The Effects of Removal into Foster Care


Examining removal decisions that were “on the margins,” this study found that children who remained at home had better long-term well-being outcomes than children who were removed and placed in foster care. The study tracked at least 15,000 children between 1990 and 2002 and in order to avoid results attributable to family background, extreme cases of abuse or neglect were screened out and instead, “on the margins” cases were used. The study defines “on the margins” decisions as instances where there was disagreement by child protection investigators as to whether removal was necessary. By using the removal tendencies of investigators as an instrumental-variable (i.e., a variable that induces change in the explanatory variable but has no effect on the dependent variable), the study identifies the effects of foster care placement on child outcomes for school-aged children.

This study provided the first “viable, empirical evidence of the benefits of keeping kids with their families,” and “confirms what experience and observation tell us: Kids who can remain in their homes do better than in foster care.” (quote from http://usatoday30.usatoday.com/news/nation/2007-07-02-foster-study_N.htm). Ultimately, the study found higher delinquency rates, higher teen birth rates, and lower earnings among children removed to foster care as compared to similarly situated children who remained at home.


Using the assumption that child protection cases are effectively randomized to investigators, this follow-up study explores an additional outcome: adult crime. According to the study, children “on the margins” of placement in foster care who are subsequently placed demonstrate “arrest propensities that are two to three times higher compared to investigated children who remained with their parents.” Moreover, this study importantly notes that while the “removal from abusive parents may protect children from further abuse and reduce the likelihood of criminal activity as adults,” at the same time, “the removal of children from their parents is thought to be traumatic and may lead to worse adult outcomes” (emphasis added). This study also notes that “[i]n terms of criminal justice involvement, nearly 20 percent of the U.S. prison population under the age of 30, and 25 percent of these prisoners with prior convictions, report spending part of their youth in foster care.”


This follow-up study uses instrumental-variables to estimate the causal effects of foster care on short- and long-term outcomes. Again examining children “on the margins,” the study focuses on two outcomes: juvenile delinquency later in life, and
emergency healthcare usage in the year following a report of abuse. According to the study, “placing children in foster care increases their likelihood of becoming delinquent during adolescence and requiring emergency healthcare in the short term.”


This project explores the number of children entering the foster care system and the resulting foster-care-to-prison pipeline in Massachusetts. The project found that children placed in foster care are three times more likely than similarly situated children who remained with their families to be juvenile justice-involved. Additionally, national and Massachusetts data show that “placement instability—when a child is moved through multiple out-of-home placements—is a key risk factor for later juvenile justice system involvement.” The project also discusses a survey of the sources of Post-Traumatic Stress Disorder among foster care alumni, which revealed that “many of the alumni identified the initial home removal itself as a trauma and also considered being returned home as an additional “placement” as it involved having to re-create relationships.” Finally, this project also provided that behavioral problems were “six times more likely among children who spent time in foster care” and that foster youth have a “three times greater risk for ADHD diagnosis, and are twice as likely to have learning disabilities and developmental delays than children not in foster care.”

The project then provides various recommendations in response to the numerous detrimental effects of foster care previously discussed, namely:

1) Invest in promising practices and program models to prevent child removal and safely promote family stabilization. DCF’s services budget under invests in in-home and reunification services. The Federal Family First Act presents an opportunity for additional funding to safely prevent out-of-home removals

2) Recent research found that opioid-dependent newborns who remain with their moms have fewer hospital stays (4-5 days compared to 22-23 days) and fewer infants needed medication assisted withdrawal treatment (14% compared to 98%). Parent’s service plans, however, may conflict with this promising clinical treatment unless service plans begin to adapt to evolving yet proven science.

3) Early recognition of behavioral problems stemming from exposure to trauma should result in an investment in interventions that promote positive youth development, to better prevent the intensification of the problems and the poor outcomes associated with them. Early efforts to develop a child’s skills, self-esteem, and positive investments in their futures include consistent involvement with positive, trusted adults and with positive pro-social community activities.

