009. The study gained the support of the county's board of supervisors for substantial expansions of Wraparound in 2006 and 2009. In 2006, the number of Wraparound providers went from eight to 34, and in 2009, the total availability of Wraparound expanded to a potential of 4,200 slots.

These evaluation results in Los Angeles County parallel an expansion of the research base nationally. For example, Bruns and colleagues conducted a pilot evaluation to assess Wraparound's effectiveness and cost impact in Nevada (Bruns et al., 2006). The pilot included 33 youth enrolled in Wraparound and 32 youth receiving traditional foster care services. The comparison group was matched on age, sex, race, current residential placement, and severity of mental health problems. The results showed that after 18 months, 82% of youth in the Wraparound group, compared to only 38% of youth in the comparison group, had moved to less restrictive environments. Conversely, 6% of the Wraparound youth and 22% of comparison youth had moved to more restrictive settings.

The Current Study

Hypothesis and Methodology. This paper describes results of a new study that aimed to continue to build the evaluation research base on Wraparound in Los Angeles County, using an expanded study cohort, a more rigorous matched comparison design, and a cost analysis. In this study, we compared the placement outcomes and associated costs of youth who graduated from Wraparound in the county to youth living in equivalent residential care (i.e., RCL 12 and 14). We hypothesized that Wraparound would result in better outcomes for foster youth (less restrictive placements) and lower costs to the system than when these youth are placed in residential care at RCL 12 and 14.

Study Design. A static-group comparison was selected for the research design for this study. The Wraparound group consisted of youth who enrolled in and graduated from Wraparound. The comparison group consisted of youth who had been discharged successfully to less restrictive levels of care from residential care placements at the highest rate classification levels (RCL 12-14). This comparison group was selected because youth who enrolled in Wraparound had been placed or were at risk of being placed in these RCLs. An ex post facto analysis was conducted for the 12-month period after graduation from Wraparound or discharge from RCL 12 and 14 to a lower placement level. Several outcome measures, to be described, were assessed during the follow-up period.

Participants. The evaluation initially consisted of 312 youth under the care of the Department of Children and Family Services (DCFS) in Los Angeles County. One group consisted of 102 youth who had graduated from Wraparound. The other group comprised 210 youth who had been in residential care placements at RCL 12 and 14 and were successfully discharged into lower levels of residential care.

The selection criteria for youth in the two groups are listed in Table 1. The last two criteria in Table 1 were added to expand the methodological rigor of our previous study. These are:

1. Youth had been in Wraparound or RCL 12-14 placements for at least six months to assure placement stability and comparability of the groups; and
2. Youth were no older than 17 years, 0 months at Wraparound graduation or RCL 12-14 discharge so we could analyze the full 12 months of placement data without age-outs from the child welfare system.

Table 1: Selection Criteria for Youth in the Wraparound and RCL 12-14 Study Populations

Selection Criteria	Wraparound	RCL 12 -14
The youth's case record is available in CWS/CMS	X	X
Graduated from Wraparound between July 1, 2006, and June 30, 2007	X	
Was discharged from RCL 12 and 14 to a lower placement level or home between July 1, 2006, and June 30, 2007		X
Had not previously been enrolled in the Wraparound program		X
Had not received Wraparound services in the 12 months after discharge		X
Was in a Wraparound or RCL 12-14 placement for at least six months prior to graduation or discharge	X	X
Was no older than 17 years, 0 months at graduation or discharge	X	X

Table 2: Demographic Characteristics of Youth Who Graduated From Wraparound vs. Youth Who Were Discharged From RCL 12 and 14

Demographic Characteristics	Wraparound (N = 43)	RCL 12-14 (N = 177)	χ^2 (p-value)
Age ranges			2.80, ns
5–11 years	21%	11%	
12–17 years	79%	89%	
Gender			2.95, ns
Female	30%	45%	
Male	70%	55%	
Ethnicity^a			10.64, $p < 0.05$
African American	33%	44%	
Hispanic	33%	34%	
White	23%	20%	
Other ^b	12%	2%	

^a Total may not sum to 100% due to cumulative rounding.
^b Includes Asian/Pacific Islander and Native American/Alaskan Native.

Populations were used as the basis of comparison to avoid the potential of sampling error from relatively small groups.

