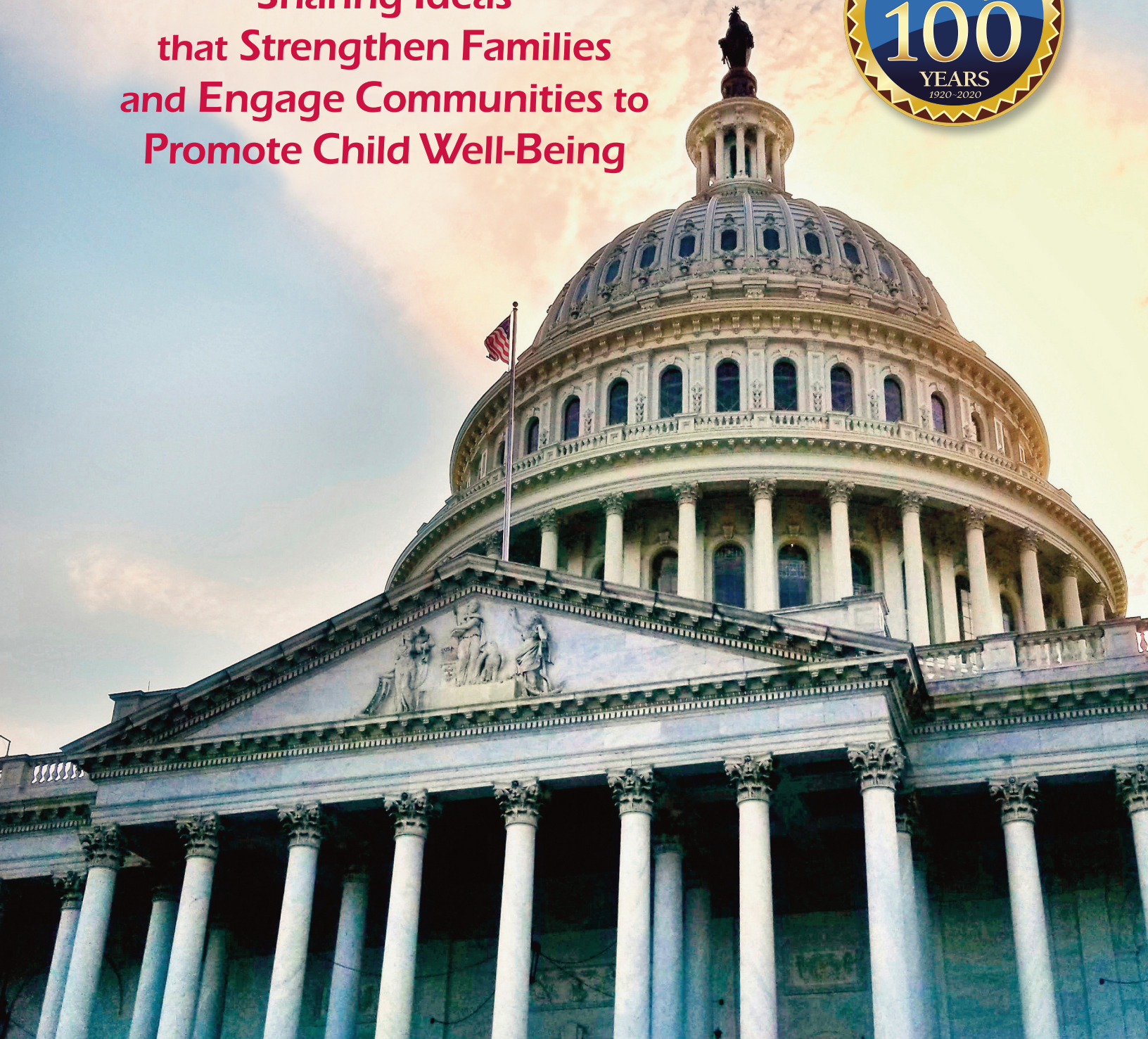


2020 LEGISLATIVE AGENDA

**Sharing Ideas
that Strengthen Families
and Engage Communities to
Promote Child Well-Being**



Recommendations for the Administration and 116th Congress

★ SECOND SESSION ★

Prevent Child Abuse: Increase Funding for the Child Abuse Prevention and Treatment Act (CAPTA) and the Community-Based Child Abuse Prevention (CB-CAP) programs

Significant resources are required for the Child Abuse Prevention and Treatment Act (CAPTA). In 2018, there were over 4.3 million child abuse referrals, involving over 7.8 million children, resulting in child protective services responses to 2.4 million cases. According to the Centers for Disease Control and Prevention (CDC), child abuse and neglect has a total lifetime economic cost of over \$124 billion each year. It affects over 1 million children every year and costs \$220 million every day through increased investigations, foster care, health care costs, and behavioral health costs and treatment. We need to prevent child abuse before it happens.