Rosalind D. Folman, “I Was Tooken”: How Children Experience Removal from Their Parents Preliminary to Placement in Foster Care, 2 Adoption Quarterly 2 (1998).
This paper presents the results of a qualitative study of the removal experiences of 90 inner-city children (aged 8-14) who entered foster care in middle childhood due to abuse and/or neglect. Using attachment theory to interpret the children’s narratives, the paper demonstrates a “progression of traumatizing events ensuing from the placement process.” The paper focuses only on the “crisis period” of the fostering process—i.e., “the day the child is initially removed from his/her parents.” According to the paper, separation from a caregiver “is severely threatening for the child, irrespective of the quality of the child’s experience with the parent.” As a result, the day of placement “constitutes a crisis for children because everything in their lives changes and the children are overwhelmed with feelings of abandonment, rejection, worthlessness, guilt, and helplessness.” The findings suggest that these feelings were intertwined with an overwhelming sense of loss. Recalling the day of his removal, one child stated: “I thought that they [the police officer] was gonna take me to where they lived. Bein in a policeman’s house would be fun, but not fun without being with my parents cause I love em.” When asked where he thought he was going, another child simply responded: “Away from my mother… I was going to leave my mother for good.”

- Catherine R. Lawrence et al., Impact of Foster Care on Development, 18 Dev. & Psychopathology 57 (2006).

This study examines that relationship between foster care placement and the development of behavioral problems. The study followed 189 children and families at risk because of poverty and associated factors. Comparisons were made among three groups: (1) children who experienced foster care; (2) children who were maltreated but remained in the home; and (3) children who had not experienced foster care or maltreatment despite similar at-risk demographic characteristics. The impact of foster placement was evaluated immediately following release from care and at several points later in development. Controlling for developmental adaptation and social economic status prior to placement, “the results support a general view that foster care may lead to an increase in behavior problems that continue after exiting the system” (71). The study highlights several factors that may account for the increase in problematic behavior, including foster care as an intervention that can expose its recipients to difficult developmental challenges and the lack of comprehensive psychological services offered to foster children.


This study explores the correlation between the increased risk of maltreated children engaging in delinquent behavior and the use of substitute care placement and placement instability. While removing children from high-risk environments should decrease the risk of delinquency, the study concluded that “children in placement are more likely to be delinquent.” According to the study, “16% of children placed into substitute care experience at least one delinquency petition compared to 7% of all maltreatment victims who are not removed from their family.” One possible explanation
for this increase in deviant behavior, the study argues, is that “multiple placements after substitute care further depletes a child’s stock of social capital, which weakens social attachments and social controls.”


Researchers conducted a population-wide longitudinal study using the 1987 Finnish Birth Cohort, which collects data from child welfare, medical, and criminal registers for those born in Finland in 1987. The study aimed to “compare the rates of psychiatric diagnoses and criminal convictions in young adulthood (ages 18–25 years) among children who were first placed at ages 2–6 years with those of children who were not placed and who had similar sociodemographic and family characteristics.”

Using this novel propensity score matching approach, the findings of study showed:

Of 54,814 individuals included in analyses, 388 (1%) were placed out of home at ages 2 to 6 years, for whom 386 were assigned matched controls. At ages 18 to 25 years, those who had been placed out of home had a greater risk compared with never-placed controls for substance-related disorders (odds ratio [OR], 2.10; 95% CI, 1.27-3.48), psychotic or bipolar disorders (OR, 3.98; 95% CI, 1.80-8.80), depression and anxiety disorders (OR, 2.15; 95% CI, 1.46-3.18), neurodevelopmental disorders (OR, 3.59; 95% CI, 1.17-11.02), or other mental disorders (OR, 2.06; 95% CI, 1.25-3.39). Additionally, those who had been placed as children were more likely to use psychotropic medication (OR, 1.96, 95% CI, 1.38-2.80) and to have higher rates of criminal convictions for violent (OR, 2.43; 95% CI, 1.61-3.68) and property (OR, 1.86; 95% CI, 1.17-2.97) offenses.

This data demonstrates that preschool children placed out-of-home are at risk of adverse outcomes as adults – more than twice that of individuals who were never placed out-of-home – even accounting for their initial circumstances.


This working paper examines children reared in institutions. It explains that “young children who live in such settings experience little more than transient serve and return interactions. Frequent staff rotations mean that infants are cared for by many different people, making it extremely difficult to develop meaningful relationships with
any single caregiver.” In such circumstances, “although basic needs for food, warmth, shelter, and medical care may be met (thereby avoiding most legal definitions of neglect), the setting itself may still be a precipitant of severe psychosocial deprivation for the youngest inhabitants.”

