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TO REVIEW FEDERAL AND STATE OVERSIGHT OF CHILD WELFARE PROGRAMS

HEARING

BEFORE THE

SUBCOMMITTEE ON HUMAN RESOURCES

OF THE

COMMITTEE ON WAYS AND MEANS
U.S. HOUSE OF REPRESENTATIVES

ONE HUNDRED EIGHTH CONGRESS

SECOND SESSION

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TO REVIEW FEDERAL AND STATE OVERSIGHT OF CHILD WELFARE PROGRAMS

WEDNESDAY, JANUARY 28, 2004

U.S. HOUSE OF REPRESENTATIVES,
COMMITTEE ON WAYS AND MEANS,
SUBCOMMITTEE ON HUMAN RESOURCES,
Washington, DC.

The Subcommittee met, pursuant to notice, at 10:32 a.m., in room B–318, Rayburn House Office Building, Hon. Wally Herger (Chairman of the Subcommittee) presiding.

[The advisory announcing the hearing follows:]

ADVISORY

FROM THE COMMITTEE ON WAYS AND MEANS

SUBCOMMITTEE ON HUMAN RESOURCES

FOR IMMEDIATE RELEASE
January 21, 2004
HR–7

CONTACT: 202–225–1721

Herger Announces Hearing to Review Federal and State Oversight of Child Welfare Programs

Congressman Wally Herger (R–CA), Chairman, Subcommittee on Human Resources of the Committee on Ways and Means, today announced that the Subcommittee will hold a hearing to review Federal and State oversight of child welfare programs. **The hearing will take place on Wednesday, January 28, 2004, in room B–318 Rayburn House Office Building, beginning at 10:30 a.m.**

Oral testimony at this hearing will be from both invited and public witnesses. Invited witnesses will include Federal and State officials and other experts familiar with child welfare programs. Any individual or organization not scheduled for an oral appearance may submit a written statement for consideration by the Subcommittee and for inclusion in the printed record of the hearing.

BACKGROUND:

On November 6, 2003, the Subcommittee held a hearing to examine a case in New Jersey involving four boys who were apparently starved while in the care of their adoptive parents. This neglect escaped the attention of caseworkers who made numerous visits to the home, and instead was first reported by a neighbor who found one of the boys rooting through the trash in search of food. The Federal Government provides approximately $7 billion to the States to operate foster care and adoption assistance programs intended to protect children. However, this case as well as others involving the death or abuse of children involved with the child welfare system raise questions about whether more needs to be done to ensure that children are protected and reside in safe environments rather than continuing to be subjected to abuse and neglect.

On November 19, 2003, the Subcommittee held a hearing to examine improved monitoring of children in care by focusing on the information systems designed to track and protect these vulnerable children from abuse and neglect. Government officials and outside experts testified at this hearing that effective data systems are necessary to keep children safe. Quality information systems can provide crucial information to monitor these children and help to ensure State accountability for their well-being, but for this to happen States must effectively use the data they collect to protect and track these children. The Subcommittee's third hearing in this series, to be held on January 28, 2004, will review Federal and State oversight systems designed to prevent abuse and neglect of children, including those under State protection.

In announcing the hearing, Chairman Herger stated, "It is critical that we do all we can to ensure the safety of children. When the very systems intended to protect these children fail to defend them from continued abuse or neglect, we must ask hard questions about what more needs to be done. This hearing will give us the opportunity to learn what Federal, State, and local officials should be doing to ensure that children are in safe, loving environments.

FOCUS OF THE HEARING:

The hearing will focus on what Federal, State, and local officials can do and should be doing to ensure the safety, permanency, and well-being of children.

DETAILS FOR SUBMISSIONS OF REQUESTS TO BE HEARD:

Requests to be heard at the hearing must be made by telephone to Peter Sloan or Kevin Herms at (202) 225–1721 no later than 5:00 p.m. on Friday, January 23, 2004. The telephone request should be followed by a formal written request faxed to Allison Giles, Chief of Staff, Committee on Ways and Means, U.S. House of Representatives, 1102 Longworth House Office Building, Washington, D.C. 20515, at (202) 225–2610. The staff of the Subcommittee will notify by telephone those scheduled to appear as soon as possible after the filing deadline. Any questions concerning a scheduled appearance should be directed to the Subcommittee staff at (202) 225–1025.

In view of the limited time available to hear witnesses, the Subcommittee may not be able to accommodate all requests to be heard. Those persons and organizations not scheduled for an oral appearance are encouraged to submit written statements for the record of the hearing in lieu of a personal appearance. All persons requesting to be heard, whether they are scheduled for oral testimony or not, will be notified as soon as possible after the filing deadline.

Witnesses scheduled to present oral testimony are required to summarize briefly their written statements in no more than five minutes. **THE FIVE-MINUTE RULE WILL BE STRICTLY ENFORCED. The full written statement of each witness will be included in the printed record, in accordance with House Rules.**

In order to assure the most productive use of the limited amount of time available to question witnesses, all witnesses scheduled to appear before the Subcommittee are required to submit 200 copies, along with an *IBM compatible 3.5-inch diskette in WordPerfect or MS Word format,* of their prepared statement for review by Members prior to the hearing. **Testimony should arrive at the Subcommittee office, B–317 Rayburn House Office Building, no later than 1:00 p.m. on Monday, January 26, 2004.** The 200 copies can be delivered to the Subcommittee staff in one of two ways: (1) Government agency employees can deliver their copies to B–317 Rayburn House Office Building in an open and searchable box, but must carry with them their respective government issued identification to show the U.S. Capitol Police, or (2) for non-government officials, the copies must be sent to the new Congressional Courier Acceptance Site at the location of 2nd and D Streets, N.E., **at least 48 hours prior to the hearing date. Please ensure that you have the address of the Subcommittee, B–317 Rayburn House Office Building, on your package, and contact the staff of the Subcommittee at (202) 225–1025 of its impending arrival.** *Due to new House mailing procedures, please avoid using mail couriers such as the U.S. Postal Service, UPS, and FedEx.* When a couriered item arrives at this facility, it will be opened, screened, and then delivered to the Subcommittee office, within one of the following two time frames: (1) expected or confirmed deliveries will be delivered in approximately 2 to 3 hours, and (2) unexpected items, or items not approved by the Subcommittee office, will be delivered the morning of the next business day. The U.S. Capitol Police will refuse all non-governmental courier deliveries to all House Office Buildings.

WRITTEN STATEMENTS IN LIEU OF PERSONAL APPEARANCE:

Please Note: Any person or organization wishing to submit a written statement for the printed record of the hearing must send it electronically to *hearingclerks.waysandmeans@mail.house.gov,* along with a fax copy to (202) 225–2610, by the close of business Wednesday, February 11, 2004. In the immediate future, the Committee website will allow for electronic submissions to be included in the printed record. Before submitting your comments, check to see if this function is available. Finally, those filing written statements who wish to have their statements distributed to the press and interested public at the hearing can follow the same procedure listed above for those who are testifying and making an oral presen-

tation. **Please directly follow these guidelines to ensure that each statement is included in the record.**

FORMATTING REQUIREMENTS:

Each statement presented for printing to the Committee by a witness, any written statement or exhibit submitted for the printed record or any written comments in response to a request for written comments must conform to the guidelines listed below. Any statement or exhibit not in compliance with these guidelines will not be printed, but will be maintained in the Committee files for review and use by the Committee.

1. All statements and any accompanying exhibits for printing must be submitted electronically to *hearingclerks.waysandmeans@mail.house.gov,* along with a fax copy to (202) 225–2610, in WordPerfect or MS Word format and MUST NOT exceed a total of 10 pages including attachments. Witnesses are advised that the Committee will rely on electronic submissions for printing the official hearing record.

2. Copies of whole documents submitted as exhibit material will not be accepted for printing. Instead, exhibit material should be referenced and quoted or paraphrased. All exhibit material not meeting these specifications will be maintained in the Committee files for review and use by the Committee.

3. All statements must include a list of all clients, persons, or organizations on whose behalf the witness appears. A supplemental sheet must accompany each statement listing the name, company, address, telephone and fax numbers of each witness.

Note: All Committee advisories and news releases are available on the World Wide Web at *http://waysandmeans.house.gov.*

The Committee seeks to make its facilities accessible to persons with disabilities. If you are in need of special accommodations, please call 202–225–1721 or 202–226–3411 TTD/TTY in advance of the event (four business days notice is requested). Questions with regard to special accommodation needs in general (including availability of Committee materials in alternative formats) may be directed to the Committee as noted above.

Chairman HERGER. Good morning. I would invite everyone to take their seats, please. Welcome to today's hearing. The purpose of this hearing is to continue our efforts to review and understand how well our Nation's child welfare programs are protecting vulnerable children. Last November, the case of four boys apparently starved by their adopted parents in New Jersey came to the attention of the Nation. Many of us were shocked to learn that the alleged abuse and neglect of these boys had for so long escaped the attention of so many individuals, including child welfare workers who repeatedly visited their homes. We held our first hearing, learning what happened in this specific case, and learning how the boys were doing. Two months later, I understand that the boys continue to make progress in their new environments.

Our second hearing looked at routine but important questions surrounding the data States collect to monitor kids in their care. Witnesses told us that good information systems play a vital role in helping States protect kids in care. We also learned that a number of States lack the capacity to use the data they collect to help ensure safe and permanent placements for kids. Today's hearing will review Federal and State oversight of child welfare programs. The basic questions today are simple, but I expect that the answers may not be so simple. What do we do at the Federal, State, and local level to ensure that children are safe and placed with loving families? Are current measures working to protect children? What

more should we be doing to protect children in foster or adoptive families?

We know the foster care system includes many thousands of loving families who provide safe, nurturing homes to vulnerable children. Without them, these children would grow up without a family or a place to call home. We commend them, and thank them for their dedication to these children. However, we also know that the case in New Jersey is not an isolated incident. Every one of our States has witnessed shocking stories of children whose abuse slipped through the cracks—of children missing from care, or even children who died while in State custody.

We have asked representatives from the Federal Government, State and local government, and child welfare organizations to join us to discuss whether Federal and State protections are working. I am also pleased that a number of organizations and individuals have responded to our request for additional input. Finally, we are joined by several parents who have been involved with the child welfare system, and who will offer us their personal perspective. I thank all of our witnesses for joining us today. We tried to accommodate everyone who submitted a request to testify that met the Committee's requirements and was related to the topic of today's hearing. We look forward to hearing from all of our witnesses about ways to better promote safety for children in foster and adoptive families. Without objection, each Member will have the opportunity to submit a written statement and have it included in the record at this point. Mr. Cardin, would you like to make an opening statement?

[The opening statement of Chairman Herger follows:]

Opening Statement of the Honorable Wally Herger, Chairman, Subcommittee on Human Resources, and a Representative in Congress from the State of California

Good morning and welcome to today's hearing. The purpose of this hearing is to continue our efforts to review and understand how well our nation's child welfare programs are protecting vulnerable children.

Last November the case of four boys apparently starved by their adoptive parents in New Jersey came to the attention of the Nation. Many of us were shocked to learn that the alleged abuse and neglect of these boys had for so long escaped the attention of so many individuals, including child welfare workers who repeatedly visited their home. We held our first hearing to learn what happened in this specific case and to learn how the boys were doing. Two months later, I understand that the boys continue to make progress in their new environments.

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We know the foster care system includes thousands of loving families who provide safe, nurturing homes to vulnerable children. Without them, these children would grow up without a family or a place to call home. We commend them and thank them for their dedication to these children.

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Mr. CARDIN. Thank you very much, Mr. Chairman. I very much appreciate your leadership in putting together this hearing. I think this is a very important hearing for us. It is not our first in the area of child welfare or protecting our children; we have had several other hearings. Yet this hearing is particularly meaningful because of the wide diversity of the panels that will be appearing before us, and their expertise in this area. We should be able to get the perspective from just about every one of the stakeholders in our child welfare system, and I thank you very much for convening this hearing.

None of us will forget the hearing we had in regard to the case in New Jersey that you mentioned, where four children were literally being starved. Yet we don't have to go to New Jersey. I think we can look in each one of our States and find that there is a lot more that needs to be done to protect the welfare of children. I notice in my own State of Maryland that there is a highly profiled case that is currently going on about a child who was beaten to death. So, each of us need to really scrutinize what is happening in our own individual States and look—and I particularly appreciate Dr. Wade Horn being here—look at what we can do at the national level to provide the right structure to protect our children.

Let me make a couple of observations. First, there is the issue of funding. I think we have to adequately fund the programs in this area. I do have concerns about the open-ended funding for children that are placed out of home—but that we have a capped funding source for preventive services in order to keep our children safe and healthy. I think we need to take a look at that as we review the budget of this country. Second, the child welfare system is only as good as the people that are in the system who provide the leadership. When we look at the turnover, particularly of caseworkers—they are the frontline people—we know that we have a problem here of how to attract and retain the best people to stay in this very difficult arena, so that they can provide the leadership and experience necessary to protect our children. Third, there is the issue of what the Federal role should be. I know that we are all struggling with providing the flexibility to local government. We want to do the best we can to allow the locals to do what they think is right, and I support that. I support the flexibility. Yet there needs to be Federal accountability. We need a Federal system that says that every child is precious, and that we need to protect vulnerable children.

During past hearings, I have expressed concern about the Bush Administration's child welfare proposals—that they fail to adequately address these three core issues that I mentioned. I am concerned about the President's budget, as to whether it will be ade-

quate to meet these objectives. I know that the Administration has proposed the block granting of child welfare dollars. That gives me a great deal of concern, because I see in every case that we have gone to block grants, it is followed with a reduction of the Federal Government's role in meeting these needs. Look at the Social Services Block Grant program (title XX of the Social Security Act, Omnibus Budget Reconciliation Act 1987, P.L. 100–203) that was at one time funded at $2.8 billion. Its funding is now down to $1.7 billion. Look at the Temporary Assistance for Needy Families (TANF) reauthorization. The TANF program has not kept up with inflation, and the chances of this Congress approving a TANF reauthorization that will reflect inflation—buying the same amount for the dollars that are being made available—is not very likely. So, we have seen that when the Federal Government goes from a guaranteed funding program to a block grant funding program, it is usually followed by less Federal funds.

Nevertheless, I remain hopeful that we can work together, Mr. Chairman, because this is an area for which we all share the same objective. We all want to make sure that America's children are protected—particularly the most vulnerable. So, on behalf of the Democratic Members, we want to continue to work without party distinction here. We want to be able to develop a national commitment to our vulnerable children. We want to improve our current system and make it accountable. We want to provide the resources that are necessary, so that we can truly protect our children, and so we don't have to read in the paper about these horrible abuse cases that should have been corrected. I look forward to hearing from our witnesses.

[The opening statement of Mr. Cardin follows:]

Opening Statement of the Honorable Benjamin L. Cardin, a Representative in Congress from the State of Maryland

Mr. Chairman, I am glad we are here today to continue a series of hearings on our Nation's child welfare system. These discussions may not get reported on the front pages of any newspaper, but they are vitally important to the nearly one million children who are victims of abuse and/or neglect every year, and to the half million children who now reside in foster care.

The written testimony provided today in combination with the comments we have heard in our past hearings appears to illustrate a growing consensus on a few key issues.

First, the current child welfare system grossly under-funds services designed to prevent child abuse by strengthening families. Experts, administrators, and advocates alike have repeatedly pointed out that the Federal Government provides open-ended funding for out-of-home care, while providing only limited, capped funds for preventive services.

Second, the child welfare system is only as good those who run it—from the top all the way down to the frontline caseworker. To make real improvements, sufficient political will has to exist within those making policy decisions, and adequate experience and training is needed by those making the hard decisions every day about how to care for children in troubled homes. Regrettably, we know that low pay, high caseloads and inadequate training has led to rapid turnover for child welfare caseworkers—with their average tenure lasting less than two years.

Third, the results of the recent Child and Family Service Reviews, past and current litigation revolving around the child welfare system, and recent reports on specific child abuse cases (including the disturbing story about an adoptive family in New Jersey), all illustrate the clear need for a strong Federal presence in ensuring the safety of our most vulnerable children.

This does not mean we cannot provide flexibility to our States and communities—because we can and should. But it does mean the Federal Government must de-

mand better outcomes for abused children, while providing the necessary resources to promote that goal.

During past hearings, I have expressed concern that the Bush Administration's child welfare proposal fails to adequately address these three core issues. The President's plan is designed to be budget neutral, indicating a belief that no new resources are needed to provide protection and permanency for at-risk children.

I do not think the evidence before us supports such a conclusion.

I also have grave doubts about the long-term impact of effectively block-granting nearly all child welfare funding. Beyond the question of what happens if caseloads go up, I am concerned about the Federal financial commitment over time. The Social Services Block Grant, which among other things funds child protective services, has been cut from $2.8 billion a year in 1996 to $1.7 billion today. Furthermore, the TANF block grant is not keeping up with inflation, meaning it is set to lose about a quarter of it purchasing power over the next five years. In short, block grants too often lead to spending cuts.

Nevertheless, I remain hopeful that we can work together on a comprehensive solution to the problems now confronting our child welfare system. We all agree there is a problem, and I think there is a fair amount of consensus about what is causing that problem. That is an important first step towards moving to a meaningful solution. I look forward to taking the next step so that we can better protect our most vulnerable children. Thank you.

Chairman HERGER. Thank you, Mr. Cardin. Before we move on to our testimony, I want to remind our witnesses to limit their oral statement to 5 minutes. However, without objection, all the written testimony will be made a part of the permanent record. As you will note from the witness list, we have a number of individuals scheduled to testify today. We expect to receive testimony from Dr. Wade Horn and the first panel before breaking for lunch. Then we expect to return for the remaining witnesses, starting at approximately 1:30 p.m. We appreciate everyone's patience in allowing us to hear from so many witnesses on such an important topic today. To begin, I would like to welcome Dr. Wade Horn, Assistant Secretary for Children and Families at the U.S. Department of Health and Human Services (HHS). Dr. Horn has been before the Subcommittee on a number of occasions, and I thank him for appearing before us today. Dr. Horn to testify.

STATEMENT OF THE HONORABLE WADE F. HORN, PH.D., ASSISTANT SECRETARY FOR CHILDREN AND FAMILIES, U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Dr. HORN. Thank you, Mr. Chairman, and Members of the Subcommittee. I want to thank you for the opportunity to appear before you today to discuss Federal child welfare oversight activities, and to share with you initiatives we are undertaking to further strengthen child welfare services in America. The Administration for Children and Families uses several mechanisms to work with States to assess State and local child welfare systems, to measure compliance with Federal laws, and to hold States accountable, both for meeting Federal requirements, and, more importantly, for achieving positive outcomes for children and families. We also use information gathered from our various reviews to provide targeted technical assistance that is responsive to individual State needs, in an effort to help improve their systems and services.

The principal mechanisms for Federal oversight include title IV–E eligibility reviews, reviews of the Adoption and Foster Care Analysis and Reporting System (AFCARS), reviews of the statewide

Automated Child Welfare Information System (SACWIS), and the Child and Family Services Review (CFSR). The CFSRs are the cornerstone of our efforts to review State performance, and ensure a State's compliance with key provisions of Federal law. It is also our means to partner with the States in identifying areas that need improvement, and working to bring about those improvements. The CFSRs began in fiscal year 2001, and to date, we have completed 48 of them.

The CFSRs cover all areas of child welfare services, from child protection and family preservation, to adoption and positive youth development. The review itself includes a self-assessment phase, followed by an intensive on-site review in which we pair teams of Federal and State staff to review cases and interview children, parents, foster parents, and stakeholders, to identify areas of strength in each State, and areas that require improvement. When weaknesses are identified, States enter into a Program Improvement Plan (PIP) to address the areas where we find deficiencies. To date, 31 PIPs have been approved. After the PIP period ends, States will undergo a second review—and we continue this process until the State comes into compliance on all of the 14 areas under review. If a State fails to carry out provisions of this PIP, or fails to achieve its goals, we will begin imposing applicable penalties.

We recognize that providing quality technical assistance is critical to helping States get the most out of the review process and to bring about needed change. Therefore, the Administration provides over $8 million annually to support 10 national resource centers, whose role is to build the capacity of State, local, tribal, and other publicly administered and supported child welfare agencies. The national resource centers are providing technical assistance to States in different stages of the CFSR process. These reviews are beginning to make a significant contribution to improving child welfare services across the country. However, we know we must do more in order to better protect children, support families, and promote timely permanency. Therefore, last year, the President unveiled a bold new proposal—the Child Welfare Program Option—that would allow States to choose a flexible alternative funding structure, to design more effective ways to strengthen services to vulnerable children and families. States that choose the program option would be able to use funds for foster care payments, as well as other child welfare services, such as prevention activities and case management. While States that choose this option would have much greater flexibility in how they use title IV–E funds, they would continue to be required to maintain the child safety protections under current law.

We believe that this option would offer a powerful new means for States to structure their child welfare services programs in a way that supports the goals of safety, timely permanency, and enhanced well-being for children and families, while relieving them of significant administrative burdens. We appreciate the Committee's support in working with us on crafting legislative language to make this proposal a reality. Finally, I would like to mention another Presidential priority that speaks to a concern Mr. Cardin brought up in his opening comments, and which directly supports State efforts to provide needed services to children and families. The Pro-

moting Safe and Stable Families amendments of 2001 (P.L. 107–133) fund family support, family preservation, time-limited reunification, adoption promotion, and support services, and provides funding for the Court Improvement Program.

The President, as you know, has proposed an increase of $1 billion in this program over 5 years. Thus far, Congress has appropriated approximately half that amount. The President is firm in his commitment to continue to seek and secure full funding—$505 million a year—for this important program. We ask for your continued support of this vital investment in our Nation's children and families. We have made great strides in the field of child welfare, but the work of assuring the safety, permanency, and well-being of every child who comes to the attention of a child welfare agency or court remains a tremendously challenging task. We are committed to working with the States, Members of Congress, community-based organizations, and concerned citizens to continuously strive for better outcomes for all of these children. Thank you, and I would be pleased to answer any questions you may have.

[The prepared statement of Dr. Horn follows:]

Statement of the Honorable Wade F. Horn, Ph.D., Assistant Secretary for Children and Families, U.S. Department of Health and Human Services

Mr. Chairman and members of the Subcommittee, thank you for the opportunity to appear before you to discuss issues related to Federal child welfare oversight and the President's commitment to improving the lives of vulnerable children and families. Through the development of national outcome measures, and the implementation of the results-oriented Child and Family Services Review process, we have built a national consensus on the key goals for child welfare: assuring children's safety, meeting children's needs for timely permanency in a loving and stable family, and promoting child and family well-being. I am pleased to have this opportunity to provide a brief overview of our Federal oversight activities and to share with you initiatives we are undertaking to further strengthen child welfare services.

Overview of Child Welfare Oversight

The role of Federal child welfare oversight is to monitor States and federally recognized Tribes to ensure they are meeting their responsibilities of protecting our nation's most vulnerable children and providing effective services to at-risk families. The Administration for Children and Families (ACF) uses several mechanisms to work with the States to assess State and local child welfare systems, to measure compliance with Federal laws and to hold States accountable both for meeting Federal requirements and, more importantly, for achieving positive outcomes for children and families. We also use information gathered from our various reviews to provide targeted technical assistance that is responsive to individual State needs in an effort to help them improve their systems and services. We urge States to collect and analyze information in a manner that promotes a culture of continuous assessment and improvement, rather than waiting for the next tragedy to call for reform.

The following are the principle mechanisms for Federal oversight of child welfare systems:

- Title IV–E Eligibility Reviews—Title IV–E reviews focus on whether a child meets the statutory eligibility requirements for foster care maintenance payments. Federal funds are disallowed for cases that fail to meet these requirements. If a State fails in more than a specific percentage of cases, it is considered to be out of compliance with the Federal foster care program requirements. Most of the States reviewed to date were in substantial compliance with the eligibility requirements and most of the remainder are in the process of implementing corrective action plans.
- The Adoption and Foster Care Analysis and Reporting System (AFCARS)—AFCARS collects case level information on all children under the care of the State in foster care and those children adopted from the State public child welfare system. It also includes information on adoptive and foster parents. The AFCARS review encompasses assessing the ability of a State's automated information system to gather, extract and submit the correct AFCARS data accu-

rately. The review process is a rigorous evaluation of the State's system and allows the review team to identify problems, investigate the causes, and suggest solutions during the review.

- Statewide Automated Child Welfare Information System (SACWIS)—Through these reviews we assess and inspect the planning, design, and operation of SACWIS systems to determine how such systems meet the requirements imposed in the law, regulations, guidelines, and in the State's unique business plan. ACF evaluates all mandatory functional components (e.g. intake, screening, assessment, and investigations) and all the optional components the State elected to include in the system design (e.g. court processing and contract monitoring). The SACWIS can function as a "case management" system that serves as the electronic case file for children and families served by the States' child welfare programs. Twenty-nine States now have operational systems that are comprehensive and capable of supporting both improved case management and required data reporting.
- Child and Family Services Review—The CFS Review is designed to ensure that State child welfare agency practices are in conformity with Federal child welfare requirements, to determine what is actually happening to children and families as they are engaged in State child welfare services, and to assist States with enhancing their capacity to help children and families involved with the child welfare system achieve positive outcomes.

The CFS Review is the most comprehensive Federal child welfare monitoring tool we have and is the focus of my testimony today.

Child and Family Services Reviews

The Child and Family Services Review is the cornerstone of our efforts to review State performance and ensure compliance with key provisions of law. It also is our means to partner with the States in identifying areas that need improvement and in working with them to bring about those improvements. I would like to take a few moments to describe the reviews and what we are learning from them.

The CFS Review began in FY 2001 and to date we have completed 48 reviews including 46 States, Puerto Rico, and the District of Columbia. Only 4 reviews remain: Mississippi, Rhode Island, Nevada, and New Jersey. These reviews will be completed by the end of March 2004.

The CFS Review covers all areas of child welfare services, from child protection and family preservation, to adoption and positive youth development. The review requires that State child welfare agencies, in collaboration with a range of other State and local representatives, engage in an intense self-examination of their practices and analyze detailed data profiles that the Federal Government provides from our national databases on child welfare.

We follow the self-assessment phase of the review with an intense onsite review—in which we pair teams of Federal and State staff to review cases and interview children, parents, and foster parents—to identify areas of strength in State child welfare programs and areas that require improvement. This joint approach to reviewing States has had the effect of not only engaging States in identifying their own strengths and weaknesses, but also in building the commitment of States to make needed improvements and strengthen their capacity to self-monitor between Federal reviews.

When weaknesses are identified, States enter into Program Improvement Plans (PIP) to address any of the areas where we find deficiencies. The PIP must be submitted for approval within 90 days of the completion of their final report. To date, 31 Program Improvement Plans have been approved.

We recognize that providing quality technical assistance is critical to helping States get the most out of the review process and bring about needed change. Therefore, the Administration provides over $8 million annually for 10 national resource centers whose role is to build the capacity of State, local, tribal and other publicly administered or supported child welfare agencies. These resource centers are organized around subject areas including: Family-Centered Practice; Organizational Improvement; Foster Care and Permanency Planning; Information Technology in Child Welfare; Special Needs Adoption; Youth Services; Child Maltreatment; Abandoned Infants; Community-Based Family Resource and Support Programs; and Legal and Judicial Issues. In addition to these ACF-funded resources centers, we also are partnering with the Substance Abuse and Mental Health Administration in supporting a National Center on Substance Abuse and Child Welfare.

The national resource centers are providing technical assistance to States in different stages of the CFS Review process. For example, the National Resource Center for Organizational Improvement has guided many States in developing work plans

for the statewide assessment portion of the review and other resource centers have assisted States in developing their Program Improvement Plans.

After the Program Improvement period ends, States will undergo a second review, and will continue this process until they come into compliance on all of the 14 areas under review.

We hold the States accountable for achieving the provisions of their Program Improvement Plans but, in order to assist them in making needed improvements, we suspend Federal penalties while a State is implementing its plan. If a State fails to carry out the provisions of its Program Improvement Plan or fails to achieve its goals, we will begin imposing applicable penalties.

Among the most significant findings across the 46 States, Puerto Rico, and the District of Columbia are the following:

- States are performing somewhat better on safety outcomes for children than on permanency and well-being. Overall, States are responding to reports of abuse and neglect in a timely manner, and are providing services to prevent out-of-home placement when appropriate.
- States need to work on preventing repeat abuse and neglect of children and need to improve the level of services provided to families to reduce the risk of future harm, including monitoring families' participation in services.
- The timely achievement of permanency outcomes, especially adoption, for children in foster care is one of the weakest areas of State performance.
- Most of the States need to make significant improvements in their judicial processes for monitoring children in foster care, such as assuring timely court hearings and increasing their attention to timely termination of parental rights, where appropriate.
- There is a strong correlation between frequent caseworker visits with children and positive findings in other areas, such as timely permanency achievement (which is one of the most difficult areas for States to address effectively) and indicators of child well-being.
- In the area of well being, States are strongest in meeting the educational needs of children, followed by physical health, and then mental health. States need to improve the way in which they assess the needs of family members and provide services, and the way in which they engage parents and children in developing case plans. In particular, States need to focus on their work with fathers, including identifying fathers and engaging them in services.
- There are important differences in the level of services provided to intact families, as opposed to families whose children are in foster care, often with less attention to the intact families. We believe that many States need to strengthen the up-front preventive services they provide to intact families if they are to be successful in preventing the unnecessary break-up of families and in protecting those children who remain at home rather than being placed in foster care.

The Child and Family Services Review is making a significant contribution to improving child welfare services across the country, but there is still much work to be done. We know that we must do more in order to better protect children, support families and promote timely permanency. Therefore, the President has put forth a bold new Child Welfare Financing proposal that would strengthen State child welfare systems and help States better meet the needs of America's most vulnerable children and families.

Child Welfare Program Option

In FY 2004, the President unveiled a new proposal, the Child Welfare Program Option that would allow States to choose a flexible, alternative financing structure over the current title IV–E foster care entitlement program. Over the years, we consistently have heard from States that the title IV–E foster care program is too restrictive because it only provides funds for the poorest children who have been removed from the home.

The program also has been criticized for failing to support the goal of permanency. While reimbursement for foster care and related case management services is open-ended, title IV–E funds may not be used for other types of services that could prevent a child from needing to be placed in care in the first place, or that would facilitate a child's returning home, or moving to another permanent placement.

Under the President's proposal, States could choose to administer their foster care program more flexibly, with a fixed allocation of funds over a five year period, should this approach better support their unique child welfare needs. States that choose not to receive funding provided by this option would continue operating under the current title IV–E entitlement program.

The Program Option provides States with more flexibility so they can design more effective ways to strengthen services to vulnerable children and families. States that choose the Program Option would be able to use funds for foster care payments, prevention activities, permanency efforts (including subsidized guardianships), case management, administrative activities (including developing and operating State information systems), training for child welfare staff and other such service related child welfare activities. States would be able to develop innovative and effective systems for preventing child abuse and neglect, keeping families and children safely together, and moving children toward adoption and permanency quickly.

While States that choose this option would have much greater flexibility in how they use funds, they would continue to be required to maintain the child safety protections under current law, including requirements for conducting criminal background checks and licensing foster care providers, obtaining judicial oversight over decisions related to a child's removal and permanency, meeting permanency timelines, developing case plans for all children in foster care, and prohibiting race-based discrimination in foster and adoptive placements. The proposal also includes maintenance of effort requirement to ensure that States selecting the new option maintain their existing level of investment in the program.

In addition to providing a new option for States, the President's proposal includes a $30 million set-aside for federally recognized Indian Tribes or consortia that can demonstrate the capacity to operate a title IV–E program. Currently Tribes are not eligible to receive title IV–E funding, although some Tribes are able to access funds through agreements with States. This proposal would open the possibility for federally recognized Tribes to receive direct title IV–E funding. We believe this proposal will result in the development of innovative child welfare programs that ultimately will better serve vulnerable children.

We believe that this option would offer a powerful new means for States to structure their child welfare services program in a way that supports the goals of safety, timely permanency and enhanced well-being for children and families, while relieving them of administrative burdens. Given the continuing problems faced by States in managing their child welfare programs, we all must think about more creative ways to strengthen these programs. We appreciate the support of this Committee as demonstrated by holding hearings such as this and in working with the Administration on creating legislative language to make this proposal a reality.

Finally, I would like to mention another Presidential priority that directly supports State efforts to provide needed services to children and families. As discussed earlier, the Child and Family Services Review points to States ongoing struggle with providing services to children remaining in their own home as well as the need for improvements in State judicial processes relating to child welfare. The Promoting Safe and Stable Families Program funds family support, family preservation, time-limited reunification, and adoption promotion and support services and provides funding for the Court Improvement Program. The President is deeply committed to securing full funding, $505 million, for this important program and we ask for your support of this vital investment in our Nation's families.

Conclusion

We have made great strides in the field of child welfare, but the work of assuring the safety, permanency and well-being of every child who comes to the attention of a child welfare agency or court in this country remains a tremendously challenging task. We are committed to working with the States, Members of Congress, community-based organizations and concerned citizens to continuously strive for better outcomes for all of these children.

I would like to thank the Committee for the opportunity to discuss our ongoing efforts to monitor the child welfare system through the Child and Family Services Review. More than any recent initiative of the Federal Government, the Child and Family Services Review has captured the attention of State child welfare agencies. It also has gained the attention of the media, State legislatures, and others who know that changing complex child welfare systems will not be fast or easy. We, in the Administration for Children and Families, are committed to working with States, and to using the knowledge that we are gaining through the review to support States in improving the outcomes of child welfare services for the children and families they serve.

I also would like to thank the Committee for the opportunity to highlight the President's bold new vision for strengthening the child welfare system through the Child Welfare Program Option. We are proud of the progress we have made to-date in providing more resources to States to support children, youth and families and look forward to working closely with you on the President's Child Welfare Option Proposal.

I would be pleased to answer any questions.

Chairman HERGER. Thank you, Dr. Horn, for your testimony. First to inquire is the gentleman from Kentucky, Mr. Lewis.

Mr. LEWIS. Thank you, Mr. Chairman. Dr. Horn, I note that the CFSRs are key to Federal oversight of the child welfare programs. What lessons have we learned from these reviews, and what, if any, changes in practice have resulted from these reviews?

Dr. HORN. The primary thing we have learned is that every State we have reviewed so far—and we have reviewed all but four at this point—have areas of strength, and areas that require improvement. What we are doing is working with each individual State to develop a plan that is consistent with our findings from the CFSR to improve the child welfare system in that State. We know we set the bar high when it comes to passing each of the elements within the CFSR. We did that on purpose because we want to use it as a way to drive improvements in the system, not simply to create a system that validates what States are already doing in child welfare. We feel that this is a very critical review process, which will allow us to help each individual State improve their systems.

Mr. LEWIS. Thank you. While States are implementing their PIPs, of course, as they are required to by these reviews, any financial penalties they may incur are waived. Do you ever foresee a time when these reviews may become more stringent, for example, by linking Federal funding to achievement of expected standards?

Dr. HORN. It is my personal hope that we will not ever impose a penalty, because States will have adequately implemented their PIPs and met the goals that are outlined in the PIPs. The goal of the penalties is not to recoup Federal dollars, but rather to drive improvements in the system. The hope is that through this process, every State will have an improved child welfare system, in order to better ensure the safety, permanency, and well-being of children that interact with the system. However, if in the course of implementing the PIP, a State either does not do it adequately, or does not meet the goals that they set in their PIP, we certainly stand ready to impose penalties. We are in the process now of going back to the States that have started to implement their PIPs, and we look forward to determining how much progress has been made.

Mr. LEWIS. Thank you.

Chairman HERGER. Thank you, Mr. Lewis. The Ranking Member, the gentleman from Maryland, Mr. Cardin, to inquire.

Mr. CARDIN. Thank you, Mr. Chairman. Dr. Horn, it is always a pleasure to have you before our Committee. We thank you for your commitment in this area. There is one area that we may agree on—the funding for the Promoting Safe and Stable Families program—which you would like to see in the Administration's request for full funding. You are right, Congress has not approved that. Wouldn't it be easier if we just made that mandatory funding? That way, you wouldn't have to worry about a fickle Congress. I certainly would be willing to support that. If we could get some Administration support, maybe we could get it done on the mandatory side.

Dr. HORN. The President is committed to——

Mr. CARDIN. Good.

[Laughter.]

Dr. HORN. To securing full funding for his request. At the end of the day, a dollar out of discretionary funds is equal to the same dollar out of mandatory spending, in terms of purchasing power at the State level.

Mr. CARDIN. It is not the same here on Capitol Hill. You pay a price on the discretionary side, whereas the mandatory side speaks to priorities. I agree with you that this is a program that is working, and would provide us additional help with regard to the concerns of today's hearing. So, I would just urge you—this may be one area on which we could reach bipartisan agreement, and not have to confront the appropriators every year. The U.S. General Accounting Office (GAO) will testify a little bit later about workforce deficiencies, talking about the high turnover issue that is not a surprise to any of us, since caseworkers are given a large number of children that they must monitor. That is unacceptable. Is HHS looking at coming in with some Federal guidelines as to what is the appropriate caseload for caseworkers, or other ways to try to deal with the problem of high turnover, inadequate training, and inadequate pay for caseworkers?

Dr. HORN. Certainly, this is something that we look at when we go out and do the CFSRs. One of the things that we try to take a look at in the cases that we review, for example, is whether there are timely visits to foster homes. If you are struggling with 120 cases per caseworker, it is harder to visit a foster home on a monthly basis than if you have a more reasonable caseload. I worked in the child welfare system myself. In fact, my first internship when I was in graduate school was as a caseworker in Child and Family Services in Southern Illinois, and I can speak from personal experience that it is harder to do your job when you have high caseloads versus lower caseloads. I think one of the difficulties that States face in this area is the categorical nature of the funding streams that come from the Federal Government to the States. One of the things that we would like to see happen with the President's flexible funding proposal, is to break down those categorical walls and allow States, if they feel that one of the problems they are experiencing is caseloads that are too high, to use those funds not just to support kids in terms of maintenance payments in foster care, but to hire more caseworkers, if that is what they need.

Mr. CARDIN. My concern with that is, I think perhaps just the opposite will happen. I know the pressures that State governments are facing today. I know what is happening in the State of Maryland during the legislative sessions. We just got the Governor's budget. It is not balanced very well at all, and the prognosis for next year is even worse. All of the programs in regard to this area are under constant attack, and caseload is one of the areas that they fudge. I would think that unless there is some direct guidance from the Federal Government, either a carrot or stick, it is unlikely that Maryland, even though it wants to make progress in this area, could make progress in this area.

I would just suggest two things. One is to set up Federal guidelines as to what is acceptable. Perhaps offer incentive bonuses for

States that achieve certain levels on training, retention, and caseload numbers. That might be a way in which federalism could truly work—where we offer encouragement to the States. We could offer the States additional incentives through bonus payments, and then see how they respond to it. I think just giving States a block grant, hoping that they will hire more people, in today's environment, is a little bit too much trust with regard to the political realities they are confronting. I would just mention one more thing because my time is running out, and that is, we have gotten word that some States, rather than comply with the review requirements of law, may very well just take the Federal penalties, because it is just too costly for them to do the reviews. Have you heard this? Are you concerned that you might, in fact, find States prepared to incur the Federal penalties rather than make improvements on the CFSRs that we think are so important to understanding what is going on in our States?

Dr. HORN. I would hope not. I have not heard that any specific State has taken that position. The penalties are escalating, so they can become quite significant. As I indicated in my response to Congressman Lewis, our perspective is not that this is a system to recoup Federal dollars, but rather to drive improvement in State systems. As I also mentioned, we are using our network of national resource centers to help States figure out how to make the improvements that are required in their system. I do believe that part of the problem, again, is the categorical nature of the funding streams. I appreciate your passion on this issue, and your longstanding interest in improving the child welfare system. I would, however, respectfully challenge your description of the President's proposal as a block grant, precisely because a block grant is one in which the money goes out in one form to all the States. If a State chooses to continue to have an open-ended entitlement program, they can continue to do that under the President's proposal.

Mr. CARDIN. The problem is that, because it is budget neutral, if the caseload goes up in a particular State, they are going to lose money from this program that they would have otherwise received.

Dr. HORN. Yes.

Mr. CARDIN. So, it is capping the dollars that are going into the program.

Dr. HORN. We have heard that. First of all, I don't deny that there would be anxiety about this at the State level. We heard the same argument in 1996 when Aid to Families with Dependent Children (AFDC) was replaced with the TANF program. We have recently done an analysis of the amount of money a State would have had under AFDC over the last 6 years if the caseloads had declined as they had under TANF—if it is true that the TANF declines are all due to the economy, versus what they actually got under the TANF program. In contrast to your opening statement, suggesting that block grants inevitably lead to fewer dollars, our analysis showed that States got $54 billion more over the last 6 years under TANF than if they had the AFDC program.

Mr. CARDIN. That is based on the fact that AFDC was a cash assistance program. On the other hand, TANF is a program whose support extends beyond cash assistance. The program is working, but I think it is unfair to say that the States would have gotten

less money. The truth is that we probably would have developed other initiatives to deal with the related programs other than cash assistance. So, I understand what you are saying and I think you can make that argument, but I also think that when you look at the total services that are now being provided, which are much more comprehensive than this cash assistance, it is working. It is doing exactly what Congress said. States don't have as much money as they had in 1996. They can't buy as much today as they could in 1996.

Dr. HORN. One of our concerns, Congressman, is that the percentage of children in foster care who are eligible is declining. We think it is declining, at least in part, because of the link back to the AFDC program. We have had to readjust our baseline estimates downward each of the last 3 years. If you were to lock in the amount of money that is available under the current baseline projections, you actually get a good deal by capturing the money now rather than seeing the amount of money available ratchet down over the next 5 years.

Mr. CARDIN. We are in agreement on that point. I just wish that all States could get away from the look back provision.

Chairman HERGER. Thank you. Dr. Horn, you have read about, as virtually all of us have, the New Jersey starvation case involving the Jackson family. In your opinion, how could that situation escape the notice of so many people, neighbors, fellow worshipers, and others, for so long, and are there specific changes that this case suggests we should be making on the national level?

Dr. HORN. I am not familiar with all the details of that particular case, but I am as incredulous as others with the details that I do know—that this could have possibly escaped the notice of caseworkers, who apparently came into the home because of other children that they were either monitoring, or thinking about placing in that home. At the same time, I would say that I think it is not possible to expect the Federal Government to be able to assure that every single case at the local level is being appropriately managed. The best that the Federal Government can do is look at trends, and look at systemic factors within a child welfare system, to determine whether there is something wrong with the system as a whole, not at each individual case level. Otherwise, every single case would have to be reviewed by a Federal employee or staff member for every child in foster care, a task that there simply is not enough money in even a perfect world to be able to do.

One of the problems in the New Jersey case, is that there isn't enough money available currently, nor enough flexibility in the current system to provide the kinds of post-adoption services that I think are necessary to ensure that once a child is adopted, the family has the resources and the skills necessary to be able to deal with whatever post-adoption circumstances come up. Under the President's proposals, both the Promoting Safe and Stable Families program, and the flexible funding proposal, there would be more money available to provide post-adoption services if that is an issue that needs to be addressed within an individual State. We think that the way we can help situations such as the one in New Jersey is, A, by having more resources available for adoption services; and B, by giving more flexibility to the States to target the resources

they have in ways that fit the needs of the children who interact with the child welfare system in that State—whether they are post-adoption services at the back end, or prevention services at the front end.

Chairman HERGER. Thank you, Dr. Horn, for your testimony. With that, I would like to call up our first panel: Cornelia Ashby, Director of Education, Workforce, and Income Security Issues for the U.S. General Accounting Office; Mary Nelson, President of the National Association of Public Child Welfare Administrators; William Bell, Commissioner of the New York City Administration for Children's Services (ACS); Wayne Stevenson, Deputy Secretary for Children, Youth, and Families for the Commonwealth of Pennsylvania; and Bill Stanton, President of the National Association of Foster Care Reviewers. Ms. Ashby?

STATEMENT OF CORNELIA M. ASHBY, DIRECTOR, EDUCATION, WORKFORCE, AND INCOME SECURITY ISSUES, U.S. GENERAL ACCOUNTING OFFICE

Ms. ASHBY. Mr. Chairman, Mr. Cardin, thank you for inviting me here today to discuss several issues related to the oversight of child welfare programs. My testimony will focus on three key issues: States' use of funds authorized by title IV–B of the Social Security Act to prevent abuse and neglect in foster care placements, as well as provide other child welfare services; factors that hinder States' ability to protect children from abuse and neglect; and HHS's role in helping States overcome these factors. My comments are based primarily on the findings from three reports we issued last year. Title IV–B, which has two parts, is the primary source of Federal funding for services to help families address problems that lead to child abuse and neglect, and prevent the unnecessary separation of children from their families. Relatively few subpart 1 dollars are used to provide family support and family preservation services, while the majority of subpart 2 funds are used for these services.

We found that States most frequently use subpart 1 funds to fund staff salaries, administration and management expenses, child protective services, and foster care maintenance payments. In contrast, States spent half of their subpart 2 funds on family support or prevention programs, and another 12 percent on family preservation services. However, the results for the past 2 years of HHS's formal process for assessing States' child welfare systems, known as the CFSR, indicate that States have not performed strongly in terms of assessing the services that families need, and providing those services. When HHS reviewed case files, it determined that 31 of the 32 States that had a CFSR in 2001 or 2002 needed improvement in this area.

Child welfare agencies face a number of issues relating to staffing and data management that impair their ability to protect children from abuse and neglect. In particular, low salaries hinder agencies' ability to attract potential child welfare workers, and to retain those already in the profession. Additionally, large caseloads, administrative burdens, limited supervision, and insufficient training reduce the appeal of child welfare work. Our analysis of the CFSRs in 27 States indicated that large workloads and worker

turnover delay the timelines of investigations, and limit the frequency of worker visits with children, hampering agencies' attainment of some key Federal safety and permanency outcomes. Furthermore, States face challenges developing a SACWIS to track abuse and neglect reports and monitor children in foster care, with many States reporting development delays. Most States responding to our survey faced challenges to SACWIS development, such as obtaining State funding, and developing a system that met child welfare agencies' needs statewide.

In addition, several factors affect the States' ability to collect and report reliable adoption, foster care, and child abuse and neglect data, including insufficient caseworker training, inaccurate and incomplete data entry, and technical challenges reporting the data. Of course, HHS plays a role in helping States implement their child welfare programs, but in some cases, additional Federal oversight or technical assistance could help States provide more effective services. For example, HHS's oversight of title IV–B focuses primarily on States' overall child welfare systems and outcomes, but the agency provides relatively little oversight specific to the services provided under title IV–B, subpart 1. The role of HHS in assisting States to overcome child welfare workforce challenges, is limited to partial Federal reimbursement for training expenses, and management of discretionary grant programs that fund State child welfare improvements. The agency monitors SACWIS development and data reporting, and provides assistance to States. However, States reported ongoing challenges, such as the lack of clear and documented guidance on how to report child welfare data, despite the availability of this assistance.

In each of the three reports upon which this testimony is based, we made recommendations to the Secretary of HHS. We recommended that HHS provide the data necessary to ensure that regional offices monitor States' use of title IV–B, subpart 1 funds, and consider gathering additional information on their use. We also recommended that HHS take actions that may help child welfare agencies address recruitment and retention challenges, and that HHS consider ways to enhance the guidance and assistance offered to help States overcome key data challenges. We found that HHS generally agreed with our recommendations, except that it noted that its level of oversight of title IV–B was commensurate with the program's scope and intent. Mr. Chairman, this concludes my prepared statement. I would be pleased to answer any questions.

[The prepared statement of Ms. Ashby follows:]

Statement of Cornelia M. Ashby, Director, Education, Workforce, and Income Security Issues, U.S. General Accounting Office

Thank you for inviting me here today to discuss several issues related to the oversight of child welfare programs across the nation. As you are aware, state child welfare agencies determined that over 900,000 children had been the victims of abuse or neglect by their parents or other caretakers in 2001. Additionally, more than 800,000 children are estimated to spend some time in foster care each year, with the Federal Government allocating approximately $7 billion each year to investigate abuse and neglect, provide placements to children outside their homes, and deliver services to help keep families together. Title IV–B of the Social Security Act, comprised of two subparts, is the primary source of federal funding for services to help families address problems that lead to child abuse and neglect and to prevent the unnecessary separation of children from their families. Funding under Title IV–E of the Social Security Act is used primarily to pay for the room and board of chil-

dren in foster care. Since 1994, designated federal matching funds have been available to states to develop and implement comprehensive case management systems—statewide automated child welfare information systems (SACWIS)—to manage their child welfare cases as well as to report child abuse and neglect, foster care, and adoption information to the Federal Government.

In addition to this funding, the Department of Health and Human Services' (HHS) Administration for Children and Families (ACF) monitors states' compliance with key federal goals, specified in part by the Adoption and Safe Families Act (ASFA) of 1997, to keep children safe and ensure their placement in stable and permanent homes. Through its formal review process, known as the Child and Family Services Review (CFSR), HHS uses specific assessment measures, such as agencies' ability to conduct timely abuse and neglect investigations and regularly visit children in their homes, to assess the performance of states' child welfare systems.

My testimony today will focus on three key issues: (1) states' use of Title IV–B funds in providing a wide array of services to prevent the occurrence of abuse, neglect, and foster care placements, as well as other child welfare services; (2) factors that hinder states' ability to protect children from abuse and neglect; and (3) HHS's role in helping states to overcome the challenges they face in protecting children from abuse and neglect. My comments are based primarily on the findings from three reports:[1] U.S. General Accounting Office, *Child Welfare: HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff.* GAO–03–357. Washington, D.C.: March 31, 2003; *Child Welfare: Most States Are Developing Statewide Information Systems, but the Reliability of Child Welfare Data Could Be Improved.* GAO–03–809. Washington, D.C.: July 31, 2003; and *Child Welfare: Enhanced Federal Oversight of Title IV–B Could Provide States Additional Information to Improve Services.* GAO–03–956. Washington, D.C.: September 12, 2003. Those findings were based on multiple methodologies, including a survey of child welfare directors on states' use of Title IV–B funds; an analysis of 600 exit interview documents completed by staff who severed their employment from 17 state, 40 county, and 19 private child welfare agencies; and a survey of all 50 states and the District of Columbia regarding their experiences in developing and using information systems and their ability to report data to HHS. In each case, we supplemented these surveys and analyses by conducting multiple site visits to selected states and by interviewing child welfare experts and HHS headquarters and regional officials.

