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“Effects of Parental Allegation Type on the Length of a Parental Foster Care Case Until Reunification”

On average there are about 400,000 children in foster care in the United States every year. In most cases, reunification between the child and their biological parents is the goal for children in foster care. When a child enters foster care, their parent(s) are given a case plan by the Department of Children and Family Services (DCFS) to help them remediate their parenting deficits to reunify with their child. This often includes attending to their own mental health, substance abuse problems, or receive other services. In New Orleans, LA, DCFS has contracted with the LSU Infant Team to provide psychological services to children and their caregivers while also aiding biological parents in rectifying their parenting deficits. On average, about 37% of children in foster care reunify with their parent(s). The likelihood of reunification, however, decreases the longer a child is in foster care (Tueller et al., 2013). Longer times in foster care are also detrimental for the child’s mental well-being (Miranda et al., 2019). This means that looking at factors that affect the time that it takes to achieve reunification is not only useful in aiding parents but also crucial in decreasing a child’s time in foster care in order to prevent long-lasting negative mental health effects. We hypothesized that parental allegation type would have a significant effect on the length of time it took for a child to be reunified with their parent and that if a child experienced neglect, they would spend the most amount of time in foster care before reunification.

Our study analyzed different types of parental allegation and their impact on the length of the parent’s case and the length of the foster care case in its entirety. We used data collected from the LSU Infant Team and selected 114 children who had reunified with one or both of their biological parents. A one-way ANOVA demonstrated that there was no significant effect of parental allegation type on mean length of time of a parental case until reunification, $F(5,89) = 1.98, p > .05$. However, there was a significant effect of parental allegation type on mean length of an entire foster care until reunification, $F(5,87) = 4.57, p < .05$.

It is possible that allegation type did not significantly affect the length of a parent’s case until reunification because regardless of allegation type, parents who reunify are much more likely to comply with treatment and actively work their case plan. This data indicates that LSU Infant Team therapy and services are effective in providing support to parents. Despite the type of allegation that a parent had, they were able to reunify with their child on average of 15.9 months after their child had entered foster care, which is less than the national average. This is crucial in attending to the mental health of young children as they go through disruptions in attachment and trauma. One limitation of our study is that there are many factors that may impact the length of time for reunification (e.g., number of siblings, parental support, etc). Nonetheless, this study contributes to the existing research and advocates for infant mental health services for children in foster care.