

Child Welfare Service Performance Indicators – Children’s Aid Society of Stormont, Dundas & Glengarry

Permanency Outcome – The Days of Care, by Placement Type

Definition:

For all children admitted to the care of a Children’s Aid Society, the days of care provided in the fiscal year, by placement type (i.e., family-based care versus non-family-based care).

Why is this Measure Important?

Family-based care is the preferred placement setting for the majority of children in care. Children placed in family settings have greater opportunities to form a connection with consistent caregivers and to experience the benefits associated with membership in a family. The research tells us that children placed in family-based care are more likely to achieve permanency when they exit care, i.e., be discharged to parents or family including adoptive families or legal custody arrangements, compared to children in group care.

Limitations of the Data

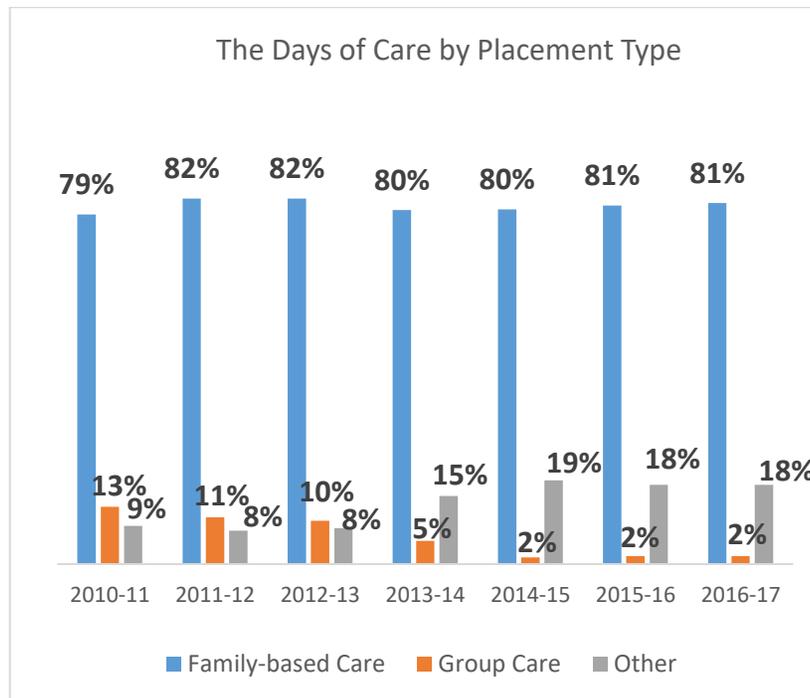
Data illustrate the number of days of care provided by a Children’s Aid Society rather than the proportion of children by placement type. There are variations across Societies in how placement types are classified (i.e., as family versus non-family based care).

Context:

The focus of Children’s Aid Societies is to keep children safe in their home of origin with necessary supports for their family. When a child cannot remain safely in their home of origin, a Children’s Aid Society provides an alternative quality of care such as living with Kin or Foster Care. There are approximately 10% fewer children coming into care today than there were five years ago. On any given day in Ontario, there are approximately 14,500 children and youth in the care of the Province’s Children’s Aid Societies. A prominent focus of the Ministry of Children, Community & Social Services Transformation Agenda was to expand family-based care options for children to include and value the participation of extended family members and significant individuals in the child’s community.

Key Considerations:

While a high rate of family-based care is desirable, selection of a placement setting should be first and foremost influenced by the needs of the child and the fit to the placement. Given the mandate of a Children’s Aid Society, and the nature of the challenges experienced by some children and youth, it can be difficult for agencies to recruit and train quality alternative care through Kin arrangements or Foster Parents.



Results:

The majority, 79-82% of days of care provided by the Children’s Aid Society of Stormont, Dundas & Glengarry are family-based in each of the years under review.

These data are compiled and analyzed by the Ontario Association of Children’s Aid Societies through the Ministry Quarterly Reports.

“Other” includes days of care provided for young people who are in care but living independently; or days of care provided through institutions such as hospitals, children’s mental health centers or youth justice facilities.