In summary, we found that states use Title IV–B funds to provide a wide variety of services to prevent the occurrence of abuse, neglect, and foster care placements, as well as to provide other child welfare services. Subpart 1 dollars were most frequently used to fund staff salaries, with almost half of these funds designated for the salaries of child protective services (CPS)[2] social workers. In comparison, states spent half of their subpart 2 funds on family support or prevention programs and another 12 percent on family preservation services. CFSR results for the past 2 years, however, indicate that states have not performed strongly in terms of assessing the services families need and providing those services. Child welfare agencies face a number of issues related to staffing and data management that impair their ability to protect children from abuse and neglect. In particular, low salaries hinder agencies' ability to attract potential child welfare workers and to retain those already in the profession. Our analysis of CFSRs in 27 states indicated that large caseloads and worker turnover delay the timeliness of investigations and limit the frequency of worker visits with children, hampering agencies' attainment of some key federal safety and permanency outcomes. Furthermore, states face challenges developing appropriate information systems needed to track abuse or neglect reports and monitor children in foster care, with many states reporting development delays. In addition, several factors affect the states' ability to collect and report reliable adoption, foster care, and child abuse and neglect data, including insufficient caseworker training, inaccurate and incomplete data entry, and technical challenges reporting the data. Although HHS plays a role in monitoring child welfare programs, additional oversight or technical assistance could assist states in meeting the needs of children served by child welfare agencies. For example, HHS's oversight of Title IV–B focuses primarily on states' overall child welfare systems and outcomes, but the agency provides relatively little oversight specific to the services provided under

[1] We also recently testified on one of these reports. See U.S. General Accounting Office, Child Welfare: States Face Challenges in Developing Information Systems and Reporting Reliable Child Welfare Data. GAO–04–267T. (Washington, D.C.: Nov. 19, 2003).

[2] Child protective services activities typically include reviewing reports of alleged child abuse and neglect, investigating those that meet the state's criteria as a potential incident of abuse or neglect to determine if the alleged incident occurred, and, in some cases, referring families to needed services and removing the child from the home, if necessary.

Title IV–B subpart 1.[3] In addition, HHS plays a limited role in states' workforce activities by offering partial reimbursement for training expenses and managing discretionary grant programs. The agency monitors SACWIS development and data reporting, but despite the availability of technical assistance, states reported ongoing challenges reporting reliable data.

Background

ACF is responsible for the administration and oversight of federal funding to states for child welfare services under Titles IV–B and IV–E. HHS headquarters staff are responsible for developing appropriate policies and procedures for states to follow in terms of obtaining and using federal child welfare funds, while staff in HHS's 10 regional offices and 10 national resource centers provide guidance and technical assistance to improve child welfare services nationwide. HHS compiles state-reported child welfare data in two databases: the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the National Child Abuse and Neglect Data System (NCANDS). HHS relies on the information available in its databases to analyze and track children's experiences in the child welfare system, to determine states' performance on federal child welfare outcome measures, and to report to Congress on children's well being and child welfare experiences. However, the monitoring of children served by state child welfare agencies is the responsibility of the state agencies that provide the services to these children and their families. Child welfare caseworkers at the county or local level are the key personnel responsible for documenting the wide range of services offered to children and families, such as investigations of abuse and neglect; treatment services offered to families to keep them intact and prevent the need for foster care; and arrangements made for permanent or adoptive placements when children must be removed from their homes. Most states and counties provide some child welfare services directly and provide others through contracts with private agencies. National survey data confirm that both state and private child welfare agencies are experiencing similar challenges recruiting and retaining qualified caseworkers. For instance, turnover of child welfare staff has been estimated at between 30 percent and 40 percent annually nationwide, with the average tenure for child welfare workers being less than 2 years.

In 2000, HHS established a new federal review system to monitor state compliance with federal child welfare laws. One component of this system is the CFSR, which assesses state performance in achieving safety and permanency for children, along with well-being for children and families. The CFSR process includes a self-assessment by the state, an analysis of state performance in meeting national standards established by HHS, and an on-site review by a joint team of federal and state officials. Based on the results of this process, HHS determines whether a state achieved substantial conformity with (1) outcomes related to safety, permanency, and well-being, such as keeping children protected from abuse and neglect and achieving permanent and stable living situations for children and (2) key systemic factors, such as having an adequate case review system and an adequate array of services. States are required to develop program improvement plans to address all areas of nonconformity.

Federal Funding of Child Welfare Services and Programs

Two titles of the Social Security Act provide federal funding targeted specifically to foster care and related child welfare services.[4] Title IV–E[5] provides an open-ended individual entitlement for foster care maintenance payments to cover a portion of the food, housing, and incidental expenses for all foster children whose parents meet certain federal eligibility criteria.[6] Title IV–E also provides payments to

[3] Our September 2003 report on Title IV–B focused primarily on subpart 1 because little, if any, research has been conducted on how subpart 1 funds have been spent on child welfare services. In contrast, a number of studies have been conducted on the services provided under subpart 2.

[4] In addition, Title XX provides funds under the social services block grant that may be used for many purposes, including child welfare.

[5] In fiscal year 2002, total Title IV–E spending was approximately $6.1 billion. The state matching rate for these payments is based on a state's per capita income and ranges from 50 percent to 83 percent.

[6] States are entitled to Title IV–E reimbursement on behalf of children who would have been eligible for Aid to Families with Dependent Children (AFDC) (as AFDC existed on July 16, 1996), but for the fact that they were removed from the home of certain specified relatives. While the AFDC program was replaced by the Temporary Assistance for Needy Families Program in 1996, eligibility for Title IV–E payments remains tied to the income eligibility requirements of the now defunct AFDC program. In addition, certain judicial findings must be present,

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adoptive parents of eligible foster children with special needs.[7] To qualify for federal IV–E funding for SACWIS, states must prepare and submit an advance planning document (APD) to ACF's Children's Bureau, in which they describe the state's plan for managing the design, development, implementation, and operation of a SACWIS that meets federal requirements and state needs in an efficient, comprehensive, and cost-effective manner. Since the administration and structure of state child welfare agencies vary across the nation, states can design their SACWIS to meet their state needs, as long as states meet certain federal requirements.

Title IV–B of the Social Security Act, established in 1935, authorizes funds to states to provide a wide array of services to prevent the occurrence of abuse, neglect, and foster care placements.[8] In 1993, the Congress created a new program as subpart 2 of Title IV–B (now known as Promoting Safe and Stable Families), which funds similar types of services but is more prescriptive in how states can spend the funds.[9] No federal eligibility criteria apply to the children and families receiving services funded by Title IV–B.

Title IV–B subpart 1 provides grants to states for child welfare services, which are broadly defined. Subpart 1 funds are intended for services that are directed toward the accomplishment of the following purposes: (1) protect and promote the welfare of all children; (2) prevent or remedy problems that may result in the abuse or neglect of children; (3) prevent the unnecessary separation of children from their families by helping families address problems that can lead to out-of-home placements; (4) reunite children with their families; (5) place children in appropriate adoptive homes when reunification is not possible; and (6) ensure adequate care to children away from their homes in cases in which the child cannot be returned home or cannot be placed for adoption.

In 1980, the Congress enacted legislation that limited the total subpart 1 funds states could use for three categories of services: foster care maintenance payments, adoption assistance payments, and child care related to a parent's employment or training.[10] The total of subpart 1 funds used for these purposes cannot exceed a state's total 1979 subpart 1 expenditures for all types of services. The intent of this restriction, according to a congressional document, was to encourage states to devote increases in subpart 1 funding as much as possible to supportive services that could prevent the need for out-of-home placements.[11] However, this restriction applies only to the federal portion of subpart 1 expenditures, as the law notes that states may use any or all of their state matching funds for foster care maintenance payments.

Subpart 2 authorizes grants to states to provide four categories of services, which are defined below:

- Family preservation services: Services designed to help families at risk or in crisis, including services to (1) help reunify children with their families when safe and appropriate; (2) place children in permanent homes through adoption, guardianship, or some other permanent living arrangement; (3) help children at risk of foster care placement remain safely with their families; (4) provide follow-up assistance to families when a child has been returned after a foster care placement; (5) provide temporary respite care; and (6) improve parenting skills.
- Family support services: Community-based services to promote the safety and well-being of children and families designed to increase the strength and sta-

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and all other requirements included in section 472 (a) and (b) of the Social Security Act must be met, in order for the child to be eligible for Title IV–E foster care maintenance payments.

[7] Special needs are characteristics that can make it difficult for a child to be adopted and may include emotional, physical, or mental disabilities, emotional disturbance, age, or being a member of a minority race. To qualify for an adoption subsidy under Title IV–E, a state must determine that the child cannot or should not return home; a state must make a reasonable, but unsuccessful effort to place the child without the subsidy; and a specific factor or condition must exist that makes it difficult to place the child without a subsidy.

[8] In fiscal year 2003, the Congress appropriated $292 million for subpart 1 and $405 million for subpart 2. These federal funds cover 75 percent of states' total Title IV–B expenditures because states must provide an additional 25 percent using nonfederal dollars.

[9] States must spend a "significant portion" of their subpart 2 funds on each of the four service categories. HHS program instructions require states to spend at least 20 percent of their subpart 2 funds on each of the four service categories, unless a state has a strong rationale for some other spending pattern.

[10] For our September 2003 report on Title IV–B and in this testimony, we mention only foster care maintenance and adoption assistance payments when referring to subpart 1 limits, although we did include planned spending on child care in our analyses of states' planned subpart 1 spending.

[11] Staff of the House Committee on Ways and Means, 106th Congress, Background Material and Data on Programs Within the Jurisdiction of the Committee on Ways and Means (Comm. Print 2000).

bility of families, to increase parental competence, to provide children a safe and supportive family environment, to strengthen parental relationships, and to enhance child development. Examples of such services include parenting skills training and home visiting programs for first time parents of newborns.

- Time-limited family reunification services: Services provided to a child placed in foster care and to the parents of the child in order to facilitate the safe reunification of the child within 15 months of placement. These services include: counseling, substance abuse treatment services, mental health services, and assistance to address domestic violence.
- Adoption promotion and support services: Services designed to encourage more adoptions of children in foster care when adoption is in the best interest of the child, including services to expedite the adoption process and support adoptive families.

States Spend IV–B Funds on A Variety of Services, With Subpart 2 Focusing More on Prevention

In our September 2003 report on Title IV–B, we found that states use these funds to provide a wide variety of services to prevent the occurrence of abuse, neglect, and foster care placements, as well as services to help children in foster care and their parents; however, relatively few subpart 1 dollars are used to provide family support and family preservation services, while the majority of subpart 2 funds are used for these purposes. According to our survey data for fiscal year 2002,[12] states spent subpart 1 funds most frequently on the salaries of child welfare agency staff, administration and management expenses, CPS services, and foster care maintenance payments. In comparison, states spent half of their subpart 2 funds on family support or prevention programs and another 12 percent on family preservation services. CFSR results for the past 2 years, however, indicate that states have not performed strongly in terms of assessing the services families need and providing those services.

States Use Subpart 1 Funds Primarily for Staff Salaries

Relatively few subpart 1 dollars were used for family support or family preservation services; instead, they were most frequently used to fund staff salaries, with almost half of these funds designated for the salaries of CPS social workers. Another 20 percent of these funds were used for the salaries of other social workers.[13] During a site visit to the state of Washington for the Title IV–B report,[14] child welfare officials told us that they used over 50 percent of the state's subpart 1 funds for salaries of staff providing direct services, including CPS social workers, other types of social workers, social work supervisors, and clerical support staff. Administration and management comprised the second largest category of service, accounting for almost 17 percent of subpart 1 dollars. This category included rent and utilities for office space, travel expenses for agency staff, and staff training.[15]

CPS represents the third largest category of services that states funded with subpart 1. States used about 16 percent of their subpart 1 funds to provide a variety of CPS services, such as telephone hotlines for the public to report instances of child abuse and neglect, emergency shelters for children who needed to be removed from their homes, and investigative services. During our site visit to California, for example, officials reported using about 40 percent of their subpart 1 dollars to fund staff salaries and operating expenses associated with a variety of shelter care services provided by counties, such as emergency shelters and foster homes. A child is placed in one of these shelters when no other placement option is immediately available—for example, when an investigation in the middle of the night determines that the

[12] To obtain a breakdown of state spending for subparts 1 and 2 for the Title IV–B report, we sent a survey to all 50 states and the District of Columbia and received responses from 47 states.

[13] The survey data reported in this category reflect the salaries of staff affiliated with the child welfare agency. These figures do not include the salaries of child welfare agency staff dedicated to a specific program, which may be embedded within some of the other direct service categories, such as family support and family preservation. In addition, a state may use Title IV–B funds to contract with an organization to provide a particular program, which may include salary expenses as well as direct service expenditures.

[14] For the Title IV–B report, we conducted site visits in California, New Jersey, Ohio, and Washington to obtain more in-depth information on the services provided and the types of children and families served. These states represent both geographic diversity and diversity in how states used subpart 1 funds.

[15] This amount may be underestimated, since some states may not have separately reported administrative expenses associated with a specific program. For example, officials in one state reported that the total spending for a family support program included salaries for agency staff, overhead expenses, and related staff travel.

child is at immediate risk of harm. States also used nearly 11 percent of their subpart 1 funds to make recurring payments for the room and board of foster children who are not eligible for reimbursement through Title IV–E. About 10 percent of subpart 1 dollars were used to provide family support and family preservation services.

Subpart 2 Most Frequently Funds Family Support and Family Preservation Services

In contrast to subpart 1, states used over 80 percent of their subpart 2 dollars to fund services in its four mandated service categories—family support, family preservation, family reunification, and adoption promotion and support services (see app. I for additional information on states' comparative expenditures on subparts 1 and 2). For example, states reported using half of their subpart 2 dollars to fund family support and prevention services. These services included mentoring programs to help pregnant adolescents learn to be self-sufficient; financial assistance to low-income families to help with rent and utility payments; and parenting classes, child care, and support groups provided by a community-based resource center. Washington funded a network of public health nurses and social service agencies to provide support services to families that are the subject of a report of abuse or neglect—these services are provided in lieu of, or following, a formal investigation when the level of risk to the child is not considered high.

Family preservation services—designed to keep families together and prevent the need to place a child in foster care—represented the second largest service category funded by subpart 2. Washington used subpart 2 funds for its statewide family preservation program, which offers counseling and parent training services for up to 6 months to families with children who are at risk of being placed in foster care.

In addition, states reported using about 11 percent of their subpart 2 funds for adoption support and preservation services. With these funds, states provided services such as counseling for children who are going to be adopted, family preservation services to adoptive families, and respite care[16] for adoptive families. Officials in Ohio reported using almost half of its subpart 2 dollars for adoption services, including post adoption services and services to recruit families for children in need of adoptive homes.

Finally, states spent about 9 percent of their subpart 2 dollars on family reunification services. States funded a diverse array of family reunification programs, such as supervised visitation centers for parents to visit with their children and coordinators for alcohol and drug treatment services for families whose primary barrier to reunification is substance abuse. New Jersey funded a supervised visitation program that offers parenting education, counseling, transportation, and support groups and is located in a private home, allowing families to visit together in a homelike setting and engage in more natural interactions.

CFSRs Find States Are Weak in Assessing Families' Service Needs

While states are using Title IV–B funds to provide this array of services, CFSR results for the past 2 years indicate that states have not performed strongly in terms of assessing the services families need and providing those services. When HHS reviewed case files it determined that 31 of the 32 states that underwent a CFSR in 2001 or 2002 needed improvement in terms of assessing family needs and providing services to meet those needs. While 21 of the 32 states were considered to have an appropriate array of services for families, HHS found that the accessibility of services was a particular weakness in that many services were either not available statewide or had long waiting lists or other barriers to accessibility.

Staff and Data Issues Affect States' Ability to Protect Children From Abuse and Neglect

Child welfare agencies face a number of issues related to staffing and data management that impair their ability to protect children from abuse and neglect. In particular, low salaries hinder agencies' ability to attract potential child welfare workers and to retain those already in the profession. Additionally, caseworkers in the four states we visited for the March 2003 child welfare workforce report[17] cited high caseloads and a lack of supervisory support as issues impacting their ability to work effectively. According to these caseworkers, high turnover rates and staffing

[16] Respite care refers to the temporary care of children that can provide a break for the families from the daily demands of caring for their children or respite during times of emergencies.

[17] For this report, we conducted site visits in California, Illinois, Kentucky, and Texas to obtain more in-depth information on workforce issues and their effect on children's safety and permanency outcomes. Among other factors, these states represent geographic diversity and diversity in the practices they have implemented to address their recruitment and retention challenges.

shortages leave remaining staff with insufficient time to establish relationships with children and families and make the necessary decisions to ensure safe and stable permanent placements. Furthermore, our July 2003 report found that states face challenges developing appropriate information systems needed to track abuse or neglect reports and monitor children in foster care. While 47 states are developing or operating a SACWIS, many states[18] reported that the development of their SACWIS is delayed. Most states responding to our survey faced challenges to SACWIS development, such as obtaining state funding and developing a system that met the child welfare agency's needs statewide. In addition, several factors affect states' ability to collect and report reliable adoption, foster care, and child abuse and neglect data, including insufficient caseworker training, inaccurate and incomplete data entry, and technical challenges reporting the data.

Recruitment and Retention Challenges May Hamper Agencies' Attainment of Federal Child Welfare Outcomes

In our report on the child welfare workforce, we found that public and private child welfare agencies face a number of challenges recruiting and retaining qualified caseworkers and supervisors. Low salaries, in particular, hinder agencies' ability to attract potential staff and to retain those already in the profession. For example, caseworkers in each of the four states we visited said that many of their former child welfare colleagues pursued positions in the education field where they could not only make more money but also work with children without risking their own safety. For example, the Bureau of Labor Statistics' national wages survey[19] reports that elementary and middle school teachers earn, on average, about $42,000 annually while social workers earn about $33,000.[20]

Additionally, high caseloads, administrative burdens, limited supervision, and insufficient training reduce the appeal of child welfare work. Caseworkers and supervisors in all four states we visited cited demanding and complex caseloads and related administrative requirements, such as casework documentation, as factors affecting retention. Some of the caseworkers we interviewed handled double the number of cases recommended by advocacy organizations,[21] and one study found that caseloads for individual child welfare workers ranged from 10 to 110 children,[22] with workers handling an average of about 24 to 31 children each. Furthermore, some of the caseworkers we interviewed told us that they spent between 50 and 80 percent of their time completing paperwork, thereby limiting their time to assist children and families.

Caseworkers told us that their desire to stay in the child welfare profession was influenced by high-quality supervision and adequate on-the-job training; however, these elements were often lacking. According to supervisors in one city we visited, about half of new trainees left their jobs before completing 1 year, in part, because these newly hired caseworkers were not sufficiently trained to do their jobs. Furthermore, some newly promoted supervisors have requested demotions because they felt unprepared to meet job demands, and the caseworkers they supervised complained of poor management and insufficient support.

There is some evidence to suggest how recruitment and retention challenges affect the safety and permanency of children in care, but the magnitude of this effect is unknown. Caseworkers in the four states that we visited said that high turnover rates and staffing shortages leave remaining staff with insufficient time to conduct

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[18] These reports were obtained through both site visit interviews and survey responses. For the child welfare information systems and data report, we conducted site visits in Colorado, Iowa, New York, North Carolina, and Oklahoma to obtain more in-depth information on states' experiences developing SACWIS and reporting data to HHS. These states represent both geographic diversity and different stages of SACWIS implementation. In addition, we surveyed all 50 states and the District of Columbia regarding their experiences in developing and using information systems and their ability to report data to HHS. We received responses from 49 states and the District of Columbia, although some states did not respond to every question. Forty-six of these states reported that they are developing or operating a SACWIS. Nevada, which HHS reported has an operational SACWIS, did not respond to our survey. Throughout this testimony, references to state survey responses for our July 2003 report include the District of Columbia.

[19] U.S. Department of Labor, Bureau of Labor Statistics, 2000 National Occupational Employment and Wage Estimates.

[20] This amount is specific to child, family, and school social workers (the occupation under which caseworkers would likely be classified).

[21] The Child Welfare League of America suggests a caseload ratio of 12 to 15 children per caseworker, and the Council on Accreditation for Children and Family Services suggests that caseloads not exceed 18 children per caseworker.

[22] American Public Human Services Association, Report from the Child Welfare Workforce Survey: State and County Data and Findings, May 2001.

the types of home visits necessary to assess children's safety and to make well-supported decisions to ensure safe and stable permanent placements. For example, when staff change, caseworkers may have to reestablish information to update the case record and families may become hesitant to work with unfamiliar caseworkers, making it difficult to learn the history of the case. Worker turnover also disrupts the continuity of services, particularly when newly assigned caseworkers have to conduct or reevaluate educational, health, and safety assessments due to poor or insufficient information in case files left behind by others. Furthermore, caseworkers explained that high caseloads require them to limit the number and quality of the home visits they conduct, forcing them to focus only on the most serious circumstances of abuse and neglect. One caseworker in Texas noted that when she does make a home visit, the visit is quick and does not enable her to identify subtle or potential risks to the child's well-being.

Our analysis of federal CFSRs corroborated caseworker accounts,[23] showing that large caseloads and worker turnover delay the timeliness of investigations and limit the frequency of worker visits with children, thereby hampering agencies' attainment of some key federal safety and permanency goals. Although identifying workforce deficiencies is not an objective of the CFSR process, in all 27 CFSRs we analyzed, HHS explicitly cited workforce deficiencies—high caseloads, training deficiencies, and staffing shortages—that affected the attainment of at least one assessment measure. While the number of affected assessment measures varied by state, we found that HHS cited these factors for an average of nine assessment measures per state, with more than half of the 27 states exceeding this average. For example, in New Mexico's CFSR, reviewers cited staff turnover and vacancies as impairing workers' ability to investigate child maltreatment reports, provide appropriate services for families, and establish timely permanency goals. Furthermore, the District of Columbia's CFSR describes heavy workloads, high staff turnover, and a climate in which supervisors often call new workers out of training to handle ongoing caseload activities.

Delays in SACWIS Completion and Challenges with Data Collection Affect States' Ability to Ensure Reliable Data on Children's Experiences

In addition to performing a wide range of services to protect children, child welfare caseworkers are the key personnel who collect and document information on children and families served by children welfare agencies. Case file documentation is generally captured in state computer systems. In our July 2003 report, HHS reported that 47 states are using targeted federal funds to develop or operate their child welfare computer systems—known as SACWIS—but many continue to face challenges completing their systems. In our November 2003 testimony on SACWIS,[24] we reported on the costs associated with developing SACWIS and the associated barriers, such as development delays and difficulties in receiving state funding approval, creating a system that reflects child welfare work processes, and securing contractors knowledgeable about child welfare. Many state officials said that they recognize the benefit their state will achieve by developing SACWIS, such as contributing to the timeliness of child abuse and neglect investigations. In Oklahoma, for example, caseworkers and state officials noted that they believe their children are safer since the implementation of SACWIS simply because the information on the children is easily accessible to the caseworkers and their supervisors. According to our survey results, automated systems provided easier access to data and allowed caseworkers to better monitor children in their care, which may contribute to additional child welfare and administrative benefits, such as decreased incidences of child abuse and neglect, shortened length of time to achieve adoption, timeliness of payments to foster families, and timeliness of payments to foster facilities.

Some of the data captured in case file records are reported to two HHS databases that compile child welfare data—AFCARS and NCANDS. We found that several factors affect states' ability to collect and report reliable data to HHS on children served by state child welfare agencies. Almost all of the states responding to our survey[25] reported that insufficient caseworker training and inaccurate and incomplete data entry into their information system affect the quality of AFCARS and NCANDS data. Although most states reported these as separate factors, HHS and

[23] At the time of the original study, CFSR final reports were available for only 27 states; as of January 28, 2004, HHS had released reports for an additional 14 states.

[24] See U.S. General Accounting Office, Child Welfare: States Face Challenges in Developing Information Systems and Reporting Reliable Child Welfare Data, GAO–04–267T (Washington, D.C.: Nov. 19, 2003).

[25] The analysis of survey responses about reporting data to HHS is based on responses from 49 states and the District of Columbia. All states, regardless of SACWIS development, were asked to complete these questions.

the states we visited found that insufficient training and inaccurate and incomplete data entry are often linked. Caseworkers, supervisors, and managers in the five states that we visited reported that additional factors, such as difficulties balancing data entry with the time that they spend with the families and children, contributed to inaccurate or incomplete data entry. Supervisors in Iowa explained that since caseworkers are responsible for ensuring that children and their families receive the services they need, the caseworkers tend to initially limit data entry to the information that is necessary to ensure timely payment to foster care providers, and complete all other data elements when the caseworkers have time. In addition, caseworkers in Colorado said that they are between 30 and 60 days behind in their data entry, so the information in the automated system may not accurately reflect the current circumstances of children in care.

We also reported in our July 2003 report and November 2003 testimony that many states experienced technical challenges reporting their data to HHS. The problems reported by states are typically a result of challenges associated with data "mapping"—matching state data elements to the federal data elements. For example, 36 states reported in our survey that matching their state-defined data to HHS's definitions affected the quality of the data reported to NCANDS and AFCARS. In addition to the challenges reported in our survey, HHS reported that transferring data from older data systems into SACWIS affects the quality of the data reported to AFCARS and NCANDS.

Improvements in HHS's Oversight of Child Welfare Programs Could Help States Overcome Some Challenges

HHS plays a role in helping states implement their child welfare programs, but in some cases, additional federal oversight or technical assistance could help states provide more effective services. In terms of child welfare funding, HHS focuses its programmatic oversight on the overall child welfare system in each state and provides relatively little oversight specific to Title IV–B subpart 1. HHS's role in assisting states overcome the child welfare workforce challenges is limited to partial federal reimbursement for training expenses and management of discretionary grant programs, such as the Child Welfare Training Program. HHS also monitors SACWIS development and data reporting and provides assistance to states to address some of the associated challenges; however, states reported ongoing challenges, such as the lack of clear and documented guidance on how to report child welfare data, despite the availability of this assistance.

HHS Focuses Oversight on the Overall Child Welfare System, but Has Limited Knowledge about States' Use of Subpart 1 Funds

HHS focuses much of its programmatic oversight on the overall child welfare system in each state, rather than focusing specifically on subpart 1 or any other federal funding source. A major component of HHS's subpart 1 oversight is having the regional offices actively work with states to develop appropriate goals for their child welfare systems and ensure that available funds are used to support those goals. To receive Title IV–B funding, HHS requires states to submit a Child and Family Services Plan, which covers a 5-year period and describes the state's goals and objectives toward improving outcomes related to the safety, permanency, and well-being of children and families, as well as the services and programs the state will pursue to achieve these goals. In addition to the 5-year plan, HHS requires states to submit an update each year to discuss their progress in meeting the goals outlined in their plans. Some regional officials noted that states are still struggling to use these documents appropriately for planning purposes and frequently just describe their current programs, rather than focusing on outcomes and collecting data to measure progress toward those outcomes.

The CFSR process is an additional tool HHS uses to ensure that states conform to federal child welfare requirements and to help states improve their child welfare services. Staff at one regional office described the CFSR as a thorough review of the services funded by different federal programs, such as Title IV–B, providing an opportunity to determine whether states are providing the services they report in their planning documents and whether those services are adequate and appropriate to meet the needs of the state's children and families. When asked about HHS's role in guiding states' use of subpart 1 funds to address weaknesses identified by the CFSRs, an HHS official told us that the agency provides technical assistance to states to help them determine the most effective use of their resources, while giving states much latitude to determine the most appropriate use of their subpart 1 funds.

HHS does not require states to provide any data about their use of subpart 1 funds, such as their subpart 1 expenditures for specific services.[26] As a result, several regional offices noted that they have no way of knowing how states actually spend their subpart 1 funds. Instead, HHS requires states to submit annual estimates of the amount of subpart 1, subpart 2, and other federal funds the state plans to spend in the upcoming year on different categories of services (such as family support or CPS). However, these estimates may not provide reliable data as to how states are using subpart 1 funds. HHS officials explained that states' actual expenditures may vary from these estimates, as they address unforeseen circumstances. In addition, HHS requires states to submit their estimates before the final spending amounts have been appropriated.[27]

The descriptions provided by regional office staff of their review of these estimates indicate that they review them for relatively limited purposes. As a result, most HHS regional offices do not review the annual estimates for compliance with the statutory limits. In addition, HHS's annual program instruction, which details what information states must include in their estimates and serves as the basis for the regional offices' review of subpart 1 spending, does not mention the subpart 1 limits. Five regional offices were unaware that any limits on the use of subpart 1 funds existed. Four other regional offices were aware of the limits, but did not ensure that states complied with the limits.

This lack of review led HHS to approve spending plans for 15 states that reported fiscal year 2002 planned subpart 1 expenditures for foster care maintenance and adoption assistance payments that exceeded the statutory limits.[28] The dollar amounts by which the subpart 1 spending estimates surpassed the limits were small in some cases, but large in others. For example, Georgia reported that it planned to spend $1,497,000 of subpart 1 funds for these purposes in 2002, which would exceed its statutory limit by $1,558. At the other extreme, Florida's estimate indicated that it planned to spend over $9 million, which was more than $7 million over the maximum allowable spending of $1.9 million. In total, these 15 states submitted planned subpart 1 spending estimates for foster care maintenance and adoption assistance payments that would exceed the statutory limits by over $30 million.

Several regional offices said that they are not concerned about a state planning to spend significant proportions of its subpart 1 funds on foster care maintenance and adoption assistance payments if they believed the state had a strong child welfare system with an appropriate array of services. Regional office staff said that they would, however, ask a state to reconsider its funding strategy if the state were performing poorly. However, many of the states with approved subpart 1 estimates above the statutory ceilings did not achieve strong outcomes on their CFSR evaluations with regard to providing needed services and having an appropriate array of services. HHS has conducted CFSRs on 13 of the 15 states with approved annual estimates over the subpart 1 spending limits and determined that appropriately assessing family needs and providing services to address those needs was an area needing improvement in 12 of the 13 states. In addition, 7 of the 13 states were also determined to need improvement in terms of having an appropriate array of services to meet the needs of families in the state.[29]

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[26] States are required to submit general reports on their total subpart 1 expenditures, but these provide no data on how the funds are actually used. Per instructions from the Office of Management and Budget, agencies must require states receiving federal grants to complete a financial status report (SF 269), providing general information on state expenditures. For example, the form might indicate that a state spent $10 million in subpart 1 funds in a specific fiscal quarter, but it provides no details on how the $10 million was used.

[27] HHS requires states to submit their annual estimates for the upcoming fiscal year on a form CFS–101. For example, for fiscal year 2002, the CFS–101 was due by June 30, 2001. Because they are submitted before final appropriations have been enacted, a state might not request the full amount of funds to which it is entitled, if the final appropriation is greater than the state's initial estimate. States must submit a revised CFS–101 by June 30, 2002, to request any additional fiscal year 2002 Title IV–B funds that might be available to them once appropriations are finalized. In addition, states can request additional Title IV–B funds if other states do not use the total funds to which they are entitled.

[28] In most cases, we reviewed the final revised CFS–101 approved by HHS. For 1 state, however, we used the initial CFS–101 approved by HHS because it included planned subpart 1 expenditures that exceeded the limits for foster care and adoption assistance payments. Although the revised CFS–101 did not show that the state planned to exceed the limit, we used the initial CFS–101 to show that HHS had previously approved a spending plan that did not comply with the statutory limits.

[29] Ten of the 13 states were also cited as needing improvement in ensuring that needed services are accessible to families in all areas of the state and 9 of the 13 states were categorized as needing improvement in terms of individualizing services to meet the unique needs of individual families.

In discussing the current structure of Title IV–B, officials in all of HHS's regional offices told us that they believe states need some flexibility to use Title IV–B funds to address state-specific child welfare needs as is currently the case under subpart 1. At the same time, officials in 8 of HHS's 10 regional offices also stressed the importance of subpart 2 to ensure that states use some funds on family support services and prevention activities to help preserve families and keep children from entering foster care. Several regional offices expressed concern that, in the absence of the minimum spending requirements outlined in subpart 2, states would neglect preventive services, while using Title IV–B funds for more urgent services, such as CPS or foster care. State and local child welfare officials in one state we visited, along with officials at 2 HHS regional offices, said that states need more federal funds to provide services to prevent foster care placements, such as an increase in funds available under Title IV–B or more flexibility to use Title IV–E funds to provide services. HHS is currently developing a legislative proposal to give states more flexibility in using Title IV–E foster care funds for such preventive services.[30]

HHS's Involvement with States' Child Welfare Workforce Is Limited

HHS's primary connection to the child welfare workforce has been through partial federal reimbursement—75 percent—of states' training funds to implement educational programs for current child welfare staff and to enhance the child welfare curriculum of undergraduate and graduate social work programs to better educate and prepare potential caseworkers.[31] This funding may also be used for curriculum development, materials and books, support for current workers to obtain a social work degree, and incentives to induce entry to the child welfare field. During fiscal year 2002, 49 states received $286 million in title IV–E training reimbursements.[32] These reimbursements ranged from a low of approximately $10,400 in Alaska to a high of more than $79 million in California, with the median reimbursement approximating $2.7 million.

In addition, ACF's Children's Bureau manages six discretionary grant programs through which it funds various activities related to improvements in the child welfare system. One of these programs—the Child Welfare Training Program, authorized by Section 426 of Title IV of the Social Security Act—awards grants to public and private nonprofit institutions of higher learning to develop and improve the education, training, and resources available for child welfare service providers.[33] This is the only program of the six with a specific emphasis on staff training;[34] however, in fiscal year 2003, it received the second smallest share—8 percent—of the Children's Bureau's total discretionary funds.

According to HHS officials, HHS has no authority to require states to address caseload issues in their CFSR-related program improvement plans or to enforce any caseload standards. Furthermore, HHS officials said that states have made few requests of HHS's national resource centers for assistance with child welfare staff recruitment and retention. Although HHS officials told us that they plan to examine the CFSRs to better understand the relationship between recruitment and retention and safety and permanency outcomes across the states, the agency is still conducting these reviews and is not expected to complete them until March 2004.

HHS Offers Assistance to Help States Develop SACWIS and Improve Their Data, but States Report Ongoing Challenges with Some of HHS's Efforts

In response to some of the challenges states face in developing SACWIS and collecting and reporting child welfare data, HHS has conducted on-site reviews of information systems and provided technical assistance from a variety of sources. For example, at the time of our review, HHS had conducted on-site reviews in 26 states with operational SACWIS to ensure that the systems met all federal requirements and to offer assistance to states that faced challenges completing the development of their SACWIS. Few systems have been determined complete after an on-site re-

[30] Under this new proposal, states could voluntarily choose to receive a fixed IV–E foster care allocation, which could be used for any services provided under Titles IV–B and IV–E.

[31] As authorized under Title IV–E of the Social Security Act, the Federal Government reimburses 75 percent of states' training expenditures related to foster care and adoption services. States providing training for contracted private agency staff can receive 50 percent federal reimbursement for this purpose.

[32] Fiscal year 2002 data are the most recent data available at the time of this testimony. The District of Columbia, Massachusetts, and Puerto Rico have not participated in title IV–E reimbursements for the last three fiscal years.

[33] In fiscal year 2003, among other child welfare training project activities, HHS awarded grants to eight recipients for developing models of effective child welfare staff recruitment and retention training.

[34] Although the other discretionary grant programs fund initiatives that can involve caseworker training, caseworker training and development is not their primary focus.

view because of unresolved issues, such as not being able to build links to other state information systems or not implementing certain eligibility determination functions. To help states address some of these development challenges, the SACWIS review team provides the state with recommendations for complying with SACWIS requirements and schedules a conference call with the state officials to walk through the system's deficiencies and offer guidance on how the state can move forward. In addition, in an attempt to help states comply with the reporting standards and address some of the factors that contribute to data quality problems, HHS performs comprehensive reviews of state information systems' ability to capture AFCARS data to identify problems associated with data collection and reporting and to ensure that the information in the automated system correctly reflects children's experiences in care.

Other technical assistance is available to states in a variety of formats. HHS facilitates the sharing of information between states developing SACWIS through an automated system users' group that allows state and federal officials to exchange information, ideas, and concerns. In addition to the users' group, HHS officials sponsor a Listserv—an electronic mailing list—that allows state officials to exchange information, a monthly conference call with state information technology directors,[35] an annual technical assistance meeting, and an NCANDS state advisory group. The National Resource Center for Information Technology in Child Welfare, which opened in 1999, also provides assistance to states on SACWIS development and data issues.

HHS has also made available to states the software it uses to examine states' AFCARS and NCANDS submissions for inconsistencies and invalid data. Officials in all the states that we visited said that they regularly use this software, and an HHS official said that nearly every state has used the software at least once. HHS officials reported that these tests help them to identify some data quality errors, such as missing data, and said that they believe that, in general, data have improved in recent years. However, the officials indicated that the tests cannot pinpoint the underlying problems contributing to these errors. Furthermore, one official reported that no specific efforts have been conducted to track the individual data elements and, therefore, HHS cannot report on how data quality has changed over time.

Although the states we visited appreciated some of HHS's efforts to assist with improving state data quality, they and most states responding to our survey agreed that the assistance is not always consistent or easily accessible. The primary concerns reported by the states we visited were delays in receiving clear written guidance on defining and reporting certain data elements and the lack of state input in suggesting changes to AFCARS. Despite the written guidance available to states in the form of regulations and an online policy manual, states reported that the variation in state policies and practices makes it difficult to interpret how to apply the general guidance. As a result, states consult with HHS to ensure they are applying the regulations appropriately. However, in commenting on a draft of the July 2003 report, officials in Oklahoma told us that a common concern among the states is the lack of timely response from HHS when seeking guidance on how to report data. In commenting on a draft of the same report, HHS explained that it first refers states to its Web site for information and believes that the available guidance addresses states' concerns in most instances. In addition, the states that have had an AFCARS review experienced delays in obtaining guidance on how to proceed following the on-site review. An HHS official told us that since the review process is relatively new, the agency is still developing a process to respond to the states and recognizes that it has not been responsive to the states already reviewed. In addition, HHS is taking steps to gather feedback from states and other users of AFCARS data to determine how to improve the system to make the data more accurate and usable. As a part of these efforts, HHS has published a *Federal Register* notice soliciting comments and held focus group meetings at national conferences. The difficulties states face in receiving federal guidance and assistance, as well as the other challenges they face in reporting data, may negatively affect the reliability of the data available in AFCARS and NCANDS.

Concluding Observations

Despite its relatively small funding level compared to other funding sources for child welfare services, Title IV–B represents an important federal commitment to

[35] In commenting on a draft of the July 2003 report, HHS indicated that a Web resource is available to states interested in learning about other states' efforts to develop human services—child welfare, food stamps, Temporary Assistance to Needy Families, child care, and child support enforcement—information systems at http://www.acf.hhs.gov/nhsitrc.

states' efforts to protect children from abuse and neglect. However, HHS does not provide in-depth oversight specific to Title IV–B subpart 1. Two key issues further compound states' ability to prevent abuse and neglect. For example, given the difficulties that public and private child welfare agencies are experiencing in hiring, training, and retaining their work forces, these agencies' ability to provide services to children is threatened. In addition, states face challenges in completing their SACWIS systems and in ensuring that caseworkers input complete and accurate case data in a timely manner.

We recommended in our September 2003 report on Title IV–B that the Secretary of HHS provide the necessary guidance to ensure that HHS regional offices monitor states' use of Title IV–B subpart 1 funds for compliance with statutory restrictions on the use of these funds. We also recommended that the Secretary consider the feasibility of collecting basic data on states' use of these funds to facilitate its oversight of the program and to provide guidance to help states determine appropriate services to fund. In commenting on a draft of that report, HHS agreed with our first recommendation but noted that the statutory limitations on Title IV–B funds no longer serve a useful purpose and are incompatible with its current proposal to offer states much more flexibility in using other federal child welfare dollars. HHS disagreed with our second recommendation, stating that it believes that its level of oversight is commensurate with the scope and intent of the program and minimizes states' reporting requirements.

We recommended in our March 2003 report on child welfare worker recruitment and retention that, because of the reported impact staffing shortages and high caseloads have on the attainment of federal outcome measures, that the Secretary of HHS take actions that may help child welfare agencies address the recruitment and retention challenges they face. In commenting on a draft of that report, HHS generally agreed with our findings and concurred with our recommendation, saying that it has begun to explore the effectiveness of child welfare training programs, with an emphasis on lessons learned and best practices. However, HHS stressed that it has no authority to require states to address caseload issues in their CFSR program improvement plans or to enforce any caseload standard.

To improve the reliability of state-reported child welfare data, we recommended in our July 2003 SACWIS report that the Secretary of HHS consider, in addition to HHS's recent efforts to improve AFCARS data, ways to enhance the guidance and assistance offered to states to help them overcome the key challenges in collecting and reporting child welfare data. HHS generally agreed with our findings and, in response to our recommendation, noted that the data definitions need to be updated and revised and said it is currently in the process of revising the AFCARS regulations to further standardize the information states are to report. More recently, HHS said that it would be creating policy guidance that will delineate what will happen if a state fails to complete its SACWIS within a reasonable time frame.

Mr. Chairman, this concludes my prepared statement. I would be pleased to respond to any questions that you or other members of the Subcommittee may have.

Appendix I: Subparts 1 and 2 Expenditures

Table 1: Fiscal Year 2002 Expenditures for Subparts 1 and 2 Service Categories

	Subpart 1			Subpart 2		
Service category	Number of States	Amout of subpart 1 funding[a]	Percentage of subpart 1 funding	Number of States	Amout of subpart 2 funding[a]	Percentage of subpart 2 funding[b]
Staff positions ..	25	$70,965,578	27.6	17	$6,229,058	2.4
Administration and management	16	43,143,097	16.8	18	11,614,667	4.5
Child protective services	17	40,543,000	15.8	5	2,248,690	0.9
Foster care maintenance payments	17	27,890,783	10.8	2	647,154	0.3
Multiple responses[c]	8	25,806,347	10.0	4	3,503,585	1.4
Family support/ prevention	17	19,840,891	7.7	28	127,430,496	49.8

Table 1: Fiscal Year 2002 Expenditures for Subparts 1 and 2 Service Categories—Continued

Service category	Subpart 1			Subpart 2		
	Number of States	Amout of subpart 1 funding[a]	Percentage of subpart 1 funding	Number of States	Amout of subpart 2 funding[a]	Percentage of subpart 2 funding[b]
Counseling and mental health services	2	8,350,562	3.2	5	1,354,763	0.5
Family preservation	7	5,986,045	2.3	23	30,308,896	11.8
Adoption subsidy payments	7	4,657,546	1.8	2	737,412	0.3
Family reunification	4	2,446,570	1.0	26	23,625,973	9.2
Recruitment and training for foster/adoptive parents	9	2,260,061	0.9	16	6,828,885	2.7
Adoption support and preservation services	2	446,877	0.2	27	28,481,585	11.1
Other	11	4,817,180	1.9	15	12,795,915	5.0
Total[d]		$257,154,537	100.0		$255,807,079	100.0

Source: GAO survey.

Notes: Percentages do not always total to 100 due to rounding.

Data on subpart 1 expenditures are based on survey responses from 46 states and data on subpart 2 expenditures are based on survey responses from 44 states. While Pennsylvania responded to our survey, it did not provide expenditure data for subparts 1 or 2.

[a] When providing data for our survey, states were asked to indicate the single service category that best described the type of program funded by subparts 1 and 2. Thus, programs that fall into multiple service categories may not be fully captured. For example, one state indicated it funded a family support program, which includes some family preservation and reunification services. In addition, states may not have been consistent in categorizing services. For example, several HHS officials told us that the delineation between family support and family preservation services is not clear, so that two states providing the same services to the same types of families may report them in different categories. Inconsistencies such as these could have an effect on any measured differences among service categories.

[b] States may spend less than 20 percent of their subpart 2 funds on any of the required service categories if they have a strong rationale. Some HHS regional officials said that they approve exceptions to the 20 percent requirement if a state is spending a significant amount of nonfederal funds on a subpart 2 service category.

[c] Although states were asked to indicate the single service category that best described the type of program funded by subparts 1 and 2, several states selected multiple program categories when responding to our survey. For example, Rhode Island reported that it funded a home visitation program and indicated that this program includes family support, health, and family reunification services. Thus, the responses from states that reported multiple categories for a program are represented by this category.

[d] The aggregate dollars reported in the service categories do not match the total allocations for subparts 1 and 2 in fiscal year 2002. States have 2 years to spend their Title IV–B allocations; as a result, expenditures in fiscal year 2002 may include dollars from a state's fiscal year 2001 Title IV–B allocation, as well as its fiscal year 2002 Title IV–B allocation. Similarly, some fiscal year 2002 allocations may not have been spent until fiscal year 2003.

Chairman HERGER. Thank you. Ms. Nelson?

STATEMENT OF MARY J. NELSON, ADMINISTRATOR, DIVISION OF BEHAVIORAL, DEVELOPMENTAL, AND PROTECTIVE SERVICES FOR FAMILIES, ADULTS, AND CHILDREN, IOWA DEPARTMENT OF HUMAN SERVICES, AND PRESIDENT, NATIONAL ASSOCIATION OF PUBLIC CHILD WELFARE ADMINISTRATORS

Ms. NELSON. Good morning, Chairman Herger, and Ranking Member Cardin. My name is Mary Nelson and I serve as Iowa's Child Welfare Administrator, and President of the National Association of Public Child Welfare Administrators. Thank you for the opportunity to relate some of the challenges we face, the strategies we employ, and the goals we have set to improve outcomes for the

children and families we serve. From the time someone contacts our agency with reason to suspect that a child is abused or neglected, to well beyond case closure, no other decision looms as large as child safety. An enormous responsibility is placed in the hands of caseworkers as they make multiple decisions that have the power to change a child's life. Their judgment can determine whether a child is kept safe, or put at risk. We struggle to recruit, retain, and reward these dedicated professionals. Pay is low, work is demanding, caseloads are high, and tight budgets limit access to much-needed training and supervision. A stable and tenured workforce is critical to the work we do.

In Iowa, the number of reports of suspected child maltreatment reached an all-time high in 2001, and has declined slightly in recent years. Still, our rate of child abuse is higher than the national average, with child neglect accounting for 66 percent of our cases. The use of methamphetamines has become a central driver of Iowa's child protective caseloads. For example, in the Council Bluffs service area, almost half of the children come from homes where caretakers are involved with methamphetamines. The prevalence is even higher in some individual counties. With respect to child safety, Iowa has adopted aggressive timeframes for responding to reports of maltreatment. A report involving an immediate threat or high risk to the child receives a response within 1 hour, reports absent an immediate threat within 24 hours, and all other reports in 96 hours. Iowa investigates all reports screened for action.

We have strengthened training on intake and screening. We have implemented structured risk and safety assessment tools. We have a new 30-hour training curriculum for new foster and adoptive parents that incorporates the Adoption and Safe Families Act (ASFA, P.L. 105–89) and CFSR outcomes and expectations. However, time and budget constraints prevent us from providing training in these areas as extensively as we would like. Ongoing measurement of State performance is integral to our work. Long before the Federal CFSR, many States developed quality assurance systems to evaluate, monitor, and improve practice. States identify conditions that both enhance and limit the ability to achieve good outcomes. Some States have embraced structured decisionmaking that has reduced recidivism—reabuse or neglect—and that has lessened time in care. In Iowa, we have established a framework for quality assurance, placing a strong focus on child safety, permanency, and well-being, which incorporates data from our SACWIS and in-depth reviews of individual cases.

As you know, States are engaged in measuring child welfare system performance through the CFSR and PIP. Iowa's CFSR found that we met two of seven outcomes, and three of seven systemic factors. While we were pleased with some of these results, we acknowledge that we have a great deal of work to do to improve performance in the areas where we did not achieve substantial conformity. The challenge is great. State child welfare workers are engaged in ongoing work with families, as well as the oversight and improvement of our agencies. With respect to the Federal role in oversight, it has been greatly enhanced through the CFSR and PIP. All States are engaged in this effort to set baselines so that we can

measure progress. Beyond setting goals, States need the tools to achieve them. That is why we believe that Congress must reform title IV–E funding. It is too limited in its definition, and no longer in step with the work of our agencies. It cannot be used to support the most basic responsibilities of our agencies, such as investigating charges of abuse and neglect; nor can it be used to fund the initiatives contained in our PIP, such as expanding services to prevent placement.

The American Public Human Services Association (APHSA) has long supported the de-linking of title IV–E eligibility from AFDC, and expanded waiver authority—and continues to do so. We know Congress is exploring new funding options, as well. We believe Congress should consider a policy change that would permit States to use Federal dollars for any purpose set forth in the PIP. Given the rigor of the approval process, the Federal Government would have all the tools necessary to ensure that State initiatives relate directly to specific outcomes. In the coming months, APHSA plans to further refine this idea. We believe that it is not enough to identify goals and initiatives in a PIP. Resources must also be available. Thank you for the opportunity to testify, and I would be happy to answer any questions you have.

[The prepared statement of Ms. Nelson follows:]

Statement of Mary J. Nelson, Administrator, Division of Behavioral, Developmental, and Protective Services for Families, Adults, and Children, Iowa Department of Human Services, and President, National Association of Public Child Welfare Administrators

INTRODUCTION

Good morning, Chairman Herger and Members of the Subcommittee. I am Mary Nelson, administrator of the Division of Behavioral, Developmental and Protective Services for the Iowa Department of Human Services. In this position, I have responsibility for program and policy in child protection, foster care, permanency, and adoptions as well as child care regulation, juvenile institutions, delinquency programs, dependent adult protection, mental health and developmental disability services for adults and children, family planning, and teen pregnancy prevention. I am also the current president of the National Association of Public Child Welfare Administrators (NAPCWA), an affiliate of the American Public Human Services Association (APHSA), and am here today in that capacity. APHSA is a nonprofit, bipartisan organization representing state and local human service professionals for over 70 years. NAPCWA, created as an affiliate in 1983, works to enhance and improve public policy and administration of services for children, youth, and families. As the only organization devoted solely to representing administrators of state and local public child welfare agencies, NAPCWA brings an informed view of the problems facing families today to the forefront of child welfare policy.

I appreciate the opportunity to testify before this subcommittee about the review of federal and state oversight of child welfare programs. With over 29 years of experience with the Iowa Department of Human Services, beginning as a caseworker, I have seen the many changes the child welfare system has undergone. My testimony today will focus on the strategies being utilized in Iowa to address the needs of children and families involved with the child welfare system, particularly the role that the states, the Federal Government and communities can play with respect to the safety of vulnerable children we serve.

THE CURRENT CHILD WELFARE SYSTEM

Challenges

The challenge is great. In 2001, state child protective services agencies received an estimated 2.7 million referrals alleging child abuse and neglect. An estimated 903,000 were found to be victims. The majority, about 517,000 or 57.2 percent, were the victims of neglect. Two percent were the victims of medical neglect, 6.8 percent were the victims of psychological abuse, 9.6 percent were the victims of sexual abuse, and 18.5 percent were the victims of physical abuse. As of September 2001,

542,000 children were in foster care and 126,000 children were awaiting adoption. For families in need of support and children in need of protection, states are pursuing solutions in many areas and at multiple levels simultaneously. Public child welfare incorporates a broad array of core services including prevention, family support, early intervention, family preservation, child protection, foster care, adoption, guardianship, post-permanency services, and independent living.

