



Promoting Safe and Stable Families Program

ACTION

- Increase funding to \$505 million for FY 2004 for the Promoting Safe and Stable Families (PSSF) program (Title IV-B, Subpart 2, of the Social Security Act).

HISTORY

Congress reauthorized PSSF in 2002, extending the program through 2006 and creating two separate funding categories. For FYs 2003–2006, states will receive \$305 million in mandatory (guaranteed) funds—the same funding level as FY 2001.

From these annual mandatory funds, \$6 million will continue to be provided for research, evaluation, and technical assistance to identify and build on programs that work. New research and evaluation priorities include reunification and postadoption service models, programs that address parental substance abuse, approaches that target specific needs and age groups, and outcomes of adoptions finalized after the Adoption and Safe Families Act (ASFA).

The State Court Improvement Program will continue to receive \$10 million per year. The law emphasizes the importance of using court improvements to promote ASFA's goals of safety, permanence, and well-being. One percent of total mandatory funding will continue to be reserved for tribal governments.

In addition to annual mandatory funding, Congress may also approve up to \$200 million in discretionary funding for PSSF. Congress has to approve these discretionary increases on an annual basis. Of any discretionary funds provided each year for PSSF, 3.3% is dedicated to research, training, and evaluation; 3.3% is available for state court improvement programs; and 2% is reserved for tribal governments. The law allows any unspent state allotments to be redistributed to the remaining states.

In FY 2002, Congress approved a \$70 million increase for PSSF, bringing total FY 2002 funding to \$375 million.

PSSF is an important federal source of funding for an array of support services for families with children, and one of the few sources of federal funds for services to prevent and remedy the difficulties that bring families to the attention of the child welfare system. The program is also central to meeting the goals of ASFA. It helps build capacity in states so services to children and families will be forthcoming.

Prior to 1997, at least 90% of PSSF funds had to be used for family preservation and community-based family support services. When the program was reauthorized in 1997, two additional categories of service were added: time-limited reunification services and adoption promotion and support services. The statute does not specify a percentage or minimum amount of funds that must be used for any single category of service; however, program guidance to states from the U.S. Department of Health and Human Services stated that allocations of less than 20% to either type of service would require a strong rationale. Funds are allocated to states according to their relative shares of children receiving food stamps, subject to a 25% nonfederal match.

Family preservation services are designed to help children and families in crisis, including extended and adoptive families. Services include programs to help reunite children with their birthfamilies, if appropriate, or place children in adoptive settings or other permanent arrangements; programs to prevent placement in foster care, including intensive family services; programs to provide follow-up services to families after a child has been returned from foster care; and services to improve parenting skills. The definition of eligible activities for family preservation services also includes infant safe haven programs.

Family support services include a spectrum of community-based activities that promote the safety and well-being of children and families. Intended to assist families not yet in crisis, these services include structured activities involving parents and children, respite care services for parents and caregivers, parenting skills training, and information and referral services. Programs may also include services outside the traditional scope of child welfare, such as health care, education, and employment. The definition of eligible activities for family support services also includes programs to strengthen parental relationships and promote healthy marriages.

Time-limited reunification services are intended to address the needs of children and families involved in the foster care system. Services are provided within 15 months of when a child enters foster care. Reunification services for the child and family include counseling, substance abuse treatment, mental health services, assistance to address domestic violence issues, temporary child care, and transportation services.

Adoption services provided with PSSF funds are aimed at encouraging an increase in the adoption of children in foster care. These services can be used to help children and families prepare for adoption and address their postadoption needs. The statute specifically highlights the growing need for postadoption services.

KEY FACTS

- In 2000, an estimated 2,800,000 children were reported and referred for investigation to state and local child protection service agencies because family members, professionals, or other citizens were concerned about their safety and well-being. After follow-up assessments, officials were able to substantiate 879,000 of these cases.¹
- An estimated 478,000 child victims received postinvestigation services; an estimated additional 385,000 children who were subjects of unsubstantiated reports also received postinvestigation services.²
- Of the 542,000 children in foster care in 2001, 126,000 were free for adoption. The number of children adopted from foster care has increased in recent years: 28,000 in 1996; 31,000 in 1997; 37,000 in 1998; and 46,000 in 1999; 51,000 in 2000; and 50,000 in 2001.³

SOURCES

1. U.S. Children's Bureau. (2002). *Child maltreatment 2000: Reports from the states to the National Child Abuse and Neglect Data System*. Available online at www.acf.dhhs.gov/programs/cb/publications/cmreports.htm. Washington, DC: U.S. Department of Health and Human Services (HHS).
2. Ibid.
3. U.S. Children's Bureau. (August 2002). *The AFCARS report #7*. Available online at www.acf.dhhs.gov/programs/cb. Washington, DC: HHS.

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