Preliminary Analyses. Youth who graduated from Wraparound were more likely to have their cases closed within 12 months than were youth discharged from RCL 12 and 14. Fifty-nine of 102 graduates in the Wraparound group (58%) and 33 of 210 youth in the RCL 12-14 group (16%)

had their cases closed within 12 months of graduation or discharge. Although an RCL 12-14 case may be closed immediately if the child is discharged to home, this outcome happens infrequently. To assure comparability of the groups, we used the subset of each population that included only cases that remained open for at least 12 months for evaluation (43 for Wraparound from the original population of 102 and 177 for

RCL 12-14 from the original population of 210). All subsequent analyses are presented on the 43 remaining Wraparound youth and 177 remaining RCL 12-14 youth, respectively.

Baseline Characteristics. As shown in Table 2, a large proportion of youth in each group was between 12 and 17 years old, $\chi^2 = 2.80$, ns. This age group reflects the Wraparound program's focus on adolescents rather than younger children. With an average of 13.42 years (SD = 2.23), youth in the Wraparound group were slightly younger than youth in the RCL 12-14 group, which had a mean age of 14.47 years (SD = 1.77), $t = 2.40$, $p < 0.05$. Age, however, did not correlate with any of the outcome measures (to be described in the next section). All r 's were lower than 0.12 and were not statistically significant. There was a higher percentage of males in the Wraparound group (70% vs. 55% for RCL 12-14), but this difference was not significant, $\chi^2 = 2.95$, ns.

There was a statistically significant between-group difference in the racial composition of the two groups ($\chi^2 = 10.64$; $p < 0.05$). A higher percentage of African Americans in residential care (44% vs. 33%) may be at least in part an indication of the racial disparity that exists in the child welfare system (Needell et al., 2009). Using administrative data of all youth involved with DCFS and the Department of Probation in Los Angeles County, Ryan and colleagues (in press) also found a higher percentage of African Americans in group home placements versus foster care placements.

Procedures and Outcome Measures. Data were extracted from the Child Welfare Services/Case Management System (CWS/CMS), a centralized statewide database application for all child welfare services records in California. CWS/CMS is used by the Los Angeles County DCFS as its principal information system. We maintained the anonymity of the youth by using the unique identifier code assigned to each child in the system.

The outcome measures for the 12-month period after graduation from Wraparound or discharge from RCL 12 and 14 to a lower placement level were:

- Number of placements;
- Duration of placements;
- Types of placements (i.e., guardian/relative, foster family, court specified/small family, FFA-certified home, and residential care); and

- Cumulative financial costs incurred by DCFS associated with each placement episode.

Cumulative financial costs were calculated by applying the reimbursement rates to the total number of days in each type of placement.

Study Results

We used SAS v.9.1 descriptive statistics and Student's t-test functions to analyze the

placement outcomes and associated financial costs. Results indicated that 44% of the Wraparound graduates had no subsequent out-of-home placements, compared to 9% of the RCL 12-14 group. Therefore, 91% of the youth in the RCL group had at least one subsequent out-of-home placement.

Placement Outcomes. As depicted in Figures 1 and 2, respectively, youth who graduated from Wraparound had, on average, 0.91 placement (SD = 1.04) and spent about 199.33 days in subsequent place-

ments (SD = 178.69). In contrast, youth who were discharged from RCL 12 and 14 had an average of 2.15 placements (SD = 1.57) and spent about 289.50 days (SD = 125.90) in out-of-home placements. These findings show that youth in the Wraparound group had significantly fewer subsequent placements than youth who were discharged from RCL 12 and 14 ($t = 6.29, p < 0.001$). When placements did occur, youth in the Wraparound group spent significantly fewer days in subsequent placements during the 12 months after graduation than youth in the RCL 12-14 group, $t = 3.33, p < 0.01$. In other words, youth who graduated from Wraparound were found to have a relatively more stable living environment than youth discharged from RCL 12-14 placements.

Youth who graduated from Wraparound also differed from youth discharged from RCL 12 and 14 in the restrictiveness of placement types. Figure 3 illustrates the out-of-home placement distribution for both groups. During the 12 months of follow-up, 77% of the placements for the Wraparound graduates occurred in less restrictive settings such as with foster families, relatives, or legal guardians. In comparison, 70% of the placements for youth who were discharged from RCL 12 and 14 took place in more restrictive environments such as residentially based settings or FFA-certified homes. More than half of the placements after graduation from Wraparound take place in less restrictive settings, whereas almost half of placements subsequent to discharge from RCL 12 and 14 occur in the most restrictive setting (residential care).