Safety Strategies and System Collaborations

Core Work of the Child Welfare System

Child safety is a central focus for America's child welfare systems. From the time a mandated reporter, a family member, a concerned neighbor, or any other person believes he or she has reason to suspect that a child is being maltreated, through well beyond case closure, the focus on child safety is unwavering. No other decision rests more heavily on a child welfare professional than the safety decision; therefore, states have developed strategies to help guide this decision process.

When an allegation of abuse or neglect comes in, caseworkers make broad-based assessments that identify current safety issues, future risks of maltreatment, and the family's strengths and needs to determine the status of the case. Caseworkers must be skillful in considering how serious the abuse or neglect is, how likely it is to occur again, and what underlying causes led to the incident. The majority of cases that initially come to the attention of the system do not pose serious harm to the child. In cases where the degree of harm is relatively minor, a caseworker can and should look at other factors, such as the vulnerability of the child and the protective capacities of the family, to make the best judgment about the most appropriate safety response. In more serious cases, the safety response will include restriction of access to the child either by placing the child out of the home or restricting access of a maltreating caretaker. However, there may be other options if the caseworker assesses that the risk to the child can be mitigated by alternative responses such as intensive case management, mental health services, substance abuse treatment, parenting skills, and other interventions.

The safety of children is dependent on good decision-making by child welfare professionals, judges, service providers, and the community. Decision-makers in child welfare cases must contend with the fact that what they decide to do or not do will directly impact the lives of children and families. A community member who calls in a report of suspected abuse may hesitate because of concerns for what may happen to the family. Child protection workers who remove children from dangerous homes must often immediately face a child's grief at the loss of parents and the child's need for a stable and nurturing family. Given the statutory requirement for states to make "reasonable efforts" to prevent the child's removal from his or her home, caseworkers who have determined that a child can stay home may second guess if they have made the right decision. The need to continually balance potentially conflicting goals often places a premium on skilled decision-making and a need for a skilled workforce.

Need for a Skilled Workforce

Child welfare professionals courageously work in one of the most challenging professions in this country. The jobs performed by caseworkers have become more complicated as the challenges faced by families in the child welfare system have become increasingly complex. An enormous responsibility is placed in the hands of caseworkers as they are expected to perform multiple interventions and make judgments that have the power to change a child's life. Their findings can determine whether a child is kept safe or put at risk.

Child welfare systems throughout the country struggle to recruit, retain, and reward these dedicated professionals. In a survey of public agency administrators, APHSA found that the number one issue in preventable turnover was that "workloads are too high, demanding, or both." Systems, workers, and families face many barriers and constraints as they work to achieve safety, success, and positive outcomes. Economic and budgetary challenges, changes in the political landscape, complex social factors, and complicated demands can impact a child welfare system's ability to contain workloads.

Child welfare supervisors play a vital role in providing support, skill building, and professional development to caseworkers. Supervisors are coaches, mentors, and evaluators responsible for the quality of services children and families receive. A supported, skilled, and stable workforce is crucial in child welfare practice given the tremendous impact caseworkers can have on helping vulnerable children and families overcome difficult life circumstances. Training, workload, risk of violence, supervision, and turnover present great challenges to providing the needed workforce supports in this field. However, the level of motivation and the level of dedication

among the child welfare workforce are assets that can contribute to meaningful and sustained improvements. A key to improving the workload for caseworkers is to ensure access to other human service systems that can help provide the services needed by children and families.

Cross-system Collaborations

The child welfare system cannot work in isolation from other critical human services programs. The system has increasingly been contending with crosscutting challenges impacting the lives of children and families including high rates of domestic violence, unmet medical and mental health needs, substance abuse, and poverty. Child protection is often the final safety net for many of the children and families who weren't "caught" in time by other social service systems. Addressing these issues is often integral to the ability of a family to care properly for its children.

Although many child welfare systems have begun to partner effectively with other sectors to address the multiple needs of children and families, there remain obstacles to truly connecting the supports these families need. For instance, an inpatient substance abuse treatment facility may not have the capacity to accommodate a family, causing a mother to have to lose physical custody while she is receiving treatment to keep her child. Even that is assuming that the parent can get into a treatment facility in a reasonable amount of time. Many states struggle with substance abuse treatment waiting lists that are often long due to insufficient resources and facilities. Once children are in the system, parental substance abuse is a significant hurdle in their path out of the system—a hurdle that requires drug or alcohol treatment for the parent in addition to other services for the family. The nature of drug and alcohol addiction means a parent's recovery can take a considerable amount of time. Other problems these parents face, such as mental illness and homelessness, further complicate these cases. Foster care cases that involve parental substance abuse therefore place an additional strain on a child welfare system already overburdened by the sheer number of foster care cases.

Numerous families that come to the attention of child protection have unmet mental health needs. Private health insurance limitations, an inadequate supply of services, and limited resources have all impacted the access to mental health services for both children and parents. A recent General Accounting Office study highlighted the critical importance of access to mental health services for children within and outside the child welfare system. These factors can cause a family to run up against the timelines set in the Adoption and Safe Families Act (ASFA), under which states must seek, with limited exceptions, termination of parental rights whenever a child has been in foster care for 15 of the previous 22 months. We have seen cases where the lack of adequate housing can lead to overcrowded conditions that cause high levels of stress and can ultimately lead to the maltreatment of a child. These examples serve to highlight how systems must work together to better address the varied needs of families.

I can share with the Committee the Iowa story to more clearly illustrate how a system goes about its core work in safety, addresses the need for a skilled workforce, and develops cross-system collaborations.

IOWA'S CHILD WELFARE STORY

Challenges

The number of reports of suspected child maltreatment in Iowa reached an all-time high in 2001, and have subsequently declined slightly and leveled off, as have the number of child abuse victims. Iowa's per-thousand rate of child abuse is higher than national averages. Child neglect is by far the most common category, accounting for 66 percent of all substantiated cases.

Safety Strategies and System Collaborations

Core Work of the Iowa Child Welfare System

Addressing child protective concerns resulting from parental use and/or manufacture of methamphetamines has become a significant part of the work of the Iowa Department of Human Services (DHS) and its community partners. Recent studies of Iowa's child protective caseloads in the southwest region, for example, have revealed that one-third of child protective investigations conducted involved methamphetamines; one in four cases referred to child protection for assessment were referred specifically due to parental meth involvement; and 49 percent, almost half, of the children in ongoing caseloads in the Council Bluffs Service Area come from homes where caretakers have been or are involved with meth. The prevalence is even higher in some counties.

The Iowa DHS has been continually working to address these and other challenges to child safety and well-being. Iowa has aggressive timeframes for responding

to reports of maltreatment—a report involving an immediate threat or high risk to the child receives a response within 1 hour; reports not involving an immediate threat, but in which the alleged responsible person has access to the child, receive a response within 24 hours; and reports not involving immediate threat or access to the child by the perpetrator receive a response within 96 hours. Iowa does not triage child abuse reports and investigates all reports that are screened in. We only screen out if a report doesn't meet the three criteria of potential abuse—not a child, not a caretaker, or the allegation would not constitute the definition of abuse even if it were true. We've recently strengthened training on intake to build more consistency across the state and to emphasize a focus on screening cases in unless a report clearly does not meet the criteria of potential abuse.

We have also developed an extensive manual for staff on issues to consider in assessing child safety. We have recently implemented use of standardized risk and safety assessment tools, as well as a family assessment that focuses on family strengths and needs. We have developed strong training programs for new child protective assessment workers, although these training programs have been negatively impacted by budget cuts in the last few years—which have reduced available training and caused higher caseloads resulting in less time for staff to take training classes.

The focus on child safety extends beyond child proactive assessments and in-home services. The Department has recently implemented a new 30-hour training curriculum for new foster and adoptive parents that integrates ASFA and the Child and Family Services Reviews (CFSR) outcomes and expectations into the training. To the extent possible, we want to encourage and allow existing foster parents to go through this training as well. However, the lack of resources, money for actual training, and time prevents us from doing this as extensively as we would like. The Department also conducts record checks before foster family licensure and adoptive family approval—including criminal history, child abuse, and sex offender registry. We've also built a strong partnership with the Iowa Foster and Adoptive Parent Association (IFAPA) to provide a range of supports to foster and adoptive parents. For example, we have a contract with IFAPA to do our recruitment and retention project, as well as to provide other supports such as peer liaisons to new and experienced foster and adoptive parents, training, and on-going support groups. Iowa's CFSR Program Improvement Plan (PIP) also includes new activities for IFAPA—including training foster parents on preventing child abuse, contacting new foster families after the first placement to help provide support to the family, and providing post-adoptive support to families when their adoption is finalized.

Need for a Skilled Workforce

The Department uses private agencies extensively to supervise and support foster parents. Due to our own high caseloads, we contract with private agencies to ensure face-to-face visits with children and families. We've also implemented policy and training on safety planning throughout our involvement with a child and family, and on safe case closure. The policy requires safety assessments, for example, when considering unsupervised visits, immediately before returning a child home, and immediately before closing a service case.

Cross-system Collaborations

Iowa's child welfare system has endeavored to build working relationships at both the state and community level with partners in domestic violence, substance abuse, the courts, the local community, law enforcement, mental health, and education. For example, we are implementing Rural Domestic Violence and Child Maltreatment Response Teams. Through these teams, six agencies are working to develop state protocols for collaboration among domestic violence, child protection, law enforcement, county attorneys, and others. We're also working with seven communities to reduce domestic violence and child victimization by creating Family Violence Response Teams whose goal is to ensure safety, justice, stability, and well-being for families.

In response to the increasing challenge of substance abuse, particularly methamphetamines, Iowa has taken several steps. For example, we've created meth specialist positions in our eight Service Areas. These staff provide consultation for our staff and the community in addressing meth abuse and working with families with a history of meth use, and provide case management for a limited caseload of families involved with meth. Iowa has also initiated Drug Endangered Children (DEC) projects in three communities with heavy reported meth production—including our most populous county, a rural county, and a mid-size county. These projects bring law enforcement, child protection workers, public health officials, medical practitioners, and prosecutors together to assist children who are endangered by

being exposed to meth manufacture or use in their environment. Projects focus on removing children from the dangerous living conditions in a drug lab, holding the caretakers accountable for the endangerment with prosecution, and medical and developmental assessment to address the child's needs.

The judicial system is a fundamental partner in child welfare. Iowa has an active judiciary that takes a strong interest. Our juvenile judges are knowledgeable about ASFA and the CFSR outcomes and processes, and take seriously their role in child protection and permanency. Juvenile judges and the director of our court improvement project were actively involved in developing our CFSR self-assessment and our PIP. Two juvenile judges actually participated in the on-site review as peer reviewers. Our PIP includes several strategies that our court improvement project will implement to strengthen the court's role in improving outcomes for children and families.

Community Partnership for Protecting Children

Finally, Iowa has been a Community Partnership for Protecting Children (CPPC) site through the Edna McConnell Clark Foundation since 1997. In Iowa's Community Partnership sites, community members are engaged to help find solutions in child welfare cases. The sites have organized a network of neighborhood and community supports. The partnership has created a network of agencies, neighborhood groups, and families to support the overall mission of the community child protection. Core members of networks include schools, faith institutions, mental health professionals and healthcare providers, substance abuse and domestic violence programs, police, child care providers, parent groups, and of course, the public child protective services (CPS) agency.

The child welfare system in Iowa has begun to adopt new policies, practices, roles, and responsibilities to support Community Partnerships. In order to take a leadership role in the partnership, DHS has changed the way it responds to reports of maltreatment, while still fulfilling its legal mandate to protect children from abuse and neglect. This process has meant teaching staff different skills for working with families. If the child's immediate safety needs are met, but the family is still in need of help, then the worker connects parents to the services and resources they may need by first conducting a thorough assessment. DHS has acted as a "safety consultant" to other members of the partnership network—assisting teachers, pediatricians, family support workers, and residents in determining what they can contribute to child safety in the community, and how to effectively intervene when a child is at risk of harm. DHS has also incorporated the key principles of the Community Partnership in child welfare policy and practice.

The community partnership model has worked well for families in Iowa. The following examples help to highlight the benefits we've seen from this model.

In one CPPC site, the community has recruited and trained Neighborhood Partners—local residents who organize events for parents and children and help families who may be isolated within the neighborhoods to take full advantage of local resources. They've also located family support workers at two of the schools in the targeted neighborhoods to assist families in identifying needed services. In another site, the community developed circles of support for at-risk families, as well as family partners for individual families. In this particular site, the community has developed its CPPC work in conjunction with a project called Beyond Welfare that is focused on helping families achieve self-sufficiency goals.

We had a case in which a mother with two children, a newborn and a two-year old toddler, was brought to the attention of the child protection agency. A caseworker visited her home to find out about the specific allegation—a bruise on the two-year old. Although the family appeared troubled, the worker was unable to connect the bruise to abuse.

The worker could have left with the hope that the family doesn't reappear to the system on more serious abuse charges. But instead, the caseworker conducted a thorough assessment of the family. The assessment revealed a young single parent who was unsure of how to care for her children and was drinking too much alcohol. She was isolated from her neighbors, friends, and family and had no contact with the father of the children.

After the assessment, the caseworker and mother developed an "individualized action plan". The plan targeted the family's strengths as well as their problems, and brought together family members and friends with service providers in a team meeting. As a result of the meeting, the mother agreed to join a support group for young parents and attend AA meetings; the caseworker went to the first AA meeting with her. A neighbor agreed to visit every few days and help out with occasional meals and errands. The toddler was enrolled in day care. A family support worker helped

the mother tackle long-term challenges such as finding ongoing medical care for her family and getting into a job training program.

Quality Assurance Systems

States constantly work to improve and move their child welfare systems forward, as exemplified by Iowa's efforts noted above. To assure that results are being achieved, it's critical for systems to continually assess their progress. States have a strong history of addressing and assessing quality within their own child welfare systems so that these systems will better serve children and families. State data has been a key piece in assessing quality services. Quality assurance systems are employed to evaluate, monitor, and improve practice. State quality assurance systems have helped to identify conditions of frontline practice that can lead to good results—such as quality of the relationship between the caseworker and the family, good matching of needs and supports, good assessments, range of services available, resilient children, and families able to communicate and willing to ask for help. States have also been able to identify conditions that limited the ability to achieve good outcomes including caseload size, prevalence of crisis patterns, reluctance of family to be involved with services, dual diagnosis caregivers, lack of available treatment alternatives, and parental substance abuse.

Some states, such as Michigan, have found through quality improvement outcome evaluations that tools like structured decision-making have led to a higher rate of permanency in 15 months, lower rates of subsequent harm to children returned home, less time in care, and lower recidivism rates. Here in Iowa, we have established a framework for a quality assurance and quality improvement system that places a strong focus on child safety, permanency, and well-being. Key components include:

- provision and use of case-specific data to allow system-wide results, trend data, and best practices to be shared to assist in decision making;
- use of in-depth quality service reviews (using a case review protocol similar to that used in the on-site CFSR review) to provide feedback on strengths and areas needing improvement related to child and family outcomes (especially safety, stability and permanency) and related to performance of the child welfare system (e.g., family engagement, service planning, service coordination); and
- support for the use of evidence-based practice.

A number of states have proactively incorporated federal performance indicators within their state quality assurance systems and performance-based budgeting systems to align state and federal accountability standards.

Child and Family Services Reviews and Program Improvement Plans

Many of the federal performance indicators that states are aligning with their own accountability standards come from the Child and Family Services Reviews. Currently, states are engaged in measuring child welfare system performance through the CFSR and subsequent program improvement plans (PIP) based on the findings of the review. The CFSR process has brought the focus on core outcomes and helped to create a common platform of dialogue among states. States have been diligently working on the CFSR and PIPs and are willing to be accountable for their efforts on behalf of children and families in need of support and services.

According to an Administration for Children and Families summary of the 2001 and 2002 CFSR final reports of 32 states, performance was stronger on the safety outcomes than in the permanency and well-being outcomes. State performance on the indicators within the safety outcomes shows that 47 percent of states achieved a strength rating for timeliness of initiating investigations, 41 percent achieved a strength rating for reducing repeat maltreatment, 50 percent achieved a strength rating for services to protect children and prevent removal, and 34 percent achieve a strength rating for reducing risk of harm to children. As of 2003, 48 states have had their system reviewed to assess baseline data on measures of safety, permanency, and child well-being; however, similar performance rating data are not yet available.

Despite some of the positive results, states recognize that they need to continue to make strong efforts to address areas needing improvement. In striving to meet the national standards, states must be able to also support good practice. The compatibility of data across states is a serious concern, and states feel strongly that the baseline for each state from this first round of CFSRs should drive measurement of improvement rather than national standards. Several differences in state definitions and data contribute to the lack of compatibility across states. Comparing results of a very rural state with a largely urban state can prove misleading. States

often have varying definitions of abuse and neglect as well as different standards for substantiating abuse and neglect. The very nature of the child welfare population, where some states include certain children in their mental health and juvenile justice programs and other states do not, is another source of variation that contributes to the lack of comparability across states.

For states, the CFSRs and PIPs are consistent with their commitment to improving outcomes and increasing accountability in the public child welfare system. APHSA and states have had a long-standing interest in moving the public child welfare system from a process-driven system to an outcomes-focused system, so that its success is measured by positive outcomes for children. States are committed to quality services for children and families and accountability for achieving outcomes. States support the outcomes-focused approach to federal child and family service reviews and the use of both qualitative and quantitative information to judge performance. However, reviews must serve as an accurate and fair measure of state performance. National standards on which performance is determined must be based on accurate data so that the fairness of these reviews is not compromised.

Iowa's Child and Family Services Review

A key finding of the Iowa CFSR was that Iowa is in substantial conformity with two of the seven outcomes and three of the seven systemic factors. With regard to the outcomes, Iowa achieved substantial conformity with Safety Outcome 2 (Children are safely maintained in their homes whenever possible and appropriate) and Well Being Outcome 2 (Children receive appropriate services to meet their educational needs). The CFSR determined that DHS is effective in addressing the risk of harm to children either through placement in foster care or through providing adequate services to maintain children safely in their own homes. Most stakeholders commenting during the onsite CFSR indicated that there is a large array of preventive and home-based services available to prevent children's removal from their homes or re-entry into foster care after reunification. Stakeholders also commented that DHS routinely conducts risk assessments and establishes safety plans for children. The CFSR also determined that DHS makes concerted efforts to address the educational needs of children in the child welfare agency caseloads and is consistently effective in reunifying children with their families in a timely manner.

With regard to the systemic factors, Iowa was determined to be in substantial conformity with the factors of statewide information system; agency responsiveness to the community; and foster and adoptive parent licensing, recruitment, and retention. The state did not achieve substantial conformity with the systemic factors of case review system, training, and service array. Information from the Statewide Assessment and the stakeholder interviews conducted during the onsite CFSR attributed many of the current difficulties experienced by DHS to recent budget cuts in all areas of child welfare agency functioning. In recent years, funds available for services, training, quality assurance, and maintenance of the management information system have been substantially reduced.

Iowa's Program Improvement Plan

Iowa's program improvement plan, based on the child and family services review, was submitted on January 20, 2004. The goals and strategies from the PIP address a variety of safety outcomes.

Iowa's goals to address Safety Outcome 1 (Children are, first and foremost, protected from abuse and neglect) include:

- Increasing the timeliness of initiating responses to reports of child abuse/neglect. *Due to Iowa's aggressive timeframes for responding to child abuse and neglect reports, our CFSR final report found that Iowa was timely in establishing face-to-face contact with children and families in accordance with state-established timeframes when reports involved immediate threat or high risk, but was less consistent in meeting timeframes when reports involved moderate or low risk.*
- Decreasing recurrence of maltreatment. *Iowa did not meet the national standard for repeat maltreatment, although case reviews in the CFSR on-site review did not identify extensive repeat maltreatment and reviewers rated this item a strength in 92 percent of cases reviewed.*
- Decreasing the incidence of abuse and neglect in foster care.

Iowa's PIP strategies to address the safety outcomes include:

- Enhancement of functional assessment protocols to better identify critical underlying issues;
- Providing staff with guidelines for service planning around different issues such as neglect cases, domestic violence, and substance abuse;

- Expansion of Community Partnerships for Protecting Children statewide by July 1, 2007;
- Expansion of family team meetings;
- Provision of training and technical assistance on substance abuse and child welfare;
- Provision of additional support to new foster parents through IFAPA, as well as training on preventing abuse in family foster care;
- Review of cases of abuse in residential treatment on a quarterly basis; and
- Development and monitoring of performance data on all three indicators and review quarterly with Service Area Managers (SAMs).

THE FEDERAL ROLE

The Federal Government and states have begun working collaboratively through the child and family services reviews and program improvement plans to focus on key outcomes. Through this process, there is a real opportunity for the Federal Government to better support and help enhance the capabilities of state child welfare systems to achieve these outcomes.

Limitations of IV–E Funding

- **Nationally, fewer than 60 percent of the children in the child welfare system are served with IV–E federal dollars, and the number of children is decreasing over time.** As you are well aware, states are required to "look back" to old AFDC rules in effect on July 16, 1996, to determine Title IV–E eligibility. Not only is this administratively burdensome, but the law does not allow the income standards to grow with inflation. As a result, eligibility for federal reimbursement has decreased over time, leading to a continued loss of federal funding to states.
- **Federal IV–E funding does not support the most basic work of our agencies, particularly with respect to safety.** For example, the investigation stage, where an agency determines the efficacy of the charge of abuse or neglect—the first point of contact an agency has with vulnerable children and families—cannot be supported with federal IV–E dollars. Furthermore, federal funding is disproportionately directed to funding out-of-home care—the very part of the system agencies seek to minimize to achieve greater permanence for children. Federal IV–E entitlement cannot be used to **fund front-end services, reunification, or post-adoption services** for children and families in the system.
- The **health and mental health** of children in the child welfare system is a key outcome measure in the CFSR. States have helped many children and families in the system by providing wraparound services, such as comprehensive needs assessments, individual service plans, service plan development and review, referrals for services, service coordination and monitoring, case management, rehabilitation service coordination, rehabilitation links and aftercare, and service management through targeted case management (TCM). Because federal IV–E funds cannot be used for these purposes, states have funded these services with Medicaid money for decades. APHSA and our members are very concerned about recent federal actions to limit states' ability to use Medicaid funds for TCM services for children in the foster care system.
- **Despite the Federal Government's renewed emphasis on accountability and program improvement through the Child and Family Services Review process, IV–E funds cannot be used to achieve many of the mutually agreed-upon goals in the Program Improvement Plans.** It is not enough to know what goals need to be achieved to help children and families in the child welfare system; the resources must also be available. For example, in Iowa's PIP we are proposing to undertake the following initiatives to improve the safety outcomes for the children and families we serve, but federal IV–E funding cannot be used for the following:
  - One of the areas Iowa needs to work on is reducing repeat maltreatment. IV–E funding, however, cannot be used for individualized "wraparound" services to address the underlying causes of maltreatment based on engaging the family and implementing a good assessment—only foster care.
  - Iowa also wants to move to paying providers for results—again, IV–E can only be used to pay for maintenance. And, if the result the provider achieves is a shorter length of stay or foster care prevention, we lose IV–E funding, and the state and provider have fewer resources available to achieve results.
  - Iowa is proposing to expand our Community Partnership initiative and to increase wrap-around flexible funds to provide services based on individual family needs, and to allow children who need services traditionally provided in

residential care to remain in their communities. Neither of these will qualify for IV–E funding because they are not focused on foster care.

- Iowa wants to include private agency staff, who deliver many of the child welfare services to children and families in Iowa, in our training. IV–E match for training private agency staff, however, is lower than for training our own staff, meaning fewer dollars available for this critical training.

Recommendations

- NAPCWA and the states have welcomed the opportunity to participate in the Children's Bureau workgroup to make improvements to the outcomes and how they're measured based on the first round of CFSRs. Some promising preliminary suggestions include **augmenting AFCARS data with state data** to paint a more complete picture; **increasing the capacity of HHS regional offices and resource centers** to better assist states; **incorporating commitments from other systems that impact child welfare** such as mental health and substance abuse; and **supporting development and execution of PIP goals.**
- We support **breaking the link between IV–E eligibility** and the long-since-repealed **AFDC** program, so that the Federal Government can share in the support of all children in the child welfare system, regardless of income.
- We support **broadening the use of IV–E funding** to support investigations, prevention and post-permanency services, and other services to vulnerable children and families.
- We support the continued use of Medicaid funds for **targeted case management,** health, and mental health services to children and families in the system.
- We support the reform and continuation of state child welfare waiver authority contained in the pending welfare reform legislation, H.R. 4, that would provide states with a mechanism to use federal funding more flexibly over time within cost neutrality constraints.
- However, in addition to the aforementioned waiver authority, we set forth another idea for your consideration. Recognizing the constraints of growing federal and state budget deficits, APHSA and our NAPCWA members want to be a part of a reasonable and cost effective approach to afford states greater flexibility in the use of federal IV–E funds. We are currently developing a proposal that would **allow states to use IV–E funding for any purpose approved under their Program Improvement Plan.** As you are aware, following the CFSR, states are required to review the findings and develop a PIP that specifies actions the state will undertake in an effort to improve the outcomes. The PIP is a negotiation between states and the Federal Government, concluding with a formal approval by the Federal Government. States are asked to implement the PIP, and the Federal Government will undertake a subsequent CFSR to evaluate the extent to which the state has achieved improvement or attained the desired outcomes set forth in its plan.

  Because the PIP is formally approved by the Federal Government, we believe Congress should consider a policy change that would permit states to use a federal IV–E dollar for any purpose set forth in the PIP and during the time period set forth in the PIP. Given the rigor of the federal approval process, the Federal Government would have all the tools necessary to ensure that the purposes set forth in the PIP relate directly to the outcomes a state seeks to achieve.

CONCLUSION

Child welfare systems are meeting the ongoing challenges of the many needs of children and families. States are working to ensure quality assurance efforts which allow them to monitor and improve their systems on an on-going basis. As was highlighted in the work in Iowa, states are also building effective alliances with other crucial human services systems and are pursuing promising new interventions. States are thoughtfully engaged in the program improvement plan process through the CFSR and are energized by the prospects of achieving much-sought-after outcomes for children and families. In the pursuit of these goals, NAPCWA and APHSA welcome the opportunity to work with the Administration to make meaningful progress.

NAPCWA's vision for child welfare is a society where children are free from abuse and neglect and live in safe, stable, permanent families—where children and families have needed supports and can help themselves. When children are at risk and come to the attention of the public agency, the agency can provide services and supports to them and their families to mitigate their problems and prevent them from being removed from their families and communities. When children must come into

care, the agency can address children and family needs expeditiously and enable a safe reunification or, where that is not possible, find an alternative permanent placement expeditiously, while assuring their well-being in the interim. This is a vision where the safety and protection of children is the shared responsibility of all parts of the human service agency and the larger community. It is a vision where the child welfare system has the capacity to improve outcomes for children and families, and the Federal Government and states are equal partners in serving all children in all parts of the system.

Thank you for the opportunity to testify. I would be pleased to respond to any questions you may have.

Chairman HERGER. Thank you, Ms. Nelson. William Bell to testify.

STATEMENT OF WILLIAM C. BELL, COMMISSIONER, ADMINISTRATION FOR CHILDREN'S SERVICES, NEW YORK, NEW YORK

Mr. BELL. Good morning, Chairman Herger, and Ranking Member Cardin. Thank you for inviting me to testify before you today. As recently as 1995, New York City may have been asked to testify about its failings in child welfare rather than its successes. My testimony here today is intended to serve as tangible evidence that it is possible to turn around a failing child welfare system. The most remarkable success of the past 8 years in New York City has been achieved over the past 2 years, where in spite of the enormous impact of a budget deficit of approximately $6 billion in each of the past 2 fiscal years, New York City's child welfare system has improved. New York City has experienced record lows in the number of children in foster care, currently approximately 22,000, and the number of admissions to foster care, approximately 6,600 placements last year, 49 percent less than in 1997.

The success of New York City's transformation suggests that the actions that we have taken are not merely optional steps for change, but that they may constitute necessary elements in the blueprint for any child welfare reform. Those steps included, committing the political will necessary to sustain change, appointing competent executive and mid-level leadership, developing a clear plan of action, investing in frontline supervision, investing in frontline staff, developing and demanding strong cross-system partnerships, clearly articulating principles and standards to guide the work, creating and enforcing a data-driven accountability system, publicly reporting on outcomes for children, and giving the system time to improve. Successful reform has occurred in New York City because the full support of the Mayor is placed squarely behind this effort. The success or failure of the child welfare system is owned as much by the leader of the city as it is by the Child Welfare Commissioner and the caseworkers. If a tragedy occurs, it is met by an aggressive effort to understand and to improve, not by the sacrificial firing of the Commissioner and the caseworkers responsible for the case.

We began our reform effort by investing in our workforce and improving the quality of frontline supervision. Staff cannot be expected to adequately fulfill their responsibilities if they are not trained properly, if they do not receive appropriate supervision, or if they are constantly afraid that their decisions will not be sup-

ported by the agency. Since the creation of ACS in 1996, we have made extraordinary progress in improving the lives of New York City's vulnerable children and their families. Since 1996, the ACS has completed over 27,000 adoptions, with the number of adoptions rising in each of the past 2 fiscal years. We have successfully reduced the child protective caseloads from an average of 26 cases per worker in 1996, to approximately 10.7 cases per worker in 2003. The overall foster care population is less than half of what it was just a decade ago. In 1990, New York City comprised 13 percent of the national foster care census. Today, we represent just 5 percent of the national census. Moreover, ACS has accounted for almost 30 percent of the total national decline in foster care since 1999.

Data-driven accountability has been a great part of this success. In 1999, ACS created the Evaluation and Quality Improvement Protocol (EQUIP), which gives ACS the ability to evaluate the quality of services being provided to children and families by looking at process, outcomes, and quality measures. After 3 years of EQUIP, ACS just recently introduced a performance-based contracting system, which now, for the first time, pays agencies based on the quality of services that they are providing to children, not based on the number of days that children remain in their organizations. As my words here today suggest, we believe that improvement to the child welfare system is achievable with the right ingredients. New York City's ACS is a testament to this belief. Nevertheless, even with our tremendous progress, we have much more to do if we are going to achieve the level of excellence required in order to help New York City's children become productive New York City adults.

We believe that the Federal Government can assist in this effort by increasing Federal funding, increasing the flexibility that is allowed in how that funding is utilized, de-linking title IV–E funding from the AFDC look back, and allowing for title IV–E funding to be used in funding the permanency option of guardianship for children. We also believe that additional services are required in terms of mental health and substance abuse services for families involved in the child welfare system. Last, we believe that a new system that focuses on after-care services for young people who have emancipated from foster care is not only necessary, but absolutely required to reduce the stream of young people who leave foster care and end up in the penal system, in the homeless system, or on the AFDC or TANF system. Thank you very much.

[The prepared statement of Mr. Bell follows:]

Statement of William C. Bell, Commissioner, Administration for Children's Services, New York, New York

Good morning, Chairman Herger and members of the House Committee on Ways and Means, Subcommittee on Human Resources. I am William Bell, Commissioner of the NYC Administration for Children's Services (ACS). I am here today on behalf of Mayor Michael R. Bloomberg and New York City. While my testimony today is presented only in my capacity as ACS Commissioner, I am pleased to acknowledge that I am also a member of the Pew Commission on Children in Foster Care and sit on the Executive Committee of the National Association of Public Child Welfare Administrators (NAPCWA).

Thank you for inviting me here today to speak about the accomplishments of New York City's child welfare system. As recently as 1995, New York City may have

been asked to testify about its failings in child welfare. I am pleased to say that after more than eight years of reform, I can today talk about the remarkable transformation of a child welfare system with many successes and positive outcomes.

My testimony here today is also intended to serve as tangible evidence that it is possible to turn around a failing child welfare system and, as we have done in New York City, become recognized for numerous successes rather than failures.

The most remarkable success of the past eight years has been achieved under the Bloomberg Administration. In spite of the enormous impact of record deficits of nearly $6 Billion in each of the past two fiscal years, New York City's child welfare system has experienced record lows in the number of children in foster care (approximately 22,300, the lowest since 1987) and admissions into foster care (approximately 6,500 placements in 2003—49% fewer than 1997). These achievements occurred even though both the number of reports of abuse/neglect (55,000) and the number of children involved (85,000) have remained consistent each year.

History of the Administration for Children's Services (ACS)

In response to several tragic child fatalities in New York City in the mid-1990s, including the death of a six year-old named Elisa Izquierdo, who was known to New York City's Child Welfare Administration, former Mayor Rudolph Guiliani focused his attention on improving the quality and accountability of the City's child welfare system. The devastation of child abuse—and the failure of the child protection system to protect Elisa and other vulnerable children—shocked New Yorkers and the nation. A quote in the *New York Times* captured accurately that which should be the position of the entire country, "All of us have some responsibility. We're all accountable." By not simply assigning blame and accepting accountability and responsibility, New York City took the first of many important steps in creating one of the strongest child welfare systems in the country.

The Mayor began a series of steps that we in New York City have come to recognize as a blueprint for improvement for any system that is failing in its mission of child protection. The success of NYC's transformation suggests that these are not merely optional steps but that they constitute necessary elements for child welfare reform for any system:

1. Commit the political will necessary to sustain change;
2. Appoint competent executive and mid-level leadership;
3. Develop a clear plan of action;
4. Invest in frontline supervision;
5. Invest in frontline staff;
6. Develop and demand strong cross systems partnerships;
7. Clearly articulate principles and standards to guide the work;
8. Create and enforce a data driven accountability system;
9. Publicly report on outcomes for children; and
10. Give the system time to improve.

Necessary Elements for Reform

Success in New York City was not easy. Nor did it happen overnight. Reform is possible for even the most troubled agencies, but first there must be the political will and support for the agency and for change. Successful reform occurred in New York City because the full support of the Mayor was placed behind the effort. There was a public declaration that the success or failure of the child welfare agency would be shouldered by the leader of the city; not by the firing of the commissioner and caseworker following the next tragedy.

The structure and leadership of the Administration for Children's Services (ACS) reflected this political will. Nicholas Scoppetta, former deputy mayor and a well-respected public servant, was appointed as the agency's first Commissioner. The Administration for Children's Services was also separated from the larger Human Resources Agency and elevated to become a Cabinet level agency with the sole charge of protecting New York City's children.

Strong leadership is also necessary to implement reform. Commissioner Scoppetta's first action was to put together a strong management team with extensive experience and dedication to reforming the system. I was fortunate to be a part of this team as Deputy Commissioner for Child Protective Services. Once the team was in place, we thoroughly assessed the system, sought assistance and advice from stakeholders and experts in the field and began to develop a clear plan of action.

We began with investing in our workforce and improving the quality of the frontline supervision and casework staff. Staff could not be expected to adequately fulfill their responsibilities if they were not trained properly, did not receive appropriate supervision, or if they were constantly afraid that their decisions would not be supported by the agency. At ACS, we have successfully changed this culture by insti-

tuting strong leadership throughout the agency, improving the quality of staff, providing staff with the resources necessary to do their jobs, and supporting staff, when appropriate, rather than using front-line staff as scapegoats when something went wrong. These changes have dramatically improved ACS's ability to protect children.

One of the most important elements of reform is time. Change does not occur overnight. In New York City there were years of poor practice, bad publicity, fear and inadequate resources to overcome. As the past eight years have demonstrated, however, success is possible with support and time.

Some people believe that lawsuits are the only impetus to change. I do not. Lawsuits may be necessary to force an entrenched system to the point of beginning the change process; however, in and of themselves, lawsuits cannot complete the long arduous work of systems reform.

Lawsuits often redirect limited agency resources into defending against the lawsuit and becoming distracted from the primary objective of protecting children. Lawsuits also reinforce the public's distrust of child protective agencies, which can be very harmful to children. Change is possible without legal action and court oversight. It is possible with political will and support, increased resources, strong leadership, workforce investment, a clear plan of action, clearly articulated principles and standards, accountability, partnerships, ongoing advice from experts in the field, and time.

Major Reform and Achievements of ACS

Since its creation in 1996, ACS has made extraordinary progress in improving the lives of New York City's vulnerable children and their families. Since taking office in January 2002, Mayor Bloomberg has continuously demonstrated his commitment to children and families by fully supporting ACS and its programs, as is seen in the significant accomplishments the agency has continued to achieve.

Front-Line Practice

One of the first areas of focus for the new ACS was the point of entry into the child welfare system: child protective investigations. ACS made a commitment to ensure that all staff responsible for investigating allegations of abuse or neglect had the resources and support necessary to thoroughly perform their duties. The goal was to ensure that every child that came to the attention of ACS would be protected from harm and only be removed from their home if necessary to prevent harm to the child.

In the first years of ACS, we took several actions to improve the capacity of the front-line staff to conduct adequate risk-assessments and provide appropriate assistance and intervention to protect children and stabilize families. The entry-level standards for hiring child protective workers were strengthened to require increased education in social work or a related field. Compensation for the staff was also increased in an effort to attract and retain higher quality staff. Merit-based raises were instituted to encourage staff to succeed and to reduce turnover. ACS also provided enhanced training, creating a more intense and comprehensive curriculum for all new staff, as well as advanced curriculums for more experienced staff.

In addition to increasing the quality of the staff, ACS also needed to increase the number of child protective investigators. When ACS was first created, caseloads were unreasonably high, which prevented workers from having the time or ability to fully investigate each case to ensure children were safe. Through aggressive hiring of quality staff, quality supervision, and enhanced accountability, we have successfully reduced the caseloads from approximately 26 per worker at the creation of ACS, to 10.7 per worker in 2003.

Successfully improving the quality of practice in child protective investigations also required the availability of additional services to protect children and stabilize families without requiring a removal from the child's home. Over the past seven years, ACS has dramatically increased the array and availability of preventive services to New York City's families. While families could always request these services without being part of a child protective investigation, through the new training and higher standards of front-line staff, preventive services are now more widely used by child protective workers to allow children to remain at home safely with their families.

In 2001, a critical milestone in ACS history was passed when, for the first time, more children were served by in-home preventive services than were in foster care. This profound shift within the child welfare system in New York City is further evidence that ACS has successfully improved the quality of case practice, training, and supervision for the frontline child protective specialists making decisions to keep families together whenever safe and appropriate.

Permanency and Adoption

Since 1996, ACS has completed almost 27,000 adoptions, with the number of adoptions rising the past two fiscal years. As a result, more and more children for whom a return to a parent or caretaker is not appropriate or possible are living with permanent, caring families. This increase in the number of adoptions has occurred during a time when the number of children eligible for adoption has decreased with the foster care census. In fiscal year 1998, the number of children for whom parental rights had been terminated was 8,772. In fiscal year 2003, this number dropped to 4,194. This means that since 1998, ACS has increased the number of adoptions completed as a percentage of the total number of children eligible for adoption from approximately 45% to 66.6% in fiscal year 2003.

One reason for this success is the partnerships that have been built with all of the entities involved in the adoption process, including: New York State Chief Judge Judith Kaye, the New York State Office of Children and Family Services (OCFS), and the New York City Family Court. In May 2003, this partnership was solidified through "Adoption Now", an initiative that seeks to address systemic barriers to timely adoptions.

As part of ACS's work towards permanency for all children in foster care, we have instituted several new initiatives that have been specifically designed to address the needs of different populations in foster care. Nationwide, the child welfare system has historically failed to adequately meet the needs of adolescents in foster care. Currently, more than half of New York City's foster care population is over the age of twelve.

This shift in population over the past several years has resulted in a focus on the special needs of adolescents. Under the Bloomberg Administration, ACS designed and implemented the "Families for Teens" initiative to change the culture of child welfare practice to ensure that all teens in foster care are provided with the care, skills, resources and positive relationships necessary to succeed as adults. We are breaking the myth that teens are not able to be adopted and we are changing practice to make sure that everyone understands and believes that teens not only need families, but that it is possible for them to have families and to leave foster care with a loving, stable support system in place.

In an effort to move adolescents out of foster care or into lower levels of care, ACS has been working with teens living in group care settings, their caseworkers, and their law guardians to identify members of their extended family with whom they could be reunited and to find adoptive families eager to parent a teenager. ACS now requires a concurrent, family-based plan for every teen at risk of aging out of foster care to safeguard against releasing young adults to the myth of "independent" living.

To build positive relationships in the lives of foster youth, we are also actively working to expand mentoring opportunities for youth in foster care by working with various reputable mentoring organizations in New York City.

Teens are not the only population that requires specialized services. Infants and toddlers have their own special developmental, medical and emotional needs. In close collaboration with New York State's Permanent Judicial Commission on Justice for Children, ACS has worked to educate its staff about infants' unique needs and to boost the enrollment of young foster children in its Head Start and Early Intervention programs. In addition, ACS was recently awarded a large HHS grant that will allow us to work closely with a network of service providers in the Bedford-Stuyvesant community to improve the outcomes for our youngest and most vulnerable children.

Foster Care Census

As a result of improved investigations and risk-assessments, increased use of in-home preventive services, implementation of family conferencing and an increased focus on permanency for all youth in foster care, New York City's foster care population has decreased dramatically. In 2003, New York City's foster care population reached its lowest level since 1987. In November 2003, the foster care population in New York City was approximately 22,300, a decline of almost 21% over the past two years. This includes a projected yearly decline of 12.2% in 2003 alone—the largest yearly percentage decrease on record in New York City. Overall, the foster care population is now less than half of what it was a decade ago.

The decrease in New York City's foster care census has primarily driven the overall decrease in New York State and has played a significant role in the reduction of the nation's foster care population. While ACS was achieving a historic decline in the New York City foster care census, the nation's foster care census was rising to a high of 567,000 in 1999. And while the national foster care census has fallen only slightly since 1999, New York City's decline has continued at a remarkable

pace. As a result, New York City's share of the national foster care census has fallen from 13% in 1990 to only 5% of the most recent national figures. Moreover, ACS has accounted for almost 30% of the total national decline since 1999.

Neighborhood Based Services

A major theme in the reform efforts at ACS has been the creation and enhancement of a neighborhood based services (NBS) approach through which children who enter foster care are placed in their own neighborhoods, keeping them close to family and in their own school. This reduces trauma to children in care and facilitates family visits, where appropriate. NBS promotes permanency by providing children with preventive services, foster care services, health care, and other support services in the community where they resided before removal from their home. As part of the NBS approach, the contracted not-for-profit foster care agencies, which provide over 90% of the foster care services in New York City, were assigned to serve specific community districts in New York City, based upon an extensive assessment of need in every community in the City.

As part of the NBS approach, ACS has established 25 *Neighborhood Networks* in the City's high-needs communities. These networks connect neighborhood organizations, schools, service providers and faith-based entities to support families in their own communities better and leverage resources in the present fiscally constrained environment.

In 2002, ACS identified that over 60% of the children in foster care came from 18 out of 59 community districts in the City. Therefore, ACS has embarked upon a strategy to target these Top 18 neighborhoods. Named "Community Partnership to Strengthen Families," the goal of this initiative is to target specific geographic areas with the highest involvement with the child welfare system, and then engage these communities in the process of collecting and analyzing the child welfare data within their area.

After analyzing the data, ACS and its community partners develop a community specific, multi-system strategy for keeping families together safely with services and reducing the need for placement into foster care. In one of the first communities to begin this process, Central Harlem, we have found that 50% of the Central Harlem children that are in foster care come from just 6 out of Central Harlem's 31 census tracts. Using this data to help stabilize families, we have now focused our efforts on the specific needs of the 24 blocks within these 6 census tracts.

Data and Accountability

The data being used in our neighborhood work is only one way we have incorporated data into our daily practices and reform efforts. Accurate and comprehensive data allows ACS to hold itself and its contractors accountable for their performance in achieving positive outcomes for children and complying with mandated activities. To this end, ACS created the Evaluation and Quality Improvement Protocol (EQUIP), which gives ACS the ability to evaluate the quality of services being provided to children and families by looking at process, outcomes and quality measures. EQUIP assesses the contracted agencies' compliance with statutory and regulatory requirements, measures the quality of service in areas such as child safety, education, and service provision, and evaluates a set of child outcome indicators, including rate of reunification and adoption and the success in independent living after discharge from care.

First used in 2000 for foster care services, this qualitative method discerns the meaningful differences in the quality of the foster care programs, allowing ACS to rank programs based upon quality of services. This information also provides ACS with the information necessary to develop empirically-based corrective action plans and to reward high quality performance by its contract agencies. And after three successful years of using the foster boarding home EQUIP, ACS has now developed a revolutionary performance based payment system that is tied directly to the quality of services provided by the contract agencies.

In December 2003, ACS announced a performance-based rate payment system for foster boarding home services that rewards agencies for quality of services rather than the number of days a child stays in a program. The goal of this performance based contracting system is to ensure that all children have the opportunity to receive the same level of care, regardless of which agency is responsible for their placement. This new system will also move all agencies towards the highest level of performance and quality outcomes for the children in their care.

New Innovative Programs

A number of improvements and new programs have been implemented in New York City over the past eight years. One of these includes the use of Clinical Consultation Teams, which consist of four professionals: a Domestic Violence Specialist,

a Substance Abuse Specialist, a Mental Health Specialist, and a Team Coordinator. Twelve of these teams are placed in child protective field offices throughout the City and all provide three types of services: case-specific consultation, office-based training, and assistance with referrals for community-based resources. ACS staff can request consultations from each specialist individually, or any combination thereof, depending upon the needs present in a case. Over the past year, there have been over 8,000 consultations. Over the next year Medical Specialists will be added to these teams.

In 2002, the New York State legislature increased the age of eligibility for Persons in Need of Supervision (PINS) to 17 years of age, from 15 years of age. It was expected that this change would increase the number of PINS cases by 28% in the first year. To address this and to help stabilize families, ACS developed and implemented the Family Assessment Program (FAP), in collaboration with the New York City Department of Probation, to work with families who might otherwise seek a PINS petition in Family Court for youth who are beyond their parent's or caretaker's lawful control.

FAP offers crisis intervention, screening, and referrals to connect families to preventive and community-based services before a PINS petition is necessary—hopefully obviating the need for a PINS petition or placement into foster care. After only six months of partial implementation, FAP turned a projected 28% increase in PINS cases for fiscal year 2003 into a 41% decline. Similarly, the number of PINS foster care placements has declined significantly, and virtually no recidivism into Family Court has occurred.

Ongoing and Future Goals of ACS

While ACS has implemented enormous change and seen many positive results, we still have much more to do to ensure all children who come into contact with our system remain safe, are provided with the highest quality of care and have their emotional, physical and mental needs met. ACS will continue to focus on the safety and well-being of all children in our system, and will expand our work in communities to empower them to ensure the safety and well-being of their children. The following is a list of our highest priorities for the next two years:

1. Continue to focus on "Families for Teens", a New York City initiative to ensure that all adolescents in foster care are provided with the skills, resources and positive relationships necessary to succeed as adults. Several strategies will be employed to achieve this result:

   - ACS will continue the work already underway to reduce the number of teenagers living in congregate care settings. Our current goal is to have 600 fewer youth placed in group care by July 2005.
   - We will double the number of foster youth who are engaged in positive mentoring relationships. Through our work with Mentoring USA, the Mentoring Partnership of New York and other mentoring programs, ACS is striving to make mentoring available to all youth in foster care.
   - ACS will release and implement the ACS Adolescent Services Plan. This comprehensive plan outlines the strategies and programs that ACS will provide to adolescents in foster care to prepare them for successful adult lives. This plan will detail policy and best practices for all staff and contract agencies to use as a guide when working with adolescents.

2. ACS strongly believes that the system's responsibility to foster youth should not end immediately when the child is discharged from foster care. We are committed to working towards the establishment an after-care system in New York City for youth who have left the foster care system—whether by being reunified with their families, adopted or emancipated from foster care.

   We believe that these services should be available on demand for the purpose of averting crisis in the lives of adults between the ages of 18 and 30 who were former foster children. We believe that the availability of these services could significantly reduce the number of former foster children who enter the criminal justice system, who become homeless, or who end up on public assistance.

   Funding is not readily available from the Federal or State governments for this purpose, but research indicates that young people require additional supports in the years after they leave foster care. While many youth who leave care have stability at the time they are discharged, life can be unpredictable and the child welfare system—in collaboration with other government systems—must develop plans to assist these youth in the years after they leave foster care. Over the next two years, ACS is committed to exploring ways to improve the services available to young people who have been in foster care.

ACS will work with Federal, State and City agencies, as well as private entities, to seek new sources of funding for these services. We will also establish partnerships and collaborations with external organizations to develop a comprehensive after-care system for youth who leave foster care. Services to be provided could include referrals and assistance in the following areas: housing, employment and education, finances, health and mental health, child care, and legal.

3. ACS has a goal of achieving 5,000 adoptions by the end of 2005. ACS will reduce the number of children in foster care in New York City to less than 20,000. Since January 2002, there has been a 21% decline in the total foster care population in New York City. Over the next 2 years ACS will continue to see the population decline, while also ensuring the safety of the City's children by:

- Continuing to provide an array of preventive services that allow children to remain safely with their families.
- Continuing to expand the provision of quality training and supervisory support to front-line child protective staff, while also sustaining manageable caseloads, to ensure that accurate and thorough safety assessments are conducted.
- Continuing the use of Family Team Conferencing and enhancing the effectiveness and family engagement at all Family Team Conferences and Service Plan Reviews.
- Reviewing and restructuring ACS's case management functions to be more focused on permanency for all children in foster care.
- Continuing work in high need communities to understand the issues affecting each specific community and expand appropriate community supports for families in need of assistance. The goal is to provide families with an opportunity to seek help before reaching a crisis point and possibly prevent the need for out of home placement.

How the Federal Government Can Help Child Welfare Systems

1. *Federal financing flexibility and increased funding are needed to enhance resources for services and achieve improved outcomes for children.*

The Federal Government has clearly articulated the desired outcomes for child welfare: children's safety, permanency and well-being. In New York City, we have embraced these outcomes and have made them central to our efforts in reforming child welfare.

If we as a Nation are to be successful in achieving the kind of child welfare system envisioned, we must take a serious look at the financing structure at the federal, state and local levels of government. The Adoption and Safe Families Act (ASFA) has done much to change the expectations for the child welfare system, but the financing structure of 1980 remains today and is out of step with ASFA and the work that needs to be done to achieve those outcomes. The bulk of federal child welfare funding is directed to out-of-home care, with IV–E only covering care and maintenance, and not the services—prevention, permanency and protection—that actually produce positive outcomes and assure that children are safe and have permanent families.

Federal regulations clearly state that allowable costs under IV–E do not include the costs of social services provided to the child, the child's family or foster family that provide counseling or treatment to ameliorate or remedy personal problems, behaviors or home conditions. Without the resources to provide services for and resolve the very issues that created the need for foster care placement, it is very difficult to reduce the foster care census and increase safety, stability and permanency for children. The resources must follow the outcomes, and fiscal incentives, rather than penalties, must be the driver of improvement.

We believe that increased Federal financing flexibility and funding are needed in order to enhance resources for prevention and services. We have accomplished sweeping system changes and improved outcomes for children and families, despite the challenges imposed by a State block grant for child welfare services, and with the lion's share of the needed investments undertaken with local dollars.