Congress must reauthorize the Child Abuse Prevention and Treatment Act (CAPTA), then provide \$270 million in state CAPTA grants and provide \$270 million for the Community-Based Child Abuse Prevention (CB-CAP) programs. The House passed the Stronger Child Abuse Prevention and Treatment Act (HR 2480) in 2019 with funding at \$270 million for CAPTA state grants and \$270 million for CB-CAP. Healthy families are the key to prevention and resilient children; prevention should be community-based; child and family safety are not just the child welfare system's responsibility; prevention and treatment efforts must help families heal from trauma; research and data are central to a public health approach; and significant additional resources are necessary for CAPTA/CB-CAP to be effective.

Congress Must Commit to Cut Child Poverty in Half in Ten Years

In 2019, the National Academies of Sciences, Engineering, and Medicine (NASEM) released a study on reducing child poverty in the United States, *A Roadmap to Reducing*

Child Poverty. The Congressionally commissioned report required a study that was bipartisan and evidence-based. The study's committee (including CWLA President & CEO Christine James-Brown) was made up of experts in economics, public policy, child psychology, and human development, and offered specific proposals to reduce child poverty by half in ten years. Research determined that child poverty rates would be higher if not for current programs that provide income, food, housing and medical care. It also indicated that a 50% reduction in ten years was demonstrated as achievable but will take a combination of work-oriented and income support programs and policies. The study identified a number of factors like health and well-being, positive neighborhood environments, and equitable treatment across racial and ethnic groups that impact and influence the success of anti-poverty programs and policies. Children continue to disproportionately experience poverty in the United States and are 62% more likely to experience poverty than adults. There is no long-term national strategy to address child poverty and the negative outcomes associated with it. The study included analysis of the economic, health, and social costs of child poverty, as well as the effectiveness of current anti-poverty programs—including international, federal, state, and local efforts—to reduce child poverty. Congress must commit to a national strategy to cut child poverty in half in ten years!

Oppose Discrimination in the Placement of Children and Recruitment of Parents

Across the country there are too many children in foster care who lack a stable, loving family to care for and nurture them. Finding a suitable foster or adoptive home can be a challenge, particularly for older children and those with special needs. Child welfare agencies must make decisions about the recruitment of parents and the placement of children based on what is in the best interest of the child. That may be more challenging in an ever-more-diverse society, but it remains just as important. In



recent years the debate has focused less on the needs and best interests of children and more on the political polarization of the times.

To ensure the broadest pool of families for children and youth, foster, kin and adoptive parents should be assessed on the basis of their abilities to successfully parent a child needing family membership and not on their income, age, marital status, religion, race, ethnicity, culture, appearance, lifestyle, sexual orientation, or gender identity. Each prospective parent should be evaluated on their ability to safely and lovingly care for children and youth. Each child and every young person under the care of state child welfare agencies must be placed based on what is in their best interest and not on politics. That is why Congress has written the best interest of the child into law nearly 20 times. ***Congress must oppose any legislation that allows discrimination in recruitment of foster and adoptive parents and must protect and respect the needs of youth in foster care.***

Reject Block Grants of Medicaid and Child Welfare and Delink Title IV-E Foster Care

The Administration and some in Congress have proposed converting Medicaid into a “per-capita cap” block grant. The Administration has suggested converting Title IV-E foster care into a block grant through a “capitated annual funding” grant through a waiver process. It is argued that block grants are about innovation and state flexibility, but recently, they have been about cutting federal spending dedicated to children and families. That is exactly what has happened to the Social Services Block Grant (SSBG) and the Temporary Assistance for Needy Families (TANF) block grant. The 2019 National Academy of Sciences, Engineering, and Medicine (NASEM) Report *A Roadmap to Reducing Child Poverty*, in examining block grants, concluded, “...block grants that are inadequately funded, fail to be sustained, or lack provisions for countercyclical adjustment have resulted in reduced support for low-income families and in increased poverty. In addition, most block grants require only limited reporting and almost no evaluation, which decreases the likelihood that their funds will be used for their intended purposes.” History shows that the SSBG, converted from an entitlement to a block grant in 1981, and the TANF block grant, converted from an entitlement in 1996, lost funding and effectiveness. Child welfare block grants, caps, and waivers in 1981,

1985, 1995, 2002 and 2017 would have resulted in fewer funds and no evidence-based results.

