



City of North Port

RESOLUTION NO. 2019-R-02

A RESOLUTION OF THE CITY OF NORTH PORT, FLORIDA, URGING MEMBERS OF THE FLORIDA LEGISLATURE TO SUPPORT CHILD WELFARE REFORM IN FLORIDA TO ENSURE A SAFE ENVIRONMENT IS PROVIDED TO THOSE WHO CANNOT PROTECT THEMSELVES AND TO REDUCE COMMUNITY IMPACTS STATEWIDE; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; AND PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the City of North Port, Florida's community leaders responded to the recent death of Jordan Belliveau by developing a task force to address much needed changes to the Florida Department of Children and Families ("DCF"); and

WHEREAS, the task force's findings and recommendations are attached hereto as Exhibit A; and

WHEREAS, the task force was made up of individuals with child welfare experience directly or indirectly; and

WHEREAS, 82% of children fatalities within the DCF system are under the age of 3 and 39% of the fatalities have had prior involvement with DCF and Florida's child population has increased by 1.8% compared to the National decrease of 0.5%; and

WHEREAS, Florida's reunification of children with families is 47% compared to the national average of 51%; and

WHEREAS, 46% of the children in care are there for 12 months or more, of which 28% are in care for 2 or more years, and 25% of Florida youth that are in care are placed in group homes; and

WHEREAS, Commissioner of Child Protective Services for the State of Texas, Hank Whitman, testified in 2018 that increased salaries and more caseworkers had succeeded in reducing turnover; and

WHEREAS, the need for legislative action is further evidenced by recent events in Largo, Florida and by the numerous child fatalities each year in Florida.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF NORTH PORT, FLORIDA, AS FOLLOWS:

SECTION 1 – INCORPORATION OF RECITALS

- 1.01 The above recitals are hereby ratified and confirmed as being true and correct and are incorporated herein by reference.

SECTION 2 - RESOLUTION

- 2.01 The City of North Port, Florida urges members of the Florida Legislature to support the following changes to the child welfare system:
- a. That caseworker and investigator caseloads, burnout and unqualified staff be decreased, by adding more positions, and increasing investigator and case manager pay that is more representative to the professional requirements, responsibilities, duties, stress, and liability of workers;
 - b. That newly hired investigators and caseworkers be assigned seasoned "mentors" per our attached requirements, to help ensure that new employees understand the proper steps needed to complete a thorough investigation and assessment;
 - c. That DCF update its hiring qualifications to ensure that more qualified investigators are hired. All hired investigators should have relevant child welfare experience;
 - d. That DCF mandate proficient initial and ongoing training with oversight;
 - e. That the statutory requirement for maximum number of investigator and caseworker assigned cases be followed. Also, that supervisors not be allowed to assign cases to themselves to cover up the high caseloads numbers, but then require an investigator to work the case;
 - f. That if imminent danger is not present, investigations be conducted over a span of sixty days with a minimum of three contacts made with the child and family to ensure a thorough investigation is completed;
 - g. That investigators contact at minimum three collateral contacts to include a school or daycare if the child attends one, a close family member, and neighbors. Collateral contacts should not just be attempted once or twice and then forgotten about. If a collateral contact is not made, then a supervisor approval should be required to override the need for the contacts prior to case closure;
 - h. That investigators make successful contact with at least 80% of collateral contacts;
 - i. That if a parent does not have at least 60% of their case plan completed at the twelve-month mark and actively working their case plan, then a termination petition should be filed;
 - j. That all case plans directly address the needs of each individual family and that caseworkers "meet the client where they are";