New York City has been experiencing enormous fiscal challenges since 2001, requiring all City agencies to reduce expenditures. At the same time, Mayor Bloomberg has made it clear that he will protect children and has done everything possible to ensure that ACS maintains its ability to protect and care for

children; however, the City now bears a large portion of what should be the State's financial responsibility.

Based on New York City's experience operating a child welfare system under the Family and Children's Services Block Grant over the last eight years, we believe that a block grant or capped allocation of state and federal foster care dollars raises a number of questions that must be seriously considered. Will a block grant ensure adequate levels of funding to states and localities? Will there be equitable distribution of limited resources? Will states be required to make equitable distributions? Will there be a cost shift to states and localities? Will a safety net for vulnerable children and families be assured as needs change? Any proposals to increase much needed flexibility must be sure not to hamper the ability of local or state child welfare agencies' to protect, support and achieve improved outcomes for our most vulnerable children and families nor undo accomplishments like those that we have worked so hard to realize in New York City.

2. *Reform must consider large urban jurisdictions.*

Federal proposals to address the financing dilemma must take into account the different structures of child welfare service delivery from state to state and among localities within states, especially a county-administered service system like New York. One size does not fit all.

Many large urban jurisdictions, such as New York City, Los Angeles County and Cook County (Chicago), account for 35%–70% of their respective state's foster care population, yet each is dependent upon the state to accurately represent their interests on the federal level. If federal approaches to reform deal only with the states, the operations of child welfare systems in urban areas will be dictated by smaller states and jurisdictions, which operate under different structures and face different issues. Under current federal policy, large urban jurisdictions are currently prohibited from applying for a IV–E waiver. They are dependent upon the will of the state, which may not represent its needs or interests. New York City would like to obtain a waiver to provide subsidized kinship guardianship similar to that which occurred in the State of Illinois under former Child Welfare Director, Jess McDonald, but we are currently excluded from taking advantage of this important means of innovation and flexibility and are dependent upon New York State to take such action.

3. *Title IV–E eligibility must be de-linked from AFDC*

Title IV–E should be amended to eliminate the requirement that links the eligibility of a child for foster care maintenance payments to the child's eligibility for AFDC as it existed prior to July 16, 1996. Prior to 1996, a child's eligibility for Title IV–E foster care payments was linked to the child's eligibility for the Title IV–A (Aid to Families with Dependent Children or AFDC) program. In 1996, when Congress passed PRWORA (the welfare reform act), the AFDC program was ended and replaced by TANF.

However, Congress, after much debate concerning how to determine eligibility for Title IV–E after the end of AFDC, chose to retain that prior program's eligibility criteria as a condition of eligibility under the Title IV–E program. Thus, state agencies are required to continue to make eligibility determinations pursuant to the provisions of a program that no longer exists, other than for the purpose of making these eligibility determinations. More than seven years after the enactment of PRWORA, it is time to acknowledge that it is no longer appropriate to make eligibility determinations in this way.

This provision was included in the welfare reform act as a placeholder and temporary solution. It is critical that Congress act now to address this situation before a continuing loss of revenue impacts states' ability to serve children and families. While AFDC has been replaced by TANF, we do not believe that TANF should automatically become the new eligibility standard. There must be more discussion and further analysis on what elements should be used to determine eligibility for IV–E funding.

4. *Title IV–E Should Support Subsidized Kinship Guardianship*

In order to increase permanency and the well-being of children, the Federal Government needs to support assistance for guardianship, **a permanency option provided under ASFA, but not funded.**

Kinship foster care placements often last longer than non-kinship foster care placements because some birth parents feel less pressure to seek the return of their children and many kinship foster parents are reluctant to push for the termination of the parental rights of their own family member and for the

adoption of their own family member's child. The result is that these children remain in foster care and ACS and other social service districts retain the "custody" of such children, which requires the continuation of casework services and performance of administrative functions. Meanwhile, the children are deprived of permanency. More than five years of IV–E waiver experience demonstrates subsidized guardianship as a viable permanency option and all jurisdictions should have the opportunity to provide subsidized guardianship.

5. *Federal training funding should support private providers and the entire continuum of child welfare services*

Although ACS has made considerable progress in upgrading and training child protective staff, there is a continued need to strengthen the training of the staff of our contracted providers who oversee more than 90% of children in foster care and those who provide preventive services to families. We urge the Federal Government to support training more comprehensively, which would include providing the same enhanced 75 percent federal match rate for contract agency workers and recognizing that, in the child welfare system today, services are regularly and largely contracted out to not-for-profit providers and demand the same high quality and outcome achievement. Federal training dollars should also support the entire service continuum of child welfare, not just training for foster care, but also training for protection, prevention and after care, if we want quality services that lead to safety, permanency and well-being.

6. *Parents and children need increased mental health, medical and substance abuse services*

Increased funding for mental health, medical and substance abuse treatment services to address parents' and children's needs in the child welfare system is critical to ensuring safety, permanency and well-being, as we know that these issues affect many of the children and families we serve and can be barriers to the outcomes we seek to achieve. Adequately funded mental health and development disability systems are needed to meet "the needs of children who inappropriately end up in the child welfare system.

Additionally, if we are to achieve the permanency timeframes contained in ASFA, the parents of children in foster care must be designated as one of the priority recipients of federally funded substance abuse services.

7. *Adolescents Need Enhanced Support Services*

Adolescents continue to be an increasing proportion of the children we serve in foster care. The special needs and challenges of the foster system's young adult population require an increased federal investment in transitional and other support services for teens to improve their prospects as adults.

One recent study suggests a very bleak picture for young adults emancipating from the foster care system. The study indicates that within 12 to 18 months of aging out of foster care, 50 percent are unemployed; and 37 percent have not finished high school. It adds that in this same period of time, 19 percent of the young women have given birth; 33 percent are receiving some form of public assistance; and 27 percent of males and 10 of females have been incarcerated or have had some encounter with the criminal justice system. The lack of enough resources directed toward young adults in care now is costing us—both figuratively and literally—a higher price than ever.

Federal funding for independent living services and education and training vouchers through the Chafee Foster Care Independence program has been an important source of federal support for this population. We propose the provision of additional federal funding for after care services so youth who leave foster care—through reunification, adoption or emancipation—have access to a safety net and assistance to ensure their safety and stability during the vulnerable years following foster care.

Improvements to the child welfare system are achievable, with the right ingredients. New York City's Administration for Children's Services is a testament to this. Nevertheless, even with our tremendous progress, we have much more work to do if we are to achieve the level of excellence desired and required. Federal resources and flexibility, with accountability, are critical ingredients to maintaining and expanding reform efforts.

Thank you again for your time and consideration of these critical issues.

Chairman HERGER. Thank you very much, Mr. Bell, for your testimony. Now, Mr. Wayne Stevenson to testify.

STATEMENT OF WAYNE T. STEVENSON, DEPUTY SECRETARY, OFFICE OF CHILDREN, YOUTH, AND FAMILIES, PENNSYLVANIA DEPARTMENT OF PUBLIC WELFARE, HARRISBURG, PENNSYLVANIA

Mr. STEVENSON. Thank you, Mr. Chairman. I would like to thank the Subcommittee for providing me with an opportunity to testify at this hearing, and to review the Federal oversight of child welfare programs. With regard to oversight, I would like to commend HHS for the comprehensive look it is taking in implementing the CFSR process. It is truly a catalyst for change, and it is moving States toward continuous improvement, so that we can reach positive outcomes for the children and families we serve. The Administration for Children and Families, I think, has done a tremendous job in doing that in an intelligent and professional manner. The way they have implemented this on the road, and on the streets in the States, has allowed several byproducts to emerge. One is the broad stakeholder involvement in the child welfare system, bringing all of the parties together at the table as we do the self-assessments and go through the review process. Second, because it is focused on practice, it has energized the field—we see great movement in the field, at this point, in terms of making changes.

The second point I would make is that keeping children safe is a responsibility of the larger community, and that collaboration is critical. The child-serving systems need to work more closely together. This includes mental health services, substance abuse services, domestic violence services, intensive in-home family preservation services, and a range of other family services. These services should be available to all children and to all families who need them. As States move toward the framework, we need continued help from the Federal Government. First, it would be beneficial if all Federal offices were working under the same common framework, so that more collaboration would be possible, and that service delivery could be more effective. It is essential that all Federal agencies with oversight responsibilities aim for the common shared outcomes and performance measures that child welfare is using.

In Pennsylvania, we have a county-administered, State-supervised child welfare system. We cannot, and do not, ask counties to collaborate across disciplines at the local level without also asking those same changes of ourselves, and providing the leadership to do it. The second area where States need Federal support is in funding, particularly for the PIPs, so that we can achieve success, and so not all of the funding attaches to those PIPs. Thirdly, the Federal Government can assist States by providing a stable funding source for child welfare that adequately funds the fullest array of needed services. We have title IV–B, title IV–E, and TANF; they are a patchwork of funding streams. title IV–E, however, is inadequate, in terms of allowing States the ability to reach all of the children, because of the eligibility requirements, and it is inadequate in terms of funding the fullest array of services that these children and families need. It does need to be expanded.

Funding for title IV–B is wholly inadequate, even with the new commitment. Like many States where title IV–B allocation is insufficient, Pennsylvania relies heavily on the TANF block grant to fund child welfare intervention services, as well as, and more importantly, primary and secondary prevention services that are not allowed under title IV–E. This is a critical point, and one that I hope you will hear closely. Absent a stable, secure funding source for prevention and in-home services, we have relied on TANF. The situation forces States to choose between providing quality early learning programs and family self-sufficiency programs, and funding those programs that ensure child safety and by preventing abuse and neglect. Oversight and accountability can identify where improvements are needed, and where we need to target our resources and technical assistance to improve outcomes. The missing component is a stable and secure funding stream to assure the achievement of safety, permanency, and well-being for children and their families. Supporting families and protecting children is a collective responsibility that requires maximum efforts from families, from communities, from States, from Federal Government, and from our business partners. By working together and pooling our resources, we can ensure positive outcomes for our children, and a healthy society for our citizens. Thank you.

[The prepared statement of Mr. Stevenson follows:]

Statement of Wayne T. Stevenson, Deputy Secretary, Office of Children, Youth, and Families, Pennsylvania Department of Public Welfare, Harrisburg, Pennsylvania

My name is Wayne Stevenson, and I am the Deputy Secretary for the Office of Children, Youth and Families (OCYF) in the Pennsylvania Department of Public Welfare. I would like to thank the Subcommittee for providing me with the opportunity to testify at this hearing to review federal and state oversight of child welfare programs.

The overall goal of Pennsylvania's child welfare system is to ensure that our children grow up in safe, healthy and permanent homes and develop into competent citizens who contribute to the community. To achieve this goal, the Office of Children, Youth and Families, Bureau of County Children and Youth Programs, has developed programs aimed at preventing child abuse and neglect, protecting children when abuse occurs and finding permanent homes for children when it is not possible for them to be reunited with their birth parents.

In regard to federal oversight, I would first like to commend the U.S. Department of Health and Human Services (HHS) for the comprehensive look it is taking through the Child and Family Service Review (CFSR) process. These reviews are serving as catalysts for change. CFSR focuses on State performance with regard to the safety, permanency, and well-being of children and families who come into contact with the public child welfare system. The overarching goal is to promote continuous improvement in programs, policies, and services that will result in positive outcomes for these children and families.

Keeping children safe is a responsibility of the larger community, not just the child welfare agency. Collaboration within child serving systems must be available and accessible if children and their families who come into contact with the child welfare agency are to be kept safe. This includes mental health treatment, substance abuse treatment, and domestic violence services as well as intensive, in-home family preservation services and a range of other child and family services. However, this type of response system requires that children and families have access (financially and physically) to the necessary services.

As states continue to move toward an outcomes framework, they will continue to need help from the Federal Government. First and foremost, it would be beneficial if all federal offices were working under a common framework. Since all human services are interrelated, it is essential that all federal agencies with oversight responsibilities aim for common, shared outcomes.

In Pennsylvania, we have a county-administered and state-supervised child welfare system. We are not asking counties to collaborate across disciplines at the local level, without also making changes and providing the leadership needed at the state level.Therefore, just as we need to model the behavior at the state level for our counties, we are asking the Federal Government to be our model.

One of Pennsylvania's most recent initiatives—our Systems of Care Project—highlights this need for collective goals and cross-system collaboration across all child-serving systems. Pennsylvania is funding this project through a system of care grant that we received last year from HHS. Specifically, this project is helping us to better serve children with behavioral health needs who are also involved with the child welfare or juvenile justice systems. After all, we know all too well that many children entering these systems have behavioral health needs that go unmet.

The systems of care model promotes integration by requiring all child-serving systems to develop an individualized service plan that meets all of the needs of the child and his or her family—physical, emotional, social and educational. This concept of integrated case management under the authority of a single, integrated plan of care is one Pennsylvania strongly supports.

Another area where states need federal support is funding to implement the Program Improvement Plan, or PIP, that is required by the CFSR. Unfortunately, since no additional federal dollars are attached to the PIP mandate, my state—like all others—must find a way to pay for critical prevention and earlier intervention services, particularly since those services are not allowable under the Title IV–E program. In Pennsylvania, the estimated cost of our PIP was nearly $70 million, and the proposed improvements would certainly enhance the safety, permanency and well-being of our children and families. To that end, states need the Federal Government to invest sufficiently in these efforts, which they prescribe.

Another way the Federal Government can assist states is by providing a stable funding source for child welfare that adequately funds the required services. Currently there are three primary funding sources for child welfare: Title IV–B, Title IV–E and TANF. Pennsylvania's Title IV–B allocation is approximately $25 million while our Title IV–E expenditures will exceed $400 million and TANF expenditures will be nearly $295 million for the upcoming state fiscal year.

The Title IV–E program provides funds to States to assist with: the costs of foster care maintenance for eligible children; administrative costs to manage the program; and training for staff, for foster parents and for private agency staff. The purpose of the program is to help States provide proper care for children who need placement outside their homes, in a foster family home or an institution. Title IV–E is an entitlement program, and this means children have a right to the services it funds and we firmly believe that all child welfare funding should be an entitlement and that states should be able to fund the necessary services for all children who enter their doors regardless of the financial situation of the family.

Therefore, unless the current financing structure is changed, states will not be able to move the child welfare system towards an outcome-based accountability system. While Title IV–E is the largest funding stream it is also very restrictive in that it can only be used for eligible children. The pool of eligible children continues to shrink as a result of the eligibility criteria that have a link to the now non-existent AFDC guidelines. Additionally, the eligibility is reliant on the willingness of courts, over which the child welfare agency has no authority, to address required child welfare issues in their rulings. While we acknowledge that Congress is looking at this flexibility issue and appreciate its efforts, we must make it clear that we do not support the capping or block granting of IV–E funds.

The Title IV–B program helps State public welfare agencies improve their child welfare services with the goal of keeping families together. These services are primarily aimed at preventing the risk of abuse and promoting nurturing families; assisting families at risk of having a child removed from their home; promoting the timely return of a child to his/her home; and if returning home is not an option, placement of a child in a permanent setting with services that support the family.

Like many other states, Pennsylvania relies heavily on the Temporary Assistance for Needy Families (TANF) Block Grant to fund child welfare initiatives. The TANF program was established to provide assistance to needy families so that children can be cared for in their own homes; to reduce dependency by promoting job preparation, work and marriage; to prevent out-of-wedlock pregnancies; and to encourage the formation and maintenance of two-parent families. Many states, Pennsylvania included, have been able to utilize TANF funds to support child welfare services.

One program we are replicating in Pennsylvania with TANF funds is the very successful Nurse-Family Partnership Program, a national program with positive evidence-based results in which nurses visit the homes of first time, low-income preg-

nant mothers with high risk factors and provide support for positive birthing experiences and parenting skills.

Absent a stable secure funding source for prevention and in home services, we have relied on TANF funding. This situation forces states to choose between funding quality early learning programs or funding those programs that ensure child safety. We want to invest in our children by intervening earlier before their problems escalate and become harder to manage and more costly. The more we can invest in services that prevent child abuse and neglect, the better able we will be to advance child well-being and healthy child development.

Oversight and accountability can identify where improvements are needed and where we need to target our resources and technical assistance to improve outcomes. The missing component is stable and secure funding to assure the achievement of safety, permanency, and well-being for children and their families.

Supporting families and protecting children is a collective responsibility that includes maximum efforts from families, communities, states, Federal Government, and other business partners. By working together and pooling our resources we can ensure positive outcomes for our children and a healthy society for our citizens.

Chairman HERGER. Thank you, Mr. Stevenson. Now, Mr. Bill Stanton to testify.

STATEMENT OF BILL STANTON, DIRECTOR, DEPENDENT CHILDREN'S SERVICES DIVISION, ADMINISTRATIVE OFFICE OF THE COURTS, PHOENIX, ARIZONA, AND PRESIDENT, NATIONAL ASSOCIATION OF FOSTER CARE REVIEWERS

Mr. STANTON. Mr. Chairman, Members of the Subcommittee, I am honored to have been asked to appear before you today and testify about the citizen foster care review boards, and the impact that they have on ensuring safety, permanency, and well-being for children. Removing a child from a home and terminating parental rights is one of the most powerful uses of our government's authority. Since this decision is so severe, it calls for extraordinary checks and balances. The foster care review board provides that needed balance. Foster care review boards began in South Carolina in the mid-seventies. Review boards consist of citizens who volunteer their time to review the cases of children who have been removed from their homes. Volunteers meet each month to review the events of these children's lives, and make recommendations to enhance the child safety, permanency, and well-being. Long after judges have rotated off the bench and caseworkers have moved on, in many cases, the most consistent presence in the child's life is the review board. They bring to the table their life experience, community standards, and a belief that their involvement can make a difference.

The fact is, citizen involvement has made a significant difference, not only in the lives of individual children, but in the systems charged with the responsibility of their care. Let me give you an example of a child from Arizona. Joe was a 14-year-old young man who had been in foster care for approximately 1 year. The caseworker reported to the review board that the child's father was deceased. While this information was in the file, it had apparently never been verified. When the review board received the case to review, they sent notices of the upcoming review to the last known address of the father. It was soon determined that not only was the father alive, but he wanted to be reunited with his son.

The review board volunteers' work doesn't end when they leave the review. Volunteers actively advocate for system changes. They identify problems during the review process, and then they go out and do something about it. One example of this came in Oregon. The review board conducted a study of the use of the Family Group Decision Making program, and found that the process was being used in only 30 percent of the cases. The program wrote and advocated for legislation mandating the inclusion of families in case review development, and as a result, Family Group Decision Making is a standard practice in almost all child welfare cases in Oregon. In Arizona, a review board was instrumental in revamping the dependency court process. Through their active advocacy, legislation was passed to set strict timeframes in which the court hearings were to be held. In addition, review boards have worked with the Arizona State Supreme Court to pass a mandate that every new judge rotating onto the dependency bench must attend an accredited dependency training program.

Now, there are times when the volunteers realize that the children may have some needs that the agency and government cannot provide. When children are placed in foster care and want to take piano lessons or go to football camp, additional funds will likely not be available. Review board Members in Arizona came together and formed the Arizona Friends of Foster Care Foundation, an organization dedicated to providing the extra things that many children would have to do without. Foster care review boards are an effective way to provide oversight as children go through the foster care system. The problem, however, is that there are not enough review programs, and that many of the programs that do exist face serious financial crises. For example, Montana discontinued its review program last year due to cuts in funding. Florida has seen two of its programs close due to cutbacks in funding. Last year, Utah's review program funding was cut in half. The National Association of Foster Care Reviewers has attempted to assist States in developing review programs. In collaboration with HHS, we developed review guidelines and training materials. These guidelines give communities the flexibility to develop review boards that meet their needs, while following national standards.

In 1997, Congress passed sweeping changes to the child welfare system with the passage of the ASFA. Although this act addressed many issues facing children in foster care, it failed to change the basic requirement surrounding the 6-month reviews. The National Association of Foster Care Reviewers wants to be the national voice for administrative review. We would like to see a requirement that all children in out-of-home placement be given the benefit of an independent review. We have thousands of volunteers and review staff ready to assist and make this possible. We urge you to establish review boards in all jurisdictions. Our volunteers stand ready to make a difference. They ask for your assistance to make the foster care review a reality for every child in out-of-home placement. Thank you.

[The prepared statement of Mr. Stanton follows:]

Statement of Bill Stanton, Director, Dependent Children's Services Division, Administrative Office of the Courts, Phoenix, Arizona, and President, National Association of Foster Care Reviewers

Mr. Chairman and members of the subcommittee on Human Resources, I am honored to have been asked to appear before you today to testify about Citizen Foster Care Review Boards and the impact they have on ensuring the safety, permanency and well being of children.

My name is Bill Stanton and I am the President of the National Association of Foster Care Reviewers (NAFCR).[1] I am also the Director of Dependent Children's Services Division of the Administrative Office of the Courts in Arizona.

Removing a child from their home and terminating parental rights is one of the most powerful uses of our Government's authority. Because such a decision is so severe, it calls for extraordinary checks and balances. The Citizen Foster Care Review Board process provides this needed balance.

Foster Care Review Boards began in South Carolina in the mid 70's. Currently, 23 states have some form of review board process in place. Review Boards consist of citizens who volunteer their time to review the cases of children who have been removed from their homes. Some volunteers from programs in Arizona, South Carolina and Oregon have remained with their programs for over 20 years. Volunteers meet each month to review the events of children's lives and make recommendations to enhance these children's safety, permanency, and well being. Long after judges rotate off the bench and caseworkers move on, in many cases, the most consistent presence in these children's lives is the Review Board.

Review Boards are comprised of volunteers, not employees of the agency, the court, or a treatment facility. They bring to the table their life experience, community standards, and a belief that their involvement can make a difference.

The fact is that citizen involvement has made significant differences, not only in the lives of individual children, but in the system charged with the responsibility of their care.

Let me give you an example of a child from Arizona. Joe was a 14-year-old young man who had been in foster care for 1 year. The caseworker reported to the review board that the child's father was deceased. While this information was in the file, it had apparently never been verified. When the review board received the case to review, they sent notice of the upcoming review to the last known address of the father. It was soon determined that not only was the father alive, he wanted to be reunited with his son.

Still other cases have seen review boards, during their review, discover abuses being suffered by children while in foster placement. Children have subsequently been moved to safer, healthier environments.

The Foster Care Review Board meetings are unique. They are less intimidating than a court hearing and less formal than a case staffing. The Review Board members review each case every 6 months. They speak to those involved in the case. They ask questions. Sometimes hard questions. They make recommendations, and they don't forget. When the case comes back again for review and services were not provided, they will ask why. Their goals are to ensure that the children are safe, that services are being provided, that the well being of the children are being addressed, and that there is a realistic plan to move toward permanency.

The Review Board volunteer's work doesn't end when they leave the review. Volunteers actively advocate for system changes. They identify system problems during the review process and then do something about it. One example of this came in Iowa. Through their review of cases in which the termination of parental rights had been appealed, the Iowa Citizens Foster Care Review Board[2] identified significant delays. As a result of the review board's observations and recommendations, changes in the Court rules were implemented, eventually reducing the length of the appeals process from 13.2 months to 4 months, a difference of nearly a year.

While Oregon was one of the states that pioneered the concept of involving families in case planning through Family Decision Making, the philosophy was not routinely incorporated into actual case practice. The review board[3] conducted a study of the use of Family Group Decision Making and found the process was being used in only 30% of the cases. The program wrote and advocated for legislation mandating the inclusion of families in case plan development, and as a result, Family Group Decision Making is standard practice in almost all child welfare cases.

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[1] nafcr.org
[2] jfoxhoven@dia.state.ia.us
[3] www.ojd.state.ore.us/osca/cpsd/citizenreview/index.htm

In New Mexico,[4] the review boards found through their case review process, that over one third of the children they were reviewing were sex abuse victims. They found that the sex offender/perpetrator was not being held accountable through treatment and/or the judicial system. The review boards conducted research and collected data. As a result, the New Mexico legislature in the Fall, 2003 special session legislated and funded a statewide New Mexico Sex Offenders Management Board.

In Arizona,[5] the review boards were instrumental in revamping the dependency court process. Through their active advocacy, legislation was passed that set strict timeframes in which court hearings were to be held. Review boards have worked with the Arizona State Supreme Court to pass a mandate that every new judge rotating onto the dependency bench must attend an accredited Dependency training. The review board also has developed an extensive data system that tracks all aspects of the review process.

There are times when volunteers realize that children may have some needs that the agency or government can not address. When a child is placed in foster care and wants to take piano lessons or go to football camp, additional funds will not likely be available. Volunteers in Arizona came together to form The Arizona Friends of Foster Children Foundation,[6] an organization dedicated to providing extra things that many foster children would do without.

Foster Care Review Boards are an effective way to provide oversight as children go through the foster care system. Community volunteers step forward to ensure the safety and improve the lives of these compromised children. The problem however is that there are not enough review boards, and that many of the programs that do exist face serious under funding or even closure.

Montana discontinued its review board programs last year due to a cut in state funding. Florida has seen two of their programs close due to cut backs in state funding. Utah program funding was cut in half last year. These are a few examples of the many programs that have been affected by deep budget cuts.

The National Association of Foster Care Reviewers has attempted to assist states in developing review programs. In collaboration with the Department of Health and Human Services, we have developed general review guidelines and training materials. This work will give communities the flexibility to develop review boards to meet their needs while following national standards.

In 1997 Congress made sweeping changes to the Child Welfare system with passage of the Adoption and Safe Families Act (Public Law 105–89). Although this act addressed many issues facing children in foster care, it failed to change the basic requirements surrounding the six-month reviews. Section 475 (5) (b) of this act states "a review of each child's status is made no less frequently than once every six months either by a court or by an administrative review . . ." NAFCR wants to be the national voice for administrative review. We would like to see a requirement that these reviews be independent reviews. We have thousands of volunteers and review staff ready to assist and make this possible. We urge you to establish review boards in all jurisdictions and fund them through NAFCR. Our volunteers stand ready to make a difference. They ask for your assistance to make Foster Care Review a reality for every child in out-of-home placement.

Chairman HERGER. Thank you very much, Mr. Stanton. Mr. Bell, I note that in your testimony you mentioned that the number of children who are in foster care in New York City is down significantly compared to prior years.

Mr. BELL. Yes.

Chairman HERGER. Can you go into why that is?

Mr. BELL. A major reason for the reduction in the number of children in foster care has been an overwhelming focus, and our effort in terms of utilizing Family Group Decision Making as one of the measures of engaging families early on after placement. Right now, every foster care placement is followed by a Family Group Decision Making conference, with the parents present within 3 to 5

[4] www.nmcrb.org
[5] www.supreme.state.az.us/fcrb
[6] www.affcf.org

days after that placement, which targets our efforts around identifying the needed services, and moving aggressively to get children out of foster care.

It has also been aided by our increased focus on adoption—looking at streamlining the adoption process, and ensuring that children who have been identified as unable to go back home to their parents can move to permanency quickly. As I indicated, we have completed over 27,000 adoptions since 1996. Each year, when you look at the percentage of children available to be adopted versus the ones who are, that number is increasing. In 1998, we only adopted about 44 percent of the children who were available for adoption. Last year, we adopted over 66 percent of the children who were available for adoption. We have also moved to a neighborhood-based environment, where we are keeping children in their communities. We are engaging all of the providers in those communities, including faith-based institutions, to wrap a network of services around vulnerable families where they live, as opposed to calling on government to be the parent for children.

Chairman HERGER. Thank you very much. That is very impressive. Do you believe, then, that part of our goal should be to keep children out of foster care unless absolutely necessary?

Mr. BELL. I think, given the trauma that occurs when children are separated from their families, that every effort must be made to complete a quality assessment up front—to make sure that out-of-home placement is absolutely necessary to protect that child. I think it is equally critical, though, that we ensure that if we leave a child in their home, we also have the kind of services wrapped around that family to ensure that the child is going to be safe in their home. One of the things that we have done over the last 8 years has been to increase the utilization from our child protective staff in terms of their referrals to supportive services in the family's home. We have a wide array of preventive services in the city. We have moved from our child protective staff only making 30 percent of the referrals that actually go to those services each year, to making over 55 percent of the referrals that actually go to those in-home services today.

Chairman HERGER. Do you feel that our current system, including its financial incentives, does a good job of encouraging this?

Mr. BELL. I think that one of the reasons I have asked for greater flexibility in terms of the utilization of title IV–E funding is that I don't think there are enough services available to support the families. One of the issues is that there are restrictions on how title IV–E funds can be used—largely being used for out-of-home maintenance as opposed to in-home support. I think that is a critical element in terms of our ability to continue to deliver services to families in their home. One of the critical concerns I have, is that there is an actual clause which says that counseling services are not going to be covered by the title IV–E dollars, when that is one of the most critical services in remedying the issues that brought children into foster care in the first place.

Chairman HERGER. So, you feel, then, that more flexibility would assist you?

Mr. BELL. Absolutely. I believe that more flexibility is required. I also think that if we go down a pathway where flexibility is being

provided at the expense of Federal participation, that would raise a considerable concern. We have lived under a block grant in New York State since 1995, and as a result, we have seen the amount of State participation in the funding of services for children in New York City decrease tremendously. New York City represents over 70 percent of the foster care population in New York State, but much of this reform effort that we have funded over the last 8 years has been largely covered by contributions from New York City.

Chairman HERGER. Thank you, Mr. Bell. Mr. Cardin?

Mr. CARDIN. Thank you, Mr. Chairman. Let me thank all of you for your service in this area. It is a difficult field, and I very much appreciate the leadership that you have brought to taking care of our children. First, let me say that there are a couple of themes that come through all of your testimonies. One is that more flexibility is needed in title IV–E funding—and I want to assure you that I agree with you. I think we need to give the local governments more flexibility in creating the type of programs that work in their community. Second, most of you have mentioned the fact that the eligibility for title IV–E funding doesn't make a lot of sense with the look back provision. You can hear from my comments that I fully agree with that, and I would hope that we would be able to correct that now.

The third issue that each of you have raised in different ways is that we need more resources for funding. You used the phrase "tight budgets," or not enough resources, and I agree with that. We are not providing the type of resources necessary to deal with the problems that, Ms. Ashby, you pointed out in regard to turnover and training dollars, and so forth. Ms. Nelson, I haven't looked at Iowa's budget recently, but I don't believe the State is providing you with a lot of additional money in order to do your job. Mr. Bell, I compliment what you have been able to do in New York. You have made tremendous progress. I also agree with your statement where you question whether a capped entitlement is the answer to this. I happen to agree with you. If we don't increase the size of the Federal pot, and keep the dollars fixed—in fact, limited so there is no growth if caseload goes up—and provide you all the flexibility you want, it seems to me that your State legislatures aren't going to be providing you with additional resources. Are we really going to get salaries increased for social workers? I haven't seen too many proposals where they are being singled out for pay raises, for recruitment dollars, or for training dollars. Are we really going to get the additional resources made available by local government if all we do at the Federal level is provide additional flexibilities? Is the money going to be there, Mr. Bell?

Mr. BELL. You raise a very important question. In my written testimony, I actually talked about some of the concerns that I have in terms of the larger jurisdictions, urban jurisdictions, and their ability to make some independent decisions and still have access to resources. I think one of the statements that I have made, in terms of looking at what has to occur to turn around the system, is that there have to be clear principles and standards that are set. While I absolutely agree with Dr. Horn when he says the Federal Government can't review every single case, I do believe that when we

think about standards that need to be set, the Federal Government has to weigh in on what those standards might be. I think that one of the issues or concerns that we have is that we have had to bear the brunt of a larger percentage of funding necessary to change the system in New York City. I would add that it is absolutely important for us not to just say that money is the answer, because——

Mr. CARDIN. I agree with that. If we were to fix the Federal dollar amount—that is, it is going to be that way, but giving you much more flexibility with overall Federal accountability standards, do you have confidence that resources will be made available locally?

Mr. STEVENSON. Not at all. As I said, we are a county-delivered, State-supervised system. In our budget, about 42 percent is Federal, and that includes a sizeable portion of TANF dollars. About 42 percent is funded by State cash, and then the remainder is matched by the local county. County commissioners are struggling mightily to deal with their own budgets. Some of our counties are nearing bankruptcy. They can't come up with additional matching funds. Certainly, the State is struggling with its own budget woes. To expect them to fill in the gap in funding as the growth continues, and as we try to target better services and expanded services so we can get better outcomes—the money is just not there.

Mr. CARDIN. Ms. Ashby, I really appreciate your comments here. You point out that there is some flexibility in the title IV–B funds that could be used for these purposes—the Part 1 funds. So, I am just curious, if we eliminate the categorical aspect of the title IV–E funds, would that do much on the caseworker numbers, the retention of caseworks, or the pay of caseworkers? Is there anything that you see which would give us hope if we did that—that we would see much progress in that area?

Ms. ASHBY. Well, I can't answer your question directly because we haven't done the work that would allow me to do that. I will say that there is no indication that there is excess funding for foster care maintenance. So, if more flexibility were applied to title IV–E, you would presume that less money would go to foster care maintenance, and more money would go to prevention, family supports, and other things. I will say that with regard to flexibility, we have not said anything in our statement, I don't think, that directly addresses that, other than to point out that there is a great deal of flexibility in title IV–B right now. Yet, title IV–B, of course, is a limited pot of money. It is $700 million versus $6.1 billion in title IV–E. With respect to Part 1 and Part 2, and with respect to title IV–E, also, we think decisions, even in a flexible environment, should be driven by research and knowledge about what is needed, and decisions about the relative merits of the needs based on information and data.

Mr. CARDIN. I have just one observation. You would assume that the title IV–E moneys that are being used for administrative—that States would need more money if they are going to deal with the caseworker retention. So, I am not exactly sure what we accomplish through the block grant approach in dealing with the core problems that have been mentioned. Thank you very much, Mr. Chairman.

Chairman HERGER. Thank you, Mr. Cardin. I understand, Mr. Bell, that you are going to need to leave soon.

Mr. BELL. Yes.

Chairman HERGER. I would like to recognize the gentleman from Washington, Mr. McDermott, to ask a question before you have to leave.

Mr. MCDERMOTT. Thank you, Mr. Chairman. I want to welcome you all here, and thank you for your work. In looking over the material that you brought from New York, Mr. Bell, it is a remarkable record.

Mr. BELL. Thank you.

Mr. MCDERMOTT. Now, the question is, if you could rank the things you did that made that happen, what would you put at the top? Is it simply cutting caseloads from 26 down to 10.7, or are there other things that you did in the process which made that system work more efficiently—if you want to put it that way?

Mr. BELL. In terms of the testimony, there is a listing of about 10 items in there. I think, the way they are laid out, that the first one is committing the political will. I think that there is an incredible need in all of our systems for the leader of that jurisdiction, whether it is a city, a State, or a county, to indicate that they are absolutely responsible and accountable for their child welfare system, and to elevate the system that supports vulnerable children to a level of prominence in government, so that everybody recognizes the importance of serving vulnerable children. I think that was the first step that took place in New York City. That was then followed by bringing in competent leadership at both the executive level in the organization, and at the mid-management levels in the organization. That was followed by——

Mr. MCDERMOTT. Did you actually fire people, lay people off, or transfer them somewhere else in the city?

Mr. BELL. Well, the next step in that process, which was looking at the frontline, actually resulted in almost 10 percent of our staff being redeployed from the agency. We elevated the requirements of who could become a child protective worker, who could become a child welfare worker, to require that people have either a social work background, or a background in some related field in human services. When ACS was created, someone with a degree in banking could come in and investigate child welfare cases, and work on those cases. So, it is critical to ensure that you have the most qualified staff on the frontline.

Mr. MCDERMOTT. Did you——

Mr. BELL. We increased the salaries of the staff who were there. Then we did a comprehensive evaluation of who was going to serve on these cases, and if people did not meet the standard, they were redeployed.

Mr. MCDERMOTT. Did you run into trouble with your unions, or with civil service requirements of the City of New York, or whatever?

Mr. BELL. There were absolutely civil service requirements, and we were absolutely sued by the union when we did this. Yet we won, and it was held that what we were doing did not violate any civil service requirements. We did not break the law in any way, and we did not deprive unionized employees of their rights. What

we did was create a foundation on which we could build the kind of program that has produced the successes that are in that document that you are looking at.

Mr. MCDERMOTT. So, you are really positing that this could happen in any situation where the leadership went to work and played by the rules—they could make the kinds of changes you are talking about in spite of whatever the system is presently. Sometimes people say that we have to get rid of the unions, and have to get rid of all that, but it is not, in your opinion, necessary?

Mr. BELL. I don't think it is necessary. I think that unions have been created to protect employee rights, and they should be there to do that. I think that what has happened in many jurisdictions over the years is that the child welfare agency has been dropped to the lower level of the totem pole. When something goes wrong, the response has been to fire a commissioner or a director, to fire caseworkers and supervisors, and not to deal with the content of the entire organization. What we have done is completely change the entire organization—to set standards, to describe what is quality. We made sure that every worker who comes in is trained on understanding what they should be expected to do, and that they have a strong system of data that monitors and manages what is going on on a regular basis, and feeds that information back into the system so that we can hold people accountable for what they are doing.

Mr. MCDERMOTT. One of the things that seems inherent in what you are talking about is something that we did in the No Child Left Behind Act of 2001 (P.L. 107–110), and that is to require that every schoolteacher have training in the field in which they are teaching. Yet we didn't put the money out there with it. Are you suggesting that national standards are useful without additional money? When you say money is not the question, it sounds like you are saying that the States can handle it if you simply leave us alone and give us a little more flexibility. I am interested in what your view of that whole thing of national standards——

Mr. BELL. I am not saying that money is not the question. I am saying that money is not the only answer to the question.

Mr. MCDERMOTT. Okay.

Mr. BELL. I think money will always be a question, because if I say that I want a Cadillac version of a system, then I cannot give—I don't want to insult anybody so I won't say Kia money to pay for that Cadillac——

[Laughter.]

If we are going to design a system that has a certain level of caseloads, that has a certain quality of employees delivering the services, that has a certain kind of administrator who is running the program, and that has the kind of data system that can tell us what is absolutely going on—it is going to cost money, and we have to be willing to put that money there. That is why I say political will is vitally important. If I am the leader politically, then I make the decisions about where the resources are going to be spent. If we have the political will to do what is right for vulnerable children, then we are going to have to put more resources behind that.

Mr. MCDERMOTT. Is there one or two things that the Federal Government does that gets in your way and that you would like to

get rid of? If you had your wish list, you had a magic wand, and you would just reach into the Federal Register and take certain things out, what would you take out?

Mr. BELL. What would I take out of the Federal Register to support what we are doing?

Mr. MCDERMOTT. Yes.

Mr. BELL. I think it is a question of what would we collectively take a look at in terms of where we—because you don't want to just take something away without analyzing the impact of removing it. I think that everybody has talked about flexibility, which is absolutely necessary.

Mr. MCDERMOTT. That is what I am asking.

Mr. BELL. Right.

Mr. MCDERMOTT. What is flexibility?

Mr. BELL. Flexibility really means that if you tell me I am going to give you an open-ended entitlement for title IV–E, then if I say that you can only get that by looking back at the standards for a program that was done away with in 1996 when TANF came in—but I am still using a 1996 measure to tell you who is eligible to get that government funding today—there is a question about that. When you say that I want to hold you to a standard——

Mr. MCDERMOTT. What would you——

Mr. BELL. A standard of production in terms of the ASFA, and you don't fully fund what is necessary to do that, or you say that the money that I am giving you in title IV–E, you can't use it for counseling when counseling is one of the most vital services in helping families overcome their issues, then the government is not fully putting the money behind it. When you put into ASFA that kinship guardianship or subsidized guardianship is a permanency option, but there is no money appropriated to support that permanency option, and you still require the termination of parental rights in order to get the money that is contained in the adoption subsidy environment, then the government is not fully putting the money behind it.

Mr. MCDERMOTT. We are saying one thing and doing something else, or saying two things at the same time.

Mr. BELL. You are saying two things at the same time. Do it, but I am not going to support it financially.

Mr. MCDERMOTT. Thank you very much, Mr. Chairman.

Chairman HERGER. Thank you, Mr. Bell, for your outstanding testimony, and the great example that you and your team are setting there in New York City——

Mr. BELL. Thank you.

Chairman HERGER. In this incredibly crucial area of protecting those most vulnerable—our children. I do understand that you need to leave, so if you need to leave, you are excused.

Mr. BELL. Thank you.

Chairman HERGER. Ms. Ashby, I have a question for you, if I may. In your testimony on page 12, you note, "Some of the caseworkers we interviewed told us that they spend between 50 and 80 percent of their time completing paperwork, thereby limiting their time to assist children and families." Meanwhile, we know other industries, manufacturing, telecommunications, and shipping, have undergone revolutionary changes, allowing them to produce far

more with fewer workers. Nonetheless, we are constantly being told that child welfare agencies need more workers just to handle the same—or now a declining—national foster care caseload. My question is, can you tell us what efficiencies, improvements, or improved uses of technology, have occurred in child welfare casework in the last decade, and what additional changes are yet to take hold that might improve practice efficiency and effectiveness?

Ms. ASHBY. The child welfare profession certainly has at its disposal many of the same technological tools that other areas of our economy have. For example, use of laptops, handheld computers, and cell phones can certainly be an aid to the caseworker out in the field. For example, a caseworker who has a cell phone can call a supervisor if he or she needs assistance or needs guidance as to how to handle a particular incident. Data can be entered from a field location into a central database if the caseworker had a laptop, for example, or a handheld device in some instances. So, certainly, the technology is used in some States and some localities, but it is not used widely enough for a number of reasons. As we talked about in the last hearing we had on this topic about the data system, SACWIS, many of the States have systems in various degrees of development, but very few States have systems that are totally complete and that can link the various systems within the State that need to be linked, or with the county levels, in order to allow some of these things to occur. In addition to technological advances, however, there are other things—telecommuting, for example. A caseworker, rather than having to go into a central office, and then leave to make a home visit, could make the visit directly from his or her home, if that made sense logistically.

The computer systems that are available, SACWIS, could have prompts that make it easier to enter data. Caseworkers could be involved in the actual development of the systems, which would make them feel more comfortable to use, and give them more of a feeling of ownership of the data systems. One of the difficulties we found in looking at the use of data systems, or looking at the development of SACWIS, was that caseworkers didn't feel in some cases comfortable with using the system, or with entering certain data into the system. Training is another issue. In order to use the data systems, in order to take advantage of some new approaches, the caseworkers have to be trained, and sometimes they have to be trained in things that change their position culturally. There are various other things. Management, for example, could set aside a period of time—a number of hours, a day of the week—where the caseworkers are to devote their time to entering information into the system. One of the difficulties we encountered in looking at the data systems was that caseworkers complained that they had difficulty balancing putting data into the system versus visiting the homes and making recommendations for services, and so forth. So, maybe management has to step in and say, all right, a certain period of time has to be devoted to this. Perhaps in the system of accountability for the child welfare workers, there could be something built in that would cause or encourage the workers to use some of these efficiencies—certainly by entering data. For example, awards systems and appraisal systems could be one method. So, yes, there are a number of ways that there could be efficiencies. Some of

these are being used. Others are not. States are working toward developing their SACWIS, but they have a ways to go.

Chairman HERGER. Just to follow up on that, to what degree would you say that States are focused on making their current workers maximally effective through the use of better technology as opposed to just adding more workers?

Ms. ASHBY. I think the States—and I can't give you a precise percentage here—are at the point that they realize they are going to have to find some other ways of doing business. As we have been talking about this morning, there isn't a whole lot more money available from either the Federal Government, or from the State and local governments, that are going to provide a lot more workers. Perhaps some more. There needs to be a combination, I think—and States recognize this—of increased efficiencies, as well as additions to the workforce. I guess a major issue is adding to the workforce, but also keeping workers who are in place. Turnover is a big problem. So, to the extent that the current workers can be retained, their training is not wasted; they get better over time because they have practiced their discipline, so to speak. That would also be helpful. I do think States recognize that they are going to have to do some things differently.

Chairman HERGER. Ms. Nelson, would you like to comment on this, as well?

Ms. NELSON. Sure, and what I might do is speak about some of the things that we have done in Iowa. We do have a fully functioning SACWIS. We very much engaged our frontline staff in the development of that system, and on an ongoing basis. We routinely get input from our staff regarding how the system could work more efficiently for them, and we set aside resources specifically to implement ideas that come from our frontline staffs. Again, the system is continually improving in response to their ideas of how it can be more helpful. We have built into our system alerts that help them manage their workload—they alert them to when things are due, so that they, again, can better manage their time. We are also working on sharing information between our SACWIS and other systems, again, so that workers have more access to information, and don't have to enter as much information in.

One of the things that we are working on in particular, right now, is enhancing the capacity of our system to provide information to frontline staff which actually informs their practice and gives them feedback about their cases. Which types of cases are, in fact, the ones where we have a repeat maltreatment? What is the profile of cases where children are reentering care? We have been feeding that back to our workers, and then training our frontline staff and frontline supervisors regarding how to use the data system for that purpose. We have been training them regarding how to go in and take a look at how their caseload and their outcomes compare to others, what kinds of cases seem to be having better outcomes, and then using that, again, getting them more comfortable with that so they can use that to inform their own practice. I think one thing I would want to emphasize is, it is not an either/or. It is not improve technology or have an adequate number of workers. I think both are really important. The last thing I might mention is that for us, the idea of adding handheld computers is not something

that we are in a financial position to do. So, there are things that we think probably have some merit, and we would be interested in doing those at some time, but we are not in a position to make that kind of investment at this time. So, we put our energies into how to use the SACWIS that we have, and make it the optimum tool for our frontline staff and managers.

Chairman HERGER. Thank you very much.

Mr. MCDERMOTT. Mr. Chairman.

Chairman HERGER. Yes?

Mr. MCDERMOTT. May I ask a question—a second one?

Chairman HERGER. Yes.

Mr. MCDERMOTT. Thank you. I just want to ask what Ms. Ashby is talking about—the whole question of how you use your workers. I suspect that her inability to get data is because every one of your States is using a different set of papers. What effort is being made by the organizations, the national organizations, to come up with a uniform form to be used by every State, so that you could get national data—so you could actually compare what is happening in various States? The question sort of buried in that, I guess, is, if you had that kind of thing, would you have the ability to protect kids? You can have a three-line form that will be the same everywhere in the United States, but it would not deal with the situations which happen in every State at some point. You have some kid that gets in a situation, and they are killed or die, or whatever, and then there is all this hand-wringing and finger-pointing and everything. I realize that a lot of the data gathering that is done is really done as a defensive mechanism against that event. There is some line between getting enough data, and giving a method by which you can evaluate cases, and over-papering, which it seems to me is often our response in these kinds of situations. So, I would like to hear what you have done both locally, and, then, is there a national effort to do anything comprehensive so you all would be using the same form?

Mr. STEVENSON. Let me just speak to the national perspective on that. Pennsylvania, by the way, does not have a SACWIS. We made an effort to develop one, and we found the data bleeding from one case record into another case record, which was making it even more unsafe for kids in Pennsylvania. So, we have crashed that system, and we are starting over. There are not that many, as was pointed out, federally approved SACWIS programs in place. I have actually had staff in those States that do have federally approved systems doing CFSR, case record reviews, and have reported back to me that even those systems that are federally approved were crashing on a regular basis. So, technology is not necessarily the answer. Nor do I think that the cost neutrality requirement under SACWIS can be achieved by reducing staff. That just isn't going to happen. I support what Ms. Nelson was saying there.

I would have to go back to the point I made earlier about funding. I think that because child welfare is a patchwork of funding, much of the paperwork is tied to determining eligibility, documenting allowable services, and that nature of things. I think that is really a critical issue. If we can get one ongoing funding stream that is an entitlement for kids, that would reduce a great deal of the paperwork, time, and effort. With regard to another aspect of

technology that I would offer, most States are moving to an evidence-based strategy for delivering services. So, we are using technology. We are using social work technology, political science technology, and psychology technology. We are applying the most effective service delivery models that are in place, and we are only funding those. We are moving in that direction. I am sorry, I took your definition and broadened it a little bit. I think that we are using technology, but in a very broad way. You are going to be hearing from the National Association of Public Child Welfare Administrators later today. They have a national working group that is working on data, and looking at how data can be drawn together, streamlined, standardized, and made more accurate and comparable between States. You might want to ask that question later.

Mr. MCDERMOTT. In sum, are you saying that data is mostly for funding——

Mr. STEVENSON. No, I am saying a good——

Mr. MCDERMOTT. Justification rather than for following the case and the problems of the kid?

Mr. STEVENSON. I am saying a good bit of it is, yes.

Mr. MCDERMOTT. Okay. The balance is what, at this point?

Mr. STEVENSON. Is documenting the services——

Mr. MCDERMOTT. No, but is it 60 percent for billing and 40 percent for kids, or——

Mr. STEVENSON. Well, it is all for accountability, but automating the case record is a critical thing. It does save some time, and particularly if you use mobile technology, so that you can interact with it wherever you are.

Ms. NELSON. I might mention, just briefly, a couple of things the National Association of Public Child Welfare Administrators is doing. We do have a work group, a task force focused on technology and data and how it can better inform our work. We are working on a common framework for how we look at our data, bringing up the floor across States of capacity building, and the ability to use the data that they have. One of the challenges, I think, of trying to standardize the data across States, is that data is based on how your system works and what your State laws are. For example, how do you define child abuse in your State? What is the standard of evidence? So, I don't know that we could input data exactly the same way across the States, as long as States set their own laws on what the definition is, and what the standards of evidence are. On the other hand, I think what we are focused on—and we work with the Child Welfare League of America on that, as well—is building that common capacity and common framework for how we look at data, so that we are looking at it comparably.

Chairman HERGER. Thank you.

Mr. MCDERMOTT. Thank you, Mr. Chairman.

Chairman HERGER. Again, I want to thank our panelists for testifying before us today, and helping us on this very important issue. As I mentioned earlier, we will now break for lunch and return at 1:30 p.m. With that, the hearing stands in recess.

[Recess.]

Chairman HERGER. Good afternoon. I would like to welcome back our witnesses and continue the hearing. I would like to invite our next panel to have a seat. This afternoon, we will be hearing

from the Honorable William Frenzel, a former Representative in Congress from the State of Minnesota, and Chairman of the Pew Commission on Foster Care; Shay Bilchik, President and Chief Executive Officer for the Child Welfare League of America; Monsignor Kevin Sullivan, Executive Director and Chief Executive Officer of Catholic Charities USA; and Thomas Atwood, President of the National Council For Adoption (NCFA). Before we begin, I would like to express my condolences to Mr. Atwood and his colleagues on the recent passing of William Pierce, the founding President of NCFA. I know Bill did a lot of work with Members of this Subcommittee over the years. As current Chairman of the Subcommittee on Human Resources, I would just like to say how thankful we are for his dedication and work on behalf of children. Mr. Frenzel to testify.