Cost Outcomes. When a child is in an out-of-home placement, the amount of direct financial costs incurred is a function of the types of placements and how long the child stays in each placement. The average post-graduation cost for the Wraparound group was calculated to be \$10,737 (SD = \$19,059), whereas the average post-discharge cost for the RCL group was \$27,383 (SD = \$21,679). This difference in average placement costs was found to be significant ($t = 4.62, p < 0.001$). As shown in Figure 4, 47% of subsequent placements in the Wraparound group, compared to 10% of the placements in RCL 12-14 group, did not generate any financial costs. In addition, whereas 86% of the placements in the Wraparound group had \$20,000 or less in associated costs, only 45% of placements in the RCL 12-14 group had costs totaling less than \$20,000 in the first year after initial discharge from residential care.

Figure 1: Average Number of Out-of-Home Placements

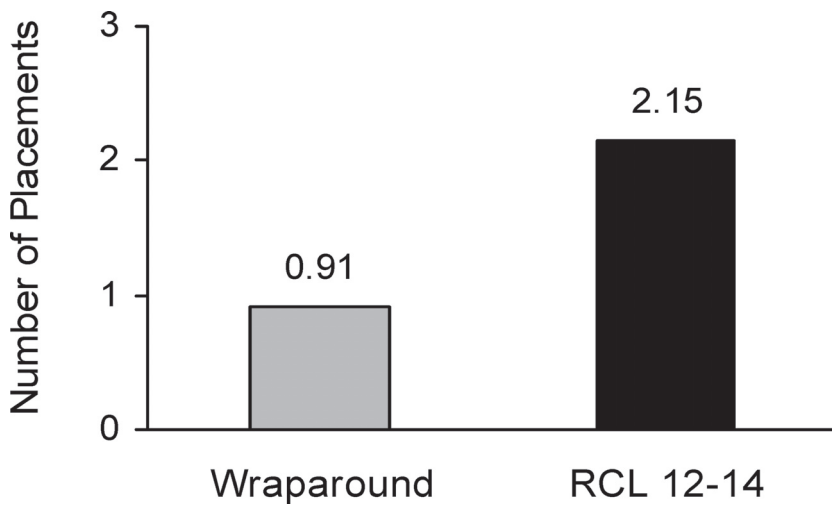


Figure 2: Average Number of Days in Out-of-Home Placements

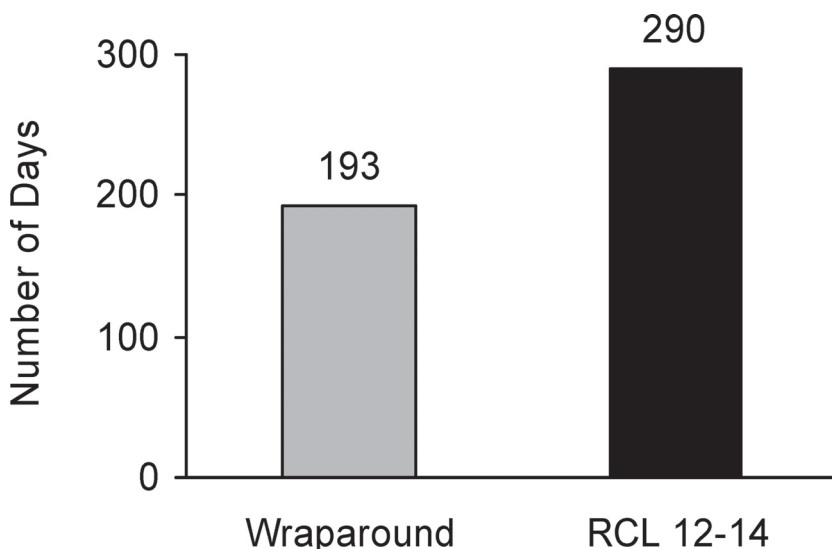


Figure 3: Distribution of Placements After Graduation From Wraparound and Discharge From RCL 12 and 14