Congress needs to reject Medicaid block grants, protect the Affordable Care Act (ACA), and instead of block granting foster care, de-link foster care funding from the 1996 eligibility standard. Only 40% of children in foster care (FY 2020 federal budget projections) are covered by Title IV-E federal funds, and this affects the quality of appropriate care. Even as we successfully reduce foster care in the years to come, thousands of children and youth still will be in need of high-quality foster care. We should not leave these children in foster care behind as we seek to reduce future foster care.

Increase Funding for Child Care and Home Visiting, Expand Family and Medical Leave

Child care and early childhood education are critical to the future well-being of all children. Congress created the Child Care and Development Block Grant Act (CCDBG) in 1990 and reauthorized it 2014. Now it is time to fully fund this important child and family support service. We thank the Congress for the increase of \$2.3 billion in FY 2019 and the \$500 million in FY 2020. States have begun to reduce some waiting lists, improve on some quality and expand eligibility but that is just a start. More is needed in funding and results. The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program was reauthorized in 2018, but funding is still frozen at the 2010 authorized level of \$400 million. Congress needs to double funding to \$800 million. MIECHV-funded programs are designed to help parents support the healthy development of infants and toddlers and address the challenges new families face. In 2018, 150,000 participants in 76,000 families were assisted through 930,000 home visits. In our efforts to build a stronger foundation for families through more home visits services, quality early childhood education, and child care, we need to provide families with more comprehensive family and medical leave. The 1993 Family and Medical Leave Act and the 2019 Family Medical Leave Act for federal employees are limited in too many ways that fall short in coverage. All families should have access to paid family and medical leave. ***Congress needs to increase funding for child care, increase funding for MIECHV home visiting, and enact a national family and medical paid leave law.***

Protect Families, Dreamers, and Children at the Border and in the United States

Reports in recent years tell us that some children are lost in the system and may not be reunited with their parents. Still others are being placed far away from their families. When children are separated from parents, they face short- and long-term psychological damage, including depression, post-traumatic stress, anxiety, feelings of abandonment, and suicidal thoughts. Being separated from their family members and their communities, cultural familiarities, and schools and other connections can cause children to struggle with their identity and face an undue sense of isolation, adding further stress to an already traumatic situation.

We call on Congress to enact fair immigration reform, to suspend mass deportations, and oppose policies that seek to deter immigration by taking children from their parents. The Supreme Court will review the legality of DACA (Deferred Action for Childhood Arrivals). In past Congresses, there have been several bipartisan “Dreamers Acts,” including legislation in the 116th Congress. This legislation grants DACA beneficiaries permanent resident status on a conditional basis. ***Congress needs to protect DACA-status immigrants and prevent the separation of children from their families by passing the DREAM Act and related immigration reform legislation.***

Stable Housing for Families in Child Welfare

Access to stable housing is a critical tool to ensure that children and families remain intact. The *CWLA National Blueprint for Excellence in Child Welfare* articulates that communities should collaborate to ensure that families have access to and eligibility for supports and services to address basic needs, including housing.

Housing instability and homelessness among children and families is a significant issue, with an estimated 180,413 people in families or 56,342 family households identified as homeless. Housing and homelessness impacts

families in child welfare: Of the 269,690 children who entered foster care in 2017, 10% (27,929) were removed due to inadequate housing. What is needed is cross-system coordination and implementation between HUD and HHS; more evidence-based housing models, in particular supportive housing; program guidance from HHS in implementation of Family First Prevention Services Act to expand access of services for families post reunification; and new Family Unification Program (FUP) vouchers for children, youth, and families from the foster care system.

Extend Foster Care to Age 21 in All States

In 2008, Congress passed the Fostering Connections to Success and Increasing Adoption Act (PL 110-351). That law gave states the option to extend foster care up to the age of 21. Since this became an option, 26 states have extended care up to the age of 21, but the remaining states have not extended care. In 2018, Congress passed the Family First Prevention Services Act (PL 115-123) that expanded Chafee services to age 23 and education training vouchers to age 26 to states with extended foster care. When foster care is extended to 21, young people have the option to stay in foster care if they choose and if they follow certain conditions around education and/or workforce development.

Recent data from the National Youth in Transition Database (NYTD) tells us that many youth do better when they are in extended foster care. We now have federal data that tells us that when young people continue to age 21 in foster care compared to youth who “age out,” they have better outcomes in employment, reduced homelessness, access to health care, and reduced negative outcomes such as incarcerations. Society has changed since we first directed federal foster care funding to age 18 in 1980. The average first age for marriage, leaving a parent’s home, and years it takes to complete a college education all have increased. ***Now it is time that all states allow youth in foster care the option to stay in care to age 21. Extend foster care to age 21.***



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