STATEMENT OF THE HONORABLE BILL FRENZEL, CHAIRMAN, PEW COMMISSION ON CHILDREN IN FOSTER CARE

Mr. FRENZEL. Thank you, Mr. Chairman. I request unanimous consent that my statement be made a part of the record——

Chairman HERGER. Without objection.

Mr. FRENZEL. I will proceed extemporaneously. Mr. Chairman, I am accompanied by the Staff Director of the Pew Commission, Ms. Carol Emick, and two other members of my staff. They have been working with your staff and are anxious to continue to do so. The Pew Commission's charge is a simple one—to improve the system—and we are vigorously involved in trying to produce recommendations for your Committee. Going over to page 2 of my printed testimony, where there are some enumerations of what we are trying to do, I need to say first that the Commission has not finalized recommendations, and probably won't for another couple of months. So, this testimony is going to be short on specifics—as the Subcommittee knew when we were invited. I don't dare outguess my Commission. They are all smarter than I am, and they know a great deal more about the subject than I do. I am mostly the traffic director rather than the determiner of policy.

Thus far, our Commission is zeroing in on the areas that are delineated beginning on page 2. In our recommendations on financing for children in foster care, the financing system needs to give the States greater flexibility in how they can use Federal funds to serve maltreated children. It is an obvious statement. How to do it is something that we haven't determined yet, but we have a lot of ideas, and we are proceeding. Second, while that flexibility is being achieved, we would like it to be accomplished with greater accountability by States for the outcomes for children. There are questions that need to be asked. Are fewer children entering foster care? Are greater numbers leaving? Are adoptions from foster care and family reunification increasing? What is the percentage of children returning to foster care? How are the children who have been in foster care for the longest time getting along? There needs to be more accountability, we believe. The CFSR is a good start, and Congress was correct when it mandated such accountability—but there are ways to improve it.

Thirdly, with respect to the financing structure, we think it should encourage States to build the full continuum of services for

abused and neglected children—from prevention to post-permanency. We believe that caseworkers and judges should be able to tailor services to a child's or family's specific needs, especially if doing so avoids the need to place the child in foster care, or allows a child to leave foster care safely, as soon as possible. The system has to encourage all participants; and we think that can be improved. Fourth, we think that Federal financing should encourage the States to test and evaluate new services and practices. I suppose spelled another way, it is w-a-i-v-e-r. We think the waivers have yielded some good results, but we think the program can be improved; we are anxious to make recommendations in that regard.

Fifth, we believe that any reordering of how the Federal Government provides funding to the States has to maintain risk sharing between the State and Federal Government, and avoid cost shifting to the greatest extent possible, either by the States or by the Federal Government. Title IV establishes a shared responsibility. Neither side of that partnership can stand to see erosion of their responsibility. Now, the Subcommittee is also working in the area of court reform. Much of what we will recommend there is eventually going to go to State legislatures, to Supreme Court chiefs, and to various other court systems—but nevertheless, there will undoubtedly be some incentives which might be provided by the Federal Government. We are looking at coordination between child welfare services and courts, better sharing of information, and more emphasis on the child and family court system. We are a long way from home. We have been at work for 9 months. We expect to be able to report back to you, Mr. Chairman, perhaps as early as May if we are lucky. We are looking forward to that meeting; we hope it will be a profitable one. Thank you very much.

[The prepared statement of Mr. Frenzel follows:]

Statement of the Honorable Bill Frenzel, Chairman, Pew Commission on Children in Foster Care

Mr. Chairman, Mr. Cardin, members of the Subcommittee, thank you for your invitation to testify today.

For the last nine months, I have been privileged to chair the Pew Commission on Children in Foster Care, a task I share with my colleague, former Representative Bill Gray. This independent, nonpartisan commission, funded by The Pew Charitable Trusts, includes some of the wisest and most experienced individuals in the field of child welfare. You heard from one of them this morning, New York City Commissioner William Bell. The other members of our Commission are no less impressive.

Like this Subcommittee, we want to see the nation take better care of children who have been abused or neglected. We want to reduce the number of children who need to enter foster care. We want to help children leave foster care for a permanent family as soon as they safely can. We also recognize that this is a responsibility shared by the Federal Government and the states, as well as by courts in every state.

The Pew Commission's charge is to develop practical, fiscally responsible, policy recommendations to reform federal child welfare financing and strengthen court oversight of child welfare cases. Every problem in child welfare cannot be attributed to federal financing or to the courts, but many have roots there. Federal dollars flow relatively easily to pay for foster care for poor children, but they are much less available for other services that may avoid the need for foster care or shorten the time a child must stay in care. And while courts are critical decision-makers for every child in foster care, judges are often hampered by crowded dockets and unnecessary bottlenecks in the court system.

By late spring of this year, we expect to offer policy recommendations that can be embraced by bipartisan leaders, including this Subcommittee, at the federal and state levels. This is no easy task, but our Commission members have accepted the challenge with enthusiasm. They see much common ground, beginning with fairly

universal dissatisfaction with the current structure of federal funding for child welfare services.

Our optimism is also based on knowledge that some states and jurisdictions have made great improvements. Illinois cut its foster care population in half since 1997, more than doubled adoptions from foster care, and—under a federal waiver—implemented a cost-effective, subsidized guardianship program. New York City cut its foster care population almost in half between 1996 and 2003. Chief justices in Michigan, California, New York, Utah, Minnesota and other states have made improving outcomes for children in abuse and neglect cases a top priority. They are seeking ways to ensure that children do not languish in foster care. Imagine the progress that could take place with a more rational financing structure and better-performing courts.

While the Commission has not finalized any recommendations, we have agreed that any financing recommendations should include several key elements:

First, it should give states greater flexibility in how they can use federal funds to serve maltreated children. Children who have been abused and neglected have a wide range of needs. Some may be better served by early, in-home intervention; others by intensive services that pave the way for reunification or support the transition to an adoptive home. Yet our current federal financing structure largely encourages a one-size-fits all response by directing the great majority of federal dollars to foster care, and providing only a relatively small amount to other important services.

Second, greater flexibility must be accompanied by greater accountability by states for outcomes for children. Are fewer children entering foster care and are greater numbers leaving? Are adoptions from foster care and family reunifications increasing? What percentage of children return to foster care? How are the children who have been in foster care the longest faring?

The Child and Family Services Reviews have made a good start at measuring states' progress. Congress was right when it required such accountability. Independent experts and state administrators have told us that the reviews have been helpful, while also suggesting ways to improve the process. Our Commission is looking carefully at how to build on this strong start, so that states and the Federal Government can more accurately measure how children are faring.

Third, we think that any financing structure should encourage states to build the full continuum of services for abused and neglected children, from prevention to post-permanency. We believe that case workers and judges should be able to tailor services to a child or family's specific needs—especially if doing so avoids the need to place a child in foster care or allows a child to leave foster care safely as soon as possible.

Fourth, we think federal financing should encourage states to carefully test and evaluate new services and practices. The child welfare field needs continued rigorous investigation into what works for vulnerable children and troubled families. In this regard, the child welfare waivers have yielded promising results. HHS' recent guidance has made the waiver process somewhat easier and more attractive for states that want to experiment. Our Commission wants to continue to encourage innovation and creativity in this field.

Fifth, any reordering of how the Federal Government provides funding to states must maintain risk-sharing between the federal and state governments and avoid cost-shifting to the greatest extent possible—either by the states or by the Federal Government. Title IV establishes a shared federal-state responsibility for abused and neglected children. Neither side of that partnership can stand down.

As the Subcommittee examines the question of how to improve federal and state oversight of child welfare, I urge you to remember the critical role of the courts. No child enters or leaves foster care without a judge's consent. Judges are responsible for ensuring that states have made reasonable efforts to reunite children and parents, and that the ASFA timelines are met in every case.

Yet state and local courts face many challenges that hinder effective oversight of these cases and can unnecessarily prolong children's stays in foster care. The handful of courts around the country that have the ability to track and analyze cases have decreased the average length of time a case is open and have identified populations, such as infants, whose special needs might otherwise go unnoticed. Our Commission is looking for ways to strengthen juvenile and family courts, to engage state courts in the development and implementation of state plans, and to develop policies to improve court performance and oversight.

Thank you for your attention this afternoon and for your commitment to this critical area. The Pew Commission looks forward to returning to you in a few months with our best suggestions, and to working with you to achieve real progress.

Chairman HERGER. Thank you very much, Mr. Frenzel. Now, Mr. Shay Bilchik to testify.

STATEMENT OF SHAY BILCHIK, PRESIDENT AND CHIEF EXECUTIVE OFFICER, CHILD WELFARE LEAGUE OF AMERICA

Mr. BILCHIK. Thank you, Mr. Chairman. I appreciate the opportunity to address this Committee on behalf of the 1,100-member agencies of the Child Welfare League of America—both public and private nonprofit agencies. What I believe is very clear at this point of the hearing, Mr. Chairman, is that there are many forms of oversight that are actually built into the child welfare system at every level of operation. They are greatly impacted by both quality of practice, and the resources, as you have heard over and over again this morning—needing to support them and make them meaningful. Some are complementary, others are simply different in terms of focus and purpose. What they do have in common, however, is that none of these forms of oversight have been fully developed. Each is limited, either by lack of time, information, authority, funding, or other factors.

In theory, the child welfare system is intended to be one of the most thoroughly scrutinized public activities in our society. Multiple layers of oversight functions have been created. However, it is not clear that any particular oversight mechanism has been implemented which is sufficient to achieve anything beyond sporadic localized success—for example, what you heard about today in New York City. The bottom line is that effective oversight is entirely dependent on sound information. Regardless of the location or scope of a particular oversight mechanism, it relies on four principal sources of information that can be more broadly categorized as community-based, externally based, part of case management, or regulatory function.

These four sources are individual and family case records, resulting from an investigation, in casework context, and clinical and court activity. Second, direct reports from people who are served by the system, or who work in the system. This includes administrative reviews, quality assurance interviews, testimony, research, and evaluation. Third, they come from formal reports of aggregate information about children, families, and interventions—part of what you began to probe this morning. This includes management information systems, research, and evaluation. Fourth, statements of intent, expectation, or standards, that are part of formal plans, policies, and regulations. This includes budgets, policies, reports, and issue briefs. The unfortunate reality, Mr. Chairman, is that the information generated within these areas is often inconsistent, incomplete, and years behind. In order for any of the existing mechanisms to achieve a higher level of effectiveness, basic information from all four sources must be used in a more integrated, consistent manner.

If one looks at the more common oversight mechanism, two conclusions are obvious. One, the basic concept behind most mechanisms is generally well conceived, and given adequate investment, would create the potential to enhance the overall strength of the system. Two, oversight mechanisms usually do not function at a fully developed level, and fall short of realizing their potential. So,

while there appears to be no dearth of efforts to provide child welfare oversight, these efforts are neither integrated nor funded in a manner that allows them to be as effective as they can possibly be. The Subcommittee should make its decisions on how to improve oversight based on a critical understanding of answers to the following questions. One, does each function have good access to complete information from each of the four principal sources to help draw sound, long-term conclusions about the performance of the system? Does it have the capacity to analyze that information? Does it have the authority, or access to authority, to act on those findings? How does each mechanism combine access to the system with appropriate objectivity? How do existing mechanisms support each other? Are they complementary, or are they competitive?

Then we must also pay attention, while asking these questions, to the fact that nearly all States have undergone their CFSRs. Now it remains to be seen how States will implement their PIPs, which are likely to require more rather than fewer resources. In other words, what we should be looking for is an incentived funding plan to support and further motivate successful implementation of the States' PIPs, not a punitive, escalating approach that ultimately hurts those we wish to serve and protect—our children. We urge Congress to comprehensively review and take action on what is truly needed to build the system of care, so that children are protected. We urge Congress to focus on the current CFSR as its primary focus. To be an effective system, that system of review must have clear measures that can tell you about the quality of service being delivered, and must be able to measure the soundness of outcomes for children. That information must be consistent across State lines and jurisdictions. Finally, the system must have a way to enforce accountability, but enforce accountability in a way or in a manner that ensures greater safety and permanence for our children. Mr. Chairman, Mr. Cardin, we look forward to working with you in this effort.

[The prepared statement of Mr. Bilchik follows:]

Statement of Shay Bilchik, President and Chief Executive Officer, Child Welfare League of America

My name is Shay Bilchik, I am the President and CEO of the Child Welfare League of America (CWLA). CWLA welcomes this opportunity to offer testimony on behalf of our 1,000 public and private nonprofit child-serving member agencies nationwide for the hearing to review the oversight systems designed to prevent abuse and neglect of children, including those under State protection. This hearing represents an important opportunity to review the existing federal, state, and local oversight mechanisms in place and to take a look at what needs to be done to ensure that all children in this country are protected from abuse and neglect.

Existing Child Protection Oversight Mechanisms

There are many forms of oversight built into the child welfare system at every level of operation. Some are complementary. Others are simply different. None have been fully developed. Each is limited by lack of time, information, authority, funding, or other factors.

The child welfare system may, in theory, be one of the most thoroughly scrutinized public activities in our society. Multiple layers of oversight functions have been created. However, it is not clear that any particular oversight mechanism has been implemented with sufficient depth or breadth to achieve anything beyond sporadic, localized success. Therefore, we currently work within a system that depends on the poorly coordinated actions of a variety of inadequately staffed overseers who must carry out their duties with often inadequate information and insufficient authority to implement corrective actions.

The best course of future action is to select a small set of complementary core mechanisms and concentrate on developing each element to a more complete level of effectiveness.

Effective oversight is entirely dependent on sound information. Regardless of the location or scope of a particular oversight mechanism, it relies on four principal sources of information:

- Formal reports of aggregate information about children, families, and interventions. This includes management information systems, research, and evaluation.
- Individual and family case records resulting from casework, contracts, and clinical and court activity.
- Direct reports or commentary from people who are served by the system or who work in the system. This includes administrative reviews, quality assurance interviews, testimony, research, and evaluation.
- Statements of intent, expectations or standards that are a part of formal plans, policies, regulations. This includes plans, budgets, regulations, policies, reports, and issue briefs.

The information generated within each of these areas is often inconsistent, incomplete, or years behind current dates. The data from each element are usually not universally available within the full range of oversight mechanisms and, even when widely available, may be presented or organized with considerable variability. In order for the any of the existing mechanisms to achieve a higher level of effectiveness, basic information from all four sources must be used in a more integrated, consistent, and balanced manner. In general, an inadequate investment is made in the basic tools and activities necessary to provide this information.

The wide range of existing oversight mechanisms can be best understood by placing them within three broad categories: Community/External; Case Management Process; and Regulatory.

Community/External

Community-based or external oversight mechanisms include a wide variety of elective and appointive, policymaking, review and comment, monitoring, and planning bodies that are mandated to exercise some degree of scrutiny and to maintain accountability from the child welfare systems.

Examples include:

- Governor's Offices of Children
- Ombudsman
- State Legislative Committees
- City and County Boards
- Appointed Commissions
- Citizen Advisory Groups
- Gubernatorial or Legislative Task Forces or Panels
- Public Advocates
- Court Appointed Monitoring Panels

In addition to these state and local efforts, every state also has some form of child fatality review process that includes a review of every child death when the child either died while in agency custody or within 6 months of leaving custody. Some states require that these fatality reviews be conducted on every child who dies in the jurisdiction (city or county), regardless of whether they were in agency custody at the time.

Case Management Process

The core child welfare process includes a set of standard authorities, functions, and review procedures that are inherently intended to provide ongoing oversight at all stages of the case management process.

Examples include:

- Supervision
- Courts
- Administrative Reviews
- Citizen Case Review and Foster Care Review Boards
- Quality Assurance
- Utilization review
- Contract monitoring
- Fatality Review and Critical Incident Review
- Multi-disciplinary Teams
- Certification and Eligibility

Regulatory

Regulatory functions are used within child welfare to establish standards against which capacity or performance is measured and rewards or penalties are imposed. Federal law or programs require many of these.

Examples include:

- Child and Family Service Reviews (CFSR)
- Program Improvement Plans (PIP)
- Title IV–E (of the Social Security Act) Audits
- Title IV–B (of the Social Security Act) State Plans
- Adoption Foster Care Analysis Review System (AFCAR)
- State Automated Child Welfare Information Systems (SACWIS)
- Other State Plans—such as Medicaid state plans
- Licensing and Certification
- Voluntary Accreditation

If one looks critically at the more common oversight mechanisms two conclusions are obvious:

1. The basic concept behind most mechanisms is generally well conceived and, given adequate investment, would create the potential to enhance the overall strength of the system.
2. Oversight mechanisms usually do not function at a fully developed level and fall short of realizing their potential.

A quick review of a few of the most important oversight functions helps to illustrate these points.

Oversight Mechanism	Weaknesses
Legislative Committees	• Dependent on relatively old aggregate information • Insufficient time to integrate and analyze information
Casework Supervision	• Workloads prohibit consistent, detailed reviews • Inconsistent access to consumers • Often questionable data from automated information systems
Quality Assurance	• Some states lack formal systems • Often don't have adequate resources to select adequate samples or to gather information from consumers
Federal Child and Family Service Reviews (CFSR)	• Inadequate case sampling • Aggregate information is compromised by inconsistent definitions and reporting among states

Virtually all existing oversight mechanisms are only partially developed and inadequately funded. It would be advisable to reduce the number of functions, many of which are duplicative, to concentrate on a core of more reliable oversight mechanisms. It would be important to make decisions based on a critical understanding of answers to questions like those that follow:

- Does each function have good access to complete information (not solely based on one data source or perspective) from each of the four principal sources to draw sound long term conclusions.
- Does it have the capacity to analyze the information?
- Does it have the authority (or access to authority) to act on findings?
- How does each mechanism combine access to the system with appropriate objectivity?
- How do existing mechanisms support each other?
- Are they complementary or competitive?

There appears to be no dearth of efforts to provide child welfare oversight. However, these efforts are neither integrated or funded in a manner that allows them to be as effective as possible

Impact of State Budgt Cuts

A discussion of how to improve oversight of the child welfare system cannot ignore the reality that the best oversight cannot make up for a lack of resources and needed services. A system that can detect inadequacies does little good if those inadequacies cannot be corrected.

In 2003, CWLA surveyed states to determine the impact of recent state budget cuts on their child welfare systems. CWLA's survey revealed that virtually every state has developed spending or reduction plans for their child welfare agencies over the past three years. Forty states reported formal spending reduction plans and two states reported informal plans. The average percentage cut is approximately 8%, with a range of 0–3% to over 20%.

As a result of these financial constraints:

- States have made significant reductions in staffing and services within their own agencies.
- Child welfare agencies are limiting their services to only those traditional core services related to child protection. Many states indicated that they now focused on their "core" mission, defined as child protection (investigation, removal, and placement). Programs that do not serve children in this population are being reduced or eliminated, such as homeless youth programs, child care subsidies, before and after school programs, teen parent counseling, and youth in transition.
- There is strong evidence that preventive and early intervention services are diminishing across the country. Consequently, state have been providing more expensive services (even if this conflicts with the original objective of reducing expenses).
- Over two-thirds of the states have plans to reduce or eliminate contracts with private agencies and to eliminate or cancel specific service program areas. Program areas affected include: in-home services, day treatment, family support prevention programs, foster care training, after-school programs, supervised visitation programs, emergency shelter programs, child care, domestic violence, family preservation services, and family resource centers.
- States are reducing or eliminating adoptive and foster parent recruitment and support. These changes conflict with the legislative permanency requirements.

In light of these actions, we have to evaluate the impact on the child welfare system. We are confident that states are making every effort to implement changes that enable them to continue to protect traditional services for children. However, we asked many states what their thoughts were on the implication of these spending reductions on services for children. In the long run, they see:

- Decreasing capacity to provide all services;Increasing caseloads and waiting lists for services;
- Decreasing preventive services, which may result in a need for more expensive future treatments;
- Decreasing in-home support services, resulting in more out-of-home care (even as states report the desire to turn to more in-home services);
- Decreasing support to foster parents, which may result in fewer foster parents in the system
- Longer lengths of stay for children in foster care;
- Decreasing permanency options for kids;
- Decreasing ability to record information into information systems in a timely manner; and
- Cuts in other state agencies, including mental health, substance abuse, and Medicaid, will likely result in cost shifting, with children moving among jurisdictions to seek services.

If deficits continue, we will likely see even further reductions in states' abilities to provide services. Given that nearly all states have undergone the federal Child and Family Service Reviews, it is also unclear how states will implement their Program Improvement Plans which are likely to require more, rather than fewer, resources.

CWLA's Call for Comprehensive Child Welfare Reform

CWLA urges Congress to comprehensively review and take action on what is truly needed to build the system of care so that children are protected. CWLA recognizes that the child welfare system, as currently constructed, cannot protect all children adequately. Failures occur. They are not limited to any single state. These failures will continue to occur until we put into place a comprehensive child protection system. We are overdue in implementing an improved and strengthened system. True

child welfare reform will hinge on an improved system of shared financing responsibilities among federal, state, local, and tribal governments.

The national child welfare system continues to be in need of:

- A reliable, responsive, and predictable method of guaranteed funding, for a full range of essential services, as well as placement and treatment services.
- A means of maintaining consistent focus on safety, permanency, and well-being as outcomes for children.
- Rigorous standards combined with strong federal and state accountability mechanisms.
- Recruitment and support of adequately trained child welfare professionals, foster and adoptive parents, mentors, and community volunteers.
- Resources that enable parents to provide adequate protection and care for their own children.

Without all of these elements in place the well-being of many of our country's children will continue to be lacking.

New Investments Needed

Increase Support for Prevention and Early Intervention Services

Resources are needed for primary prevention services that can prevent many families from ever reaching the point where a child is removed from the home. Prevention and early intervention services play a vital role for children and families in communities. Family support, home visiting, and in-home services enable many parents to gain competence and confidence in their parenting while addressing other family concerns. Child care, housing, and job training/employment are services that enable families to stay together to the fullest extent possible. These and other preventive services need to be much more available to families early on, as well as when a crisis occurs.

Community-based child protection programs have demonstrated that many families can be helped before there is a need for protective intervention with the family. Often, the family can identify what is needed and be connected to resources—and contact with the formal child welfare system can be averted. Often, after a formal report has been made, a child can be maintained safely at home with sufficient supports, clear expectations, and monitoring. At all points in the continuum, however, ongoing, targeted assessment must be taking place. Both the initial child protective services investigation and placement prevention services require appropriate immediate assessments of the family, the child and the community. CWLA supports the Act To Leave No Child Behind (H.R. 936) that would allow states to claim reimbursement under the Title IV–E foster care program to address these needs.

Increase Funding for Promoting Safe and Stable Families

CWLA supports increased funding to $505 million for the Promoting Safe and Stable Families program (PSSF). States use these funds for family support, family preservation, adoption and family reunification. Since 2001 when this program was last reauthorized, Congress has had the ability to add $200 million to the $305 million in mandatory funding. Despite the best efforts of members of this Subcommittee, Congress had never approved more than $405 million for PSSF.

Restore Funding for the Social Services Block Grant

CWLA again calls for the restoration of funding to $2.8 billion for the Social Services Block Grant (SSBG, Title XX of the Social Security Act). In 2000, SSBG represented 17% of all federal funding for child welfare services. While SSBG funds can be used for an array of social services, such as child care or services for the aging, states chose to spend these funds on child welfare services more than any other service area. In federal FY 2001, child protection and child foster care services each accounted for 22% of SSBG expenditures; 43 states used SSBG funds to address child protection services; and 35 states used SSBG to fund foster care.

As part of the 1996 TANF law, SSBG funding was to be restored in FY 2003. That commitment has never been fulfilled. Restoring full funding to $2.8 billion for SSBG would fulfill a congressional promise and provide needed resources to states in these difficult budget times.

Support the Adoption Incentives Fund

CWLA supports full funding of $42 million for the Adoption Incentives Fund. This is an important fund that provides resources to the states to encourage the adoption of children. Increased funding is especially needed to help states reach the new target of facilitating the adoption of older children. Congress, led by the work of this

Subcommittee, reauthorized the Adoption Incentives fund just last year. Despite that effort, the 2004 funding does not provide the full $42 million.

Implement Program Improvement Plans

Many states have now undergone their federally mandated Child and Family Services Reviews. States are now putting together Program Improvement Plans that outline what improvements are needed to better ensure that children are protected. Many states will struggle to implement these plans unless resources are provided.

Legislation pending before the Subcommittee sponsored by Representative Benjamin Cardin (H.R. 1534) offers an innovative approach that would target funds to assist states in the implementation of their Program Improvement Plans. H.R. 1534 would provide grants to states to help implement program improvements and would provide an additional bonus for the most successful states.

Adopt Strategies to Better Support the Child Welfare Workforce

A well-trained, reliable, and experienced workforce is a critical element to making children safer. Legislation pending in this subcommittee introduced by Representative Pete Stark (H.R. 2437), as well as H.R. 1534 mentioned earlier, includes a number of workforce strategies including expanded access to training for new and current child welfare workers. In the U.S. Senate, Senator Mike DeWine has sponsored legislation (S. 407) that expands college loan forgiveness to this part of our nation's workforce.

Change the Eligibility for Title IV–E Foster Care and Adoption Assistance

To ensure child safety, permanency, and well-being, federal funding should be provided for all children in out-of-home care. Congress has mandated legal and permanency protections for all foster and adopted children, however, federal funding is only available to pay for the costs of children who are eligible for Title IV–E of the Social Security Act. The current law links Title IV–E eligibility to archaic standards that each state had in place under their 1996 AFDC eligibility standards.

Since AFDC no longer exists, this continues to be an administrative burden on the states. Even more critical, however, is the fact that as time goes by, fewer and fewer children will be eligible for federal support. Data gathered by the Urban Institute indicates that as of 2000, approximately 57% of all children in out-of-home placement were eligible for Title IV–E funding. Some states may be able to serve less than one-third of their children in out-of-home placement through the use of Title IV–E foster care fund. If the current eligibility link remains, fewer and fewer children will be eligible for federal foster care and adoption assistance.

Expand Family Reunification Services

Reunification is the first permanency option states consider for children entering care. Yet, in many ways, it is the most challenging option to achieve in a plan-based, permanent way. Forty-three percent (239,552) of children in care on September 30, 2000, had a case plan goal of reunification with their parents or other principal caretaker while 57% (157,712) of the children who exited care during FY 2000 returned to their parent's or caretaker's home. Successful permanency through reunification requires many things, including skilled workers, readily available supportive and treatment resources, clear expectations and service plans, and excellent collaboration across involved agencies, at a minimum. The Act To Leave No Child Behind (H.R. 936) would allow states to claim reimbursement under the Title IV–E foster care program to address these needs.

Support Kinship Permanency and Guardianship

One area that can serve as an important tool in providing children with a safe and permanent setting is the use of guardian kinship care arrangements. Some states have used various resources to fund this permanency option. A few states have utilized federal Title IV–E funds to support guardianship through the use of Title IV–E waivers.

CWLA supports a federally funded guardianship permanency option available through Title IV–E to allow states to provide assistance payments on behalf of children to grandparents and other relatives who have assumed legal guardianship of the children for whom they have committed to care for on a permanent basis. Kinship guardianship assistance agreements and payments would be similar to the adoption assistance agreements in that they would take into consideration the circumstances and the needs of the child.

Kinship care, when properly assessed and supported, has been shown to provide safe and stable care for children who remain with or return to their families. Twenty-five percent of children in care are living with relatives, some of who will not be able to return to their parents. States vary in their use of relative homes for foster

care even though federal regulations state that there is a preference for relative placements. States are challenged to provide the financial, social, and legal supports that are needed to ensure safety and permanency in kinship placements. Generally there is a lack of case management and support services made available to relative and legal guardian providers.

Conclusion

CWLA believes that important and necessary reforms must be enacted to ensure a consistent level of safety and care for all of America's children. We look forward to working with this subcommittee to develop a comprehensive child welfare reform proposal that meets all the needs of America's the most vulnerable children and families and ensures that every child is protected. A part of that reform must include improvements to oversight systems designed to ensure the safety of our children.

Chairman HERGER. Thank you, Mr. Bilchik. Now to testify, Monsignor Kevin Sullivan.

STATEMENT OF MONSIGNOR KEVIN SULLIVAN, EXECUTIVE DIRECTOR AND CHIEF EXECUTIVE OFFICER, CATHOLIC CHARITIES, ARCHDIOCESE OF NEW YORK, NEW YORK

Monsignor SULLIVAN. Good afternoon, and thank you for this opportunity to testify—sadly—on behalf of half-a-million vulnerable children in these United States, who tonight will sleep in foster care homes, not their own homes. I am the Executive Director of Catholic Charities USA, the Archdiocese of New York. We have more than 100 agencies serving New York City and the lower Hudson Valley—a full, comprehensive range of services. Today, I want to focus on just one of these critical services: foster care. My goal is to demonstrate how important it is to provide the funding that can help prevent the foster care tragedies that so appall us when they make front-page news.

Each year in New York, we provide foster care and group care for more than 7,000 children and adolescents. In addition, we provide for thousands of services to those in preventive services, also. We agree with, as so many of the other panelists today have spoken of, the need for increased resources in preventive care, adoption services, and reunification. However, those resources cannot be provided at the expense of the foster care component of the child welfare system. If you will pardon me—we can't rob Peter to pay Paul. We can't continue to under fund a system that has children in significant danger. We are talking about children placed in foster care because they have been burned, because they have been beaten and starved—children that might never have been read to, children who have never been held. We have to keep faith with those half-million children in foster care. We need to make sure that the funds are available to provide enough social service professionals, to provide sufficient supervisors, to ensure that they are in a safe haven where growth and learning are possible. We need to make sure that the foster parents are reimbursed to ensure that they can provide a decent home.

The reasons are simple. Children are in foster care because some judge has determined that they have been so badly abused or neglected that they cannot remain safely in their own homes. The foster care component of the system makes a simple, difficult, and arrogant assertion. It says, we the people can provide better care for

these children than their parents. Ladies and gentlemen, if we don't provide the resources to make that happen, then we open ourselves to similar charges of neglect. The foster care system needs additional reimbursement to guarantee the safety of children in care, and to ensure that we provide the remedial services needed to rebuild their already damaged lives. Permit me to focus on two areas where Federal leadership is critical. The first is ensuring consistent quality of staffing and foster care parents. The current system creates instability. Resources—I can speak most about New York State—are woefully inadequate. Some residential care facilities and foster care agencies have closed because they could not retain or attract quality staff. Staff turnover, as you have heard in some of those agencies, is as much as 40 percent. Foster care parent recruitment is troublesome, and turnover high, at least in part because of low reimbursement.

Complicating these problems, and intensifying the need, is the fact that our agencies report that 50 percent of the children in foster care have special medical, psychological, and educational needs. These needs must be assessed, addressed, and monitored by caseworkers who are carrying minimum caseloads of 25 families, and all for a starting salary well under $30,000 a year. Foster parents must handle these problems in their homes, and facilitate those needs being met by various practitioners, all for about $20 per day, per child. The second area for Federal leadership concerns the funding mechanism, which others have spoken about. Unfortunately, there is a misperception that the extension of block grants to foster care is the silver bullet of greater flexibility and targeting resources. In New York, we have had an experience with foster care—and they don't work. At the end of the day, the flexibility which theoretically exists is de facto undermined by the lack of resources. In New York City, funds were diverted from foster care to other services, leaving a strapped system even more pressed for critical resources. Unfortunately, block grants in foster care will have a far greater resemblance to snake oil than silver bullets. Finally, I thank you for this opportunity to speak on behalf of that particular component—foster care—which can't be overlooked for those half-million children whose lives have already been damaged and need to be rebuilt so that they can live in greater dignity in the future. Thank you.

[The prepared statement of Monsignor Sullivan follows:]

Statement of Monsignor Kevin Sullivan, Executive Director and Chief Executive Officer, Catholic Charities, Archdiocese of New York, New York

Good afternoon. Thank you for allowing me to testify on behalf of the most vulnerable children and families in our nation.

I am Monsignor Kevin Sullivan, Executive Director and CEO of the Catholic Charities of the Archdiocese of New York. More than 100 Catholic Charities agencies serve ten urban, suburban and rural counties in New York City and the lower Hudson Valley. We provide a comprehensive range of services to people of all religions and ethnicities who are in need. We are the oldest and one of the largest providers of child welfare services in the US.

Our focus today is one of these critical services: foster care. My goal is to demonstrate how important it is to provide the funding that can help prevent the foster care tragedies that so appall us when they make front-page news.

Every year New York Catholic Charities agencies provide foster and group care for more than 7000 children and adolescents. While we agree that more resources are needed for prevention, reunification, and adoption, foster care cannot be allowed

to falter. We cannot continue to under fund a system that responds to children in significant danger. We are talking about children who have been burned, beaten, and starved—children who have never been held or read to. We must keep faith with the half-million children in foster care. We must make sure funds are available to provide enough social service professionals and sufficient supervision to insure that these children are in a safe haven where growth and learning are possible. We must also make sure that foster parents are adequately reimbursed to provide a decent home. Can anyone in this room disagree about the importance of our responsibilities to and for children in foster care?

The reasons are simple: children are in foster care because a judge has determined they have been so badly abused or neglected that they cannot remain in their own home. The foster care system makes a very difficult, yet arrogant assertion: *We, the people, can take better care of these children than their parents*. Ladies and gentlemen, if we do not provide the resources to make this happen, we open ourselves to similar charges of neglect. The foster care system needs additional reimbursement to guarantee the safety of children in care and to ensure remedial services needed to rebuild their damaged lives.

Permit me now to focus on two areas where federal leadership is critical to ensuring adequate resources to a strained system.

The first area for leadership is insuring the consistent quality of staffing and foster care parents. The current system *creates* instability. Resources in New York State are woefully inadequate. Some residential care facilities and foster care agencies have closed because they could not attract nor retain qualified staff. Foster parent recruitment is troublesome and turnover high at least in part because of low reimbursement. Staff turnover can be as high as 40% in some agencies.

In addition, our agencies report that 50% of the children in foster care have special medical, psychological and educational needs. These needs must be assessed, addressed and monitored by caseworkers who carry minimum caseloads of 25 families, all for a starting salary well under $30,000 a year. Foster parents must handle those problems in the home and facilitate those needs being met by various practitioners—all for $20 per day per child.

The second area for leadership concerns the funding mechanism. Unfortunately, there is a misperception that the extension of block grants to foster care is a "silver bullet" of greater flexibility and targeting resources. In New York we have an experience with foster care block grants that I believe tells another story. Initially, the NYS block grant to counties showed some promise of more investment in prevention and rehabilitation services to natural parents. After a few years, however, as state and county budget problems worsened, these bright promises dimmed. In NYC funds were diverted from foster care to other services, leaving a strapped foster care system even more pressed for critical resources. Theoretical flexibility was undermined by de *facto* lack of resources. Block grants for foster care will bear a far greater resemblance to "snake oil" than "silver bullets." They utilize a funding mechanism that cannot be counted on to provide consistent financial support for the stability our foster children need.

Positive strides have been made in enhancing prevention services and encouraging timely permanency planning. More needs to be done. Allow me to commend this committee for looking at ways to do this. I strongly urge you not to do anything—even if well intentioned—to make the foster care system more precarious. I would be remiss to go no further. I plead that you find a way to enhance the funding to this system that often serves an average of two years as the home of last resort for our damaged children. During those two critical years, the system must not allow children to languish; rather it must restore and rebuild those lives. Thank you the opportunity to share these ideas.

Chairman HERGER. Thank you, Monsignor Sullivan. Now to testify, Mr. Thomas Atwood.

STATEMENT OF THOMAS C. ATWOOD, PRESIDENT AND CHIEF EXECUTIVE OFFICER, NATIONAL COUNCIL FOR ADOPTION, ALEXANDRIA, VIRGINIA

Mr. ATWOOD. I thank you, Chairman Herger, and Mr. Cardin. Founded in 1980, NCFA is an adoption research, education, and advocacy nonprofit. Chairman Herger, I thank you for your kind

words about William Pierce. Indeed, there are quite literally tens of thousands of children and adults today who are enjoying loving, permanent families because of Bill Pierce's work. To my testimony—ASFA's encouraging results suggest three valuable lessons for the Subcommittee's policymaking: first, the importance of standards and measures; second, the importance of incentives and accountability; and third, the importance of flexibility for States. These lessons are elaborated in NCFA's written testimony. According to reports, the Jackson children were subjected to inexcusable and hideous treatment by their adoptive parents. One case of cruelty which the Jackson children suffered is one too many. It is important to keep in mind, however, that the main problem facing our child welfare system today is the suffering of children languishing in foster care—not the rare case of abusive adoptive parents. It is statistically predictable that in a population of 1.7 million households with adopted children, there would be some examples of horrendous abuse. Unfortunately, child abuse and neglect is a tragic fact of life in some families, whether adoptive or biological.

However, NCFA cautions against enacting extraordinary new measures which impose requirements on adoptive parents that are not expected of biological parents. Adoptive parents are as attentive to their children's needs as biological parents are. Congress should be reticent to enact a policy that treats them differently. The average age of children waiting to be adopted out of foster care is 8.3 years, and they have been in continuous foster care for an average of 44 months. The average age when the waiting child was removed from his or her family is 4.7 years. The average American hears these numbers and rightly wonders, how can it take so long for the child welfare system to determine that these children's biological parents cannot or will not parent them. In our testimony, NCFA suggests five policy ideas regarding how Federal and State officials can address these problems more effectively through the oversight of child welfare programs. First, through performance-based measures and incentives for courts. Perhaps the biggest problem with the child welfare system today is dysfunctional family courts that entrap children in never-ending hearings and technicalities that effectively doom them to miserable childhoods. A major part of the problem is the lack of performance measures and incentives for family courts, that policy makers and the public can use to praise courts for good performance, and hold them accountable for poor performance. Our written testimony suggests steps for establishing accountability—including specific performance-based measures.

Second, through flexible funding for States. Present law regarding how States spend their foster care funding is too restrictive. States should have the flexibility to customize their funding to the specific challenges of their respective foster care populations and systems. We support the concept contained in President Bush's child welfare program option. Third, through ASFA enforcement. Some judges simply ignore ASFA's 15/22 rule, for example. In effect, they deny children loving, permanent families through adoption, often in the name of family preservation, even when it is apparent that there is no real family to preserve. Federal and State officials should require courts to follow the 15/22 rule and to com-

ply with ASFA's speedier hearing schedules. Fourth, through caseload standards. In many tragic stories of the foster child who dies or is abused, the social worker was carrying too large a caseload. States should have appropriate caseload standards, and meeting caseload standards should be a high priority in social service department budgets.

Fifth, and last, through collaborations with the private sector to recruit and prepare adoptive parents. There are 471 married couples for each foster child waiting to be adopted, and many potential single parents, too. There are three places of worship for each child waiting to be adopted and every major faith calls its believers to care for orphans. This year, the Children's Bureau funds a demonstration project to develop a national network of adoption advocacy programs that recruit adoptive parents from faith-based communities. Federal, State, and local officials should work with communities of faith to recruit adoptive parents. Private adoption agencies are another resource. The public system already turns to private agencies for home studies. Adoptive parent preparation is another way private adoption agencies can help relieve the very stretched public system. Chairman Herger, I refer you to NCFA's written testimony for further details on today's topic, and I thank you for the opportunity to work with you to achieve better results for America's deserving foster children.

[The prepared statement of Mr. Atwood follows:]

Statement of Thomas C. Atwood, President and Chief Executive Officer, National Council for Adoption, Alexandria, Virginia

Chairman Herger and Members of the Subcommittee:

My name is Thomas C. Atwood. I am president and CEO of the National Council For Adoption. On behalf of the National Council For Adoption, I submit this testimony on the subject of federal and state oversight of child welfare programs.

The National Council For Adoption (NCFA) is an adoption research, education, and advocacy nonprofit whose mission is to promote the well-being of children, birthparents, and adoptive families by advocating for the positive option of adoption. Since its founding in 1980, NCFA has been a leader in promoting adoption and child welfare policies that promote adoption of children out of foster care, present adoption as a positive option for women with unplanned pregnancies, reduce obstacles to transracial adoption, make adoption more affordable through the adoption tax credit, and facilitate intercountry adoption.

Observations Regarding Recent Policies

It is useful to note at the outset several observations about recent developments in adoption and foster care policymaking. These experiences provide valuable lessons and insights for the issue of what federal, state, and local officials can do and should be doing to ensure the safety, permanency, and well-being of children:

Success of ASFA: The results of the Adoption and Safe Families Act of 1997 (ASFA) have been encouraging. Since its enactment, adoptions out of foster care rose from 31,000 in 1997 to 51,000 in 2002. From 1998 to 2002, an average of more than 13,000 additional children per year—more than 65,000 additional children in all—were adopted than would have been otherwise. Over the same five-year period, more than 230,000 foster children were adopted, about the same number as were adopted in the previous ten.

Importance of Standards and Measures: ASFA proves that in order to improve the performance of the child welfare system, federal and state officials need to establish specific standards and then regularly measure and report actual performance relative to these standards. The most important standards and measures established by ASFA include: states' baselines for the number of children adopted out of foster care; the requirement to initiate proceedings to terminate parental rights for children who are in foster care for 15 of the previous 22 months; the aggravated-circumstances exception to family-reunification require-

ments; and the requirements for earlier permanency hearings and concurrent case planning.

Importance of Incentives and Accountability: ASFA also proves the effectiveness of "carrot and stick" policies that reward good performance through such policies as the Adoption Incentives payments to states for exceeding their baselines for children adopted out of foster care, and exercise accountability for poor performance through possible reduction of funding. Congress was right to pass the Adoption Promotion Act of 2003, reauthorizing the Adoption Incentives and increasing the incentives for adoptions of foster children and youth ages nine and up.

Importance of Flexibility: Finally, the success of ASFA shows the importance of allowing states the flexibility to address the particular concerns and needs of their respective foster care populations and systems. Under ASFA, the Federal Government established standards, measures, incentives, and accountability. But ASFA largely left it to the states to determine the best ways to achieve the standards, given their respective needs and circumstances. While it is constructive for the Federal Government to work with the states in setting standards and incentives for the child-welfare system's performance, it would not serve the best interests of children and families for the Federal Government to dictate a one-size-fits-all operations plan for our diverse 50 states.

Other Positive Policy Developments: Other initiatives that are helping, and will help, to promote safety, permanency, and well-being of children in foster care are: education and training vouchers for youth who age out of foster care; the Children's Bureau's test project to develop a national network of adoption advocacy programs that recruit adoptive parents from faith-based communities; funding increases to Promoting Safe and Stable Families, which funds adoption promotion and support services; www.adoptuskids.org, the Children's Bureau website, profiling children in foster care waiting to be adopted; and the national public service advertising campaign featuring First Lady Laura Bush and Bruce Willis, and other public education campaigns at the state and local levels.

Fairness for Adoptive Families

Before moving on to policy suggestions, please consider one other general comment. The case of the Jackson children in New Jersey has appropriately come to the attention of this Subcommittee. According to reports, the Jackson children were subjected to inexcusable and hideous treatment by their adoptive parents. One case of the cruelty the Jackson children suffered is one too many. If proven guilty, the Jacksons and the officials who oversaw their adoptions should be punished severely. It is important to keep in mind, however, that the main problem facing our child welfare system, by far, is the suffering of children languishing in foster care, not the rare case of abusive adoptive parents.

According to the Census Bureau report, *Adopted Children and Stepchildren: 2000*, in the census year there were 2.1 million adopted children living with their parents in 1.7 million households, 1.6 million of those children under the age of 18. Sadly, there are abusive adoptive families, just as there are abusive biological families. It is statistically predictable that in a population of 1.7 million households there would be some examples of horrendous abuse. Unfortunately, child abuse and neglect is a tragic fact of life in some families, whether adoptive or biological.

However, the National Council For Adoption cautions against leaping to dramatic new conclusions about adoption, or adoption policy, based on the aberrant Jackson case. Adoption is an extraordinarily successful social institution in promoting child welfare. It is indisputable that children adopted out of foster care fare better than those who languish there. The benefits of adoption for children include higher scores on measures of family adjustment, emotional and developmental functioning, and self-esteem. Adopted children are more likely to attend college and less likely to abuse drugs. Adoption into their own family gives children security, well-being, and love that foster care cannot.

One of the chief reasons adoption has been so successful in meeting the needs of children is that law and society have respected adoptive parents as the real parents and treated them essentially the same as biological parents. NCFA cautions against enacting extraordinary new measures that impose requirements on adoptive parents that are not expected of biological parents, such as requiring adoptive parents to provide medical information and submit their child to post-adoption medical examinations. Adoptive parents are as attentive to their children's needs as biological parents are. Congress should be reticent to enact a policy that treats them differently. Treating them differently creates a second-class status for adoptive parenting, which

would violate children's best interests. The time to examine adoptive parents' suitability as parents is prior to adoption.

Policy Recommendations

The average age of children waiting to be adopted out of foster care is 8.3 years. The average age when the waiting child was removed from his or her family is 4.7 years. The average American looks at these numbers and wonders how it can take so long for the child welfare system to determine that these children's biological parents cannot or will not safely and responsibly parent them. To ensure child safety, permanency, and well-being, federal, state, and local officials should redouble their efforts to free foster children for adoption at younger ages, as well as make special efforts to encourage adoptions of older foster children and youth.

The greatest obstacles to child safety, permanency, and well-being today include: family courts that do not keep timely schedules or comply with the mandates of ASFA; excessive social worker caseloads; inadequate parent recruitment and preparation efforts; and lack of experience with effective models for post-adoption services, as well as for services to foster children and youth with case goals of emancipation or long-term foster care. Following, for the Subcommittee's consideration, are policy suggestions regarding how federal and state officials might oversee child welfare programs in ways to address these problems:

Performance-Based Measures and Incentives for Courts: Perhaps the biggest problem with the child welfare system today is dysfunctional family courts that entrap children in a never-ending process of hearings and legal technicalities that effectively doom them to miserable childhoods, and even danger in unsafe households. A major part of the problem is the lack of performance measures and incentives for state courts and court systems that policymakers and the public can use to praise courts for good performance and hold them accountable for poor performance.

To address this problem, the federal and state governments should take steps to establish an effective accountability system for state courts including: (1) defining clear performance standards to apply to family courts and court systems; (2) measuring court performance according to these standards; (3) reporting these performance measures to policymakers with authority over the courts and to the general public; and (4) developing incentives and accountability systems, at the state and federal levels, that promote improved performance.

The courts themselves should use this information to target areas for improvements, and policymakers and child welfare advocates should use them to monitor the courts and hold them accountable. States and the Federal Government should use these data to develop incentives and regulations that improve courts' processing of foster care cases. Among the data regarding family courts for which HHS and states should develop standards and publicize performance are:

- Average length of time between review hearings.
- Percentage of review hearings that are postponed.
- Numbers of placements children experience while in foster care.
- Numbers of review hearings children experience while in foster care.
- Percentage of children in foster care 15 out of the last 22 months who are exempted from initiation of proceedings to terminate parental rights, and the reasons given for these exemptions.
- Lengths of time from entry into foster care until termination of parental rights.
- Numbers of disruptions of placements, by type of placement.

Flexible Funding for States: Present law regarding how states spend their IV–E foster care funding is too restrictive. States do not have the flexibility to customize their child welfare systems to the unique needs of their children, youth, and families. The National Council For Adoption supports the concept contained in President Bush's flexible funding proposal, the Child Welfare Program Option. This option would allow states to maintain the federal funding of their foster care program as is, or to receive these funds as a flexible grant over five years, to support a range of child welfare services, such as parent recruitment and training, family counseling and post-adoption services, and vocational counseling, job placement, and mentoring for foster youth.

The proposal's flexibility offers states the opportunity to be timely and effective in addressing the specific challenges of their respective foster care populations and systems. This approach is consistent with the proven model for federal-state partnerships discussed in "Importance of Flexibility" in this written testimony.

Part of the flexible funding plan should be protections against negligence of states' foster care populations by requiring states to: adhere to the child safety protections mandated by ASFA; maintain existing levels of investment in their child welfare programs; and continue to participate in the Administration for Children and Family's Child and Family Service Reviews. Besides allowing more strategic targeting of foster care resources, greater flexibility would encourage the discovery of creative, new ways to promote child welfare.

ASFA Enforcement: The Federal Government should enforce state compliance with ASFA in certain key areas. Influenced by "family preservation" ideology, some judges simply ignore the ASFA requirement to initiate proceedings when the child has been in foster care 15 out of the previous 22 months. This ideology, which asserts that the biological connection must be maintained at almost all costs, denies children loving, permanent families in the name of "family preservation," even when it is apparent that there is no real family to preserve. Using ASFA's "stick," the Federal Government should require states to follow the 15/22 rule.

The Federal Government should also target for enforcement states' compliance with hearing schedules. Considering how long it takes the child welfare system to free children for adoption, it is clear that problems with hearing schedules continue. Finally, the Federal Government should evaluate whether ASFA's aggravated-circumstances exception from reasonable efforts to reunify families has been adequate to protect children. Given aggravated circumstances, perhaps states should be required to initiate proceedings to terminate parental rights, rather than only being allowed not to make reasonable efforts.

Caseload Standards: Whenever there is a tragic story about a foster child who dies or is abused, almost invariably, part of the report is that the social worker was carrying an unmanageably large caseload. Federal, state, and local officials responsible for the child welfare system should do everything in their power to ensure that foster care and adoption workers have appropriate caseloads, so that children in public care receive the professional attention and protection they deserve. Social workers and their supervisors should have clearly established, appropriate caseload standards. The standards should be highly public, as should the child welfare system's actual performance measured against these standards. Meeting caseload standards should be a high priority in evaluating supervisors' performance and in social service department budgets.

Collaborations to Recruit and Prepare Adoptive Parents: Federal, state, and local officials can collaborate more effectively with the private sector to recruit parents to adopt children out of foster care. According to HHS's most recent information, there are nearly 117,000 children waiting to be adopted out of foster care. Though that number is trending down, it is still tragically large. But here is a larger number: There are 55-million married-couple US households, 471 married couples for each foster child waiting to be adopted. There are many single Americans who can be part of the parenting solution for foster children, too, especially for older children. If federal, state, and local officials continue to promote adoption, there are more than enough loving American families to provide permanent homes for these deserving children.

Communities of faith present an excellent opportunity for adoptive parent recruitment. There are nearly 400,000 places of worship in the United States, three for each child waiting to be adopted, and every major faith calls its believers to compassion and admonishes them to care for orphans. This year, the Children's Bureau funds the first year of a five-year demonstration project to develop a national network of adoption advocacy programs that recruit parents from faith-based communities to adopt children out of foster care. This concept has tremendous potential to benefit foster children through adoption. Federal, state, and local officials should move ahead with communities of faith to explore this creative opportunity.

Private adoption agencies are another resource for promoting adoptions out of foster care, through their ability to provide parent preparation services. As parents are recruited, the public system will be further stretched to provide the parent training necessary for foster care adoptions. The public system already turns to private agencies to assist with home studies. As the child welfare system does a better job of recruiting adoptive parents, parent preparation is another way private adoption agencies can help relieve the already very stretched public system.