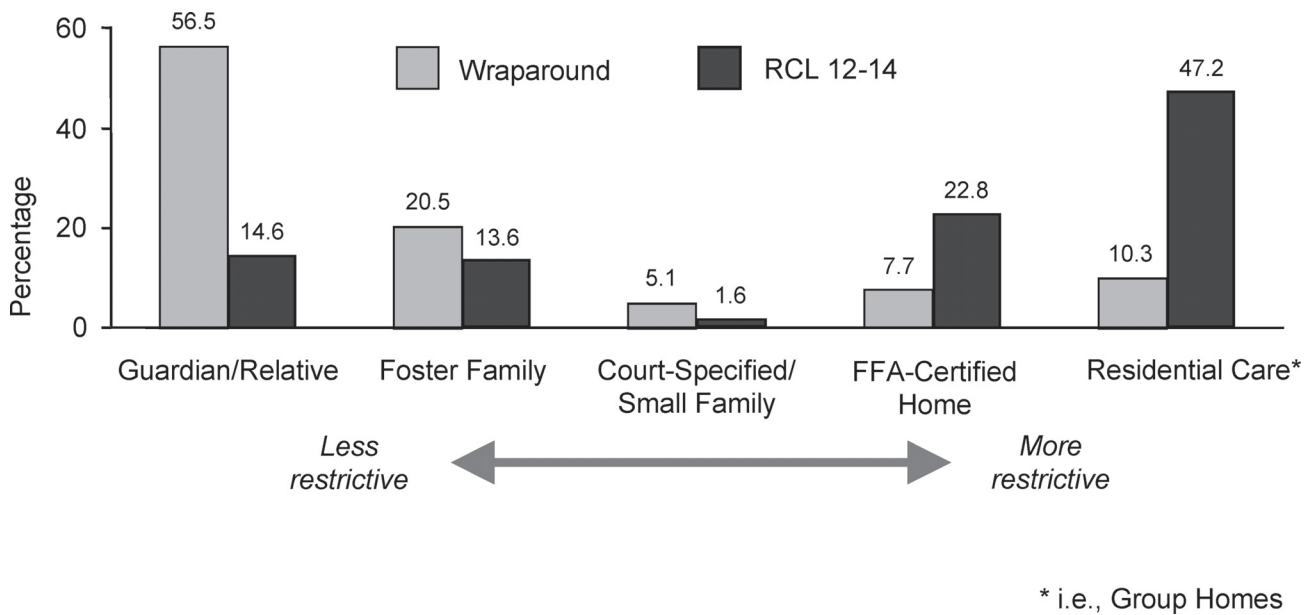
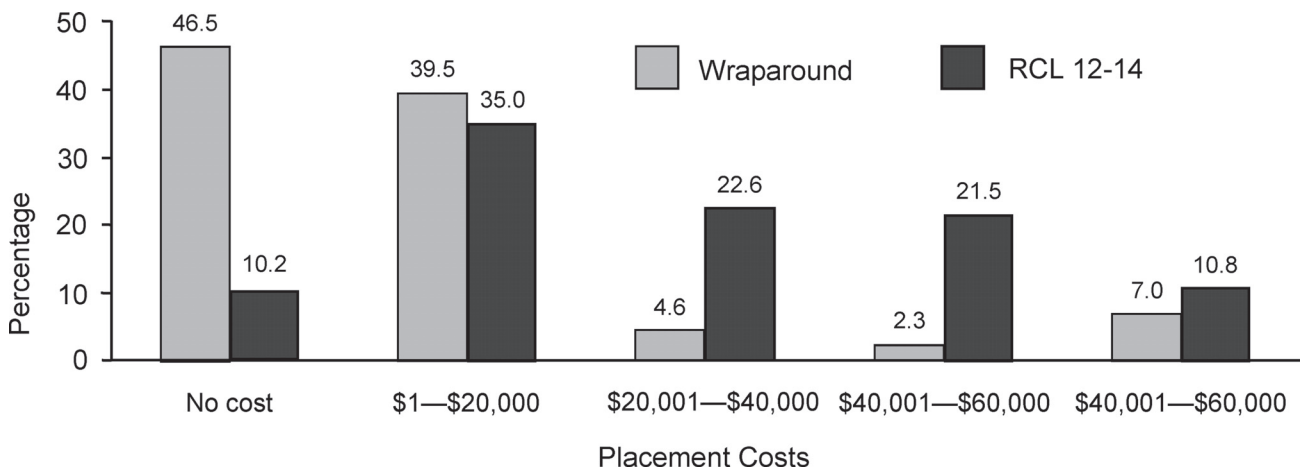