- k. That caseworkers should make face-to-face contact with parents and children at least two times per month to ensure parents are making timely progress toward reunification;
 - l. That investigators and caseworkers be required to return client phone calls within 48 hours;
 - m. That affidavits for removal be more holistic. The entire picture should be placed into the report, positive and negative;
 - n. That an explanation be provided in the report as to why an arrest was not made when a child was removed. There should be a very specific explanation in the report as to why wrap-around services could not be provided in the home instead of removing the children from the home;
 - o. That DCF have 6 months to develop a focus group that looks at employee retention concerns and include current investigators to share their concerns without fear of retaliation;
 - p. That DCF be required to allow workers to deny case assignment with good cause; and
 - q. That DCF conduct employee surveys yearly with a minimum of 25% of DCF employees (who are selected randomly). Upon review, DCF should identify negative patterns that could impact employee morale or services. Once the issues are identified, a plan should be put in place to address the concerns within 90 days.
- 2.02 The City of North Port, Florida urges members of the Florida Legislature to support the following changes to the child welfare system placements and foster care:
- a. That if an individual has been a productive member of society for five years or more their past should not be held against them and they should have a right to accept placement of relatives;
 - b. That if children re-enter care, there be a first right of refusal of placement by previous foster parents that children are familiar with versus automatic placement with family or another foster placement;
 - c. That traditional foster parents receive increased compensation for placements. Care for children 13 years and older should see a significant increase in financial help and incentives as older children are often the most difficult to place and have increased behaviors;
 - d. That foster homes not be pressured to take children above their capacity;
 - e. That foster families receive financial assistance for extracurricular activities;
 - f. That a voucher is provided to caregivers and/or foster families for clothing immediately upon transfer to their custody;
 - g. That foster parents & caretakers receive a verified, up to date, list of services offered for children placed with them to ensure adequate community and agency support; and

- h. That all children in care have a mandatory mental health assessment by a licensed mental health counselor within two weeks of entering care and all recommendations from the mental health assessment should be followed.

2.03 The City of North Port, Florida urges members of the Florida Legislature to support the following changes to the child welfare system and the reunification process.

- a. That when a judge hears a case for reunification a mandatory report by the guardian ad litem and foster parent/guardian must be presented to the judge 10 business days prior to the hearing for their review;
- b. That guardian ad litem have limited access to the Florida Safe Families Network (“FSFN”) portal to create case notes on their interactions with children and their families;
- c. That when children are reunited with their parent or guardian the return shall be gradual for every case;
- d. That children have at least two visits per week for two hours with their parent or guardian as supervised visitation is proven to increase the rates of successful reunification. Infants should engage in visitation with their parents more frequently;
- e. That supervision for parent/child visits be conducted by a third party, not the case manager;
- f. That following reunification, a family support worker should conduct a minimum of 5 drop-ins per week unannounced, and slowly decrease overtime throughout their six months post placement supervision; and
- g. That FSFN should be updated to reflect the changes herein.

SECTION 3 – CONFLICTS

3.01 In the event of any conflict between the provisions of this resolution and any other resolution or portions thereof, the provisions of this resolution shall prevail to the extent of such conflict.

SECTION 4 – SEVERABILITY

4.01 If any section, sentence, clause or phrase of this resolution is held to be invalid or unconstitutional by any court of competent jurisdiction, then said holding shall in no way affect the validity of the remaining portions of this resolution.

SECTION 5 – EFFECTIVE DATE

5.01 This Resolution shall take effect immediately upon adoption by the City Commission of the City of North Port, Florida.

PASSED and DULY ADOPTED by the City Commission of the City of North Port, Florida this _____ day of _____ 2019.

CITY OF NORTH PORT, FLORIDA

CHRISTOPHER HANKS
MAYOR

ATTEST:

KATHRYN PETO
CITY CLERK

APPROVED AS TO FORM AND CORRECTNESS:

AMBER L. SLAYTON
CITY ATTORNEY

EXHIBIT A TO RESOLUTION NO. 2019-R-02**Ad Hoc Community Task Force Findings and Recommendations****Reform Request Explanation*****Section 1***

1. **Concern:** There are far too many active cases with too few investigators and caseworkers to manage the number of open cases resulting in families not receiving adequate support to complete their case plan, improper investigations being conducted and children in care not receiving proper oversight, which results in death or serious bodily harm to children.