Chairman Herger, in recent years there has been significant progress made in finding loving, permanent families for America's foster children. But there is much more to be done through improved federal and state oversight of child welfare programs. The National Council For Adoption looks forward to continuing to work with

you and the Subcommittee to achieve still better results for America's deserving foster children.

Chairman HERGER. Thank you, Mr. Atwood. I would like to ask you a question, if I could. In your testimony, you discussed the importance of accountability for the courts in the child welfare system. In your opinion, what are some of the biggest problems courts face in protecting children and ensuring timely hearings? What are some of the more important measures Congress might consider to make State courts more accountable?

Mr. ATWOOD. The measures that we refer to in our written testimony are the average length of time between review hearings, the percentage of review hearings that are postponed, the number of placements children experience while in foster care, the number of review hearings children experience while in foster care, the percentage of children in foster care during 15 out of the last 22 months who are exempted from initiation of proceedings to terminate parental rights and the reasons given for those exemptions, the length of time from entering into foster care until termination of parental rights, and the number of disruptions by type of placement. This is a lot easier said than done, I realize, but the mandate is there. It has to happen. It is clear that when you look at the performance of the executive branches of the States in response to the ASFA, you can see how measures, incentives, and accountability can be quite productive. We have had tremendous increases in the number of children adopted out of foster care as a result of these incentives that were put in place. We need to find a similar mechanism for the courts. The courts have not kept pace with the responsiveness of the executive branch agencies. So, I don't have all the answers, but I certainly would suggest that these points that I listed contain some of them.

Chairman HERGER. Thank you very much. The gentleman from Maryland, Mr. Cardin.

Mr. CARDIN. Thank you, Mr. Chairman. First, let me just compliment all of you for your testimony—but also for the work that you are doing. My only regret is that this isn't being covered by C–SPAN, because I think this is the type of message America needs to hear—what is happening with children. Mr. Frenzel, we appreciate your continued public service. I know your report will be coming out in the spring; we hope it will be as early as possible. You may not be aware, but this is an election year——

[Laughter.]

So, we are going to try to get our work done a little bit earlier this year. If we can get Bill Frenzel and Bill Gray together on a report, I know it is going to be fiscally responsible, accountable, and compassionate—so we look forward to your recommendations. I think it could be extremely helpful to us as we go through our work here, and we have had a chance to chat. I think you are moving in the right direction, and we really are looking forward to your work; we thank you for your continued leadership.

Mr. FRENZEL. Thank you, Mr. Cardin. Schedule us for the first week in May.

Mr. CARDIN. Good. We appreciate that. Mr. Bilchik, I always appreciate your work and the work of your organization. I think you really should underscore the point of your survey that revealed that virtually every State has developed spending or reduction plans for their child welfare agencies over the past 3 years. That shouldn't shock us. It just points out the fact that if we think that the States are going to have the political or the financial will to come forward with additional resources, it is not going to happen.

Mr. BILCHIK. The survey that we did of all the States and the District of Columbia in mid-year 2003 did reveal that virtually every State planned on cutbacks, and narrowing the scope of services back to child protection, foster care, adoption, and eliminating perhaps some services that normally prevent families from entering the child welfare system, or support them once they have left. So, if we are looking at the CFSRs, and we are seeing that virtually every State is struggling with being rated in a way to show they are really in compliance with the standards, then we need to be looking to how we create a formula to make it work. Relying too much on the States, if the Federal Government says we are going to cap what we do here, is going to be a formula for disaster, because the States aren't going to have the resources to do it themselves. It truly needs to be a partnership.

Mr. CARDIN. I agree with you. That is why I would just urge, as we look at the reform of the Federal role in this regard, it has to be mindful of the realities of what is happening to the States. So, if we develop how we want child welfare reform nationally, we have to recognize the fact that these are difficult times for our States with regard to budgets. Frankly, there have been very few times, even during good times, that States have significantly increased their investments in this area. So, we need to develop a national policy. Monsignor Sullivan, Ranking Member Rangel warned me about you—that you would be very inspirational to our Committee—and you were. You made a point that I really want people to stop and think about: it is by our orders that we are basically the parents for children that are in the foster care system.

Mrs. Johnson—when she was Chair of this Subcommittee—worked with me on a bill dealing with children aging out of foster care, between 19 and 21 years of age. What we said at that time is that if you were a parent, you wouldn't give up your child at 18 years of age. You still support your child. You still provide help for your child. I dare say today that for American parents, as they look at schools to send their children to for part of the day, or look at summer camps that they are going to send their children to during the summer, would not tolerate the type of supervision that we have in foster care if it was their children—and that should be the test. We should be willing to make the investment necessary to protect these most vulnerable children, and I think you have given us the standard that I hope we will use as we evaluate what we should be doing at the Federal level on our policy regarding the child welfare system. So, I really want to thank you for at least planting in our minds the roles that we need to play.

Monsignor SULLIVAN. Mr. Cardin, thank you very much. The reason why I think it is critical to focus on that foster care component, is because it is the unique part of the system. All the other

stuff is absolutely critical—the preventive service and the reunification. Kids are in that foster care system for around an average of 2 years. For 2 years, we have that responsibility, because we have said they have to be there, and the choice is whether we let them languish for those 2 years, or during that period of time we provide the resources so that they begin to rebuild those damaged lives. So, I thank you for highlighting that.

Mr. CARDIN. Mr. Atwood, I want to join the Chairman to compliment the work that you have done in this area. So many lives have been affected by your work in a very positive way; we are very proud of what we have been able to accomplish, and what you have been able to do with changes in the policies. Thank you.

Mr. ATWOOD. If I might just offer one or two thoughts on the funding aspect—NCFA does, indeed, also support the full funding of the Promoting Safe and Stable Families amendments of 2001, as the Bush Administration proposed. Again, I refer to ASFA. The power of ASFA was standards, measures, incentives, and accountability. There was some money in there with the adoption incentive payments for States, but it was tied to performance. So, if we are going to talk about funding increases, I would suggest that we tie them to incentives, and that we look for incentives for the courts, most specifically, to improve their performance.

Mr. CARDIN. I would just point out, there are proposals here that would offer a bonus incentive based upon performance that I would urge you to take a look at, because they are aimed at just what you are talking about, by providing carrots, incentives, for States to respond—particularly as it relates to training and supervision of their caseloads, and reducing their caseloads. I think that is the right way to proceed. On the money, the additional funding, we are suggesting mandatory funding for the Promoting Safe and Stable Families amendments of 2001. It would be a lot easier than fighting that battle every year.

Chairman HERGER. I thank our witnesses for being here, and would like to invite our next panel to come forward to testify.

Mr. BILCHIK. Mr. Chairman?

Chairman HERGER. Yes?

Mr. BILCHIK. I have some information. The panel this morning talked about the comparability of data, and I brought forward some reports that might help the Committee.

Chairman HERGER. Without objection, we will submit that for the record.

Mr. BILCHIK. Thank you very much.

Chairman HERGER. Thank you.

[The information follows:]

Issue Brief

Child Welfare League of America October 2003

Can States Be Compared Based on Child Welfare Data?

State and county agencies run the nation's child welfare systems, providing a wide range of services including child protection, family preservation and support services, foster care, adoption, and often juvenile justice and mental health services. Over the last 10 years the child welfare field has seen a significant growth in the availability and use of data to help understand and administer child welfare programs.

On a national level, the National Child Abuse and Neglect Data System (NCANDS) and the Adoption and Foster Care Analysis and Reporting Systems

(AFCARS) have become important sources of information about children in the child welfare system, providing a national picture of child maltreatment and foster care. Moreover, the Federal Government is using the data from these systems to inform the Child and Family Service Review process. With these national data sets available, the question often arises: **What do the data show us about how states compare in their ability to ensure the safety, permanency, and well-being of children in the child welfare system?**

Comparisons among states based exclusively on national child welfare data sources can be misleading and should not be used to judge the effectiveness of one state versus another. While the national data sets provide good national estimates, they lack reliability for interstate comparisons due to variations in state laws, policies, definitions, and data collection processes. The reliability of the data increases when each state establishes a baseline and monitors itself over time. Also, the reliability increases when states with similarities in their child welfare systems, such as those serving both child welfare and juvenile justice populations, are grouped together for a comprehensive analysis. The Federal Government is currently addressing some areas of variation among the states' data. Following are just a few examples that show why data cannot be compared across the states without additional information and analysis.

- **Child abuse and neglect—**Each state and the District of Columbia defines child abuse and neglect differently in their state statutes and policies. While there are similarities among these 51 or more definitions of child abuse and neglect, the differences prevent reliable comparison of the data. For instance:
- Some states capture categories such as abandonment and emotional or mental injury in their laws, while others do not.[1]
- Some state laws include threatened harm in the definitions, while others do not.[2]
- Some states investigate educational neglect, while others do not. Some states investigate fetal exposure or addiction to alcohol or other harmful substances, while others do not.[3]
- States require different levels of evidence to substantiate a report of abuse or neglect.[4]
- **Child abuse and neglect fatalities—**A child death may be counted as a maltreatment fatality in one state, but not in another. A few of the factors that limit the reliability of the maltreatment fatality data include the following:
- About half the states investigate incidents that appear to be accidents (such as swimming pool drowning) to determine whether abuse or neglect played a role in the death, while other states do not.[5]
- Some states incorporate the numbers from their child fatality review teams, while others do not. Also, the composition of the child fatality review team, the role of the team in reporting child deaths, and the extent of the review or investigation when a death occurs, varies considerably from state to state.[6]

CWLA National Data Analysis System Issue Brief

- **Child maltreatment in foster care—**There are nuances in the child protection and foster care data that make it difficult to accurately compare data across states. The Federal measure on child maltreatment in foster care uses the foster parent and facility staff perpetrator categories from NCANDS and the foster care population in AFCARS. In this measure:
- When a child is abused or neglected by a relative foster care provider, the incident is captured differently among states. Since the care giver is both a relative and a foster care provider, the relative relationship may be captured in the per-

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[1] National Clearinghouse on Child Abuse and Neglect Information. Statutes-at-a-Glance. *Definitions of Child Abuse and Neglect.* (Retrieved September 2003 from: http://www.calib.com/nccanch/statutes/define.cfm).

[2] Ibid

[3] Utah Division of Child and Family Services. (2003). *Child Protective Services Allegation Survey Report.* Salt Lake City Utah: Author.

[4] U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2003). *Child Maltreatment 2001.* Wahington, DC: U.S. Government Printing Office.

[5] Child Welfare League of America. (July 2001). *National Working Group Highlights: Child Abuse and Neglect Fatalities: Clarification Survey Results.* Washington DC: Author.

[6] Ibid.

petrator data in some states (not the foster care relationship), which is not part of the Federal measure on child maltreatment in foster care.[7]

- Residential facility staff are counted as perpetrators of maltreatment in most, but not all, states. The victims in these cases are not always in foster care, and thus the measure of maltreatment in foster care in these states has the potential to be inflated.[8]

- **Placement stability—**Data on placement stability contains several discrepancies in how states count the number of children's placements, and reflects considerable variation in the populations served by the child welfare agencies. For instance:

- A child in foster care may spend a short time outside of his or her foster home (or other placement), receiving services in a hospital or detention or incarceration placement. States vary as to whether they count these as placement changes. In 2000 59% of states counted medical hospital stays, 65% counted detention or incarceration placements, and 76% counted placements in psychiatric hospitals. There were also differences in circumstances and timeframes in which these placements were counted.[9]
- Some child welfare agencies serve the juvenile justice population, and some juvenile justice youth are included in the national data.[10] Since placement issues are different in juvenile justice, the placement stability data may be affected. Therefore, when analyzing placement stability data it is important to group states that serve similar populations or limit the data to just the child welfare population.

- **Relationship between outcomes—**The child welfare field is just beginning to study how measured outcomes correlate and interact with one another. There is evidence that performance in one outcome area affects performance in another, adding another complexity to cross-state comparison. For example:

- Analysis of Federal outcome data demonstrated a relationship between high percentages of reunification within 12 months and high re-entries within 12 months. Likewise, states with low reunification tended to have low re-entries within the 12-month periods.[11] Therefore, when assessing reunification outcomes it would be critical to evaluate data and policies relevant to re-entries, and perhaps other areas, at the same time.

The child welfare field lacks crosscutting standards and definitions that would allow reliable comparison among states. The two Federal data sources provide important national information as well as a basis to work toward more comparable data. Relevant policy guidance begins to add clarity, but clear, common operational definitions are needed to enhance inter-state reliability in the data. Also, additional research is needed to understand the relationship between different performance measures.

Much can be learned by comparing state child welfare programs, allowing states to share their successes and challenges in ensuring the safety, permanency and well-being of children. Data play an important role in such comparisons, but significant time and resources must be invested in understanding the nuances of the data. NDAS helps present some of the variations through footnotes, text-based tables, and National Working Group Highlights bulletins. Further information about data nuances and data quality may be gathered directly from the states of interest.

Prepared by Kristen Woodruff, Project Manager for the National Working Group To Improve Child Welfare Data, kristen@cwla.org.

Chairman HERGER. Again, I would like to invite our next panel to the table. We will be hearing from Curtis Mooney, President of DePelchin Children's Center in Houston, Texas, here today on be-

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[7] Child Welfare L eague of America. (October 2002). *National Working Group Highlights: Child Maltreatment In Foster Care: Understanding The Data.* Washington DC: Author.

[8] Ibid.

[9] Child Welfare League of America. (April 2002). *National Working Group Highlights: Placement Stability Measure and Diverse Out-of-Home Care Populations.* Washington DC: Author.

[10] Ibid.

[11] U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2003). *Safety, Permanency, Well-being. Child Welfare Outcomes 2000: Annual Report.* Washington, DC: U.S. Government Printing Office.

half of the Alliance for Children and Families; Mr. Thomas Birch, Legislative Counsel for the National Child Abuse Coalition; Courteney Holden, Executive Director of Voice For Adoption; Jack Trope, Executive Director of the Association on American Indian Affairs; and Christopher Klicka, Senior Counsel for the Home School Legal Defense Association. Mr. Mooney to testify.

STATEMENT OF CURTIS C. MOONEY, PH.D., PRESIDENT AND CHIEF EXECUTIVE OFFICER, DE PELCHIN CHILDREN'S CENTER, HOUSTON, TEXAS, ON BEHALF OF THE ALLIANCE FOR CHILDREN AND FAMILIES

Mr. MOONEY. Mr. Chairman, I am here today on behalf of the Alliance for Children and Families, an organization in which my nonprofit agency is a member. The Alliance for Children and Families is a nonprofit membership association representing 320 child and family service organizations in North America. By training, I am a social worker, and for the past 28 years, I have devoted my life to working with children who have been abused and neglected in the private sector. I am the President of DePelchin Children's Center in Houston, Texas. DePelchin provides a full array of services for children and families, including prevention services, mental health services, foster care, adoption, emergency shelter, residential treatment, and post-adoption services. There is a growing consensus among national advocacy groups, child welfare providers, as well as many State officials and policy makers, that the current mechanism for funding the Nation's child welfare system needs revision and must be revamped. The Alliance for Children and Families believes that the following major topics need to be reflected in the discussions that lead to the framing of a meaningful child welfare reform.

Child safety cannot be measured by physical safety alone. The physical scars of trauma heal much faster than the emotional ones. There must be a common definition for child safety that is consistent throughout the States, which includes not only physical safety, but behavioral and emotional well-being, as well. Once this common definition has been established, it is vital that resources are dedicated to the training of staff, judges, and mandatory reporters—every child, every time. Any refinancing of the child welfare system must assure that standards of care, caseload and supervisory ratios, and expectations for child welfare outcomes do not get reduced in large urban, often poor areas across the country—or, as in West Texas, across vast areas of land with little population. Safety, permanency, and well-being measures should be a child's everyday experience in the child welfare system—not just ultimate system outcomes. To achieve this, we must have a system that invests in and expects quality, and places the highest value on assuring that the adequate case management supervision and services are there for children.

Prevention, family based services, and successful reunification of families must be our highest priority, and over time, a focus on these areas will reduce the number of children in out-of-home care. To provide these programs as we transition from a system that has focused on out-of-home care will require a sustained effort and additional resources over at least a 3- to 5-year period of time. The

children in our system today often have serious and severe physical, behavioral, and emotional needs. When their needs cannot be met through a family centered, in-home service, we must assure that the first placement is the best placement. Oftentimes, these children experience repeated failed services and placements that have had devastating results on them. To accomplish this, we need funding specifically directed to recruitment, placement development, training, oversight, and ongoing support and services. The current Federal commitment to a shared partnership of research institutions, Federal and State agencies, and community-based service providers is outstanding. Any system changes may continue the incentives States now have to conduct research and evaluation.

Continuous quality improvement works. The child welfare system, including contracted service providers, must be funded and required to have the internal capacities for continuous quality assurance and improvement. Improvement should not be driven by high-profile cases or audits alone. The child welfare system is comprised of many partners, agencies, and funding streams. Future success for this system requires both the Federal and State governments to identify the agencies and funding streams that must work together for the sake of the children and families, and ensure that those entities adopt a common set of child and family centered outcomes and values and are accountable for them. The deteriorating state of the child welfare workforce can no longer be ignored. In fact, we have reached a crisis point, needing both Federal and State response. Adequate education and training, continued competence, quality of supervision, pay, benefits, and caseloads of critical frontline staff must be addressed. A clear connection between poverty and family violence must be addressed, as well. Safety, permanency, and well-being of children must include an assessment of the family's ability to assure the child's needs can be met, or identify what must be done so that those needs can be met.

The Federal Government should—if changes are made to title IV–E funding—be considered for poverty as the funds are distributed. The outcomes of the title IV–E demonstration project and waivers should guide the way for child welfare reform. They have allowed us to test out what works and what doesn't. Let us begin our reform there, and in the future when we have something that works well and is cost neutral, all States should be able to implement it without a waiver. As a provider of services in Texas for many years, and as a representative of the Alliance for Children and Families' 320 agencies, I can tell you that the nonprofit sector takes seriously our mission to provide services to people in need. Our communities are generous, and give us resources to help children and families beyond those covered under State and local contracts. However, we too often find ourselves having to use these precious resources to supplement State and local contracts which should be paying for the services they purchase in full. I want to thank the Subcommittee for the opportunity to testify.

[The prepared statement of Mr. Mooney follows:]

Statement of Curtis C. Mooney, Ph.D., President and Chief Executive Officer, DePelchin Children's Center, Houston, Texas, on behalf of the Alliance for Children and Families

Mr. Chairman, distinguished members of the Subcommittee, I am testifying here today on behalf of the Alliance for Children and Families, an organization of which my nonprofit organization is a member. The Alliance for Children and Families is a nonprofit membership association representing 320 child and family serving organizations in North America. Member organizations, such as DePelchin Children's Center, provide an array of community-based programs and services to all generations, and serve close to 8 million people each year in more than 6,700 communities. Motivated by a vision of a healthy society and strong communities, the Alliance's mission is to strengthen the capacities of North America's nonprofit child and family serving organizations to serve and to advocate for children, families and communities.

I have spent the past 28 years working at four agencies in three states with children who have been abused and neglected. I am a social worker by training with a Masters in Social Work from Washington University in St. Louis and a Ph.D. in Social Work Administration from the University of Texas in Arlington, Texas. For the last 7.5 years I have served as the President and CEO of DePelchin Children's Center in Houston, Texas. One of Houston's oldest charities, DePelchin provides some 30 different programs in the three broad areas of a) prevention of child abuse, b) children's mental health services, and c) child welfare services including foster care, residential treatment and adoption services. My agency provides services to over 20,000 individuals annually. We are funded via United Way, individual contributions, state and federal grants, and contracts with the state of Texas for child welfare services and health insurers for mental health services.

By holding this hearing, the Subcommittee has taken up a timely topic that merits our individual attention. There is a growing consensus among national advocacy groups, child welfare providers, as well as many state officials and policymakers that the current mechanism for funding the nation's child welfare system needs revision, and must be revamped. Child welfare funding has eroded, and scant attention has been paid to maintaining adequate funding for children in the foster care system, who often have severe physical and psychological needs. It is imperative that any proposed changes promote and invest in increased prevention and early intervention, while assuring the protection, permanency and wellbeing of our country's most vulnerable children.

The Alliance believes that the following major topics need to be reflected in discussions that lead to the framing of meaningful child welfare reform:

- Through experience, trauma research, and neuroscience, we now have a clearer understanding that child safety cannot be measured by physical safety alone. There must be a common definition for child safety that is consistent throughout the states which includes not only physical safety but behavioral and emotional wellbeing as well. It should be noted that research has shown that neglect in boys is more harmful to their developing brain than physical abuse.
- Any refinancing of the child welfare system must respond and be responsive to every child regardless of where a child lives. We must assure that standards and expectations for child welfare outcomes do not get reduced in large urban (often-poor) areas across the country. Quality standards in relation to caseload size, supervisory ratios, and minimum standards of practice should be funded and expected for all children.
- Safety, permanency, and wellbeing are often only considered as ultimate system outcomes. These measures should mark a child's experience in the child welfare system and should be expected and achieved in every day practice. To achieve this we must have a system that invests in and expects quality and places the highest value on assuring adequate resources for maintaining reimbursement rates to assure highly competent and professional staff services and placement resources.
- Prevention, family-based services and successful reunification of families should be our highest priority. It should be noted that to build the necessary capacity needed in these areas will take a sustained one-time effort of additional resources over at least 3–5 years before the system will begin to see a steady and real decrease of children in placement and a realization of those savings for reinvestment in the front-end of the system.
- We must recognize and respond to the often serious and severe physical, behavioral, and emotional needs of children in the system today. The Federal Government should continue an entitlement funding mechanism for children with these special needs, to ensure that family centered services, including residen-

Statement of Curtis C. Mooney, Ph.D., President and Chief Executive Officer, DePelchin Children's Center, Houston, Texas, on behalf of the Alliance for Children and Families

Mr. Chairman, distinguished members of the Subcommittee, I am testifying here today on behalf of the Alliance for Children and Families, an organization of which my nonprofit organization is a member. The Alliance for Children and Families is a nonprofit membership association representing 320 child and family serving organizations in North America. Member organizations, such as DePelchin Children's Center, provide an array of community-based programs and services to all generations, and serve close to 8 million people each year in more than 6,700 communities. Motivated by a vision of a healthy society and strong communities, the Alliance's mission is to strengthen the capacities of North America's nonprofit child and family serving organizations to serve and to advocate for children, families and communities.

I have spent the past 28 years working at four agencies in three states with children who have been abused and neglected. I am a social worker by training with a Masters in Social Work from Washington University in St. Louis and a Ph.D. in Social Work Administration from the University of Texas in Arlington, Texas. For the last 7.5 years I have served as the President and CEO of DePelchin Children's Center in Houston, Texas. One of Houston's oldest charities, DePelchin provides some 30 different programs in the three broad areas of a) prevention of child abuse, b) children's mental health services, and c) child welfare services including foster care, residential treatment and adoption services. My agency provides services to over 20,000 individuals annually. We are funded via United Way, individual contributions, state and federal grants, and contracts with the state of Texas for child welfare services and health insurers for mental health services.

By holding this hearing, the Subcommittee has taken up a timely topic that merits our individual attention. There is a growing consensus among national advocacy groups, child welfare providers, as well as many state officials and policymakers that the current mechanism for funding the nation's child welfare system needs revision, and must be revamped. Child welfare funding has eroded, and scant attention has been paid to maintaining adequate funding for children in the foster care system, who often have severe physical and psychological needs. It is imperative that any proposed changes promote and invest in increased prevention and early intervention, while assuring the protection, permanency and wellbeing of our country's most vulnerable children.

The Alliance believes that the following major topics need to be reflected in discussions that lead to the framing of meaningful child welfare reform:

- Through experience, trauma research, and neuroscience, we now have a clearer understanding that child safety cannot be measured by physical safety alone. There must be a common definition for child safety that is consistent throughout the states which includes not only physical safety but behavioral and emotional wellbeing as well. It should be noted that research has shown that neglect in boys is more harmful to their developing brain than physical abuse.
- Any refinancing of the child welfare system must respond and be responsive to every child regardless of where a child lives. We must assure that standards and expectations for child welfare outcomes do not get reduced in large urban (often-poor) areas across the country. Quality standards in relation to caseload size, supervisory ratios, and minimum standards of practice should be funded and expected for all children.
- Safety, permanency, and wellbeing are often only considered as ultimate system outcomes. These measures should mark a child's experience in the child welfare system and should be expected and achieved in every day practice. To achieve this we must have a system that invests in and expects quality and places the highest value on assuring adequate resources for maintaining reimbursement rates to assure highly competent and professional staff services and placement resources.
- Prevention, family-based services and successful reunification of families should be our highest priority. It should be noted that to build the necessary capacity needed in these areas will take a sustained one-time effort of additional resources over at least 3–5 years before the system will begin to see a steady and real decrease of children in placement and a realization of those savings for reinvestment in the front-end of the system.
- We must recognize and respond to the often serious and severe physical, behavioral, and emotional needs of children in the system today. The Federal Government should continue an entitlement funding mechanism for children with these special needs, to ensure that family centered services, including residen-

tial care and treatment, are available and effective. Too often, these children experience repeated failed services and placements due to lack of quality assessment and placements that do not meet their needs.

- Currently, the federal commitment to facilitating a shared partnership of research institutions, federal and state agencies and community-based service providers is outstanding. Any system changes must continue the incentives states now have to conduct research and evaluation.
- The child welfare system, including the agencies holding city and state contracts for provider services, must be funded to possess the internal capacities for continuous quality assurance and improvement. The federal Child and Family Service Reviews are but a starting point for achieving quality assurance within the system. The ability for child welfare systems to improve themselves should not be based on the latest high-profile case or audit. Instead, a portion of federal and state funding should be dedicated to internal quality improvement within child welfare organizations.
- In order for a child welfare system to be successful, we must interact on a daily basis through both policy and funding with multiple federal agencies and funding streams as they play out at the local level. Both the Federal Government and state governments need to clearly identify these agencies and funding streams and assure that we are working together to adopt and achieve a common set of child and family-centered outcomes and values that will guide them in their daily work and accountabilities. For instance, it is time that Medicaid and the child welfare system work together in a concerted way to assure that the unique physical and behavioral health needs of children in the child welfare system are being met.
- The deteriorating state of the child welfare workforce can no longer be ignored, and in fact is at a crisis point needing both federal an state response. Adequate education and training, continued competence, quality of supervision, pay and benefits of critical front-line staff must be addressed. The Alliance supports legislation such as Representative Cardin's bill (H.R. 1534) that works to reduce the many substantial barriers to maintaining a qualified and effective human services workforce.
- It is time that we address the clear connection between poverty and family violence. Safety, permanency, and wellbeing of children must include a family's ability to assure the needs of a child can be met and work with these families to improve their economic security. Since we now know clearly that there is a correlation between the stresses of poverty and the neglect and abuse of children, these families simply are at a higher risk.
- The outcomes of the IV–E Demonstration Projects and Waivers should guide the way for child welfare reform. Before significant reform policies can be crafted, an analysis of those states using flexible funds with current IV–E dollars should be conducted. The challenges and lessons learned from these states can be used effectively to revamp the current child welfare system to better serve children, families and communities. In the future, once a demonstration program has proven success through outcomes and cost neutrality, all states should be able to implement the program without a waiver.

Alliance Key Concerns Regarding the Administration's Flexible Funding Proposal

The Administration has attempted to respond to the needs of the child welfare system with a proposal that would dismantle the current entitlement system and restructure the Title IV–E foster care program. While legislation has not yet been introduced, many aspects of the Administration's proposal have been revealed through congressional testimony and public conversations with Administration officials.

The Alliance for Children and Families and its member agencies have many concerns about reform of the child welfare financing mechanism. Any such reform must provide states with guaranteed federal funds and a long-term partnership necessary to both meet the varied needs of vulnerable children and their families as well as systematically reform a system long overlooked by the Federal Government. Service delivery systems as complex and critical as child welfare cannot be reformed overnight by simply extending flexibility to a dwindling pool of resources.

The "look back" provision for foster care streamlines the IV–E process, but maintaining the provision for Adoption Assistance accomplishes just the opposite. An assessment of the child's household income at removal is required at time of adoption; a IV–E determination would have to be completed regardless. If the eligibility determinations remain a part of the foster care process, the "look back" must be corrected to reflect current Temporary Assistance to Needy Families (TANF) eligibility stand-

ards. If eligibility determinations are eliminated from foster care, the "look back" provision should be eliminated from adoption determinations as well.

State flexibility, while desirable, transfers a greater share of responsibility and risk for the child welfare population to the states. The partnership between the Federal Government and states in providing services to abused and neglected children must be maintained and states should be discouraged from diminishing their investment in the child welfare system once receiving federal dollars. Additionally, Congress should create appropriate and minimum standards in areas such as caseload size, and give guidance to participating states to ensure the progress of child welfare reform. A continued federal match opportunity for states will leverage additional resources from state legislatures.

Conclusion

As a provider of services in Texas for many years, and as a representative of the Alliance's 320 nonprofit family service agencies, I can tell you from experience that the nonprofit sector takes very seriously our mission to provide service to all people in need. However, we are increasingly finding that our contracts with state and local agencies do not provide adequate funding for the expectations for which they carry. We stand ready to be full partners with you, the state, and our communities but that partnership must go both ways. As an independent sector, we have demonstrated the knowledge, experience, and commitment to work with you as a partner in developing any changes necessary in policy, minimum standards and practices in the child welfare system.

The Alliance for Children and Families would welcome the continuing opportunity to share the voices of America's service providers with the Subcommittee as it deliberates on the child welfare system.

I would like to thank the Subcommittee for giving me the opportunity to testify, and would be happy to answer any questions at this time.

Chairman HERGER. Thank you, Mr. Mooney. Mr. Thomas Birch to testify.

STATEMENT OF THOMAS L. BIRCH, LEGISLATIVE COUNSEL, NATIONAL CHILD ABUSE COALITION

Mr. BIRCH. Thank you, Mr. Chairman. I am Tom Birch, and I am here as the Legislative Counsel of the National Child Abuse Coalition, which is a collaborative effort of some 30 national organizations to bring focus to the issues of prevention of child welfare abuses and provision of treatment and services for abused and neglected children. I very much appreciate the opportunity to testify here today, and also the efforts of this Subcommittee to constantly work toward strengthening our response regarding preventing abuse and protecting children. At this point in the hearing, I realize that the messages that I bring have been brought to you already, but I would like to provide some kind of framework, and talk about the need to invest in preventive services, and to look at closing the spending gap in services to protect children who have been abused and neglected. When we look at how we as a nation spend on child welfare services, we see that we are actually investing in an outcome that no one wants—the placement of children in foster care. We are spending well over $16 billion each year in Federal, State, and local dollars to subsidize the foster care and adoptive placements of children who have been so seriously abused and neglected already that they are in danger of no longer being safe when left at home. By contrast, a fraction of that amount is spent on prevention of abuse and neglect, and on intervention services to protect children from abuse.

No one would argue that we should not be paying to protect the children who have been the most seriously injured. Far less attention in our policy, our funding, and our discussion is directed at preventing harm to children from ever happening in the first place. Let me give you a sense of how the Federal dollars work out here. When we look in the current fiscal year with title IV–E, over $7 billion is being paid for out-of-home placement. By contrast, funds coming from title IV–B and from a share of title XX, a small amount contributed from the Child Abuse Prevention and Treatment Act (CAPTA, P.L. 93–247), together add up to less than $900 million for preventive and interventive services. For every Federal dollar we spend on foster care and adoption subsidies, we spend less than 13 cents of Federal child welfare funding on preventing and treating child abuse and neglect. We will never stop the flow of children into our Nation's foster care rolls unless we put together additional resources to help States and communities build their capacity to support preventive services and treatment services, as well. Putting dollars aside for prevention is sound investing, not luxury spending.

We looked at what we should be spending to improve child protective services, and to support preventive services, and we discovered a spending gap in this country of almost $13 billion in prevention and protection. Spending in Federal, State, and local dollars in preventive and protective services amounted to only about $2.9 billion of the estimated $15.9 billion total cost of what we ought to be spending on those services. We looked at the Urban Institute's most recent report on child welfare spending. States reported spending $20 billion—that is in Federal, State, and local dollars—on child welfare in 2000. Of that, they could categorize a little over $15 billion in terms of how they had spent it. Some $9.1 billion was for out-of-home placements for foster care, $1.8 billion on administration, $1.9 billion on adoption, and $2.9 billion on what was called "all other services." That is the piece that I am talking about—prevention and intervention. We looked at the cost to Child Protective Services first—what we ought to be spending on investigating the reports of child abuse and neglect, and then what we ought to be spending on providing some basic services. We came up with a total cost of $5.9 billion, and again, when we compare that with the actual dollars spent, the gap shows that Child Protective Services funding comes up nearly $3 billion short.

When we considered the cost of preventive services, we looked at what it would mean to provide preventive services to the 3 million children—the victims of maltreatment identified by the national incidence study. About $10 billion is what we ought to be spending there, so we are way short on what we need. What does the spending gap mean in terms of the child welfare workforce? Well, 90 percent of States report having difficulty in recruiting and retaining child welfare workers because of low salaries, high caseloads, insufficient training, and high turnover of child welfare workers. When we look at caseloads for child welfare workers, the average is double the recommended caseload amount. Our present system is overworked and inadequate to the task—we need to reorganize our current child protection system to come within the framework of a broader family support system. I will stop there. I look forward to

and child protective services. (Of the $20 billion, states spent $7.9 billion in federal funds, $7.9 billion in state funds, and $2.2 billion in local funds). There were some increases in state and local child welfare spending in 2000 over 1998, when the Urban Institute last looked at these numbers, but that was when states were feeling flush. It's not the case now.

First, consider the cost to child protective services of 1) investigating the reports of child abuse and neglect that were accepted in 2000 and 2) providing some basic services to the victims of child maltreatment in that year. When we look at the expense of investigating the 1.726 million children who were screened in for further assessment, plus the expense of providing services to the 879,000 substantiated child victims and to the 385,000 children in unsubstantiated reports who also received some services, we come up with a total cost of $5.9 billion.

We should not, here, overlook the unacceptable fact that nearly half the victims of child maltreatment in fact receive no services at all. One of the great tragedies of our system for protecting children is the hundreds of thousands of children—over 392,000 (45%) victims of child abuse in 2000—who received no services whatsoever: suspected abuse reported, report investigated, report substantiated, case closed.

A recent analysis of unsubstantiated reports of child abuse and neglect found that a perceived lack of services would influence a caseworker's decision to unsubtantiate a report of abuse, often resulting in a recurring report and continuing harm to a child.[2]

The CPS spending shortfall amounts to a failure to invest in a system that could successfully protect children from abuse and neglect. When examining the actual dollars spent, the gap in CPS funding—a spending shortfall of nearly $3 billion—must be held accountable for many of the barriers to the adequate protection of children. Failing to invest in a working child protection system results in a national failure to keep children free from harm.

Second, consider the cost of preventive services—$10 billion if offered to the three million child maltreatment victims identified in the HHS National Incidence Study III[3]—and I am not even talking about cost of offering voluntary, universal preventive services to families. That's a total cost of $15.9 billion. Yet, in 2000, states spent only $2.9 billion in federal, state and local funds on protective and preventive services for children. Our national child welfare policy represents a morally unacceptable failure to invest in this system.

These are conservative cost figures. When adjusted to account for inflation, data indicate that investigations by child protective service agencies cost approximately $990 per case. The cost per case to provide basic in-home services such as homemaker assistance or family counseling is $3,295.[4] These costs are low to start with. Pay scales in child welfare are generally low and noncompetitive—significantly lower, for example, than salaries for teachers, school counselors, nurses and public-health social workers[5]—which brings these costs in at an unrealistically low level.

What does the spending gap mean in terms of the child welfare workforce? Ninety percent of states report having difficulty in recruiting and retaining child welfare workers,[6] because of issues like low salaries, high caseloads, insufficient training and limited supervision, and the turnover of child welfare workers—estimated to be between 30 and 40 percent annually nationwide.[7] When we look at caseloads for child welfare workers, the average is double the recommended caseload, and obviously much higher in many jurisdictions.[8]

The Case for Prevention

Our present system of treating abused and neglected children and offering some help to troubled families is overworked and inadequate to the task. We need to reorganize the current child protection system to come within the framework of a broader family support system. Hundreds of thousands of children are currently identified

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[2] Fluke, J.D. (2001). *Dynamics of Unsubstantiated Reports of Child Abuse and Neglect*. American Humane Association.

[3] U.S. Department of Health & Human Services (2002). *Child Maltreatment 2000,*. Washington, DC. U.S. Government Printing Office.

[4] Courtney, M.E. (1998). *"The Costs of Child Protection in the Context of Welfare Reform"*. The Future of Children, Vol. 8, No. 1.

[5] U.S. General Accounting Office (2003). *HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff* (GAO–03–357).

[6] U.S. General Accounting Office (1995). *Child Welfare: Complex Needs Strain Capacity to Provide Services* (GAO/HEHS–95–208).

[7] U.S. General Accounting Office (2003). *HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff* (GAO–03–357).

[8] Alliance for Children and Families, American Public Human Services Association, Child Welfare League of America (2001). *The child welfare workforce challenge: Results from a preliminary study*. Dallas.

as having been abused, but receive no services to prevent further abuse. We must focus attention on children and families known to the system in order to prevent reoccurrence of abuse, as well as provide services to families earlier, before problems become severe.

For more than twenty years, the Federal Government's attention has concentrated on a restricted approach to child abuse and neglect, in many ways preventing the development of a major federal attack on the problem. As a result, the prevention of child maltreatment of children, which lies at the root of many of this nation's social ills, has been marginalized.

We know that child abuse prevention fights crime, because research has shown us time after time that victims of child abuse are more likely to engage in criminality later in life, that childhood abuse increases the odds of future delinquency and adult criminality overall by 40 percent.[9]

We know that preventing child maltreatment helps to prevent failure in school. Typically abused and neglected children suffer poor prospects for success in school, exhibiting poor initiative, language and other developmental delays, and a disproportionate amount of incompetence and failure.[10] Ensuring that children are ready to learn means ensuring that children are safe at home with the kind of nurturing care that all children deserve.

We know that preventing child abuse can help to prevent disabling conditions in children. Physical abuse of children can result in brain damage, mental retardation, cerebral palsy, and learning disorders.[11]

Groundbreaking research conducted by the Centers for Disease Control in collaboration with Kaiser Permanente shows us that childhood abuse is linked with behaviors later in life which result in the development of chronic diseases that cause death and disability, such as heart disease, cancer, chronic lung and liver diseases, and skeletal fracture. Similarly, the CDC research shows that adult victims of child maltreatment are more likely to engage in early first intercourse, have an unintended pregnancy, have high lifetime numbers of sexual partners, and suffer from depression and suicide attempts.[12]

We know that women who suffered serious assaults in childhood experience more episodes of depression, post-traumatic stress, and substance abuse, demonstrating a relationship between childhood trauma and adult psychopathology,[13] as well as links between childhood neglect and later alcohol problems in women.[14]

Finally, looking at the consequences of child maltreatment, we find that among homeless people, many of them, especially homeless women, reported serious family problems or a history of sexual or physical abuse as children that predisposed them to homelessness as adults.[15]

An analysis of the costs of child abuse and neglect in the United States looking at the direct costs of hospitalizations, chronic health problems, mental health care, child welfare services, law enforcement intervention, and the judicial process totals over $24 billion annually. When we add the indirect costs from special education, additional health and mental health care, juvenile delinquency and adult criminality, as well as lost productivity, the total annual cost of child abuse and neglect in the United States amounts to more than $94 billion.[16] We cannot sustain this drain of human and financial capital when we know how to support families and prevent abuse from occurring in the first place.

Preventing child abuse is cost effective. Over ten years ago (1992) a report by the General Accounting Office looking at evaluations of child abuse prevention efforts

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[9] C.S. Widom (1992). *The Cycle of Violence.* Washington, DC: National Institute of Justice.

[10] S.R. Morgan (1976). *The Battered Child in the Classroom.* Journal of Pediatric Psychology.

[11] H.P. Martin & M.A. Rodeheffer (1980). *The Psychological Impact of Abuse in Children.* In: G.J. Williams. Traumatic Abuse and Neglect of Children at Home. Baltimore, MD: Johns Hopkins University Press.

[12] V.J. Felitti, R.F. Anda, et al. (1998). *Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. The Adverse Childhood Experiences (ACE) Study.* American Journal of Preventive Medicine.

[13] R.D. Duncan, et al. (1996). *Childhood Physical Assault as a Risk Factor for PTSD, Depression, and Substance Abuse: Findings From a National Survey. American Journal of Orthopsychiatry.* Washington, DC: National Institute on Drug Abuse.

[14] C.S. Widom, et al. (1995). *Alcohol Abuse in Abused and Neglected Children Followed-up: Are They at Increased Risk?* Journal of Studies on Alcohol. Washington, DC: National Institute of Justice.

[15] S. Davies-Netzley, et al. (1996). *Childhood Abuse as a Precursor to Homelessness for Homeless Women With Severe Mental Illness.* Rockville, MD: National Institute of Mental Health.

[16] Fromm, Suzette (2001). *Total Estimated Cost of Child Abuse and Neglect in the United States.* Prevent Child Abuse America, Chicago.

found that "total federal costs of providing prevention programs for low-income populations were nearly offset after four years."[17]

Community-based, in-home services to overburdened families are far less costly than the damage inflicted on children that leads to outlays for child protective services, law enforcement, courts, foster care, health care and the treatment of adults recovering from child abuse. A range of services, such as voluntary home-visiting, family support services, parent mutual support programs, parenting education, and respite care contribute to a community's successful strategy to prevent child abuse and neglect. To be eligible for federal child welfare assistance, states should be required to develop a prevention plan including effective programs identified to carry out the prevention work of community-based programs serving families and children.

In 2002, the deplorable state of child protective services was a visible issue in the gubernatorial races in three states: Florida, New Jersey and Maryland. Public officials were called to respond to the deplorable state of child protection in their states, and the public demanded more attention to improving the capacity of community-based services to support parents and prevent abuse, and to treat the victims of abuse and neglect. It is our collective responsibility and our duty to America's children and the nation's future to work toward that goal.

Chairman HERGER. Thank you, Mr. Birch. Now we will hear from Courteney Holden. Ms. Holden?

STATEMENT OF COURTENEY ANNE HOLDEN, EXECUTIVE DIRECTOR, VOICE FOR ADOPTION

Ms. HOLDEN. Thank you, Mr. Chairman. Thank you so much for the opportunity to testify. My name is Courteney Anne Holden, and in addition to volunteering as a court-appointed special advocate in my home State of Washington, I am also the Executive Director of Voice For Adoption. Voice For Adoption is a membership organization. We speak out for the Nation's 126,000 waiting children in foster care. First and foremost, the adoption community wants to thank you for all your hard work on the reauthorization of the adoption incentive program during last year's session. Voice For Adoption applauds the new focus on moving older children into adoption. In my short time this morning, I want to touch briefly on five areas included in my written statement that Voice For Adoption believes need the attention of Congress and the Federal Government in order to help ensure the promise of adoptive families for every child.

The first is post-adoption services. If we truly want to ensure that children get permanent families, much more must be done to provide post-adoption services. The grief and the loss that foster children experience does not disappear once the adoption is finalized. A proven way to avoid adoption disruption is by providing services, such as respite care, family support groups and counseling, and adoption competent mental health services. Post-adoption services and support is a way for States to ensure that adoptive placements are successful. As a first step, we recommend that States be required to support adoptive families by reinvesting their incentive dollars on post-adoption services. This is especially important with the new focus on older children. The older a child is when he or she is adopted, the more likely the adoption is to disrupt. Congress should also take steps to ensure that States are spending,

[17] U.S. General Accounting Office (1992). *Child Abuse: Prevention Programs Need Greater Emphasis* (GAO/HRD–92–99).

as required by Federal law, at least 20 percent of their Promoting Safe and Stable Families program funds on adoption promotion and support. We urge you to explore other strategies, as well, in your broader discussions of child welfare financing.

Second, we urge you to take steps to make sure that all children adopted from foster care are eligible for title IV–E adoption assistance. The adoption assistance program is an extremely effective program that helps move thousands of waiting children into permanent families. As we all know, adoption is cost effective. The typical administrative costs associated with foster care, such as ongoing training, agency supervision, and periodic case reviews, disappear once the child is adopted. Unfortunately, due to an outdated AFDC eligibility requirement, not all children adopted from foster care qualify for assistance. Congress can help support foster care adoptions by eliminating the administratively burdensome requirement in Federal law that makes only children removed from poor families eligible for adoption assistance.

Third, we ask that you eliminate the disincentives to adoption by requiring that adoption assistance payments be at least equal to the foster care payments for which the child would have been eligible. When foster care payments are higher than adoption assistance payments, as they are in some States, it creates a disincentive for foster parents to adopt children. States should provide adoptive children with at least the same level of support and benefit, including therapeutic and specialized rates, that they would have received in family foster care. This change in the adoption assistance program would help move waiting children to adoptive homes. Fourth, continued improvements are needed to address inter-jurisdictional barriers to children being adopted. The special needs adoption community is excited about the new Federal adoption website. This multifaceted media tool will help highlight waiting children and recruit other families across the country. Yet inter-jurisdictional barriers to adoption need to be addressed to help aid the website's success.

Several years ago, adoption workers, advocates, researchers, and families, including many Voice For Adoption members, convened in Chicago to strategize about solutions and overcoming barriers to inter-jurisdictional placements. I am happy to provide the Committee with a copy of the report from the meeting, which includes a number of recommendations to address these barriers. Finally, as you consider reforms in adoption and other aspects of child welfare, Voice For Adoption asks that you take steps to address the racial disparity in the child welfare system. There is a disproportionate number of minority children in care today. This inequity needs to be addressed. Recruitment of families who reflect children in State custody is imperative. Many children of color are entering Caucasian homes through adoption, and parents need to be prepared to deal with race-related issues by training families when trans-racial placements occur, in order to prepare families to handle the unique responsibilities in trans-racial parenting. I thank you for this opportunity to testify.

[The prepared statement of Ms. Holden follows:]

Statement of Courtney Anne Holden, Executive Director, Voice For Adoption

Chairman Herger, Ranking Member Cardin and distinguished members of the subcommittee, thank you for this opportunity to testify on federal and state oversight of child welfare programs. My name is Courteney Anne Holden. In addition to volunteering as a court appointed special advocate in my home state of Washington, I am also the Executive Director of Voice for Adoption or VFA for short.

VFA is a membership advocacy organization. We speak out for our nation's 126,000 waiting children in foster care. VFA members recruit families to adopt special needs children and youth. Our members also provide vital support services both before and after finalization to help adoptive families through challenges they often face. We, like you, are dedicated to finding permanent loving homes for every waiting child in foster care.

First and foremost, the adoption community thanks you for all your hard work in reauthorizing the Adoption Incentive program during last year's session. VFA applauds the new focus on moving older children into adoption. However, it is important that states support these adoptive families by reinvesting their incentive dollars on post-adoption services.

Research shows that the older a child is when he or she is adopted the more likely the adoption will dissolve. The grief and loss that foster children experience does not disappear when the adoption is finalized. A proven way to avoid adoption disruption is by providing support services such as respite care, family support groups and counseling, and adoption competent mental health services. Post-adoption services and support is a way for states to ensure that adoptive placements are successful.

Also, many states do not take full advantage of the ability to fund post-adoption services through the adoption promotion and support provision of the Promoting Safe and Stable Families (PSSF) program. State should spend at least 20 percent of their PSSF flexible funds on post-adoption services and support.

Another extremely effective program in moving waiting children to permanency is the Adoption Assistance program. This program provides adoptive families with monthly subsidies to cover costs such as adoption camps, tutoring, and extraordinary health care costs due to the child's special needs. Of the 50,000 children adopted from foster care in 2001, 88 percent received state or federal assistance. As we all know, adoption is cost effective. The typical administrative costs associated with foster care such as ongoing training, agency supervision, periodic case reviews and judicial hearings disappear. Thousands of children and families have benefited since the program's inception in 1980.

However, financial barriers to foster care adoptions still exist and the Adoption Assistance program needs to be modernized. Due to an outdated AFDC eligibility requirement, not all children adopted from foster care qualify for the assistance. Congress can help support foster care adoptions by eliminating this administrative burdensome requirement.

Moreover, levels of support that children receive can vary, often foster care payments are higher, in effect creating a disincentive to adopt the child. States should provide adopted children with at least the same level of support and benefits (including any therapeutic or specialized rates) they would have received in family foster care. Nationally, payments made on behalf of an eight-year-old child average $14 per day, a fraction of what the Department of Agriculture suggests is needed to raise an average child, let alone a child with serious disabilities. Making these few changes to the Adoption Assistance program would go a long way in moving waiting children into permanent homes.

The special needs adoption community is excited about the new federal adoption website. This multi-faceted media tool will help highlight waiting children and recruit forever families across the county. Yet, interjursidictional barriers to adoption need to be addressed to help aid the websites success.

Several years ago, adoption workers, advocates, researchers, and families including many VFA members convened in Chicago to come up with solutions to overcoming barriers to interjursidictional placements. Which state pays for the adoptive home study and the varied home study fees were just some issues that where addressed. I am happy to provide committee members with a copy of the report from the meeting.

Additionally, last week the Children's Bureau at HHS convened a workgroup on the identical subject. VFA is thrilled that Majority Leader Tom Delay's staff, Dr. Cassie Bevan and Susan Smith with Illinois State University Center for Adoption Studies are participating. However, there are some notable absences on the workgroup, including adoption exchanges and agencies that specialize in the place-

ment of African American and Latino children. Also absent are grantees that focus on overcoming geographic barriers such as Oregon's Team Work for Children. This group has an Adoption Opportunities grant to finds collaborative ways to overcome barrier and is working with states such as Washington, Idaho and California. There are three other states with AO grants on this topic including Texas, Colorado and Alaska. This past fall, VFA awarded the Adoptions Across Boundaries recognition to Oregon for their commendable work in overcoming barriers to cross-jursidictional placements. VFA urges the Children's Bureau to expand the workgroup before their next meeting.

VFA is not the only organization that places priority on addressing geographic barriers. Organizations like the American Academy of Adoption Attorneys (Quad A) and the American Public Human Services Association (APHSA) are working within their membership to address this issue too. It is VFA's hope that all groups and the Children's Bureau can work together to find consensus and help improve adoptive and foster care placements across state lines.

There are a disproportionate number of minorities, 45 percent are Black non-Hispanic and 12 percent are Hispanic, in the child welfare system. This inequity needs to be addressed. Recruitment of families who are reflective of children in state custody is imperative. Many children of color also enter Caucasian homes through adoption, and parents need to be prepared to deal with race-related issues. Training families when transracial placements occur is crucial in order to prepare families to handle the unique responsibilities of transracial parenting.

VFA also looks forward to the release of the Pew Commission's Report on Youth in Foster Care. We truly appreciate that focus on child welfare that the Commission has brought. We also look forward to today's Packard Foundation briefing on a report and survey of foster care.

