



2023 Legislative Agenda

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HOT TOPIC:

Reauthorize Title IV-B of the Social Security Act to Support Children and Preserve Families

Action

- Reauthorize and fully fund the Title IV-B Stephanie Tubbs Jones Child Welfare Services (CWS) and Marylee Allen Promoting Safe and Stable Families (PSSF) programs to support and preserve families.
- Increase funding for the Regional Partnership Grants under PSSF to expand evidence-based substance use treatment programs.
- Increase caseworker visit funding under PSSF to assist states in building a workforce that can address the workforce crisis to better support children and families.

Background

There are two child welfare programs created under Title IV-B of the Social Security Act: Title IV-B part 1 the Stephanie Tubbs Jones Child Welfare Services (CWS) program and Title IV-B part 2, the Marylee Allen Promoting Safe and Stable Families (PSSF) program. CWS provides much-needed flexible child welfare funding that assists state child protection systems and supports families through wraparound services. PSSF targets funding to help four categories of families: families who adopt, families who are reunifying, families avoiding foster care through preservation services, and family support to help many families who are vulnerable.

Title IV-B Part 1, Child Welfare Services (CWS) of the Social Security Act, was first established as part of the 1935 Social Security law. It evolved from a small source of federal funding for a range of children's services from the 1930s through the late 1950s. Although Congress can appropriate up to \$325 million, the program funding peaked at \$295 million in 1994 with current funding now down to \$269 million.

Title IV-B part 2, Promoting Safe and Stable Families, started in 1993 as Family Preservation and Family Support and was created to promote family preservation programs that prevent foster care placements through intensive focused and limited efforts to help families at a crisis stage. The Adoption and Safe Families Act (ASFA) in 1997 revamped the program to become the Promoting Safe and Stable Families (PSSF) block grant. Regulations require states to allocate at least 20% to each of the four service categories: family preservation, family support, reunification, and adoption support. CWLA has continued to advocate for this specificity because while the services could be the same, the four types of families served are different.

PSSF includes mandatory funding at \$345 million with \$20 million designated for Regional Partnership Grants to address substance use, \$20 million to promote the child welfare workforce and monthly caseworker visits and \$20 million to promote court training. Additionally, Congress can appropriate \$200 million more for the four services. Appropriations peaked at \$100 million in FY 2002 and are now down to \$69 million. Between mandatory and discretionary funding, the services reached their peak in 2004 at \$405 million. It is down to approximately \$360 million today. The Tribes receive 3% of the mandatory funds and 3% of the appropriated funds.

The Importance of Title IV-B

Title IV-B provides flexible funding to states to target root causes of maltreatment and to provide families with connections to other systems for support. The very limited funding for prevention services stands in contrast to the far greater federal investment in paying for the costs of foster care, covered by Title IV-E, despite widespread recognition of the need to invest in upstream prevention. The Family First Prevention Services Act provides additional funding for evidence-based services to prevent families from entering foster care, while the flexibility of Title IV-B funds can complement the more rigorous requirements of Family First and help develop evidence-based models.

According to the annual Child Maltreatment Report, for fiscal year 2021, there are nationally an estimated 600,000 victims of child abuse and neglect. Child Protective Services (CPS) agencies received a national estimate of just under 4 million (3,987,000) total referrals, including approximately 7.18 million children. Forty-six states reported that an estimated 1,761,128 children received prevention services, and the biggest source of federal funding for these services was the IV-B Promoting Safe and Stable Families program. However, a large portion of children and families reported to CPS for suspected child maltreatment do not receive post-response services, and increased funding for Title IV-B would give states the ability to support additional children and families.

Recommendations for Reauthorization

Reauthorization of Title IV-B should include significantly increasing federal investment in prevention and preservation services, including in the areas outlined below.

Prioritize Strengthening Families. The focus of both Title IV-B programs is strengthening and preserving families. Increased funding for the following aspects of Title IV-B would better serve children and prevent families from becoming involved, or re-involved, in the foster care system. By increasing funding, Congress will:

- **Increase investment in reunification.** Almost half of children in foster care return home, but federal investment to prevent these families from re-entering foster care is insufficient. Expand IV-B's focus on reunifying families so they succeed. More funding can help develop evidence based-reunification programs that can eventually qualify through the Family First Act.
- **Support adoptive families.** Increase support for much needed post-adoption services. There are currently no programs in the Family First Clearinghouse that specifically address post-adoption families; more support will help build this evidence base.
- **Reauthorize and expand the funding for the Court Improvement Program,** which is the only federal funding source specifically for child welfare and court collaboration. With increased PSSF funding courts receive more funding due to a set-aside

Support Families' Mental Health. Since the COVID-19 pandemic, Congress has rightfully sought to address the ongoing mental health crisis among children, youth, and adults. Title IV-B offers opportunities to strengthen vital mental health and substance use supports for children and their families.

- **Provide funding, training, technical support, and accountability so states improve access** to community-based mental health services for youth in care, to address trauma, improve outcomes, and reduce inappropriate institutionalization.
- **Reauthorize and expand the Regional Partnership Grants program** beyond the current \$20 million, which does not provide enough funding to address all 50 states. RPGs offer critical support in addressing substance use for families involved in child welfare or at risk of child welfare involvement.

Fund the Child Welfare Workforce. The children in our communities deserve a child welfare workforce that is equipped to address the myriad issues facing them. As child welfare agencies struggle with unmanageable case-loads, increasing vacancies, and high turnover rates, recruitment and retention of high-quality staff must be a top priority for federal policy-makers.

- **Fund workforce development.** Currently, all 50 states receive a share of \$20 million if they assure that children receive caseworker visits at least monthly. Those funds are for workforce development but at that level there is little funding to make important investments. Congress needs to significantly increase these funds to promote the education and training needed to address the complex work supporting children and families and support the mental health of the workforce.

Conclusion

The flexible funding in Title IV-B of the Social Security Act allows states to direct funds where they are needed most and to invest in an array of services to support children and families. Without Congressional action, Title IV-B will expire on September 30, 2023. The current reauthorization offers Congress an opportunity to prioritize strengthening families, support the mental health of children and their caregivers, and invest in the professionals who deliver vital services to families who are vulnerable.

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