Caseworkers and investigators are also experiencing burn out which results in a high turnover rate due to the workers being underpaid, the lack of support in the work place, and the substantial number of hours they work each week. On average investigators are assigned up to 50 cases involving children living in a three-county area (Sarasota County). In Sarasota County, all satellite offices for DCF (Department of Children and Welfare services) caseworkers are closed or in the process of closure increasing travel time for investigations.

Due to the high burn out rate (on average two years), and low pay coupled with the intense schedule, few investigators and case managers hired are qualified which means that workers with little child welfare training and experience are overseeing at risk children without the necessary training and supervision needed.

Recommendations:

- It is recommended that DCF and Community Based Care programs hire more investigators and case managers to decrease caseloads.
 - Decreasing caseloads will result in more thorough investigations, adequate oversight and support for families receiving ongoing case management services, and less intensive schedules for investigators and case workers. Proper investigations and oversight will decrease child death and serious bodily harm cases.
- It is recommended that the state increase funding for such positions to allow for additional workers to be hired. Also, to increase investigator and case manager pay that is more representative to the professional requirements, responsibilities, duties, stress and liability of workers.
 - Increasing funding will ensure the state can meet case load requirements and hire an adequate number of workers. It will also help the state and community based care agencies hire and retain qualified workers.
- It is recommended that DCF update their hiring qualifications to ensure that more qualified investigators are hired.
 - Hiring investigators with more child welfare training and experience will ensure proper investigations are being conducted.

- It is recommended that satellite offices re-open to decrease travel time. Also, Investigators should not be assigned a case more than 30 miles outside of their assigned office or home location.
 - Re-opening satellite offices will allow more employee working hours to be devoted to the children and families served to help ensure they receive the time and attention they deserve.
- It is recommended that the statute requirement for maximum number of investigator and caseworker assigned cases be followed. Also, that supervisors not be allowed to assign cases to themselves to “cover up” the high caseloads numbers, but then require an investigator to work the case.

- 2. Concern:** Newly hired investigators and caseworkers lack needed oversight. Currently, there is little on-the-job training required for newly hired investigators and caseworkers post classroom training.

Recommendation:

- It is recommended that newly hired investigators and caseworkers be assigned seasoned "mentors" to help ensure that the new employee understands the proper steps needed to complete a thorough investigation and assessment.
 - Currently a mentoring program is in place, but it is not being utilized properly. The new investigators should have a seasoned investigator shadow them on several investigations to observe their work post training and ensure they are completing investigations and assessments properly. The new employee should not go on an investigation on their own prior to being shadowed for at least two cases in their entirety. After the investigator starts investigating cases on their own, they would continue to meet with their mentor throughout their first year. The mentor would slowly decrease their oversight of the new worker. Meetings with the mentor should be in addition to case staffing's with the assigned supervisor.

- 3. Concern:** Investigations are conducted too quickly, often times in just one home visit resulting in inadequate investigations. Not thoroughly conducting investigations can result in further trauma or even death of a child. In addition, if risk factors are identified right away they can easily be addressed within the home environment in a timely way instead of waiting until multiple calls to the hotline are made that result in the removal for a safety risk/threat that could have been ameliorated sooner.

Recommendations:

- It is recommended that if imminent danger is not present, investigations be conducted over a span of sixty days with a minimum of three contacts made with the child and family to ensure a thorough investigation is completed. This will help the worker conduct a better assessment of the family, identifying potential risk factors that could increase threat to the children over time if not addressed.
- It is recommended that investigators contact at minimum three collateral contacts to include a school or daycare if the child attends one, a close family member, and neighbors. Collateral contacts should not just be “attempted” once or twice and then

forgotten about. If a collateral contact is not made, then a supervisor approval should be required to override the need for the contacts prior to case closure.

- It is recommended that investigators make successful contact with at least 80% of collateral contacts. This will ensure there is not a pattern of behavior with particular workers “attempting” to make collateral contacts.