Figure 4: Distribution of Out-of-Home Placement Costs



An Effective Mechanism

Both child welfare policy and practice have focused on reducing the reliance on out-of-home care by preventing out-of-home care altogether or by decreasing the length of stay in residential care and stabilizing the placement if placement is inevitable (James et al., 2004). The current findings from Los Angeles County point to the effectiveness of Wraparound in improving placement outcomes for foster

care youth. Our findings show that during the 12-month period, youth who graduated from Wraparound experienced fewer out-of-home placements than youth discharged from residential care, thereby increasing the stability of their future living situations. Given that frequent placement changes are associated with negative outcomes such as externalizing behaviors (Keil & Price, 2005) and propensity for delinquency (Ryan et al., in press), Wraparound has a positive

impact on youth’s outcomes relating to permanency, safety, and well-being.

Placements, when they do occur for Wraparound youth, require fewer numbers of days. On average, Wraparound youth who were placed after graduation spent about six months in subsequent out-of-home placements compared to their residential-care counterparts, who spent about 10 months. The decrease in the youth’s length of stay in residential care suggests that Wraparound

seems to have provided an effective mechanism for reducing the county's reliance on out-of-home care.

The results also indicate that youth who graduated from Wraparound have less restrictive living environments than youth discharged from RCL 12 and 14 placements. This finding supports previous evaluation studies (Bruns et al., 2006; Yoe et al., 1996). Although most of the youth in the Wraparound group were placed with a guardian or relative, almost half of the youth in the RCL 12-14 group continued in the most restrictive levels of residential care. It may be that youth who graduated from Wraparound are more likely to maintain continuity in school and home settings, and thus to maintain their relationships with families, friends, and teachers.

Because youth who graduated from Wraparound had fewer out-of-home placements and were placed in less restrictive environments overall, their placement costs were substantially less. Almost half of the placements in the Wraparound group incurred no cost at all. In addition, a higher percentage of subsequent placements for the RCL 12-14 youth, relative to the Wraparound youth, involved residentially based settings. As a result, placements in the RCL 12-14 group, compared to placements in the Wraparound group, incurred two and a half times the cost. This finding is consistent with the observation that group homes are an expensive option within the child welfare system (Ryan et al., in press).

Our data also show that Wraparound youth are much more likely to have their cases closed within 12 months of graduation relative to youth discharged from RCL 12 and 14. From the point of view of the Los Angeles County child welfare system, case closure may indicate that the youth's safety and permanency goals have been met. From the point of view of Wraparound, case closure may signify that the family is equipped with skills and community-based resources to address future needs or crises that arise.

Limitations and Future Research Directions

The current study contributes to the evidence base of Wraparound's effectiveness and cost impact in Los Angeles County. Nevertheless, there are some limitations to the evaluation.

First, the study design is a retrospective study and youth were not randomly assigned to groups. This means that groups

might not have been equivalent at baseline and that factors other than receipt of Wraparound versus residential care may have led to the observed differences in placement outcomes and associated costs. Currently, we are determining the equivalency of the two groups, looking at the following background covariates prior to Wraparound or RCL 12-14:

- Age at first placement;
- Number and types of placements prior to Wraparound or RCL 12-14;
- Reason for placement changes;
- Cumulative length of stays for all out-of-home placements; and
- Last placement before entry to Wraparound or RCL 12-14.

Second, we examined the placement outcomes of these youth for a period of only one year. To examine the longer-term outcomes of Wraparound versus RCL 12 and 14, we will develop in the coming year a two-year cohort of youth from the original study populations who have not aged out of the foster care system. We will also add a new first-year cohort to expand the current analysis. Tracking outcomes over multiple years will also enable us to examine the replacement rate of youth into foster care and into residential care.

Last, in using available administrative data, we do not have information on the behavioral characteristics or functioning of the comparison youth. Although we have an assessment of the degree of impairment in functioning for those youth enrolled in Wraparound through the Child and Adolescent Functional Assessment Scale (CAFAS; Hodges, 1999), we do not have CAFAS data for the youth in residential care. Ongoing evaluation of the outcomes of youth in the system will benefit from incorporation of an expanded set of outcome measures that include measures of functioning or behavioral adjustment.