Waiting children are languishing too long in state care. These are just a few issues that will help eliminate barriers and accelerate adoptions. The 126,000 children and youth who cannot safely return to their birth parents are depending on us.

On behalf of waiting and adopted children and their families, thank you again for this opportunity to address the subcommittee. I am happy to answer any questions members might pose.

Chairman HERGER. Thank you, Ms. Holden. Now Mr. Jack Trope to testify.

STATEMENT OF JACK F. TROPE, EXECUTIVE DIRECTOR, ASSOCIATION ON AMERICAN INDIAN AFFAIRS, ROCKVILLE, MARYLAND

Mr. TROPE. Thank you, Mr. Chairman. I appreciate the opportunity to appear before the Committee. The Association on American Indian Affairs, of which I am the Executive Director, is an 80-year-old Indian advocacy organization. We have a broad-based program, one part of which is in the field of Indian child welfare. We have been involved in child welfare for decades. We were instrumental in obtaining the enactment of the Indian Child Welfare Act (P.L. 95–608), and since its enactment, we have worked on policy with tribes to negotiate tribal-State agreements, and we have provided training to, among others, State employees and officials on Indian child welfare. We have also had a longstanding interest in the issue of adequate funding for tribal child welfare programs, having testified before this Committee as far back as 1990 on these issues. We applaud the Subcommittee for its efforts to continually look at these issues, because they are vitally important.

Obviously, the perspective that we have to offer has to do with our work with Indian children, and we have some specific recommendations about that—but I think some of our observations are more broadly applicable to all children involved with the sys-

tem. First of all, I would like to say, in terms of Indian children and the safety and well-being of Indian children, we believe, like many others, that increasing the resources available to children in need, and families in need, is essential. One way in which this can be done for Indian children that is different than other children is to tap into tribal resources. As you probably know, Mr. Chairman, tribal governments are separate governmental entities from States. They provide child welfare services to children within their own communities, but they also have a vital interest in those children that are involved with State systems. We have worked with tribes to negotiate tribal-State agreements that cover a whole variety of items, including things like joint planning, decisionmaking and service delivery, early notice to tribes, maximum support to families to adjust to placements and to deal with particular cultural needs, training exchanges, and so forth. We believe that one way in which more resources can be brought to bear for Indian children is through encouraging tribal-State agreements that provide Indian children and families who are in the State system with access to tribal resources, tribal families, and tribal communities.

We would note, however, that in order for tribes to effectively participate in those kinds of agreements, they also need resources. Once again, I would remind the Committee that many Indian children are not under State systems. They are under tribal systems and under tribal jurisdiction, and we do have Federal programs—most specifically the title IV–E foster care program—that do not provide for direct funding to tribes, and that is an oversight that this Committee, we hope, will address. Congressman Camp is sponsoring legislation to do that, and we applaud him for that. We know that this issue is being considered on the Senate side—and that this legislation might be part of the welfare reform reauthorization passed by the Senate. If that is the case, we hope that Members of this Subcommittee will advocate for it in conference. In addition, for tribes and States to really work together effectively in a partnership for Indian children, it is very important that States have a commitment to the unique needs, circumstances, and legal framework that pertains to Indian children. Right now, the Indian Child Welfare Act is a unique law that applies to Indian children, and there is no Federal oversight of the implementation of that law. We urge you to designate a Federal agency to do that.

More broadly, I want to talk about a couple of things that I think are applicable to non-Indian children. One is based upon something that is very typical in Indian communities—namely, strength-based family healing systems. These are systems where families come together with extended family, community members, tribal employees, and whoever is appropriate, to develop plans to deal with troubled families. It is a concept very similar to what Mr. Bell talked about in his testimony, when he talked about his Family Group Decision Making, and bringing neighborhood resources and neighborhood supports in for families. We think anything that can be done to encourage these types of approaches would be very positive. The other thing I would mention is that when we think about permanency from a tribal perspective, permanency isn't just about moving a child from one nuclear family to another. It is about maintaining that child's connections with community, with extended

family, and with culture. This idea ties into the notion of Family Group Decision Making, and is a way to effectively deal with these problems outside of the legal system. In conclusion, I would like to mention one thing a family court judge once told me. She said that she felt like an emergency room doctor. She said she patches up families, and makes profound decisions in their lives based on inadequate and conflicting information. Thus, I think that whatever we can do to provide supports for families and keep these problems out of the legal system, is a good thing for all children. I want to thank you again for having us here, and I hope as you go forward you will include us and other organizations that are familiar with the needs of Indian children in developing your legislation.

[The prepared statement of Mr. Trope follows:]

Statement of Jack F. Trope, Executive Director, Association on American Indian Affairs, Rockville, Maryland

Chairman Herger, Ranking Minority Member Cardin and other members of the Subcommittee. Thank you for inviting us to testimony before the Subcommittee.

The Association on American Indian Affairs is an 80 year old Indian advocacy organization located in South Dakota and Maryland and governed by an all-Native American Board of Directors. We have been involved with Indian child welfare issues for decades and played a key role in the enactment of the Indian Child Welfare Act of 1978. We have not only developed policy and been involved in legal proceedings, but also worked with tribes to negotiate tribal-state partnerships to better serve Indian children and have provided training to state employees and officials about Indian child welfare. We have also had a long standing interest in the issue of adequate funding for tribal child welfare programs, having testified before this subcommittee about this issue as far back as 1990.

We applaud the subcommittee for holding this oversight hearing and allowing non-governmental organizations and individuals to offer testimony on how state systems might better protect the safety and well-being of children and promote permanency.

Obviously, the perspective that we have to offer has to do with our work with Indian children. There are many recommendations that we could present to the subcommittee. However, in part because of the short time frame that we have had to prepare this testimony, we will focus upon only a few—those least likely to be identified by other witnesses. Some of the recommendations that we will offer will be applicable only to Indian children. However, we believe that some of our recommendations will also have broader applicability.

Safety and Well-being

There are several principles with which everyone involved in child welfare agrees: children should remain with their families wherever possible; if a child is in imminent risk of harm, it is appropriate to remove the child from his family to ensure that the child is safe; and if removal has taken place, reunification of the child with his or her family is in most cases the first option that should be considered.

We believe that an important way to accomplish these goals is to increase the availability of support services for families in crisis. In the context of Indian children, we believe that this means increasing the possibility that Indian families involved with the state or county systems will have access to tribal services and resources, in addition to those provided by the state or county.

An effective way that we have found to accomplish this end has been through the negotiation of tribal-state agreements that specify how the state will handle Indian child welfare cases and provide for tribal involvement in that process. The agreement between the tribes in Washington and the state of Washington, which we helped negotiate, is an example of such an agreement. That agreement, among other things, provides for joint planning, decision making and service delivery, early notice to tribes and cooperation, maximum support to children and families to adjust to placements, maximum support and services to care providers regarding cultural needs, training exchanges and some state funding for tribal programs.

In order for tribes to effectively participate in such agreements, however, they need to have resources. Currently, tribes struggle to maintain child welfare programs through a patchwork of funding—some BIA money, extremely limited funds through Title IV–B, tribal resources which are also usually limited and, in rare cir-

cumstances, state support. Through an oversight when the law was enacted, tribes are not eligible for the Title IV–E foster care/adoption assistance entitlement program. It is important to remember that tribal governments are distinct from state governments and tribal nations exercise their own inherent sovereignty. Even aside from negatively impacting the ability of tribes to productively contribute to state efforts to protect Indian children, it must be emphasized that the lack of resources impacts the tribe's ability to adequately serve Indian children living in Indian country under tribal government jurisdiction. These children suffer high rates of poverty and abuse and neglect, but yet are virtually left out of this federal program. It is tragic that we have a federal entitlement program to assist abused and neglected children who must be removed from their homes, but have limited it to state governments and the children under their jurisdiction.

We urge the subcommittee to rectify this problem and specifically wish to thank Representative Camp of this Subcommittee for introducing and seeking the enactment of H.R. 443 that would provide direct tribal funding under the existing Title IV–E program. We understand that the Senate is still considering whether to include this provision in its Welfare Reauthorization bill. If it is included, we urge the members of this Subcommittee to advocate for the provision in conference.

In addition, for these state-tribal beneficial partnerships to develop fully, the state must have a commitment to proper implementation of the Indian Child Welfare Act. Currently, no federal agency takes responsibility for overseeing whether states are complying with the ICWA. We believe that if Congress were to mandate that a specific federal agency or agencies audit states for ICWA compliance, this would help protect Indian children.

Finally, there are some lessons to be learned from Indian tribes that might have a positive impact upon all children. One of the most ubiquitous elements found in tribal codes on child welfare are alternative dispute resolution provisions. These provisions typically provide for informal conferences with the family and tribal employees and/or community members that seek to develop a plan to remediate the problem and obviate the need for court action. Many tribes also have mechanisms for developing plans after a petition has been filed—a consent decree with the family or something similar. The focus is to heal everyone in the family as the best way to ultimately provide for the well-being of the child. It builds upon the strengths that are normally present even in troubled families, strengths can often best be identified through involvement of extended family members or other community members in such processes.

We believe that these strength-based family healing systems can have application beyond Indian children. Having been involved in family court proceedings as an attorney, I can state unequivocally that the adversarial process is not well adapted to child abuse and neglect situations. One family court judge of my acquaintance once likened herself to an emergency room doctor—often trying to make difficult decisions having dramatic impacts upon families with only limited and often conflicting information available. It seems to us that promoting conflict resolution systems that build on strengths and that pull together all possible supportive parties and resources in pursuit of a solution would improve the safety and well-being of all children. Obviously, there are certain egregious abuse cases where such an approach would not be feasible and we are not suggesting this type of process would be appropriate for all situations. But severe abuse cases are a small percentage of the overall child welfare caseload; many more cases involve allegations of neglect and inadequate parenting. We believe that a family/community non-adversarial process would be highly feasible in most of these cases.

Permanency

We believe that child welfare systems and Congress must look at permanency in an expansive way. Too often, permanency is thought of as replacing a dysfunctional nuclear family with another functional nuclear family. We think that this is too narrow of a view.

In almost all Indian cultures and communities, a child is thought of as belonging not only to his or her parents, but to his grandparents, uncles, aunts and other members of his extended family. Where there is a clan system, that can also be an important source of identity. Moreover, a child also has a broader sense of belonging to the child's tribe and his or her culture as well.

This is reflected in many tribal codes. Tribes frequently recognize the rights of extended family, grandparents and traditional custodians to participate in judicial and informal proceedings and continued visitation with such individuals is frequently mandated by tribal courts or codes even where parental rights have been terminated. Extended family is defined in many codes to include a large number of people beyond those typically included in non-Indian definitions—people such as

clan and band members, individuals who traditionally assist with parenting, any person viewed by the family as a relative, first cousins of parents (defined as aunts and uncles), step-family and godparents. Concepts such as grandparents may include brothers and sisters of the child's lineal grandparents.

I experienced the importance of these connections first hand when I was Director of the Western Area Office of the Save the Children. We worked closely with a number of tribal communities, including Navajo communities. When we would hold youth summits, we would usually start by having the teenagers introduce themselves to each other. Most of the Navajo youth would automatically introduce themselves through reference to their clan and extended family relationships.

For most Indian tribes, any concept of permanency that would sever a child's relationship with important family and community members who are capable of providing love and support to the child (or that would sever a connection with the tribe, tribal culture or, where applicable, clan) makes no sense. We believe that this is true for many non-Indian children as well—certainly, at a minimum, there are other ethnic groups that have a similar sense of family and community. Maintaining a child's non-parental connections, unless they are demonstrably harmful to a child, promotes a child's well-being and sense of permanency in the larger sense. Many states have been expanding the use of kinship care, which we believe to be a positive development. In thinking about child welfare issues, we hope that Congress will define permanency to include the network of relationships that can benefit a child, and not just focus upon the nuclear family.

Conclusion

In conclusion, we recommend the following:

Indian-specific recommendations

- Encourage tribal-state agreements on Indian Child Welfare Act compliance
- Provide tribes with adequate resources for child welfare programs, particularly by making tribes eligible for the Title IV–E Foster Care Adoption Assistance program, as proposed by Rep. Camp in H.R. 443
- Mandate federal audits of state compliance with the Indian Child Welfare Act

General recommendations

- Encourage the development for certain types of child welfare cases of alternative dispute resolution systems that involve extended families and communities in a strength-based, non-adversarial problem-solving process
- Define permanency to include a continued connection between a child and his or her extended family and community

Thank you for the opportunity to submit this testimony and to appear before the subcommittee.

Chairman HERGER. Thank you, Mr. Trope; we will do precisely that. Now I would like to turn to Mr. Christopher Klicka for his testimony.

STATEMENT OF CHRISTOPHER J. KLICKA, SENIOR COUNSEL, HOME SCHOOL LEGAL DEFENSE ASSOCIATION, PURCELLVILLE, VIRGINIA

Mr. KLICKA. Thank you very much. It is a great privilege to be here, and I hope I can add some good thoughts to child welfare reform. I am coming from a fairly unique perspective. I have been Senior Counsel of the Home School Legal Defense Association for 18 years, and I have dealt with over 1,000 social worker situations where families, innocent families, were turned in by anonymous tipsters. These anonymous tipsters a lot of times had prejudice against the home schoolers because they were teaching their children at home, and they tended to fabricate many allegations to get the family in trouble. Other situations where it is simply a relative—maybe it was a religious thing where they didn't like it because it was a Christian family. For about 95 percent of these

1,000 or more allegations that I have dealt with, the source has been an anonymous tip. This hasn't always been the case—where social workers at the local level pursued anonymous tips in such a thorough and complete manner. What their normal mode of operation is, regardless of whether the tipster is identified or not, they seek to come into the family's house, and they seek to interview every member in the family—including the children—and many times they like to do that separately. Sometimes they like to just do a strip search. It is very traumatic for the families. I have given in my written testimony many, many examples of situations that have occurred, and what happened to the families.

Now, the two solutions that I am recommending—because what I am hearing from many of the panelists is that there really isn't enough money being spent to fight child abuse. There are cutbacks—Shay Bilchik said 8-percent cutbacks—and the caseloads are meanwhile getting bigger and bigger. In my experience, I see that one of the areas in which social workers are wasting their time is with anonymous tips, because they tend to be false. So, I am recommending that Congress require some sort of changes throughout the States in order to get their Federal funds to require tipsters to reveal their identity when they call in. Of course, their identity would be kept confidential by the social worker, but then the consequences of giving false testimony or a false tip should be made very clear. I believe that this will curtail tremendously these false allegations on which social workers are wasting their time, spinning their wheels, and traumatizing innocent families in the process. The second suggestion would be to require some sort of statutory mechanism where victims of intentionally false allegations would be able to pursue their tipsters with criminal charges.

Real abuse is taking place, and children are being hurt and even killed. We need a child welfare system to investigate, stop, and prosecute this horrible abuse—like what happened recently in New Jersey. By limiting the investigation of anonymous tips and penalizing false tipsters, social workers will have far fewer cases to investigate, and the referrals will be far more accurate. This way, they can give the requisite time and attention to real child abuse cases instead of being spread thin pursuing anonymous tips that usually turn out to be unfounded. I give a lot of statistics on how for over half of all the people who are investigated for child abuse, the information turns out to be unfounded—and there is a large percentage of those that are anonymous tips. I have found that if people have to identify themselves, they are going to be a lot more careful about using the system to hurt people. Also, I have talked with many social workers one-on-one. There was a social worker in Georgia who confessed that 90 percent of all her cases turned out to be unfounded, and she felt like she was just spinning her wheels. In Alabama and Florida, I met two social workers who now are home schooling their children, and they said 60 to 70 percent of their cases were unfounded. Thousands of families are being hurt by this process.

Just to give you one example of the many that I document in here, there is a family in Wisconsin, a home-schooled family, and this was the tip that the anonymous tipster gave. The caller was concerned because the children were all thin, and thought that re-

moval of food was a possible form of discipline. The caller thought this discipline may have been a practice of the parents' religion, which is thought to have been born-again Christian. The caller thought that these parents give a lot of money to the church and spend little money on groceries. The caller's last, somewhat passing concern, was that the mother was home schooling her children. The tip turned out to be bogus. The only true thing was that they were actually home schooling. I think this Committee should take a look at the possibility of having some compliance procedures that States would follow that would enable their investigations to go much smoother, and not have to waste so much time pursuing false allegations.

[The prepared statement of Mr. Klicka follows:]

Statement of Christopher J. Klicka, Senior Counsel, Home School Legal Defense Association, Purcellville, Virginia

My name is Christopher J. Klicka, and I serve as Senior Counsel of the Home School Legal Defense Association (HSLDA). Since 1985, I have counseled and legally represented nearly a thousand home school families who were harassed by social workers investigating child abuse tips they received from their child abuse hotlines. Ninety-five percent of the tips were anonymous. The other attorneys in our organization have handled a similar number of these legal conflicts.

I have seen first hand the trauma innocent families have experienced at the hands of social workers pursuing anonymous tips.

The Home School Legal Defense Association is a nonprofit legal advocacy organization dedicated to protecting parental freedom generally and promoting the right to home school. At this time, we represent over 76,000 member families (i.e. approximately 250,000 children and 150,000 parents.)

Over these last 18 years, I have drafted state legislation on child welfare reform, lobbied on this issue before state legislatures and the Congress, and written and spoke extensively on the abuses of families by the present child welfare system. As a constitutional attorney who has represented hundreds of families involved in child welfare legal conflicts, investigations, and court cases, I have been exposed to many abuses in the child welfare system.

What happens when anonymous tips are allowed to be used to justify entry into a home or private interviews with children is that enemies can phone in a tip. People who are disgruntled with the family can phone in a tip. People who don't like the fact that a particular family is homeschooling can call in a tip and turn that family's life upside down.

The purpose of my testimony is to offer some possible solutions to real abuses that I have encountered over the years. By incorporating these reforms, Congress and the states can save money and encourage states to enable their child welfare workers to better stewards of their time.

The two solutions I recommend are:

1. Require all tipsters to reveal their identity and address to the social worker. The social worker will keep this information confidential but warn them of consequences of giving intentionally false information. This will prevent the majority of bogus allegations that anonymous tipsters give who use the system to get back people.
2. Require all states to have a statutory mechanism for victims of intentionally false allegations to pursue the tipsters with criminal charges.

Real abuse is taking place. Children are being hurt and even killed. We need a child welfare system to investigate, stop, and prosecute this horrible abuse of children. By eliminating the investigation of anonymous tips and penalizing intentionally false tipsters, social workers will have far less cases to investigate and the referrals will be far more accurate. This way they can give the requisite time and attention to real child abuse cases instead of being "spread so thin" pursuing anonymous tips that usually turn out to be unfounded. Eliminating investigation of anonymous tips will largely stop tipsters from using the system to harass people they do not like or are prejudiced against. Eliminating anonymous tips will also better protect innocent families parental and 4th amendment rights.

Pursuing False Allegations Reduces Time and Attention to Investigating Real Abuse Cases

I have talked with over 1,000 social workers over the last 18 years, many whom have indicated that they waste much of their time pursuing anonymous tips that turn out to be fabrications. After resolving a false allegation with a particular Chicago social worker over the phone, the social worker informed me that well over 50% of all referrals, most of which are anonymous, to her child welfare agency are "unfounded." Unfortunately, she complained, many of the cases are deemed unfounded after families are broken apart and children are put in foster homes.

A social worker in Georgia, after we resolved a fabricated allegation concerning a homeschooler, confessed that 90% of all the cases of alleged child abuse she handled turned out to be "unfounded." She explained that she spent most of her time "spinning her wheels" pursuing anonymous tips. She felt the number of false allegations coming into her office were on the rise.

In Alabama and Florida, I met two former social workers who were now home schooling their children. Both admitted that intimidation was a routine procedure which they were taught and which they always used to get their way. Their goal, in fact, was to get into the house and talk with the children, no matter what the allegation. Both of these social workers admitted that 60% to 70% of their cases were "unfounded" and mostly anonymous.

Since so many social workers are "spinning their wheels" pursuing anonymous tips that often turn out to be false, they waste much money and time their time. It would be far more effective to find the real child abusers if anonymous tips were prohibited. Requiring tipsters to identify themselves to the social worker would virtually completely prevent social workers from having to investigate false allegations. Of course, the tipster identification would be protected by the social worker until the conclusion of the case. This way, the social workers could spend their time pursuing real allegations and catching real child abusers.

Thousands of Innocent Families are Traumatized Over Anonymous Tipsters Using the System to Hurt People

I can provide much-documented abuses of social workers using anonymous tips and how families were traumatized. For example, in Wisconsin, a home school family was reported by an anonymous tipster. I secured a copy of the report by the social worker which said:

"The caller was concerned because the children were all thin and thought that removal of food was possibly a form of discipline. The caller thought this discipline may have been a practice of the parents' religion which was thought to have been Born Again. The caller thought that these parents give a lot of money to the church and spend little money on groceries. The caller's last, somewhat passing concern, was that [the mother] home schools her children."

As usual, the anonymous tip was bogus. It is apparent from the report that the caller was biased against both the fact that the family was home schooling and that they were born again Christians. The social worker insisted on entry into the home and interrogate the children.

One family had recently moved to Florida. Within weeks, they were visited by a truant officer who questioned the legality of their schooling. The truant officer left and reported them to the Health and Human Services department. A few days later, an HHS agent appeared at the door and demanded to interview the children within 24 hours or he would send for the police. The allegations were that "the children were home during school hours and the children were sometimes left alone." I explained the legality of their home schooling and denied the "lack of supervision" charge. (The family only had one car and the father took it to work leaving the mother at home). I then called his bluff and refused to have the children interviewed. After talking with the parents, we allowed him to come by the door and see the children only from a distance. He finally closed the case because he had no evidence except an anonymous tip.

A really outlandish investigation involved a home school family in New Jersey. In the first visit, the agent from the Division of Youth and Family Services accused the mother of kidnapping some of her children because she had so many children. The mother produced birth certificates to prove the children were hers. The following year, another agent came by and said that someone called and reported that the "children were seen outside during school hours." She demanded to enter the house but, under my instruction, the mother refused. Although she knew it was only an anonymous tip, the agent then said she would be back with the police. She never came back that day, showing that she was only bluffing.

In California, a single mother was contacted by a social worker with allegations that "children were not in school, mother was incapacitated, and caretaker was ab-

sent." I talked with the social worker and she admitted the allegations were based solely on an anonymous tip. However, she insisted on talking with the children separately. When I objected, she said she would get a police officer and that she did not need a warrant. We held our ground and she settled for a meeting with the mother and a witness only.

One of our member families had just moved into Alabama two weeks earlier and had not really met anyone in their neighborhood yet. However, the Department of Human Resources agent received an "anonymous tip" that the children had "bruises" and demanded a "strip search!" When I refused to allow a "strip search," the agent became upset and stammered, "No one else ever refused a strip search before!" She also implied the family had something to hide.

The above comment of the social worker in Alabama is a common response which I hear from social workers frequently concerning all kinds of demands. They are personally offended that we would refuse to let them into the home or interview the children. Many of them insinuate the family must be guilty even though they have nothing but an anonymous tip.

In Appendix I, I relate more true accounts of social workers harassing innocent parents over the last few months. All these examples simply demonstrate the desperate need for consistency in applying a constitutional standard in the all the state child welfare codes.

Court Precedent: the Fourth Amendment and Anonymous Tips and Social Workers

The 4th Amendment applies to all 50 states. It guarantees:

> The right of the people to be secure in their persons, houses, papers, and effects, against unreasonable searches and seizures, shall not be violated, and no Warrants shall issue, but upon probable cause, supported by Oath or affirmation, and particularly describing the place to be searched, and the persons or things to be seized.

Yet social workers do not believe it applies to them and they pursue anonymous tips to the detriment of innocent families 4th amendment rights.

It is time for the Congress to take the lead to protect these precious 4th Amendment rights of the over 1 million innocent parents being abused by the state child welfare systems, largely by anonymous tipsters..

Below are some of the key cases that define how the 4th Amendment applies to social workers.

The Home School Legal Defense Association won its first significant case in this area in 1993, when the Alabama Court of Appeals construed the term "cause shown" in a state child abuse investigation statute to mean "reasonable or probable cause to believe that a crime is being or about to be committed," since any other reading might conflict with the Fourth Amendment. H.R. v. Dept. of Human Resources, 609 S.E.2d 477 (Ala. Civ. App. 1993). In H.R., HSLDA represented a low-income home school mother who was contacted by a social worker over some allegations of child abuse and educational neglect. Under counsel from HSLDA, the family refused to allow the social worker to come into the home or to interrogate the children. In order to muscle this family, charges of child neglect were brought based on no evidence whatsoever: only based on an anonymous tipster who admitted she did not have personal knowledge of the family's situation.

However, a hearing was held on whether an anonymous tip was enough to require the social worker to enter the home and interrogate the children. The lower court agreed that it was and issued a search warrant.

HSLDA appealed the decision to the Alabama Court of Appeals on the basis that the Fourth Amendment to the Constitution requires government officials to have "probable cause" (some kind of reliable evidence) to enter individuals' homes. The Alabama Court of Appeals reversed:

We suggest, however, that the power of the courts to permit invasions of the privacy protected by our federal and state constitutions, is not to be exercised except upon a showing of reasonable or probable cause to believe that a crime is being or is about to be committed or a valid regulation is being or is about to be violated. . . .

The 'cause shown' [in this case] was unsworn hearsay and could, at best, present a mere suspicion. A mere suspicion is not sufficient to rise to reasonable or probable cause.

H.R. v. Department of Human Resources, 609 So. 2d 477 (Ct. Civ. App. ALA 1993)

In the years since 1993, court after court has rejected the myth that social workers are exempt from the requirements of the Fourth Amendment.

In Calabretta v. Floyd, 189 F.3d 808 (9th Cir. 1999), for example, a case we litigated, the unconstitutional strip search took place on October 27, 1994. The federal district court denied the social worker's summary judgment motion for qualified immunity, and the Ninth Circuit affirmed that ruling on Aug. 26, 1999.

The Fourth Amendment rights case was originally filed February 24, 1995, by HSLDA on behalf of Robert and Shirley Calabretta in the Eastern District of California federal court, after a Yolo County policeman and social worker illegally entered the Calabretta home and strip searched their three-year-old daughter. The policeman and social worker forced their way in the home over the objections of the mother based simply on an anonymous tip. The tipster merely said she heard a cry in the night from the Calabretta home, "No Daddy no!" After the coerced entry, interrogation of the children, and the strip search of the three-year-old, no evidence of abuse was found and the officials ended the investigation. The police officer and social worker said "thank you" and left.

The Ninth Circuit came down hard against the social workers for violating the 4th Amendment:

We held, years before the coerced entry into the Calabretta home, that even in the context of an administrative search, "[n]owhere is the protective force of the fourth amendment more powerful than it is when the sanctity of the home is involved. . . . Therefore, we have been adamant in our demand that absent exigent circumstances a warrant will be required before a person's home is invaded by the authorities." 189 F.2d at 817, quoting Los Angeles Police Protective League v. Gates, 907 F.2d 879, 884 (9th Cir.1990).

The reasonable expectation of privacy of individuals in their homes includes the interests of both parents and children in not having government officials coerce entry in violation of the Fourth Amendment and humiliate the parents in front of the children. An essential aspect of the privacy of the home is the parent's and the child's interest in the privacy of their relationship with each other. 189 F.2d at 820.

The precedent is very clear. The 4th Amendment does apply to social workers. This landmark decision of Calabretta v. Floyd, makes it perfectly clear that social workers are bound to obey the U.S. Constitution when investigating child abuse cases. With respect to the Fourth Amendment, the Ninth Circuit settled the social worker question once and for all. No longer can social workers enter a home without either a warrant or probable cause of an emergency. It is a myth that Child Protective Services agencies are exempted from the Fourth Amendment's prohibitions against illegal searches and seizures.

In another case in California, on Tuesday, May 18, 1999, at approximately 3:00 p.m., two social workers from Child Protective Services arrived at the DeSantis home to investigate an anonymous complaint of child abuse. The social workers insisted upon entry to investigate allegations of physical abuse, to examine the utilities, and to make certain that the children had adequate food and clothing.

"You do not have my consent to enter, but the gate is open," Mrs. DeSantis told the workers. Despite the mother's objections, Debbie Mulvane and Sandy Knabb pushed through the gate and marched into the house.

Once inside, they strip-searched the two younger children and subjected the seven year old to a traumatizing private interview. As the social workers left, they stated that the referral was a hoax and the case would be closed.

On March 2, 2000, HSLDA filed a civil rights lawsuit on behalf of the DeSantis family against the social workers for violating the family's Fourth Amendment right against entry without a warrant.

After long negotiations, the social workers finally agreed to pay Mr. and Mrs. DeSantis $40,000 to avoid a trial.

In another HSLDA case, Marsh v. Bellanca, based on anonymous tip, officials entered a home without consent. On February 1, 2001, HSLDA filed a civil rights suit against the Riverside County child welfare agency. A social worker visited one of our member fathers in Riverside, California, and advised that he was investigating child neglect and abuse because the son was not registered in public school. Even though it was July 20, 2000, and school was not in session, the father explained that his son was enrolled in a private school. The social worker admitted the report was anonymous.

Nevertheless, the worker insisted that the child needed to be interviewed. The father objected, but the two uniformed officers accompanying the worker pushed their way past him. Mr. Marsh advised the officers that they had entered against his will and that he was going to contact his attorney. The social worker inspected the child's sleeping quarters and then interviewed the child out of the presence of the father. Mr. Marsh gave the social worker the name and phone of the private school, as well as the birth dates of himself and his wife. The officials left, but indicated that the investigation may not be over.

In addition to the 4th Amendment rights, parents also have "the fundamental right to direct the education and upbringing of their children" as guaranteed under the 14th amendment of the U.S. Constitution. The United States Supreme Court made it clear that these are, in fact, fundamental federal rights. In Troxel v. Granville, 530 U.S. 57 (2000), the Court struck down a Washington state statute that allowed juvenile courts to order third party visitation without any showing of parental unfitness or harm to the child. The Court ruled that this statute deprived parents of a federally protected liberty interest without due process of law.

This affirms a long line of U.S. Supreme Court case starting with Meyer v. Nebraska, 262 U.S. 390 (1923), Pierce v. Society of Sisters, 268 U.S. 510 (1925), Wisconsin v. Yoder, 406 U.S. 205 (1972), and Parham v. J.R., 442 US 584 (1979). The treatment many parents are receiving at the hands of social workers pursuing anonymous tips, violates parent's fundamental rights to direct the upbringing of their children.

Solutions to Reform the Child Welfare System

I offer two solutions to prevent unnecessary trauma to families while saving state and Federal Governments millions of dollars in following "wild goose chases."

1. Anonymous Tips: As a condition of receiving federal funds, states should be mandated to require all reporters of child abuse to give their names, addresses and phone numbers. This will curtail false reporting and end harassment using anonymous tips. The appropriate legislation should be amended by adding a requirement that "each state must establish provisions and procedures to assure that no reports shall be investigated unless the person making such a report provides such person's name, address and telephone number and that the information is independently verified."
2. False Reporting: As a condition of receiving federal funds, states should be required to make it at least a class C misdemeanor to knowingly make a false report. "States shall establish penalties for any individuals who knowingly or maliciously makes a false report of any type of child abuse or neglect that includes a provision stating that such persons shall also be liable to any injured party for compensatory and punitive damages and a provision requiring that all reporters be informed of the penalties for false reporting and that the call is being recorded."

Seventeen (17) states have penalties for false reports in their child welfare code.

Conclusion: Congress Needs To Free Social Workers to Pursue Real Abuse Cases

Real abuse is taking place. Children are being hurt and even killed. We need a child welfare system to investigate, stop, and prosecute this horrible abuse of children. By eliminating the investigation of anonymous tips and penalizing intentionally false tipsters, social workers will have far less cases to investigate and the referrals will be far more accurate. This way they can give the requisite time and attention to real child abuse cases instead of being "spread so thin" pursuing anonymous tips that usually turn out to be unfounded. Eliminating investigation of anonymous tips will largely stop tipsters from using the system to harass people they do not like or are prejudiced against. Eliminating anonymous tips will also better protect innocent families parental and 4th amendment rights.

APPENDIX I

True Accounts of Social Workers Wasting Time Pursuing Anonymous Tips and Traumatizing Innocent Families.

Michigan: "What Is the Fourth Amendment Again?"

Mr. and Mrs. A* were enjoying an extended out-of-state trip with their family. While checking their answering machine, they discovered a message from a local child protective services worker. Mr. A called CPS to find out what was going on. Apparently, an anonymous person had alleged that Mr. A's children were being "beaten" and that one had a black eye. The charges were completely false, but the CPS worker insisted that, as soon as they arrived back from their trip, he come into their home and interview each child, including their three year old.

Upon my advice, the family submitted a statement from their doctor, giving the family a clean bill of health and several character references.

However, the CPS worker still insisted that the law required him to come into the house and interview the children. When I challenged him that this was not in the law, he was not able to produce any authority to the contrary.

When I told the CPS worker we simply wanted to protect the family's Fourth Amendment rights, he asked "What is the Fourth Amendment again?" This man has been a social worker for 20 years, and yet he did not know what the Fourth Amendment to the U.S. Constitution says! The Fourth Amendment is the key Due Process protection that every law enforcement officer must follow.

I reminded the social worker that he had no right to enter the home and interview the children without a warrant or court order signed by a judge. The anonymous tip he had received was false and did not rise to the level of probable cause. After 30 minutes of discussion, the situation was finally resolved to the satisfaction of the parents, and the social worker determined that allegations were unfounded.

Kentucky—Social Worker Says Home Schooling Without Certified Teacher Illegal

Pendleton County, Kentucky—Two of the most common legal difficulties home schoolers face are anonymous tips to social services by people who are not familiar with all the facts of a situation or government officials who do not know the law. Last week, a single mother in Kentucky faced both problems during an unpleasant social services investigation.

Mrs. T, who home schools her three children, was making preparations to move out of her house. As part of these preparations, the electricity was turned off. Unfortunately, the house she was planning to move into was not immediately available, so she and her children temporarily moved in with her mother, who lives close by.

An unknown person reported the T family to the Kentucky Department of Children and Families, claiming that the children were living in a house without any electricity and were not attending school.

When a social worker came to Mrs. T's door while the family was packing, Mrs. T explained the circumstances. However, the social worker demanded entry to talk to the children about their schooling. Claiming that home schooling is illegal in Kentucky unless the teacher is state-certified, she threatened to remove the children from the home.

Mrs. T called HSLDA, and HSLDA immediately informed the social worker that Kentucky law allows parents to teach their children at home, and that Mrs. T was in full compliance with the law. After the local public school confirmed that Mrs. T had indeed sent in her notice this year, the social worker agreed to drop all of the allegations.

Nevada—Family Successfully Handles Hostile Investigation

NEVADA—Mrs. P was at the library around lunchtime with several of her children, who began telling her that they were "starving." Evidently, someone overheard them and called in an anonymous tip to Child Protective Services, claiming that the children were "starving and dirty." This complaint resulted in an aggressive investigation.

A few days later, a social worker visited Mr. and Mrs. P at home. They explained the situation at the library and brought the children to talk to him, so that he could see they were well fed. But that wasn't enough—the social worker then demanded to enter the home, which Mr. and Mrs. P respectfully denied.

When the P family told HSLDA about the investigation, HSLDA contacted the social worker and explained that the Fourth Amendment protected our member's right to deny his entry without a warrant or an emergency.

Several weeks passed. Suddenly, the social worker showed up on the family's doorstep, again demanding entrance. Mr. and Mrs. P called HSLDA and handed the phone to the social worker. After HSLDA reiterated the family's rights and the family showed the official that they had food on hand, he yelled at Mrs. P and left.

The next day, the social worker's supervisor called Mrs. P and, after vigorously complaining that the family had been "uncooperative," informed her that the case was unfounded.

Missouri—HSLDA Defends Family from False Allegations

The W family in Missouri, Home School Legal Defense Association members, was visited by a social worker investigating allegations that their children were not in school.

When the social worker arrived at their door, Mr. W immediately called HSLDA. We talked to the social worker to discover the specific allegations from the anonymous tipster and then explained Mr. and Mrs. W's constitutional rights.

In response to the allegation of truancy, we told the social worker that the W family was home schooling in compliance with Missouri law. While she quickly dropped

that claim, as required by state law, she still insisted upon investigating other allegations, including that of physical neglect and unsafe living conditions.

We advised Mr. and Mrs. W to have their children examined by their family pediatrician. The doctor gave them all a clean bill of health and wrote the social worker a letter to this effect.

In addition, we were able to find a friend of the W family who was a police officer. He examined the house and reported to the social worker that there were no unsafe conditions.

After we supplied the social worker with all this information, the W family had no further contact from her.

Indiana—Social Workers Refuse to Disclose Allegations

Based on only an anonymous tip of "possible child neglect," social workers from the Jackson County Office of Family and Children contacted Mr. and Mrs. Bailey* demanding to enter their home to interrogate their child. When the Baileys asked about the allegations against them, the social workers refused to provide them with any information.

The Baileys immediately contacted Home School Legal Defense Association for assistance. When we talked to the social workers, they refused to reveal the allegations either, even though a newly-passed federal law states that social workers are supposed to explain what the allegations are when they first contact the family. Attorney Tom Washburne of HSLDA followed up with several letters to the attorney who represents the Office of Family and Children, but they still refused to cooperate.

Finally, the social workers laid down an ultimatum—either surrender the child for an interview on the still-unknown allegations, or face court action. The Baileys decided to stand on their Fourth Amendment rights, so the social workers' attorney filed a motion with the court to force an interview with the Baileys' child. However, even in this motion, the Office of Family and Children never disclosed the content of the anonymous allegations.

HSLDA quickly opposed this motion, since the court would have to rule blindly on whether to grant a warrant. We argued that the constitutional right to due process requires that parties be informed of the factual basis for allegations against them before a hearing so that they may be able to prepare. Indiana law has long recognized that parents have a right to know the nature of the allegations against them before a hearing. Under state law, when the attorney filed the motion with the court, he was supposed to also file a statement of facts explaining the allegations. In addition, under Indiana law, anonymous tips are not sufficient for a court to issue a warrant.

Apparently realizing that this was a losing battle, the social workers' attorney finally called HSLDA and told us the nature of the anonymous tip.

After discussing the matter with the family, we discovered that a stranger had misinterpreted some perfectly innocent behavior. Armed with the facts, the Baileys were then able to resolve the matter with social services quickly.

Texas—Neglect Case Dismissed

The Wilson family in Longview, Texas was surprised to be contacted by the Child Protective Services based on an anonymous tip that their children were being neglected. The parents wisely refused to let the social workers talk to the children. A week later, the social worker returned escorted by a deputy sheriff.

The allegations were "children are malnourished, they used homeopathy, had home births, no social security numbers for the children, homeschooled, unsupervised near lake, sores on children, and 14-month old was not fed any solids."

HSLDA was able to prove that these allegations were completely false.

The social worker demanded to interview the children. HSLDA offered to allow an interview as long as a third person was present. Instead of responding, the social worker obtained a court order to gain entry into the family's home. Providentially, the Wilson family was on vacation and the summons was never delivered.

Upon review of the allegations in the social worker's affidavit to obtain the court order, HSLDA discovered that the social worker had misstated the facts. We reached the social worker's supervisor and worked out an understanding to withdraw the court order if the social worker interviewed the children with the parents present. The supervisor found no evidence of abuse and stated: "This has been a mistake." The investigation has been closed and all allegations have been dismissed.

A formal complaint has been issued against the social worker who obtained the court order.

Texas—Education Neglect When School's Out?

In July, the Lewis family was turned into the Child Protective Services by an anonymous tipster. One of the allegations was that the family homeschools their six year old child. The tipster indicated that the child cannot read. The fact is that the child can read, at the level of a six year old. Furthermore, this allegation is truly absurd as school is not in session; therefore, no educational neglect can occur.

To show the extent that some anonymous tipsters will go to try to get a family in trouble, they asserted that the children swim in a "feed trough." The family lives in the city and has no close proximity to any feed troughs, which simply demonstrates that the tipster was malicious. HSLDA has communicated with the CPS worker that she has no right to enter into the home, nor to talk to the children separately. We believe that this situation will resolve quickly.

Florida—Homeschoolers Face Aggressive Child Protection Investigators

The Wilkins family was homeschooling their children in Palm Bay, pursuant to the Florida home school law. Little did they know their life would turn upside down when the Dad was seen lightly spanking their two-year old on the diaper in a parking lot.

The anonymous tipster called the police who met the homeschool father at the home when he returned. The father showed the police the 2-year old and they were satisfied that there was no injury. However, the incident was referred to the Florida Department of Children and Families. A social worker came to the home and talked at length with the parents and children. Although the social worker found no evidence of abuse, she demanded that the parents: 1) take 22 weeks of parenting classes through the County, 2) have a social worker visit once a month for an indefinite period of time to see how they are doing, and 3) sign a statement of release allowing the social worker to get documents and medical records from any source they choose. Then she indicated that they would seek a court order if the family did not cooperate.

At this point the family contacted Home School Legal Defense Association because they did not believe that the law required them to fulfill the demands of this social worker.

HSLDA Attorney Chris Klicka contacted the child protective investigator who at first did not want to back down from her demands. She indicated that the family was at risk. When Chris Klicka asked why, she told him the Wilkins have a large family (four children), they homeschool and have a low profile in the community, and they do not have daily contact with trained people who can detect child abuse, such as those who run the local public school. She also admitted that the children look fine and there was no marks on them, nor any concerns that abuse was actually taking place.

After much discussion on the phone, the social worker insisted that she would need to get a court order if her earlier demands were not satisfied. HSLDA immediately responded with a 4-page letter explaining that the Florida statutes say "corporal discipline of a child by a parent—for disciplinary purposes, does not constitute abuse when it does not result in harm to the child." This statute further explains that corporal punishment would only be abusive if there were clear-cut injuries (sprains, dislocations, or significant bruises). Furthermore, Mr. Klicka pointed out that in order for a child to be taken from a family, or a court order issued, there must evidence that the children are under substantial risk of eminent abuse or neglect.

In this case, the fact that they have a large family homeschool, and no contact with daycare centers or public schools, is not sufficient evidence to constitute a substantial risk of abuse.

Mr. Klicka ended the letter by establishing the constitutional and statutory right of a family to homeschool and the fact that if her risk factors were applied, every homeschool family in the state of Florida would be guilty of abuse.

The social worker finally withdrew her demands and the family is able to continue homeschooling without further harassment.

Florida—Social Worker Attempts to Intimidate Family with Police

The Morris family in Orlando was homeschooling, but the parents decided to separate for a time due to some marriage issues. When the family returned to the home where the father was still staying, they were surprised to be met by a child protective investigator.

Apparently, an anonymous tip came from someone out-of-state, who invented a false story about the father. The family immediately called HSLDA after the social worker came back a second time. The social worker demanded to interview the children and demanded entry to the house. HSLDA Attorney Chris Klicka argued with

the social worker over the phone for thirty minutes while she waited on the doorstep. Finally, in exasperation, after getting one police officer, she said, "I will get four more police officers." Attorney Klicka responded, "You can get a whole army of police officers, but you still cannot come into the home without a warrant." An anonymous tip is not sufficient evidence to get any type of court order.

This homeschool family had restored their relationship, but it was nearly broken asunder by the harassment of the social services. Finally the child protective investigator and the police left the house without gaining entry and interviewing the children. At this time, a family has been left alone.

Michigan—Several Contacts

An anonymous tipster told the Empire Child Protective Services that Mr. and Mrs. Frankfurt's daughter was not being properly socialized and was "isolated" by homeschooling. This Home School Legal Defense Association member family contacted our office for help.

HSLDA Senior Counsel Christopher Klicka explained to the social service agent that these allegations were false and supplied references who could vouch for the parents' responsible care of their child. The girl was thriving in her homeschooling program and was active with a local weekly science class, 4–H club, church, and other youth-related activities. She had just taken two trips during the last two weekends to other states.

In the face of clear evidence disproving the allegations, the social workers dropped the case.

No Interview Needed

Macomb Child Protective Services contacted the Johns family in Macomb County, concerning anonymous allegations that the father had a serious kidney illness and was not receiving sufficient care. On our member's behalf, HSLDA attorney Chris Klicka explained to CPS that Mr. Johns was not only receiving good care, but could care for himself. Suspicious that the daughter was caring for her father rather than homeschooling, CPS insisted on interviewing her privately. HSLDA established that the allegations were false, providing documentation and a letter describing the law and the Fourth Amendment limitations of CPS. CPS finally closed the case.

False Allegations

In Dowagiac, an anonymous tipster accused the Marris family of having a messy home, using drugs, and neglecting the medical condition of their daughter. After CPS attempted several times to visit the home to enter and interview the child, the Marris asked HSLDA for assistance. HSLDA provided alternative evidence that the allegations were false and CPS closed the case as "unfounded."

Colorado—Allegation of "Small" Child

Mr. and Mrs. Stein of Parker County, Colorado, were quietly homeschooling their four children when a Child Protective Services (CPS) worker contacted them with an anonymous allegation that one of their children was "small" and that they were neglecting medical attention to this child.

The family contacted Home School Legal Defense Association for assistance. We demonstrated to the social worker that the allegation was false and provided a letter from the "small" child's pediatrician that gave the child a clean bill of health. Based on this communication, the CPS worker declared the allegation had "no validity," and the situation was resolved.

* Names of families changed to protect privacy.

APPENDIX II

Unfounded Cases are Artificially Increasing Child Abuse Statistics While Parents' Rights Suffer

Here are a few statistics showing the great percentage of cases that are unfounded. Many of the unfounded cases are results of anonymous tips.

In a single representative year (1986) the American Humane Association (hereafter, "AHA") reported 2,086,112 allegations of abuse or neglect.[1] Unfortunately, most of these allegations turned out to be either false or trivial. After investigation, only 737,000 of these cases of reported abuse or neglect were found to be valid. The

[1] American Humane Association, Highlights of Official Child Neglect and Abuse Reporting 1986, p. 10.

other 1,349,000 were unsupported by evidence.[2] AHA's percentage of substantiated cases are generally consistent from year to year.[3]

Other studies have consistently shown similarly low levels of validity for child abuse and neglect allegations. One study involving an actual review of every case for a 20-year period from one county determined that only 39 percent of all reported cases of abuse or neglect were substantiated.[4]

While 737,000 is still a large number of abused and neglected children, even this figure bears further analysis to avoid overstating the problem. AHA offers the following breakdown by type of abuse or neglect.

Major Physical Injury 21,000
Minor Physical Injury 115,000
Other Physical Injury 84,000
Sexual Maltreatment 132,000
Deprivation of Necessities 429,000
Emotional Maltreatment 71,000
Other Maltreatment 34,000[5]

In New Hampshire, the Department of Child and Youth Services (DCYS) data shows that in 1991, there was 6,434 abuse reports. Believe it or not, 5,524 of those reports turned out to be false! This means 86.2% of all child abuse reports were false. The statistics over the last eight years show that the number of founded cases is dropping and yet the number of false child abuse reports is rising. In 1984, 54% of the child abuse reports turned out to be false. There were 3,855 abuse reports of which 1,814 were founded and 2,041 were false. In 1990, 86% of the child abuse reports were found to be false. There were a shocking 5,616 abuse reports with only 709 which were proven to be founded or legitimate abuse allegations and 4,907 turned out to be false child abuse reports![6] The system is out of control. Many thousands of innocent families are being abused by the system. Furthermore, Representative Gary Daniels of New Hampshire has federal statistics that demonstrate that approximately 62% of children taken from their homes were taken without justification.[7]

An important book was published in 1990 that confirms much of reports above and provide important documentation of the frequent abuses of the modern child welfare system: Wounded Innocents, by Richard Wexler (1990).[8]

In his book, Wounded Innocents, Wexler warns:

The war against child abuse has become a war against children. Every year, we let hundreds of children die, force thousands more to live with strangers, and throw a million innocent families into chaos.[9]

He demonstrates further that the hotlines, used often by anonymous tipsters, have become a "potent tool for harassment." He states, through the state child abuse laws, "We have effectively repealed the Fourth Amendment, which protects both parents and children against unreasonable searches and seizures." He shows the child welfare system often denies due process to the "accused" child abusers.[10]

Wexler also confirms the AHA statistics above. In actuality, number of approximately 2 million abused children represents only the number of cases reported by tipsters. In actuality, over half of the reported cases are false. In fact, in 1987 alone there were 1,306,800 false child abuse reports. Sexual maltreatment, which is commonly argued for the need to increase the power of social workers, only makes up

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[2] Id., at 11.

[3] More than 65 percent of all reports of suspected child maltreatment in 1978 turned out to be unfounded. U.S. National Center on Child Abuse, National Analysis of Child Neglect and Abuse Report 36 (1978), Table 28 (DHEW 1979), at 18, table 5. Another study reported in over half of the cases investigated parents never mistreated their children. U.S. National Center on Child Abuse and Neglect, National Study on the Incidence and Severity of Child Abuse and Neglect 11, (DHHS 1981), at 16, Table 3–5.

[4] Dean K. Knudsen, Ph.D., Department of Sociology and Anthropology, Purdue University, Child Protective Services, Discretion, Decisions, Dilemmas, Charles C. Thomas, Publisher, Springfield, Illinois, (1988), p. 81.

[5] Id., at 23. Because of the use of different data sources, the numbers in the AHA study vary from chart to chart. This particular chart totals 784,000 cases of maltreatment while at page 10, AHA uses the number of 737,000 of confirmed cases.

[6] "Is DCYS Running Out of Abusers?" Christian Home Schooling News, Vol. 2, No. 4, April/May 1992, Manchester, New Hampshire, p. 3.

[7] Ibid.

[8] Richard Wexler, Wounded Innocents: The Real Victims of the War Against Child Abuse, (Buffalo, NY: Prometheus Books, 1990).

[9] Wexler, Wounded Innocents, p. 14.

[10] Ibid., p. 15.

15.7 of all reports. Minor physical injury constitutes only 13.9 percent and severe physical injury only constitutes 2.6 percent.[11]

This means for every 100 reports alleging child abuse:

- at least fifty-eight are false
- twenty-one are mostly poverty cases
- six are sexual abuse
- four are minor physical abuse
- four are unspecified physical abuse
- three are emotional maltreatment
- three are "other maltreatment"
- one is major physical abuse.[12]

After he shows that the "child abuse panic" is a myth and an excuse to give unconstitutional powers to the social service agencies, he documents the terrible abuse children receive in foster homes and juvenile homes. The true accounts and statistics are sobering and shocking. In Kansas City, a study was done showing 57% of children in foster care to have been placed in "high risk of abuse or neglect" situations." [13]

Chairman HERGER. Thank you very much, Mr. Klicka. I noticed in your written testimony, as well as your oral testimony, you do make reference to a number of anecdotes and personal stories about individuals who have been harmed by false reports of abuse or neglect. Do you have any national data that would support your suggestion that this is an increasing problem? Have there been any studies on this point, including any discussion of the amount of caseworker attention and resources across States or the Nation devoted to pursuing false reports? Naturally, not all reports will turn out to be accurate, so a certain number of reports will not result in a finding of abuse or neglect, but what actual data is there that would suggest we should be concerned about this growing number of false reports, and the impact that it has, not just on the families involved, but on others of need?