- 4. Concern:** Children in Florida are lingering in care despite the Adoption and Safe Families Act that mandates specific timeframes for permanency (15 months). In Florida, 46% of the children in care are there for 12 months or more of which 28% are in care for two or more years.

Recommendation:

- It is recommended that allowing parents one year to complete a case-plan along with allowable extensions should be reviewed. If a parent does not have at least 60% of their case plan completed at the twelve-month mark and actively working their case plan, then a termination petition should be filed. Too much time is given, and children are lingering in care. Parents at times will wait until the last minute to start engaging in their case plan and then an extension is given, forcing the children to linger in care longer.

- 5. Concern:** A case plan that identifies the necessary steps families must take before their children can be returned home are often unrealistic and are often “cookie cutter”, not addressing individual family concerns. Parents are not always being provided with the appropriate referrals and/or resources to successfully achieve their case plan goals, delaying reunification. Case managers and investigators do not call parents back in a timely manner.

Recommendations:

- It is recommended that all case plans directly address the needs of each individual family and that caseworkers, “Meet the client where they are”. If caseworkers meet the client where they are and develop rapport with them, then they are more likely to engage the clients and help them make meaningful changes in the grand scheme of things. (Currently, parents are being pressured to make changes immediately upon removal of the children without rapport building first creating anger and frustration in the parents.)
- It is recommended that in order to ensure parents are making timely progress toward reunification, caseworkers should make face-to-face contact with parents and children at least two times per month.
- It is recommended that investigators and caseworkers be required to return client phone calls within 48 hours.

- 6. Concern:** DCF does not develop objective reports with a full picture of family functioning when writing an affidavit for removal. At times this results in the removal of children when intensive wrap around services could be placed in the home to ameliorate the family’s risk. If a full picture is provided on family circumstances, the judge can make an informed ruling when it comes to the removal of children.

Many DCF investigators are not qualified and develop subjective reports. The reports only answer to the complaint, addressing the negative functioning of the family while leaving out the strengths that could decrease overall risk.

Recommendations:

- It is recommended that affidavits for removal be more wholistic. The entire picture should be placed into the report, positive and negative.
- It is recommended that an explanation be provided in the report as to why an arrest was not made when a child was removed. There should be a very specific explanation in the report as to why wrap around services could not be provided in the home instead of removing the children from the home. FITT (Family Intensive Treatment Team) is an intensive wrap around service that can be used to ameliorate a significant number of safety risks, reducing the trauma children experience. Studies show that removal from the home is very traumatic for children, so ALL efforts must be made to maintain the family unit to ensure best interest of the children.

7. **Concern:** A negative and hostile work environment has been created in several DCF service areas due to lack of supervisor support, long work hours, worker liability. This also contributes to the high burn out rate of workers and increasing caseloads. A survey of prior and current DCF employees would paint a horrific picture of the work environment employees are subjected to. One DCF worker interviewed for this proposal stated, "The Suncoast Region Upper Management is a HUGE problem. They are evil and treat staff like complete dirt. It is unreal what they do. It SERIOUSLY needs to be addressed." Another worker shared a time when she had been impacted by a close family member committing suicide. Upon going back to work the week after the incident her supervisor assigned her a suicide case. She asked for the case to be assigned to another worker due to her recent traumatic experience and her request was denied. They made her work the case. If employees are not supported and their well-being is not being considered, then they cannot provide the best services to families. Employee's mental health concerns should be respected.

Recommendations:

- It is recommended that DCF have a focus group that looks at employee retention concerns and include current investigators to share their concerns without fear of retaliation.
- It is recommended that if a worker requests to not be placed on a case for reasonable concerns that they be respected. Especially if their own experiences may impact their decision making related to the case or mental health negatively.
- It is recommended that DCF conducts employee surveys yearly with a minimum of 25% of DCF employees (who are selected randomly). Upon review, DCF should identify negative patterns that could impact employee morale or services. Once the issues are identified a plan should be put in place to address the concerns within 90 days.