Policy and Practice Implications

Despite the limitations described above, the present research, coupled with the 2004 exploratory study, has had immediate and long-term policy and practice implications in Los Angeles County. One implication is that Wraparound provides an effective service delivery option for youth with behavioral and emotional problems. As demonstrated in both the 2004 evaluation and the current study, a higher percentage of youth who graduated from Wraparound exited the child welfare system than did youth in residential

care. Conversely, a lower percentage of Wraparound graduates had subsequent out-of-home placements compared to RCL 12-14 discharges. Wraparound, endorsed as a high-priority strategy in Los Angeles County, was recently expanded to accept youth who are not currently in or at imminent risk of placement into higher levels of residential care. By providing Wraparound earlier, we expect fewer youth will need high-level residential care and thus have fewer placement disruptions resulting from removal from their families and communities. We also expect that youth are less likely to reenter the child welfare system following graduation from Wraparound.

The adoption of the Wraparound practice and approach will also influence how children's social workers are trained in Los Angeles County. A training model for service delivery is being developed that shares many of the Wraparound values and principles. The departmental goal is to assure that children's social workers have knowledge of and access to a broader range of strategies for improving outcomes for youth in foster care.

Other programs have also been influenced by Wraparound. California Assembly Bill 1453, Residentially-Based Services (RBS), passed in 2007, authorizes the implementation of alternative program and funding models to transform residential care from long-term placements to planned, short-term, and individualized interventions. These interventions combine needs-specific treatment with integrated "follow-along community-based services" to reconnect youth with their families, schools, and communities. Assembly Bill 1453 was influenced by Los Angeles County's Residential/Wraparound pilot program in 2003 that infused Wraparound with residential care.

Thus, Wraparound principles and practice will soon influence the nature of residential care in Los Angeles County. RBS will focus on youth who are currently in or identified for high-level residential care placements (i.e., RCL 12 or 14). The residential care providers selected for the demonstration project will integrate the principles and practices of family finding, family engagement, and Wraparound within their residential care programs to increase the effectiveness and reduce the length of residential stays. The integration of Wraparound into residential care will help complete the transformation already underway in many residential care programs in Los Angeles County from

a deficit-based, facility-driven model to a strength-based, family-driven model functioning largely within the community. The lessons learned from the RBS demonstration project will inform planning for statewide implementation of RBS reform that is due to the California Legislature in 2011.

Conclusion

Wraparound is providing promising options for service delivery that supports youth with high level needs in Los Angeles County. Our study has shown improved outcomes in maintaining youth with their families and in their communities and in helping assure their safety, permanency, and well-being. Wraparound has also reduced the costs associated with providing this level of care in the community rather than in a residential setting.

The results of this study build upon the existing, and rapidly expanding, Wraparound research base concerning placement outcomes. It is essential that we conduct rigorous evaluations of Wraparound services in Los Angeles County, the largest and one of the most urban settings in California, and we are currently planning such an evaluation.

In addition, the integration of the Wraparound model into residential care has far-reaching implications in the training of children's social workers in Los Angeles County and the transformation of the very nature of residential care in California. Wraparound has the potential to play an even more important and expanding role in the field of child welfare in delivering services to vulnerable populations, including youth with complex emotional and behavioral needs.

References

Bruns, E.J., Burchard, J.D., Suter, J.C., Leverentz-Brady, K., & Force, M.M. (2004). Assessing fidelity to a community-based treatment for youth: The Wraparound fidelity index. *Journal of Emotional and Behavioral Disorders, 12*, 79–89.

Bruns, E.J., Rast, J., Peterson, C., Walker, J., & Bosworth, J. (2006). Spreadsheets, service providers, and the statehouse: Using data and the wraparound process to reform systems for children and families. *American Journal of Community Psychology, 38*, 201–212.

California Alliance of Child and Family Services (2008). *A Brief History of Group Home Rate-Setting and a Description of the Current System of Standard Rates*. Available at <http://www.cacfs.org/Advocacy/PublicPolicy.html>.

California Department of Social Services Research and Development Division (CA RADD, 2001). *Children in Group Homes Foster Care Program: A Point in Time Comparison. March 1998 and September 2000*. Available at <http://www.cdss.ca.gov/research/res/pdf/GroupHomes.pdf>.

Child Welfare League of America (2005). *Residential Group Care*. Available at <http://www.cwla.org/programs/groupcare/groupcareaboutpage.htm>.

