The Next Steps in Child Welfare Funding



The CWLA National Blueprint for Excellence in Child Welfare calls for a multi-system, community-based approach to protecting children and supporting families. We need a child welfare continuum of care: prevention, intervention, placement and permanency. We must work for the prevention of child abuse before it happens; intervention to keep families together when it is best for the child; placement in foster that is short and must be quality care; and permanency for families that reunify, adopt, or are kinship families—and, not forgetting the youth who exit to adulthood, a strong and supported transition. This is not about flexibility or child-welfare-only budget-neutral shifting of dollars, it is about investing in a continuum of care.

The Family First Prevention Services Act (PL 115-123) was an important step in building and expanding services to *prevent the placement of children* into foster care. More must be done.

Prevention of child abuse and neglect is perhaps the greatest challenge in the continuum of the child welfare system. All too frequently, prevention of abuse and neglect is an add-on service instead of a core component of the range of needed services. The issue of providing or addressing prevention too often is conditioned on whether a child welfare agency can free up appropriations or funds by reducing the cost elsewhere such as foster care including group or congregate care. It frequently requires agencies to address both strategies at the very same time rather than investing on the front end in a long-term strategy to reduce costs elsewhere.

Prevention can encompass some services as basic as expanded access to child care, Head Start and home visiting services. Prevention also includes community-based initiatives that can strengthen families and a range of other services that can help families reduce the stresses of parenting by providing evidence-based parenting and family strengthening models. There are two existing federal programs that can help coordinate and expand access to these programs, the Child Abuse Prevention and Treatment Act (CAPTA) and the Community-Based Child Abuse and Neglect Prevention Grants (CB-CAP). Both of these core programs need to be increased.

Intervention services help families that are struggling and have come to the attention of child protection or child welfare. The Family First Act has set up a structure to begin funding these services for children at imminent risk of foster care. "Candidates" for foster care and their families can access needed mental health, substance use and in-home services. States will have the option to draw funding in federal fiscal year 2020. They will need to build the catalogue of qualifying evidence-based services, coordination with other services including behavioral health and build the capacity to provide the covered programs. Congress can help this implementation by funding programs to their authorization level. That includes the Child Welfare Services program (Title IV-B) which has not been fully funded since 1982 and the Promoting Safe and Stable Families Program (Title IV-B) which has never received a full appropriation since 2002.

Placement services refer to the more than 680,000 children and youth that spent at least part of 2016 in foster care. While we seek to make sure foster care, numbers are reduced, and length of stays are short, we cannot forget the quality of foster care. Advocating for reductions in foster care does not excuse us from focusing on the quality of these foster care placements for the likely 250,000 who will enter care this year. We can't forget these children, we can't! There is a patchwork of eligibility for a child in state custody depending on the family the child comes from, the family placement type, the institutional placement settings and the length of time in care. Congress needs to get rid of the eligibility link to the non-existence AFDC program. Invest in the quality of care of foster family homes (and kinship homes)! It doesn't mean we want more children in care, it means we care about the children who are there. Congress needs to take steps to improve training and retention of foster families, improve access to Medicaid-based therapeutic care, and in our efforts to reduce institutional care lets aggressively invest in and fund community-based efforts like the Building Bridges Initiative. Cutting federal funding for foster care will not make it disappear. If that were the case, the nearly half of the foster care population who are not covered by federal funds would not exist.

Permanence services is about strengthening families once a young person or child has been reunified with the family, has a forever family through adoption or is part of a kinship/relative care. More than half the children who leave foster care will be reunified with their families. Despite that we pay limited attention to following up with support for these families. Within a year, anywhere from 8 to 13 percent will re-enter foster care and the percentages are higher in some states and for older children and youth. If we do better, we can reduce the number of children entering care. We know that some children are adopted and sometimes there are disruptions and dissolutions, including adoptions that are through international placements. The Family First Act can help. It allows states to fund reunification services and post-adoption services. We need to build up model programs that can strengthen and support these families. We can also do better in supporting kinship and relatives.

Today, at least 20,000 young people will age out of foster care. That number has deceased in the last decade but it is still too high. We don't know how these numbers will be affected by the current increases in the number of infants and toddlers entering care now due to the opioids epidemic. Many youth that age out entered and re-enter foster care at a much younger age. We need to step up our efforts to support these young people even as we seek to prevent any child from leaving care without a family. All 50 states need to extend the age of care to 21, we need to fully fund the education and training vouchers and we need to better assure that youth that exit foster care do it with the resources they are supposed to have including clean credit histories, birth certificates and documents and continued guaranteed access to Medicaid to age 26.

Image if there were fewer children at risk of foster care because we prevented child abuse, fewer children entering care because we strengthened that family through intervention, more children exiting foster care with less trauma, stronger families built on a foundation of post placement services and if all that happens very few children exiting foster care direct to adulthood without a family. We can do it, but it takes investment and commitment at all levels and all stages of a continuum of care that includes *prevention*, *intervention*, *placement and permanency*.