Section 2

- 8. Concern:** It is in the best interest of children to be placed with family if there is an appropriate caregiver available. However, at times family members are excluded due to their criminal history and children end up in foster care or even worse, group homes.

Recommendation:

- While we recognize that a person may have had a history at one time, if they have been a productive member of society for five years or more their past should not be held against them, they should have a right to accept placement of relatives.
 - Sexual abuse and serious bodily harm or death histories, should be excluded in this exception.

- 9. Concern:** Children re-entering care are further traumatized by being placed with strangers when prior foster homes are able and willing to accepting placement of the child again.

Recommendation:

- When children re-enter care, there should be a first right of refusal for placement by previous foster parents that children are familiar with versus automatic placement with family or another foster placement. This will decrease trauma to the child.

- 10. Concern:** Foster homes are pressured to take on more children that goes beyond their capacity and/or desired amount. Traditional foster parents are not compensated enough to ensure children's needs are met without having to pay for expenses out of pocket. Foster parents do not receive enough support or community resources which makes it difficult to retain foster homes.

Recommendations:

- It is recommended that traditional foster parents receive increased compensation for placements. Care for children 13 years and older should see a significant increase in financial help and incentives as older children are often the most difficult to place and have increased behaviors.
- It is recommended that foster homes not be pressured to take children above their capacity. If they say no to the placement of a child, they should not be pressured to reconsider their answer.
- It is recommended that foster families receive financial assistance for extracurricular activities.
- It is recommended that a voucher is provided to caregivers and/or foster families for clothing immediately upon transfer to their custody if the child does not have an adequate amount at the time of placement.
- It is recommended that foster parents and caretakers receive a verified, up to date, list of services offered for children placed with them to ensure adequate community and agency support.

- 11. Concern:** Children are not receiving adequate mental health services when in state custody. When childhood trauma is not addressed children are at an increased risk of being incarcerated, having mental health concerns, and using substances as adolescents and adults. In addition, children may act out behaviorally creating placement disruption which further traumatizes youth.

Recommendation:

- All children in care must have a mandatory mental health assessment within two weeks of entering care **and** all recommendations from the mental health assessment should be followed. Currently a CBHA (Child Behavioral Health Assessment) is conducted with youth upon entering care, however, recommendations for treatment are rarely followed increasing youth risks as adolescents and adults, costing communities more money in the criminal justice and mental health systems.

Section 3

- 12. Concern:** Foster parents and Guardian ad Litem's (GAL) are not always given an opportunity to be heard in court. Often times, foster parents and GAL have vital information that could impact a judge's decision for reunification and they need to be heard to ensure best interest of the children.

Recommendation:

- It is recommended that a mandatory report by the GAL and foster parent/guardian must be presented to the judge at least 10 business days prior to each status or reunification hearing for the judge to review prior to the hearing.

- 13. Concern:** Guardian ad Litem's have frequent contact with children and their parents. At the present time the GAL cannot input case notes for child welfare professionals to review after making each contact with the parent and child. GAL's are a party to the case and their input and work should be valued and recognized.

Recommendation:

- GAL's should have limited access to the portal to create case notes on their interactions with children and their families.

- 14. Concern:** Parents are often reunified with their children abruptly with very little or no transition from out of home care to reunification with their parent(s). An abrupt transition can be stressful on the parent and child resulting in increased risk factors upon reunification. Slowly transitioning children home allows case managers to continually assess risk throughout the transition to ensure the children are safe. In addition, caring for children is stressful and parents need time to ease back into full time caregiving responsibilities. Children also need time to adjust to developing a "new" routine in a "new" environment.