Institutionally-reared children also show differences “in the neural reactions that occur as an individual is processing information, such as looking at faces to identify different emotions.” These findings indicate “impairments in the way the brain interprets such input and are consistent with behavioral observations that neglected children struggle to correctly recognize different emotions in others.”

Finally, “[w]hen compared with children who have been victimized by overt physical maltreatment, young children who experienced prolonged periods of neglect exhibit more severe cognitive impairments, language deficits, academic problems, withdrawn behavior, and problems with peer interaction. This suggests that sustained disruption of serve and return interactions in early relationships may be more damaging to the developing architecture of the brain than physical trauma.”


This study asserts that while a child may be more physically secure if removed from the home in certain circumstances, they may not necessarily be more emotionally secure. Young children, “who may not yet have had the opportunity to develop secondary attachment relationships,” are particularly at risk, since they “may lose the only source of security and comfort they had, however fallible or limited it was.” Discussing psychobiological propositions alongside attachment theory, this study demonstrates the hidden physiological responses to child-parent separation. By examining HPA-axis activity (activity within the hypothalamus, pituitary gland, and adrenal glands that controls reactions to stress), the study suggests that foster children show more reactivity within systems facilitating fight-or-flight behaviors than social engagement. These results increased in foster children with atypical attachment behavior. If children must be placed out of the home, the study argues, “more is needed than a physically safe family.” According to the study, well-designed intervention aimed at foster parents “may nudge back psychophysiological parameters within the normative range.”


This paper discusses “role of emotion regulation circuitry implicated in stress related psychopathology from a developmental and transdiagnostic perspective.” Of note, this paper explains that “[i]n accordance with studies in adult Early Life Stress (ELS) samples, children and adolescents with a history of early adversity also show enhanced amygdala reactivity to emotional stimuli. Previously institutionalized (PI) youth with a
history of institutional care exhibit heightened amygdala reactivity to threat-related facial expressions across childhood and adolescence.” Further, this paper explains that “[i]n a cross-sectional study from early childhood to late adolescence, PI youth showed an atypical trajectory of age-related changes in threat-related amygdala-mPFC connectivity relative to comparison youth, such that PI youth exhibited more mature (i.e., adult-like) connectivity at younger ages. Youth with trauma exposure also show atypical amygdala-prefrontal function in response to emotional distractors, with weaker negative connectivity between the amygdala and pregenual ACC (pgACC) relative to comparison youth.” This is to say that exposure to childhood trauma creates lasting impacts, but so, too, does institutionalized care.

When discussing the importance of caregivers, this paper notes that:

Evidence across species has shown that caregivers regulate emotional and neurobiological development. In rodent pups, maternal presence has transient effects on cortisol release and amygdala function, such that maternal presence blocks stress reactivity and fear learning during the early stage of rat pup development. Similar social buffering effects have been identified in humans; parent availability reduces cortisol response to social stress and enhances emotion regulation abilities in children. Moreover, parental stimuli can induce transient changes in functional connectivity of amygdala-mPFC circuitry, and these neurobiological changes predict the degree of parental buffering of children’s emotion regulation abilities. Together, these findings provide a plausible neurobiological mechanism through which caregivers can directly influence neuro-affective functioning during development.

Altogether, these findings provide further insight into the “neuro-developmental mechanisms underlying the emergence of adversity-related emotional disorders and facilitate the development of targeted interventions that can ameliorate risk for psychopathology in youth exposed to early life stress.”

- Renee Schneider et al., What Happens to Youth Removed From Parental Care?: Health and Economic Outcomes for Women with a History of Out-of-Home Placement, 31 Child. & Youth Servs. Rev. 440 (2009),

This study used data from the California Women’s Health Survey to examine the mental and physical health problems, low educational attainment, and economic adversity for women ages 18 and older with and without a history of out-of-home placement. The study defined “out-of-home placement” as any removal from the parents’ or caregivers’ home by the state or county. Surveying 368 women with a history of out-of-home placement and 9240 women without, the study found that “history of out-of-home placement was associated with mental health problems, poor subjective health, smoking,
obesity, low educational attainment, living in poverty, and use of public assistance in adulthood.” The study contends that overall, these findings “underscore the need for greater access to mental health and social services for youth in out-of-home placement to improve their long-term health and economic well-being.”