

Foster care: Temporary out-of-home care for children

Children who cannot safely remain in their familial home may be placed in family foster care or a group residential facility. In Minnesota, approximately 11,235 children and youth experienced out-of-home care in 2022. On an average day, there were approximately 6,750 children and young adults in care, based on preliminary 2022 data.

Children enter foster care for a variety of reasons

During 2022, approximately 4,400 children and youth entered out-of-home placement. The most common reasons for removal from the home are:

- Caretaker drug abuse (30.2%)
- Allegations of neglect (12.7%)
- Alleged physical abuse (10.4%)

Caretaker drug abuse continues to be the most frequently identified reason for children to be placed in out-of-home care, accounting for 30% or more of new removals during each of the past several years.

Health experts have declared a national state of emergency in child and adolescent mental health. During 2022, over 800 placement episodes were specifically due to the child or youth's mental health needs (around 7% of placements). These placements were largely voluntary placements (95.8%) and for children 12 years and older (86.7%). This includes Extended Foster Care for young adults 18 and older.

Family foster homes are urgently needed

Some children and young adults are in group residential settings, but approximately 73.5% of those children and young adults are in family foster care on any given day. Because of this need, many county and tribal agencies have a shortage of family foster homes and are urgently seeking additional families to be licensed to care for Minnesota's children. Specific needs vary by agency, but in general, there is a particular need for homes:

- Able to keep sibling groups together
- For youth, who make up more than one-quarter of the children in foster care
- For parenting youth, allowing them to remain with their children in a safe and supportive environment. With expertise in or willing to learn to support children with trauma and other mental health needs
- Able to meet the needs of youth in terms of their culture, race, ethnicity, religion, sexual orientation, language spoken, etc.
- Supportive of LGBTQ2S+ youth
- Reflective of the ethnic and racial diversity of children in foster care.

Foster families provide critical temporary care and nurturing to children in crisis; they come from all walks of life and may be single, married, partnered, with or without children, renters or homeowners. Foster parents play a role in recognizing the trauma children may have experienced and help give them the structure, nurturing and stability they need every day.

The Minnesota Department of Human Services website provides [steps to becoming a foster parent](#). Those interested can contact their county, tribal social service agency or licensed child placement agency for more information about the need for homes.

Placement options available for children

Children thrive in stable, nurturing, permanent homes. As part of an effort to preserve family connections while children were in foster care, 61.7% of those in family foster care on any given day are placed with relatives. Removing children from the people they love and the environments that are familiar to them can be an emotionally traumatizing experience. When children must leave their homes, placement in foster care with relatives is considered first. Children may be placed in:

- Emergency foster care when removed from their homes by law enforcement. This immediate care may be provided in a shelter facility or in a nonrelative foster home.
- Family foster homes, which offer a temporary substitute until children can be safely reunified with their families, placed permanently with relatives or adopted. Foster homes are licensed by county, tribal or private agencies.
- Group residential settings, which provide structured, temporary care. Many group settings offer intensive treatment for children with serious emotional disturbances or chemical dependency.

Whenever possible, children are placed in their own community and continue to attend their home school.

Supports available to meet children's needs

Foster parents receive initial training prior to placement and ongoing training while licensed to help prepare them to meet the needs of children under their care. Visit [Foster Adopt Minnesota](#) for training opportunities.

All foster parents receive the same supports, including foster care payments and other services to help keep children in their care. Agencies arrange for Medical Assistance or other medical insurance to cover a foster child's medical, dental and vision care and mental health services. If a foster child needs additional services, agencies will help determine appropriate services and eligibility for those services. Services may include child protection, Medical Assistance, independent living and transition, mental health, disability, chemical dependency, home- and community-based services, Intensive Treatment in Foster Care, vulnerable adult services or other services offered by a county or tribal agency.

The department also has grant funding for support services statewide. For more information, refer to [Permanency support services for adoptive, foster and kinship families DHS-4925 \(PDF\)](#).

Most children reunited with families, some were adopted, others aged out

For children who left out-of-home placement during 2022:

- 51.7% were reunited with their parents or legal guardians
- 20.1% were adopted
- 18.2% achieved permanency with a relative or other caregiver
- 8.0% reached the age of majority or emancipated
- The remaining children left foster care for reasons such as transfer to another agency (1.1%), runaway from placement (0.8%) and death (0.1%).

Collaboration speeds permanency outcomes for many

Concurrent Permanency Planning is a process for children in foster care in which caseworkers pursue family reunification at the same time that they develop alternative permanency plans. By moving concurrently rather than sequentially, temporary foster care placements can be shortened, and children and youth can thrive in safe, stable, permanent families. Concurrent Permanency Planning goals are best achieved when child welfare agencies, community partners and the court system work together with children's birth parents, extended families and foster parents.

Disproportionality in Minnesota's foster care system

Younger children, children from rural counties and children of color and American Indian descent are disproportionality represented in the foster care system. Of the children in foster care during 2022:

- Approximately 21.8% were 3 years old or younger
- Approximately 66.4% were living in Greater Minnesota (outside the seven-county metro area)
- American Indian children were approximately 16 times more likely than their white counterparts to experience out-of-home care; those of two or more races were 7 times more likely; Black children were approximately twice as likely; and children reported to have Hispanic/Latino ethnicity were twice as likely.

Resources

Below are a list of available resources.

- [Foster Adopt Minnesota Fostering Network webpage](#)
- The department's [Foster care webpage](#)
- The department's [Child welfare data dashboard webpage](#)



For accessible formats of this information or assistance with additional equal access to human services, write to dhs.info@state.mn.us, call 651-431-4671, or use your preferred relay service. ADA1 (2-18)