Recommendations:

- It is recommended that when children are reunited with their parent or guardian the return shall be gradual for every case. For example, when deemed safe, parent and child visits should move from supervised visits to unsupervised for two hours each visit with a drop-in visit by a family support worker for two weeks. Following the initial two weeks of unsupervised visits, the family should have four hours with two drop-ins, and increase their time too multiple times per week. After a few weeks, the unsupervised visits shall include overnights with multiple unannounced drop-ins. After a parent has successfully had a few weeks of overnights with no safety concerns then the children should be reunified with their parent or guardian.
- It is recommended that following reunification, a family support worker should conduct a

minimum of 5 drop-ins per week unannounced, and slowly decrease overtime throughout their six months post placement supervision. This will ensure child safety following reunification as this can be a very stressful time for the parent and child adjusting back to their normal routine as a family. When families are stressed risk increases and it is important to ensure the family adjusts without safety concerns. This same process has been implemented in other states and is successful.

- FSN (Florida Safe Families Network) should be updated to reflect the changes in this proposal.

15. Concern: Florida has a reunification rate of 47% compared to the national average of 51%. In many counties, case managers and foster parents supervise the visits between children and their parents which has been proven to create tension, decreasing parental visitation engagement.

Recommendations:

- It is recommended that children should have at least two visits per week for two hours with their parent or guardian as supervised visitation is proven to increase the rates of successful reunification.
- It is recommended that supervision should be conducted by a third party, not the case manager as studies have shown when case managers supervise family visits parents are less likely to engage due to the tension/negative relationship between the case manager and parent.
- It is recommended that infants should engage in visitation with their parents more frequently because infancy is has been identified as a crucial time for parent/child bond development.

SUMMARY

When children are subjected to child abuse or neglect, they have experienced trauma. Traumatic experiences more often than not lead to negative emotional, behavioral, medical, and psychological outcomes. When children suffer from the above-mentioned, they are at an increased risk of being involved in the criminal justice system, being addicted to substances, and an increased risk of medical and mental health concerns. In addition, they are at higher risk of being a perpetrator of child abuse/neglect, and domestic violence.

Studies show, that trauma accounts for 45% of mental health disorders starting in childhood, 32% in early adulthood, and 26% in mid-later adulthood. In fact, in one study, 70% of psychiatric inpatients are reported to have experienced some form of childhood abuse. These statistics show the correlation between childhood trauma and increased costs in the mental health system which costs every community an astronomical amount of money each year.

Childhood trauma is also found to be associated with an increased risk of being arrested or incarcerated. Dependent upon which study is reviewed, it has been found that children with a history of maltreatment are two to six times more likely to develop criminal behavior in young adulthood when compared to non-maltreated children. Decreasing the impacts of childhood trauma through early intervention and adequate mental health services will decrease crime in our communities, saving tax payers money.

Childhood maltreatment is related to a fourfold increase in truancy and running away from home which forces law enforcement and school personal resources to address these concerns.

Medical costs are found to increase significantly when individuals have a history of childhood trauma. One study found that the mean annual adjusted costs range between \$982 and \$3,269 per abused person, depending on the type of childhood maltreatment. The annual societal costs at population level range between 100 and 450 MILLION per one million individuals between the ages of 18 and 65 years of age. When concerns are addressed in childhood by conducting proper assessments, which would enable the child welfare system to intervene sooner and provide adequate mental health services to children then the annual societal medical costs would be reduced dramatically.

While this Child Welfare Reform Task Force recognizes that the recommendations in this proposal will require an initial investment, the costs to the State of Florida for child welfare training, mental health and medical services, criminal activity, child abuse and neglect, and educational resources, will decrease overtime by being proactive instead of reactive to problems in our communities. Adopting this proposal will make impacts in our communities for years to come and decrease risk of our youth.