*Due to rounding to the nearest percent, total percentages may not always add up to 100%.

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Well-being Outcome: The Quality of the Caregiver and Youth Relationship

Definition:

The average score for children in care (aged 10-17) from a standard scale that measures a young person’s perception of the quality of the relationship with his or her primary caregiver. The scale measures the child in care’s response to the following four items:

Thinking of your caregiver (female or male):

1. How well do you feel he/she understands you?
2. How much fairness do you receive from him/her?
3. How much affection do you receive from him/her?
4. Overall, how would you describe your relationship with him/her?

Each of these four items is rated from 0 to 2, yielding a composite score with a minimum of 0, and a maximum of 8.

Why Is This Measure Important?

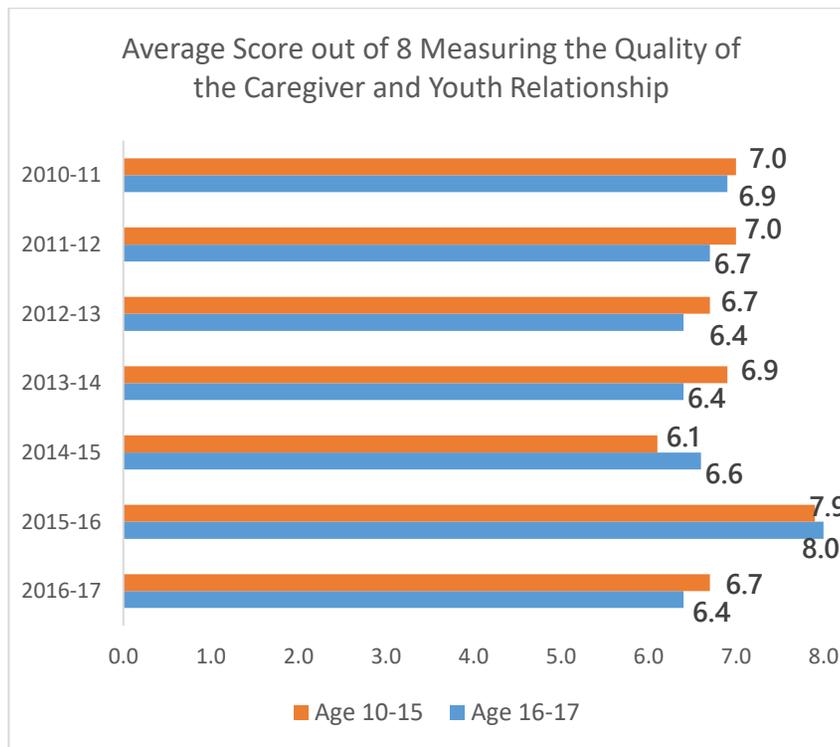
The quality of the caregiver-youth relationship is at the heart of service to children in care. Research demonstrates that a young person’s perception of the quality of his/her relationship with his/her caregiver predicts the following: current happiness; self-esteem; positive behaviour; and placement satisfaction and stability. As scores increase on the quality of the caregiver relationship scale, so do positive outcomes across each of these areas (e.g. higher self-esteem).

Limitations of the Data:

These data form part of the Ontario Looking After Children assessment, which is completed annually for all children who have been in the care of a Children’s Aid Society for at least one year. A very small number of children who should have completed this assessment are not assessed within the required timeframes. Therefore their data are not included in these results. Child protection workers ask children to provide responses verbally with the caregiver present and the child’s responses may be influenced by this approach. Children usually respond to the 4 questions based on how they are feeling that day not necessarily how they have felt over the past year.

Key Considerations:

The key influencing factors in measuring the quality of the caregiver and youth relationship include; the age of the youth, the type of placement, gender and the length of the placement.



Results:

Children in care between the ages of 10 to 15 years old have scored the quality of their relationship with their caregiver 6.1-7.9 out of 8 based on the answers to the questions and the youth age 16 and 17 scored the quality of their relationship with their caregiver between 6.4-8.0 out of 8.

These data are compiled and analyzed by the University of Ottawa, Centre for Research and Community Services.