Clark, H.B., Lee, B., Prange, M.E., & McDonald, B.A. (1996). Children lost within the foster care system: Can wraparound service strategies improve placement outcomes? *Journal of Child and Family Studies, 5*, 39–54.

Cole, R.F. (Cole Report, 1998). *Brief Facility Assessment: MacLaren Children's Center*. Washington, DC: National Resource Network for Children and Family Mental Health, Washington Business Group on Health.

Cooper, C.S., Peterson, N.L., & Meier, J.H. (1987). Variables associated with disrupted placement in a select sample of abused and neglected children. *Child Abuse and Neglect, 11*, 75–86.

Curtis, P.A., Alexander, G., & Lunghofer, L.A. (2001). A literature review comparing the outcomes of residential group care and therapeutic foster care. *Child and Adolescent Social Work Journal, 18*, 377–392.

Dishion, T.J., McCord, J., & Poulin, F. (1999). When interventions harm. *American Psychologist, 54*, 755–764.

Hodges, K. (1999). Child and Adolescent Functional Assessment Scale (CAFAS). In M.E. Maruish (Ed.). *Use of Psychological Testing for Treatment Planning and Outcome Assessment* (2nd ed.) (pp. 631–664). Mahwah, NJ: Lawrence Erlbaum.

Hyde, K.L., Burchard, J.D., & Woodworth, K. (1996). Wrapping services in an urban setting. *Journal of Child and Family Studies, 5*, 67–82.

James, S., Landsverk, J., & Slymen, D.J. (2004). Placement movement in out-of-home-care: Patterns and predictors. *Children and Youth Services Review, 26*, 185–206.

Keil, J.M., & Price, J.M. (2005). Externalizing behaviour disorders in child welfare settings: Definitions, prevalence, and implications for assessment and treatment. *Children and Services Review, 28*, 761–779.

Los Angeles County Department of Children and Family Services (LA County DCFS) (2007). *Wraparound 2007 Annual Report*. Los Angeles, CA: M. Rauso, T. Howard & S.J. Lin.

McMillen, J.C., Scott, L.D., Zima, B.T., Ollie, M.T., Munson, M.R., & Spitznagel, E. (2004). Use of mental health services among older youths in foster care. *Psychiatric Services, 55*, 811–817.

Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, C., Peng, C. & Holmes, A. (2009). *Child Welfare Services Reports for California*. Available at <http://cssr.berkeley.edu/CWSCMSreports>.

Persi, J., & Sisson, M. (2008). Children in foster care: Before, during, and after psychiatric hospitalization. *Child Welfare, 87*, 79–99.

Ryan, J.P., Marshall, J.M., Herz, D., & Hernandez, P.M. (in press). Juvenile delinquency in child welfare: Investigating group home effects. *Children and Youth Services Review* (doi:10.1016/j.chilyouth.2008.02.004).

Simms, M.D., & Halfon, N. (1994). The health care needs of children in foster care: A research agenda. *Child Welfare, 73*, 505–524.

Suter, J., & Bruns, E.J. (2008). A narrative review of wraparound outcome studies. In E.J. Bruns & J.S. Walker (Eds.), *The Resource Guide to Wraparound*. Portland, OR: National Wraparound Initiative, Research and Training Center for Family Support and Children's Mental Health.

VanDenBerg, J.E., & Grealish, E.M. (1996). Individualized services and supports through the wraparound process: Philosophy and procedures. *Journal of Child and Family Studies, 5*, 7–21.

Walker, J.S., Bruns, E.J., & Penn, M. (2008). Individualized services in systems of care: The wraparound process. In B. Stroul & G. Blau (Eds.). *The System of Care Handbook: Transforming Mental Health Services for Children, Youth, and Families*. Baltimore: Brookes.

Wells, K. (1991). Long-term residential treatment for children: Introduction. *American Journal of Orthopsychiatry, 61*, 324–326.

Yoe, J.T., Santarangelo, S., Atkins, M., & Burchard, J.D. (1996). Wraparound care in Vermont: Program development, implementation, and evaluation of a statewide system of individualized services. *Journal of Child and Family Studies, 5*, 23–39. ■



Electronic Copy

This electronic copy is authorized solely for the use of the subscriber. This material may not be photocopied, e-mailed, or otherwise reproduced or distributed without the expressed written permission of Civic Research Institute, and any such reproduction or redistribution is a violation of copyright law.