SOURCES

Population:

[http://www.dcf.state.fl.us/programs/childwelfare/docs/2017LMRs/2017%20Annual%20Performance%20Report ROA.pdf](http://www.dcf.state.fl.us/programs/childwelfare/docs/2017LMRs/2017%20Annual%20Performance%20Report%20ROA.pdf)

Community Impacts:

Hoffman, J. A. 1. hoffman. 800@osu. ed., Bunger, A. C. 1. bunger. 5@osu. ed., Robertson, H. A. 1. robertson. 227@osu. ed., Cao, Y. cao. 225@osu. ed., & West, K. Y. 2,3. K. W. or. (2016). Child welfare caseworkers' perspectives on the challenges of addressing mental health problems in early childhood. *Children & Youth Services Review*, 65, 148–155. <https://doi.org/10.1016/j.chilyouth.2016.04.003>

Yampolskaya, S., Armstrong, M. I., & Vargo, A. C. (2007). Factors associated with exiting and reentry into out-of-home care under community-based care in Florida. *Children and Youth Services Review*, 29(10), 1352–1367. Retrieved from <https://login.ezproxy.net.ucf.edu/login?auth=shibb&url=https://search.ebscohost.com/login.aspx?direct=true&db=swh&AN=57253&site=eds-live&scope=site>

Thielen, F., Have, M., Graaf, R., Cuijpers, P., Beekman, A., Evers, S., & Smit, F. (2016). Long-term economic consequences of child maltreatment: a population-based study. *European Child & Adolescent Psychiatry*, 25(12), 1297–1305. <https://doi.org/10.1007/s00787-016-0850-5>

Gamache Martin, C., Van Ryzin, M. J., & Dishion, T. J. (2016). Profiles of childhood trauma: Betrayal, frequency, and psychological distress in late adolescence. *Psychological Trauma: Theory, Research, Practice, and Policy*, 8(2), 206–213. <https://doi.org/10.1037/tra000095.supp> (Supplemental)

Maschi, T., Baer, J., Morrissey, M. B., & Moreno, C. (2013). The aftermath of childhood trauma on late life mental and physical health: A review of the literature. *Traumatology*, 19(1), 49–

64. <https://doi.org/10.1177/1534765612437377>

McCormack, L., & Thomson, S. (2017). Complex trauma in childhood, a psychiatric diagnosis in adulthood: Making meaning of a double-edged phenomenon. *Psychological Trauma: Theory, Research, Practice, and Policy*, 9(2), 156–165. <https://doi.org/10.1037/tra0000193>

Jamie R. Yoder, Kelly Whitaker, & Camille R. Quinn. (2017). Perceptions of Recidivism Among Incarcerated Youth: The Relationship Between Exposure to Childhood Trauma, Mental Health Status, and the Protective Effect of Mental Health Services in Juvenile Justice Settings. *Advances in Social Work*, Vol 18, Iss 1, Pp 250-269 (2017), (1), 250. <https://doi.org/10.18060/21305>

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Shin, S. H., Cook, A. K., Morris, N. A., McDougale, R., & Groves, L. P. (2016). The different faces of impulsivity as links between childhood maltreatment and young adult crime. *Preventive Medicine: An International Journal Devoted to Practice and Theory*, 88, 210–217. <https://doi-org.ezproxy.net.ucf.edu/10.1016/j.ypmed.2016.03.022>

Carnochan, S., Lee, C., & Austin, M. J. (2013). Achieving Timely Reunification. *Journal of Evidence-Based Social Work*, 10(3), 179–195. <https://doi-org.ezproxy.net.ucf.edu/10.1080/15433714.2013.788948>

51% national reunification rate:

<https://www.childwelfare.gov/pubPDFs/foster.pdf>

46.62% so far this year so round up.... 47% reunification rate FL which is consistent with the 2014 findings- two sites used:

<https://www.cwla.org/wp-content/uploads/2017/03/FLORIDA-1.pdf>

<http://www.dcf.state.fl.us/programs/childwelfare/dashboard/cya-exiting-ooH.shtml>

Child fatality statistics (change with each death):

<https://www.dcf.state.fl.us/childfatality/state.shtml>

https://www.news-journal.com/online_features/mcclure-texas-should-act-to-safeguard-foster-children/article_f5ff2a98-e478-11e8-bd2a-df14513a9bf0.html?utm_medium=social&fbclid=IwAR3xcFCiCAoGdHz20AMs2Gkv1Am8-es4zK2Y6Mbu86BjZE8qWUIBygF1w