Mr. KLICKA. When CAPTA was reauthorized, I testified at that hearing a year and a half ago, and Congressman Hoekstra's Committee asked specifically if we could get some data on that. They were going to put into the bill a requirement that new data be kept regarding anonymous tips—and it didn't happen. That didn't get added into the legislation. So, to my knowledge, there isn't real clear recordkeeping on which of them are anonymous and which are not anonymous, but I am still doing some deeper research in that area.

Chairman HERGER. Okay, thank you. Mr. Birch, in your experience, what types of prevention activities have proven most successful in preventing the placement of children in foster care, and do you know what the cost of these programs is compared to the cost of placing a child in foster care?

Mr. BIRCH. There are a range of services which are available to a community that has a really successful strategy for prevention. The service that probably has recieved the most attention and the most positive results is the nurse home visiting program, which is being implemented in four or five communities around the country. More broadly, home visiting is a service that has existed for dec-

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[11] Ibid., p. 86–88.
[12] Ibid. p. 87.
[13] Ibid., p.198.

ades—it is common practice in Great Britain, and it is one that has been the subject of hearings on Capitol Hill in past years. So, that is one that I certainly would call to your attention. I would also add to that, parenting education, parent support groups, respite care, family support, and family resource centers. There is not one single approach, because families are different; those approaches need to be available broadly. When we looked at the costs and the spending gap that I talked about in my testimony, we looked at an expense of about $3,250 a year for a simple kind of home visiting service for a family—much cheaper than what we are paying otherwise to support children in foster care.

Chairman HERGER. Very good. Again, I want to thank each of our witnesses for testifying. I would like to release you at this time, and call up our final panel today. I would like to welcome those individuals who have traveled here today to provide us firsthand knowledge on the child welfare system. Your perspectives will provide important information for us to consider as we work to ensure that these systems better protect children from abuse and neglect. We will now be hearing from Cathy Burge from Naples, Florida; Lisa Gladwell from River Edge, New Jersey; and Marie O'Hara from Barnegat, New Jersey. Ms. Burge?

STATEMENT OF CATHY BURGE, NAPLES, FLORIDA

Ms. BURGE. Thank you, Mr. Chairman. Thank you for this opportunity. I feel that my case represents only one of thousands where the States do not monitor vulnerable children in custody battles. As a frame of reference, I would like you to read what U.S. Supreme Court Justice William Brennan said about the family. It ends with, "Contemporary life offers countless ways in which family life can be fractured and families made unhappy. The children who increasingly live in these families are entitled to the chance to sustain a special relationship with both their fathers and their mothers, regardless of how difficult that may be. No society can assure its children there will be no unhappy families. It can tell them, however, that their government will not be allowed to contribute to their pain." Members of this Subcommittee, our child welfare program is a broken system, and the biological parent and child relationship is not being protected—many families like mine are in pain. I would like for you to feel the pain we have endured. My custody case, my most recent custody case, began in California in 2000. I immediately and illegally lost custody of my 2 sons, ages 9 and 11 years, who I had raised as a single mother for 6 years. I had been a mother for 18 years. Child Protective Services in California assisted the angry, vindictive father of my sons to legally steal my children and deny them of any further relationship with their mother.

Months before, the father promised my sons that with the help of his big law firm, Higgs, Fletcher & Mack, LLP, they would be living full-time with him. They were taught to keep many secrets. In 1995, when my sons were much younger, their father refused to return them after a 1-week visit. The judge in Illinois found him to be guilty of wrongfully withholding them, and immediately ordered that my sons return to California with me. My sons were permanently affected by what common people call kidnapping. For

18 months after the most recent custody battle, I spent thousands of dollars on legal fees, forensic psychologists, and testing, yet Child Protective Services stood by their initial support of the father even though our trial in 2001 showed that none of these allegations were substantiated. Meanwhile, 14 months had passed and I had only seen my children a couple of hours per week during supervised visits. After the trial, the judge ordered that I be reunited with my sons, and we were ordered to reestablish our 50–50 parenting time. Child Protective Services and the judge did not admit any mistakes in this 14-month litigation. After the trial, the father stated to my sons that they would never live with their mother again—and they have not. They believed him. They feared him. The father controlled their thinking.

One of my sons contacted Child Protective Services in 2002 and declared to them that he had lied for his dad, and he just wanted to be with his mama. They said many times to him that the abuse he described in his dad's house was not bad enough to change custody. Was that a decision that Child Protective Services should make, or should they have investigated to find the truth? Were the same standards applied to me in 2000, or were they protecting themselves? Judge Judith Stern in the San Diego family court system did not protect my children's rights, as Justice Brennan said, to a relationship with both parents. She did not even enforce her own rules. Child Protective Services never protected my sons, and they never investigated the source of the complaint. Not one professional, friend, neighbor, medical doctor, or teacher supported the father's complaints. In fact, it was shown in the trial that our court-appointed, independent evaluator was a business partner with the father's therapist. Who is responsible for the trend in California of fathers being successful in gaining custody, according to the California National Organization for Women? A devoted mother like me should never suffer a parentectomy, as I have, and no children like my sons should ever lose their mother at such a tender age.

My sons are now 13 and 15 years old. Every day, I long to see them, listen to them, fix their favorite meals, shop for and wash their clothes, share my thoughts with them, laugh and play with them, and just spend the family time with them that I had taken for granted. I long to see all three of my children together, and especially for my mother to have time with them. I want my sons to know our extended family the way my daughter does. I would like my parental rights and my custody restored as soon as possible, and I request that this Committee investigate the abuse and injustice that has occurred to my family and thousands more, so that this pattern will not be repeated. Divorce will not decline in our lifetime, so our courts must protect the rights of children when the two parents divorce, and one parent cannot tolerate the other parent's involvement in the children's lives. Our constitutional rights need to be protected. When you consider the foster children, adopted children, and all the children in the system, please do not forget the children whose biological parents are fighting over them. Thank you, ladies and gentlemen.

[The prepared statement of Ms. Burge follows:]

Statement of Cathy Burge, Naples, Florida

I feel that my case represents only one of thousands.

As a frame of reference, I would like you read to you what U.S. Supreme Court Justice Brennan said about the family ending with . . .

"Our society's special solicitude for the family reflects awareness that it is through the family that we inculcate and pass down many of our most cherished values, moral and cultural . . . As a result we have long recognized that the freedom of personal choice in matters of family life is a fundamental liberty interest protected by the Fourteenth Amendment.

A fundamental element of family life is the relationship between parent and child. The intangible fibers that connect parent and child have infinite variety. They are woven throughout the fabric of our society, providing it with strength, beauty, and flexibility. It is self-evident that they are sufficiently vital to merit constitutional protection. . . . We have thus been vigilant in ensuring that government does not burden the ability of parent and child to sustain their vital connection . . .

Contemporary life offers countless ways in which family life can be fractured and families made unhappy. The children who increasingly live in these families are entitled to the **chance to sustain a special relationship with both their fathers and their mothers**, *regardless of how difficult that may be.*

No society can assure its children that there will be no unhappy families. It can tell them; however, that their Government will not be allowed to contribute to their pain."

Members of this Committee, our Child Welfare Program is a broken system and the parent and child relationship is not being protected and many families like mine are in pain. I would like for you to feel the pain that we have endured.

Background:

My custody case began in California in 2000. I immediately and *illegally* lost custody of my two sons, ages 9 and 11, whom I had raised as a single mother for 6 years; I had been a mother for 18 years. CPS in California assisted the angry, vindictive father of my sons to "legally" steal my children and deny them of any further relationship with their mother. Months before, the father told my sons' that with the help of his big law firm (Higgs, Fletcher, and Mack) they would be living full-time with him. They were taught to keep many secrets.

In 1995, when my sons were much younger, their father refused to return them after a 1-week visit. The judge in Illinois found him to be guilty of *"wrongfully withholding them"* and immediately ordered that my sons return to CA with me". My sons were permanently affected by what common people call *kidnapping*.

For 18 months after the most recent custody battle, I spent thousands of dollars on legal fees, forensic psychologists and testing; yet, CPS stood by their initial support of the father, even though our trial in 2001 showed none of his allegations were substantiated. Meanwhile, 14 months had passed and I had only seen my children a couple hours per week during *supervised* visits.

After the trial, the judge ordered that I be reunited with my sons and we were ordered to re-establish our 50/50 parenting time. CPS and the Judge did not admit any mistakes in this 14-month litigation. After the trial, the father stated to my sons, that they would never live with their mother again. They believed him. They feared him. The father controlled their thinking.

One of my sons contacted CPS in 2002 and declared to them that he had lied for his dad and he just wanted to be with his Momma. They said many times to him that the abuse he described in his dad's house was not bad enough to change custody. Was that a decision that CPS should make or should they have investigated to find the truth? Were the same standards applied to me in 2000 or were they protecting themselves?

Judge Judith Stern in the San Diego family court system did not protect my sons' rights to a relationship with both parents. She did not even enforce her own rulings. CPS *never* protected my sons and they *never* investigated the source of the complaint. Not one professional or friend or neighbor or medical doctor or teacher supported the father's complaints. In fact, it was shown in trial that our court-appointed "independent" family evaluator was a business partner with the father's therapist.

Who is responsible for the trend in California of father's being successful in gaining custody, as documented by CANOW?

A devoted mother, like me, should never suffer a Parentectomy, as I have, and NO children, like my sons, should ever lose their mother at such a tender age.

My sons are now 13 and 15 and every day I long to see them, listen to them, fix their favorite meals, shop for and wash their clothes, share my thoughts with them,

laugh and play with them and just spend the family time with them that I had taken for granted. I long to see all three of my children together again and especially for my Mother to have time with them. I want my sons to know our extended family the way my daughter does.

I would like my Parental Rights and my Custody restored as soon as possible. I request that this committee investigate the abuse and injustice that has occurred to my family and thousands more so our children will not repeat this behavior.

Divorce will not decline in our lifetime. Our courts MUST protect the rights of children when the 2 parents divorce and one parent cannot tolerate the other parent's involvement in their children's lives. THIS MUST BE STOPPED! Our constitutional rights need to be protected.

When you consider the foster children, adopted children, and all children in the system, please do not forget the children whose biological parents are fighting over them. Initiate the measures to insure their constitutional rights to a relationship with both of their parents and their family.

I tried to defend myself against cruel charges and I tried to protect all three of my children's right to their family, as they had always known it. I learned that the Family Court System does not have the Child's Best Interest in mind. Further,

1. They do not protect the children.
2. They do not preserve the relationship with both parents.
3. They are not monitored or held accountable by the system.
4. They do not enforce their own rulings.
5. The system is designed to protect itself, not the children.
6. It is a gravy train for the individuals working in the system.
7. There seems to be no education in such important matters as Parental Alienation, Brainwashing Children, and the ability of a parent (usually the father) to buy the system.

Chairman HERGER. Thank you, Ms. Burge. Ms. Gladwell?

STATEMENT OF LISA E. GLADWELL, RIVER EDGE, NEW JERSEY

Ms. GLADWELL. Good afternoon, Mr. Chairman, and Members of the Subcommittee. It is an honor to be asked to speak to you about my family's tragic experience at the hands of the New Jersey child welfare system, and my pursuit of assistance and justice from Federal and State agencies, including the Children's Bureau, State legislators, law enforcement, the Governor of New Jersey, New Jersey Administration of the Court, the Roman Catholic Archdiocese of Newark, the civil rights community, and advocacy groups, and so forth. My name is Lisa Gladwell. I am a corporate professional, homeowner, taxpayer, churchgoer, volunteer, and neighbor—a hardworking, productive asset to my community. In 2000, I was a doting mother to two beautiful 2- and 3-year-old boys. I, unfortunately, like millions of other mothers in this country, was also afflicted with the disease of alcoholism. I was a binge drinker—not enough to affect my employment, but certainly enough to have consequences in my personal life. I was a loving, nurturing mother. I never abused my children. Yet by virtue of my disease, when active, I placed them in a position of endangerment.

On April 30, 2000, my husband and I sought my family's help for my alcoholism. This was not the first time; I had been in recovery once previously. The path we chose that day, asking for assistance, was the beginning of a terminal journey for my family. Shortly thereafter, my family of origin filed for permanent custody of my sons, because alcoholism will not be tolerated in my family. After entering a program, marital counseling, and the restabilization of my recovery and home life, the family court ordered my children to return home. The Division of Youth and Family Services (DYFS)

immediately filed for legal custody. It quickly became painfully obvious DYFS's only goal was termination. The DYFS strongly advised my husband to leave our marriage and "become autonomous," claiming it was his only chance to reunite with his children. Fully compliant, we were bewildered that, despite laws to the contrary, under no circumstances was reunification considered—nor was the best interest of my sons. During our legal pummeling by DYFS, the agency utilized and rewarded lying and stealing, and illegal, unethical, and damaging tactics in order to terminate our parental rights. This New Jersey goliath blatantly violated all the rules in his battle with us. I wrote every organization, Federal and State agency, and individual and politician, for assistance and guidance on what was happening, as well as what was not—no legally required reasonable efforts, criminal and unethical contact on the part of the State as well as the foster parents, neglect, and psychological abuse of my children. The DYFS did nothing to shield their intent to terminate my family from the beginning, which by virtue of my family's position today, was supported by the court. The foster parents have forbidden us any contact with our children. My sons' great-grandmother died last Christmas without holding her great-grandchildren for over 3 years. All my children's paternal relatives have been severed from their lives.

The well-intentioned foster care and adoption system functions on simplistic laws of supply and demand. The basic flaw in its application to New Jersey's child welfare system is that children are not commodities. Statistically, all adoptions are positive key performance measures for the State—bonus points, bonus dollars. On the other hand, reunification of children with their families earns no bonus moneys. For high-demand, easily adoptable children, family reunification is not an option. It is considered an unnecessary expense, a drain on resources, costing the State thousands of bonus dollars, and is statistically unfavorable. My children were targeted before they reached the system. The foster mother, my biological sister, through corrupt connections within the State, sought and received the State's assistance in her mission to adopt my children after failing in her attempts without DYFS's involvement. Her reward? The foster parents have been receiving and are slated to receive support, services, allowances, and special subsidies until my now 6- and 7-year-olds reach adulthood. They will receive community standing, moneys, and services for years, and the State receives Federal support bonuses and a few pats on the back—a win-win situation, right? Only if children were commodities. Legal guardianship and kinship care was dismissed because the financial compensation was less than foster care, and the arrangement was not permanently guaranteed. Instead, the foster parents of my two young sons were receiving thousands of dollars in support from my husband and I, while also collecting full compensation and benefits from the State. Although identified as criminal fraud, this investigation sits inactive in the Burlington prosecutor's office, awaiting cooperation from DYFS.

The DYFS cries of insufficient funding. Their cries of insufficient funding ring hollow in the wake of their support of foster and adoptive parents who defraud the system and benefit financially from vulnerable children. These State-sanctioned, criminal parents are

the people paid for and charged with raising children to be responsible, virtuous human beings. Are all DYFS foster placements and adoptions bad? No. Are there foster and adoptive parents out there who are truly motivated by compassion, benevolence, and love? Yes. Well-intentioned caseworkers, foster parents, service providers, and advocates become demoralized and discouraged when the corrupt overshadow the charitable works they struggle daily to perform. To use Federal funds to finance State-sanctioned kidnapping and support fraud is iniquitous. Most importantly, to not do right by our children when afforded the opportunity to make a difference is to turn our back on humanity. The DYFS could not operate in its corrupted form if it weren't for the blessings of the New Jersey judiciary. The agency by itself would not have succeeded if not supported by a judiciary who ignored its responsibility to ensure that laws are upheld. Through submission, the New Jersey judiciary has given DYFS permission to behave unethically and illegally. Regrettably, the Federal Government and children's rights groups have had to intervene where the judiciary fell short. Thank God, because their actions gave my incredible nightmare credibility. The public won a glimpse into the horror hidden for years under a cloak of confidentiality and unchecked power.

The federally-ordered reforms taking shape within New Jersey are a source of future hope. What is to happen to us—those of us who have and are still being victimized by the corrupt child welfare system? Just as taxation without representation was the driving force behind the birth of our Nation, funding without accountability is irresponsible, and this tyranny must stop. Money thrown at corrupted bureaucracies is not responsible, and taxpayers' hard-earned dollars being utilized to destroy children, families, and to reward criminality, is reprehensible. It is time the government did what it was created to do—govern. Based on my own tragic experience, we need not create new bureaucracies, but establish some enforceable Federal accountability by every State receiving Federal funds. Through my journey, I could not find one organization with the fortitude, tenacity, willingness, or ability to investigate—let alone assist in my family's plight. Harsh, maybe, but please understand that this is my family that is being annihilated by a corrupt bureaucracy, supported by resources bestowed by the Federal Government. I have been in recovery for well over 2 years—1 day at a time, despite DYFS's efforts. New Jersey's corrupted child welfare machine has nearly bankrupted me emotionally, financially, professionally—but not spiritually. New Jersey may have illegally terminated my family, but I am and always will be Colin and Dillon's mommy.

I know God will not allow my children to remain victims, and their paternal family to be made martyrs. I yearn for my family to be the poster family for reunification—part of the solution, not a discarded carcass of absolute power corrupting absolutely. From the State of New Jersey, victims deserve acknowledgement of responsibility and amending actions—fundamental prerequisites for change. Until New Jersey's leaders take action to reverse the injustice and repair damage done to the victims, there will be no reform. From the Federal Government, the U.S. taxpayers deserve some assurances that the States receiving their moneys are held account-

able and responsible for upholding what is truly in the best interest of children and families. Until that time, illegal kidnapping and family executions will continue. Thank you for your hope and help. I anxiously await the opportunity to be part of the solution—to support, preserve, and cultivate healthy families so that they may protect and nurture our most priceless resource, our children. May God bless your work. Thank you.

[The prepared statement of Ms. Gladwell follows:]

Statement of Lisa E. Gladwell, River Edge, New Jersey

Dear Mr. Chairman and Members of the Subcommittee,

It is a contentious honor to be asked to speak to you about my family's tragic experience at the hands of the "NJ child welfare" system and my pursuit of justice and assistance from the federal and state agencies (including the Children's Bureau), state and federal legislators, federal and state law enforcement, the Governor of New Jersey, New Jersey Administration of the Court, the Catholic Church, U.S. Council of Catholic Bishops, The Roman Catholic Archdiocese of Newark, the ACLU, civil rights groups, community groups, advocacy groups, family, attorneys, and the Lord.

My quest has opened my eyes to the frightening reality of the bureaucratic value of the dollar over ethics and principles. . . . Where truly good intent is eclipsed by the evil it attracts . . . And how absolute power corrupts absolutely . . .

My Family's Story

I am a logistics professional: I have worked for over twelve years for one of the largest consumer product corporations in the world. I am a homeowner, taxpayer, churchgoer, volunteer and neighbor: a hard working, productive asset to my community and those I encounter.

In 2000, I was a doting mother to two beautiful, 2- and 3-year-old boys and a dedicated wife to their dad. I, unfortunately, like millions of other mothers in this country, was also *afflicted* with the disease of alcoholism. I was a binge drinker, not enough to have an affect on my employment but certainly enough to have consequences in my personal life and relationships. I was a loving and nurturing mother. I never abused my children, but by virtue of my disease when active, I placed them in a position of endangerment.

On April 30, 2000, my husband and I sought my family's help for my alcoholism. This was not the first time, for I had been in recovery once previously. The path we chose that day, **asking for assistance**, was the beginning of a terminal journey for my family. Shortly thereafter, my family of origin filed for permanent custody of my sons, for alcoholism will NOT be tolerated in the family.

After entering a program, marital counseling and the re-stabilization of my recovery and home life, the family court ordered my children to return home. DYFS immediately filed for legal custody. Initially we maintained some guarded hope that the best interest of our children would be paramount to the state and family preservation was at the very least, an option. Despite our full cooperation, it quickly became painfully obvious the Division's only goal was termination.

During our legal pummeling by DYFS the agency used and rewarded lying, stealing, illegal, unethical and damaging tactics in order to terminate our parental rights. The "Goliath" of New Jersey (DYFS) blatantly broke all the rules (policies) in his battle with David (vulnerables-other families and us "in the system").

I wrote every organization, federal and state agency, individual and politician I found about our unfolding nightmare. I wrote and wrote, for assistance and guidance on what was happening as well as what was not: no reasonable efforts, criminal and unethical conduct on the part of the state as well as the foster parents, neglect and psychological abuse of my children, etc. The Division did nothing to shield their intent to terminate from the beginning which, by virtue of my family's position today, was supported by the court.

DYFS strongly advised my husband to leave our marriage—"become autonomous"—they claimed it was his only chance to reunite with his children. Fully compliant, we were filled with anger, sadness, frustration and bewilderment discovering that under no circumstances was reunification considered. Nor was the best interest of my sons.

The foster parents have forbidden us any contact with our children. MY sons' great grandmother died last Christmas without holding her great grandchildren for three years. All my children's paternal relatives have been severed from their lives.

Foster Care/Adoption

The well-intentioned foster care and adoption system functions on simplistic laws of supply and demand. The basic flaw in the theoretical application of rudimentary economics to New Jersey's child welfare system is that children are NOT commodities . . .

States receive reward monies from the Federal Government when children are adopted. Statistically, all adoptions are positive key performance measures for the state: bonus points/bonus dollars. On the other hand, reunification of children with their families earns no bonus monies. For "easily adoptable" children, family reunification is often not an option: it is considered an unnecessary expense, a drain on resources, costs the state in thousands of dollars in bonuses and is statistically unfavorable.

My children were targeted BEFORE they reached the "system." Although healthy and young, they are classified as "hard to place," being siblings. The foster mother, my biological sister, through corrupt connections, sought and received the state's assistance in her mission to adopt my children after failing in her attempts without DYFS's involvement. Her reward? The foster parents have been receiving and are slated to receive support, services, allowances and special subsidies for each until my now six and seven year olds reach adulthood. They will receive community standing, monies and services for years and the state receives federal support, bonuses and a few pats on the back. A "win-win situation," right? *Only* if children are commodities.

Legal guardianship and Kinship Care were dismissed because the monies were less than foster care and the arrangement was not permanently guaranteed. Instead, the foster parents of my two young sons were receiving thousands of dollars in support from my husband and me while also collecting compensation from the state.

The Commissioner of Human Services has identified this as against policy. My county's prosecutor characterized this as criminal. And since then it has resided, inactive, in the prosecutor's office awaiting cooperation from DYFS. Fraudulent? Criminal? Illegal? Certainly unethical.

DYFS/Human Services cries of insufficient funding ring hollow in the wake of their support of those foster and adoptive parents who defraud the system and benefit financially from vulnerable children. And, these state-sanctioned parents are the people paid for, and charged with, raising children to be responsible, virtuous human beings.

Are all DYFS foster care placements and adoptions bad? Of course not. Are there foster and adoptive parents out there who are truly motivated by compassion, benevolence and love? Thank God many are! Is New Jersey unique? I doubt it.

Unfortunately, the bad taints the good. Well intentioned caseworkers, foster parents, service providers, advocates all are disheartened, disparaged and discouraged when the corrupt overshadow the charitable and beneficial work they struggle daily to perform.

To use federal funds to finance state-sanctioned kidnapping and support fraud is iniquitous. Most importantly, to not do right by our children when afforded the opportunity to make a difference, individually and/or collectively, is to turn your back on humanity.

The Judiciary—Credit where Credit is due

DYFS could not operate in its corrupted form if it weren't for the blessing of the New Jersey Judiciary. The agency by itself would not have succeeded if not supported by a judiciary who ignored its responsibility to ensure laws are upheld. It is the judiciary that has the authority and obligation of ensuring all parties are held accountable and responsible: to protect rights while rendering justice. Through submission, the New Jersey judiciary has given DYFS permission to act unethically and illegally.

Regrettably, the Federal Government and child advocacy groups have had to intervene for enforcement of law where the New Jersey judiciary fell short. Thank God, for their actions gave my INCREDIBLE nightmare credibility. The tenacity of Children's Rights, on behalf of vulnerable children won the public a glimpse into the horror hidden for years under a cloak of confidentiality and unchecked power.

I am hopeful that the newly created Office of the Child Advocate will have sobering impact on the bureaucratic operations and thus, positively impact the children of New Jersey. But, this office alone is not and can not be the only safeguard against a landslide of corruption, crime and gluttony by the public servants charged with NJ child welfare.

The federally ordered reforms taking shape within New Jersey are great and a source of future hope. But what is to happen to those of us who have and are still being victimized by the corrupt "child welfare" system?

Responsibility, Accountability and Hope for Vulnerable Children and Families

Just like the resistance to taxation without representation was the driving force behind the birth of our nation, funding without accountability is irresponsible and this tyranny must cease.

If the Federal Government is truly for the people, if Human Services is truly HUMAN SERVICES, it is time they stood up and took responsibility. Money thrown at corrupted bureaucracies is not responsible. And taxpayers' hard earned dollars being utilized to destroy children, families and reward criminality is reprehensible.

It's time the government did what it was created to do—govern.

Based on my own tragic experience, we surely need not to create new bureaucracies, but to establish some enforceable federal accountability by every state that receives federal funding. I could not find one organization with the fortitude, tenacity, willingness and ability to investigate, let alone assist in my family's plight.

Harsh? Maybe, but please understand that this is MY family that is being annihilated by a corrupt bureaucracy supported by resources bestowed by the Federal Government.

I know God would not allow my children to be victimized and their paternal family to be made martyrs in vain. I speak from my heart, and through my pain, that of my family as well as countless other vulnerables maimed and destroyed by an easily manipulated system devoid of principles, accountability and safeguards.

I have been in recovery for well over two years—one day at a time—*DESPITE* DYFS's efforts. New Jersey's corrupted child welfare machine has nearly bankrupted me emotionally, financially and professionally, but, not spiritually. New Jersey may have illegally LEGALLY terminated my family, but I AM and ALWAYS WILL be Colin and Dillon's mommy.

I yearn for my family to be the "poster family" for reunification, part of the solution—not another discarded carcass of absolute power corrupting absolutely.

From New Jersey, victims deserve acknowledgement of responsibility and amending actions, *fundamental* prerequisites for change. Until New Jersey's leaders take action to reverse the injustice and repair the damage done to the victims, there will be no reform. And, from the Federal Government, those financing the system, the United States taxpayers deserve some assurances that states receiving their monies are held accountable and responsible for upholding what is truly in the best interest of children and families. Until that time, illegal legal kidnapping and execution will continue.

Thank you for your hope and help. I anxiously await the opportunity to be part of the solution: to support, preserve and cultivate healthy families so that they may protect and nurture our most priceless resource, our children. May God bless your work.

Chairman HERGER. Thank you, Ms. Gladwell. Ms. O'Hara?

STATEMENT OF MARIE C. O'HARA, BARNEGAT, NEW JERSEY

Ms. O'HARA. Congressman Herger, ladies and gentlemen, thank you for the opportunity to appear before you today on behalf of my children, and the children of the United States of America. My name is Marie O'Hara. I am a divorced mother of four young children. My experience with the child welfare system and the State of New Jersey over the past few years has brought me here before you today. I would like to begin by suggesting that more, indeed, than increased funding, quality information systems, and additional cell phones are needed to ensure the safety and well-being of our Nation's most valuable and most vulnerable resource, our children. An agency which truly focuses on the physical, mental, and emotional safety and well-being of our youth must be founded on compassionate service. Two years ago, based on an investigation initiated by the Ocean County Prosecutor's Office in Tom's River,

New Jersey, and simultaneously investigated by the DYFS, it was determined and confirmed by a Child Protective Services psychologist that my 3-year-old daughter had, quote, "experienced inappropriate sexual contact with her father while at visitation."

Without enough evidence to proceed, and my unwillingness to let my young children testify, the prosecutor's office did not pursue the case further. Via subsequent court-ordered mediation, I agreed to a supervised visitation schedule for my young daughter and her father without overnight privileges. The following November of 2002, based on an allegation made by my abusive ex-husband and eldest son, all four of my children were abruptly removed from my custody and care by a DYFS special protective response unit worker, and subsequently placed with their father. Although there was no justification for removal, and DYFS acted on sketchy evidence, I have not seen or spoken to my 2 oldest boys—who at the time were 11 and 9 years old—since. It has been 15 months. Six months later, my third son, age 7, stopped coming to visit. The last time I saw my daughter, now 5 years old, was this past December. Nothing is being done to resolve this. As the employees of the Preferred Visitation and Foster Care Services of New Jersey informed me, they are not allowed to ask my children why they no longer want to visit me—nor are they allowed to physically handle my children.

Based on my ex-husband's allegations, our local police department filed charges of child abuse and neglect. I was arrested and paid $5,000 in order to post $50,000 bail. I spent an evening in jail. Shortly thereafter, the unfounded charges were administratively dismissed by the prosecutor's office—but DYFS did not stop there. Prior to their removal, my children and I enjoyed a close and loving relationship. I had been a stay-at-home mom, volunteering in each of their schools, participating in their extracurricular activities, and teaching their religious education classes. My children have since been denied this privilege, as I have been cut off completely from their lives, and unable to attend even a school function. As child support ended abruptly with the children's removal, and after a year of surviving on a small income supplemented by excess student loan money and the charity of friends and family, I have been forced to sell our home. My legal costs are already in excess of $40,000, while my ex-husband enjoys a free ride that is being funded by our State and Federal Government. Prior to, as well as after, my children's removal, DYFS never performed an investigation of our family. They never even saw my home, never interviewed a teacher, and never interviewed a pediatrician, a dentist, an eye doctor, a neighbor, or a school psychologist—no one. The DYFS has used precious dollars to act as the vehicle for the complete severance and alienation of my children from me.

Even though New Jersey's courts have emphatically ruled that children cannot be removed from a parent charged with abuse unless the court conducts a thorough evidentiary hearing, makes specific factual findings, and follows the rules of evidence, this has not been so in my case. We are just in trial now, 15 months after their removal. In order for our country's human resources to serve our children and families more effectively, they must be held to a higher standard. Everyone else in our country who regularly is involved in the lives of children must be highly qualified—as is so clearly

defined in this Administration's No Child Left Behind Act of 2001. Yet DYFS caseworkers, having fewer credentials than teachers and school psychologists, have more power—and they are abusing it. More funding is not the issue. My experience proves that funds intended to protect our Nation's most vulnerable and most valuable children in crisis are being squandered on vindictive custody litigation—litigation perpetrated by individuals adept at manipulating our system. No one is driving the bus. My children are at the mercy of a system that is governed by laws that no one has the power or courage to enforce. The individuals who are charged with the well-being and welfare of children hide behind a veil of secrecy. This confidentiality, actually intended to protect our most vulnerable from further harm, oftentimes serves to prevent them from being justly and expeditiously free from the bondage of incompetent child welfare agencies.

Based on my experience, I offer you the following suggestions for State child welfare programs: solicit investigations and reports from all professionals who touch the lives of children of suspect parents. Higher qualifications, and increased training for all human services workers, including family court judges and lawyers. Limiting the power of caseworkers and their supervisors in their ability to make life-altering decisions on behalf of children without proper procedure, training, and investigation. Expediting court proceedings. Preservation of family financial security. Working more closely with educators and community members. National standards need implemented for investigation procedures. The imposition of fines for those who use the system for personal gain. Implementation of ongoing training in domestic abuse—and how it affects parent-child relationships. Accountability of caseworkers to follow court orders. Many of the court orders issued in my case were not followed through on. Those that were, occured only after several certified letters were sent, and only by my personal efforts. Greater emphasis on family preservation and reunification. Combining State child welfare agencies to increase accountability. Audio or videotaping all supervised visitations. Participation in counseling and therapy for all family members.

I am sorry that I have gone over time. I would just like to say that one of my ideas is that education already has many, many of the things that we need in place to protect our children—they are already doing that job. Therefore, we need to combine efforts so that child welfare workers work more closely with educators. In addition, child welfare workers need to be certified; this could be accomplished by working with our State universities. Presently, child welfare employees are not even social workers, yet they have the ability and the decisionmaking power to take our children. My children are already poisoned against me. They have experienced something called parental alienation. The last visit with my 5-year-old daughter took place during the last week of December. I am not even allowed to look at her. I have no contact with any of my children. The visitation supervisor, when I asked her why my daughter wouldn't come, said she couldn't ask her why she wouldn't come, but that she had looked down and said, "I never want to see my mommy again." She was looking at the floor. I brought pictures of

my family. I love my children. Thank you very much for this opportunity.

[The prepared statement of Ms. O'Hara follows:]

Statement of Marie C. O'Hara, Barnegat, New Jersey

Congressman Herger and committee members, thank you for the opportunity to appear before you today on behalf of my children and the children of the United States of America.

My name is Marie O'Hara and I am a divorced mother of four young children. My experience with the child welfare system in the state of New Jersey over the past few years has brought me here before you today.

I would like to begin by suggesting, that more indeed than increased funding, quality information systems, and additional cell phones, are needed to ensure the safety and well-being of our nations most valuable and most vulnerable resource, our children. An agency which truly focuses on the physical, mental and emotional safety and well-being of our youth must be founded on compassionate service

My experience is as follows: Two years ago, based on an investigation initiated by the Ocean County Prosecutors Office and simultaneously investigated by the Division of Youth and Family Services, it was determined and confirmed, by a Child Protective Services psychologist, that my three-year-old daughter had, "experienced inappropriate sexual contact with her father while at visitation."

Without enough evidence to proceed and my unwillingness to let my young children testify, the Prosecutors Office did not pursue the case further. Via subsequent court ordered mediation, I agreed to a supervised visitation schedule for my young daughter and her father, without overnight privileges.

The following November of 2002, based on an allegation made my abusive ex-husband and eldest son, all four of my children were abruptly removed from my custody and care by a DYFS Special Protective Response Unit worker. As the worker informed me that further investigation would be necessary, I agreed to sign an informed consent placing the children in the custody and care of my former mother-in-law and which included a provision for immediate communication and visitation. The SPRU worker assured me that the investigation would take only a few days and that a visit would be set up immediately. Although there was no justification for removal and DYFS acted on sketchy evidence, I have not seen nor spoken to my oldest two boys since, who were eleven and nine at the time.

Within twenty four hours, the boys were placed with their father and a short time after that, Elizabeth was placed in his unsupervised custody as well. When questioned about why the children were placed with their father while he was still under supervised visitation status, the SPRU worker said that the appearance of his name on this list was "a mistake."

Based on my ex-husbands allegations, our local police department filed charges of child abuse and neglect. I was arrested and paid $5,000 in order to post $50,000 bail. Shortly thereafter, the unfounded charges were administratively dismissed by the Prosecutors Office.

Despite daily attempts, my first contact with my youngest two children was during a supervised visit nearly five weeks after our separation. My oldest two children, based on the first caseworker's communication with their father, did not want to see me. Six months later my third son stopped coming to visits and the last time I saw my daughter, now five, was the last week in December. Nothing is being done to resolve this as the employees of Preferred Visitation and Foster Care Services inform me that they are not allowed to ask my children why they do not want to visit with me, nor are they allowed to physically handle the children.

Prior to their removal, my children and I enjoyed a close and loving relationship. I had been a stay-at-home-mom, volunteering in each of their schools, participating in their extra-curricular activities, and teaching their religious education classes. My children have since been denied this privilege as I have been cut-off completely from their lives and unable to attend school functions. The state contracted psychologist who diagnosed my daughter's abuse at the hands of her father, is now the psychologist treating the children. She has vehemently denied me information on the frequency of their visits or their progress, sighting HIPAA restrictions. In addition she has defied a court order to reintroduce the children to me.

As child support ended abruptly with the children's removal, and after a year of surviving on a small income supplemented by excess student loan money, and the charity of friends and family, I have been forced to sell our home. My legal costs are already in excess of forty thousand dollars while my ex enjoys a free ride that is being funded by our state and federal taxes.

My children were excellent students who often received academic and behavior recognition. I was responsible for making and keeping their doctor, dental and eye appointments and, as our oldest son suffers from acute allergies and asthma, I persevered through alternate treatments and months of weekly and bi-weekly, allergy injections. The DYFS case workers ignored my requests for their father to attend to these important parental responsibilities. Only recently, after several certified letters, did a case worker contact my ex and request that he do so.

I persevered in taking the children to counseling, although their father did everything he could to prevent the children from talking to anyone. The children were taught by him to be secretive, to spy, and to be afraid of me. They were told repeatedly to call DYFS or police in order to undermine my parental authority and ultimately steal custody. Each time our family was investigated, as a result of these calls, they found no evidence of abuse. Although I explained this to the DYFS caseworkers, that my ex was abusing the system and poisoning the children against me, all of my concerns have been repeatedly ignored.

Prior to, as well as after my children's removal, DYFS never performed an investigation of our family they have simply taken my ex-husband's word on everything. Our long-time family pediatrician, who is highly reputed in our area, attempted numerous times to contact DYFS and was ignored. When he finally did reach someone he was given the impression that they had already made up their minds despite what anyone had to say; they ignored his qualified professional observation that he had never suspected any abuse.

DYFS has used precious dollars to act as the vehicle for the complete severance and alienation of my children from me. It has been nearly fifteen months since this nightmare began, and although the criminal charges against me for the same alleged incidents have been dismissed and expunged, I have still not even had a phone conversation with any of my four children. We are just now going through the fact finding.

Even though New Jersey's courts have emphatically ruled that children cannot be removed from a parent charged with abuse unless the court conducts a thorough evidentiary hearing, makes specific factual findings, and follows the rules of evidence, this has not been so in our case and, although I trusted DYFS to follow the law and to do the right thing, when my attorney pointed this out in a motion last summer, DYFS did not even bother to respond to the motion. None of my complaints or legal arguments was ever denied. Yet, I still have no contact at all with any of my children.

In order for our country's human services to serve our children and families more effectively, they must be held to a higher standard. Everyone else who regularly is involved in the lives of children must be "highly-qualified," as is so clearly defined in this Administration's *No Child Left Behind* Act. Everyone else in our country who touches the lives of children are "held to a higher standard," yet DYFS case workers, having fewer credentials than teachers and school psychologists, have more power, and they are abusing it.

It is my contention that more funding is not the issue, it is my humble observation that funds intended to protect our nations most vulnerable, children in crisis, are being squandered on vindictive custody litigation, perpetrated by individuals adept at using the system.

No one is driving the bus. My children are at the mercy of a system that is governed by laws that no one has the power or courage to enforce and whereby the individuals who are charged with the well-being and welfare of children hide behind the veil of secrecy which is in place for the protection of our children yet often times serves to prevent them from being justly and expeditiously freed from the bondage of incompetent child welfare agencies.

Based on my experience, I offer you the following suggestions for state and federal Child Welfare Programs.

- Mandatory investigations/reports, from all professionals who touch the lives of children of suspect parents
- Higher qualifications and increased training of all human services workers including family court judges and lawyers
- Limiting the power of case workers and their supervisors in their ability to make life altering decisions on behalf of children without proper procedure and investigation
- Expediting court proceedings
- Preservation of financial security
- Working closely with educators and community members
- National standards for investigation procedures
- Imposition of fines on those who "use the system for personal gain."

- Mandatory and ongoing training in Domestic Abuse and how it affects parent/child relationships
- Accountability of case workers to follow court orders
- Greater emphasis on family preservation/reunification
- Combining state child welfare agencies to increase accountability
- Mandatory audio/video taping of all supervised visitation
- Mandatory participation in therapy for ALL family members
- Mandatory and regular follow-up of all placements outside of the residential home
- Greater accountability for ensuring that children who are removed are receiving care that is equal to or greater than that received in the environment from which they were removed
- Immediate and mandatory assignment of family advocate

I am not alone, due to carelessness, poor training, failure to follow proper procedures, and law, DYFS case workers along with the human services agencies they work with, are acting in ways that too often damage the families they are charged with protecting.

Chairman HERGER. Thank you very much, Ms. O'Hara, and each of you for your moving testimonies. I want to thank you, Ms. O'Hara—you had a number of suggestions for us. I would be interested if any of you have any further suggestions which we at the Federal level might implement to improve the child welfare system—that might help it to work better. In your opinion, an area that you feel is the biggest flaw, and that you think—yes, Ms. Burge?

Ms. BURGE. I heard a lot of discussion about more data, more forms—information technology. I am a demographer by training, so I mentioned that the divorce rate is not going to decline for populations like ours. The divorce rate is about 70 percent right now, so you can apply that number to the number of children who are going to be part of a custody case. It isn't about more forms. I work in information technology. It is easy to automate this process. It is about education. It is about the ridiculous things that judicial officers—first of all, the caseworkers have no knowledge of parental alienation, brainwashing, and what one vindictive parent can do against the other. These children are suffering at the hands of a parent that wants to punish the other parent. That is one of the outcomes of divorce. So, I don't think it is about data. I think it is really about education.

Ms. GLADWELL. During my nightmare with the New Jersey child welfare system, I had gotten in touch with the Children's Bureau. I spent a lot of time, I sent a lot of documentation to them, and so forth—both Dr. Wade Horn, Dr. Orr, and the people in her department. After doing that for about a year and a half, and asking what could be done, knowing that millions and millions of dollars were flowing into the State of New Jersey, who has—not all parts of it are corrupt. Not all people in it are corrupt. The system itself is broken, and they have admitted that. Millions of dollars are still going into New Jersey. The response from the Children's Bureau was, "There is nothing we can do. We do audits"—which New Jersey just failed, and one of the ways they failed was on the basis of family reunification. There is no accountability there at all. In New Jersey, at the end of September, the Governor just appointed an Office of the Child Advocate. I have hope for that office, but that is not the do-all and end-all in New Jersey, or for other

children in the country who may be experiencing the same thing. There has to be some type of justice, and a way to get through this system when it is corrupt and broken. Everyone I have talked to, including Children's Rights, who had won the lawsuit, said, "This case is absurd," but no one can do anything. This is my family—my family. "Oh well, I am sorry," doesn't cut it. "Oh, yes, we are going to do this in the future based on what happened to your family." I don't want to be a victim any longer. I don't want my children to be either. I want my family back, and I want my children to be afforded the opportunity to enjoy their parents, and vice-versa, and grow up in a healthy family. Thank you.

Ms. O'HARA. I would just like to offer briefly, as I said in my testimony, no one is driving the bus. Actually, I have been having a recurring nightmare about my car accelerating and leaving without a driver. I finally figured out what that meant. My children are on a bus with no driver. The judge has, in fact, made several court orders that DYFS—as I have already said, but I just think this is so important—does not have the ability to enforce. They cannot enforce them. They will tell the judge—they will make lame excuses for it, but I don't believe they have the education or the qualifications to actually follow through. Then the judge says, "Well, I don't know what I can do," because the judges are relying on the expert opinions of the child welfare workers who are not experts. That is the best way to put it. We really need help quickly, because my children—it has been 15 months, and all 4 of my very young children are poisoned against me. Getting a child back from parental alienation is nearly impossible. I am not going to give up, but once this has happened, once the mother-child bond is severed, this is—it has become a nightmare. I don't know how to impart that upon you. My children already don't want to see me. They say that they hate their mother. They no longer love me. I can show you photographs. You can talk to the schoolteachers, the psychologists, and everyone else in our lives—my community members. We had a beautiful, loving relationship, and it is gone. Thank you.

Chairman HERGER. Thank you. Mr. Cardin?

Mr. CARDIN. Thank you, Mr. Chairman. Let me thank our witnesses for being here. We look at the statistics, we look at the numbers, we look at what is happening out on the streets—and you all put a face on it. I know it is not easy for you to be here, and I appreciate very much your willingness to present this testimony. I think it helps us to try to get a complete picture of the tragedies that occur within our current system.

Child custody, visitation issues, are difficult issues. One thing that I have learned over my years as an attorney and as a legislator, is that you can't pass a law that takes care of the circumstances of a family that requires a system, people who are trained, judges who are willing to spend the time necessary to make decisions that are in the best interests of the child and family, and that is consistent around the country. So, we are struggling to figure out what is the appropriate role for children who are vulnerable. How can we help to make sure that families are kept together, and that the child's interest is maintained? Clearly, the relationship with their parents is what we always envision as the preferred route. It is by law the preferred route. We want family

reunification where possible, and I am afraid there are people who get hurt. Sometimes we say, well, maybe there are not that many—but if it is one, it is a tragic situation, and I think your testimony here today points out how people's lives are affected and ruined as a result of decisions that are made within our system. Although we must do what we can to protect the interests of the child, we need to do a much better job in having a system that is compassionate for all interests. I thank you all for giving that dimension to our hearing.

Chairman HERGER. Thank you, Mr. Cardin. Again, I want to thank each of you for your moving personal statements, and for taking the time, trouble, and expense to come here today. In any hearing like this, we hear from a number of government officials and representatives of associations and agencies, but it is always tremendously useful to hear firsthand from people like yourselves who have actually been involved with programs, and live with the consequences every day. That has been your role today, and you all filled it well. We will keep your experiences and the many families who no doubt share your experiences in mind as we consider ways to try and improve this system. Again, many thanks for your thoughtful testimony and for joining us here today. At this time, I would like to thank all of the witnesses for their testimonies today. This series of hearings we have held since we first learned about the alleged abuse of the four boys in New Jersey has been very informative. Our witnesses today have provided useful information for us to consider as we contemplate what our next steps may be to better ensure that children are safe. I look forward to continuing to work with each of you as we continue our oversight of the child welfare system. With that, the hearing stands adjourned.

[Whereupon, at 3:08 p.m., the hearing was adjourned.]

[Submissions for the record follow:]

Statement of Edith J. Beauchamp, Greenbelt, Maryland

Chairman Herger, Congressman Cardin, and other distinguished members of the Subcommittee. Thank you for your consideration of my written testimony for inclusion in the printed record of the hearing to **Review Federal and State Oversight of Child Welfare Programs**. My name is Edith Beauchamp, and I am an adoptive mother of two siblings, whom I adopted just over a year ago from the Department of Children and Families in Miami-Dade County, Florida after being their foster mother for a year and a half. I am also a senior-level IT executive, having held the role of Chief Information Officer with four different organizations. My testimony today will bring together these unique perspectives on Oversight of Child Welfare Programs.

Achieving safety, security and permanency for our most vulnerable children depends on the people assigned to care for them 24/7. Yet assignment of temporary foster parents as well as possible pre-adoptive parents—**the function of placement**—is an OPTIONAL activity for states to undertake in automating their child welfare systems.

In addition, as I discovered in my own path to parenting, we arbitrarily limit the possible choices of homes for foster children, so that in regions like Miami-Dade County we have high concentrations of children in shelters because "there aren't enough homes" and simultaneously high concentrations of potential adoptive parents with foster care training who wait with "empty homes." How is it possible to have both high supply and high pent-up demand to adopt children and not be able to achieve equilibrium?

High supply and unmet demand to adopt children is not just a regional issue; it is a **national crisis**. How else can we explain that close to 130,000 children a year[1] in this country await permanent homes, which is one and a half times the annual total of all private and foreign-born adoptions in the US?[2] Yet the public perception is that there aren't enough children to adopt.

So these are the topics that I want to share with you today:

1. The critical nature of the placement process and just how broken it is in this country;
2. The path to parenthood for an adoptive foster parent; and
3. Why and how the mechanisms that HHS and the individual states have established for oversight should be changed.

The Critical Nature of the Placement Process and A Path to Parenthood:

Caseworkers may visit with the children once a month for a half hour, but foster parents make critical decisions regarding their care every day: what they will eat, which pediatrician to see and when, which day care or school to enroll them in or to home school them, who they can play with, whether they get new clothes or toys, and how often they are hugged.

Thousands of children in the United States are "warehoused" in shelters and group homes, not even placed in family settings. Often, when a child is taken into custody by the state, sometimes in the middle of the night, a temporary placement is made to a shelter. "Temporary" sometimes stretches into weeks, months and even years. I found my children in a shelter, as related below, and to this day, my daughter remembers her three-week stay there as terribly frightening. It was almost three years ago now, and she was only three then, but the stay is etched in her mind. With minimum-wage workers coming and going throughout the day and night, and a large dormitory-style room full of cribs and cots, she remembers this place the way most adults would probably remember a stay in the hospital: hard to sleep, and institutional. Shelters are no place to keep children warehoused, no matter how well run and clean. **We have to have a process to rapidly move children into loving homes**, and as my experience and that of my friends may illustrate, recruitment is not so much the problem in finding enough homes as is **the lack of an adequate placement mechanism to reduce the wait times and help the staff with the matching process**.

My husband and I were among the **one in five couples of childbearing age that are infertile, or 5 million couples according to the Center for Disease Control**. The infertility industry is a $5 billion a year industry in this country, and completely unregulated—"self-regulated" they call it. The treatments are expensive, physically debilitating, and can be life-threatening. A friend of mine, undergoing the same treatments as I, was induced into a five-day coma in the intensive care unit to relieve the fluid build-up in her lungs as a result of the infertility drugs. According to this month's (February 2004) issue of "O" Magazine, Oprah Winfrey's enterprise, you are more protected by oversight getting a tattoo than undergoing infertility treatments.

What I want you to understand is the pain and the lengths and depths to which couples will go to achieve parenthood, and the latent demand for adoption, because as with us, adoption is usually turned to as a solution after one has exhausted the infertility treatment options. The lack of access to effective adoption strategies in this country, particularly across state lines, has left many couples believing that they must simply give up on the dream of being a parent if medical treatments are unsuccessful.

In our case, there wasn't an "us" anymore after a nine-year marriage and going through four years of the treatments, but it didn't dampen my desire to be a "Mom." As I researched adoption, I learned of several agencies in South Florida that sheltered children for the State, and which advertised adoption on TV. What I learned is that each had different criteria for placing children in their care, and **each worked only with the parents whose home studies they completed, and the children were limited to that group of parents.** The children were limited to a small pool of possible parents instead of all the hopeful couples (and singles) in the state, or just the county even, as possible homes.

In fact, this limiting of placement to those parents each agency has worked with directly appears to be universal. The limitations can be within

[1] From HHS' AFCARS website, chart entitled, "Trends in Foster Care and Adoption as of 11/01/02" with the subtitle "(FY 2000 and FY 2001 estimates will not be revised before Spring 2003)".

[2] From US Census and INS data: approximately 50,000 private adoptions and 30,000 adoptions of children from other countries in 2000.

the same agency to a particular shelter. For example, the Children's Home Society in Miami has a significant number of children in its care at any point in time, yet the Children's Home Society in Minnesota has as its sole mission to facilitate Russian adoptions. How can we have over 130,000 children a year in the US waiting for permanent homes and no coordinated "distribution mechanism" for locating and placing them with prospective parents? There is no central database of all parents in each state interested in adoption. There are no objective standards even within finite geographic regions for the process of conducting home studies and background checks. As I learned in Miami, there wasn't even a better system than a whiteboard.

Florida has the third highest concentration of children in foster care, with the exception of California and New York. Miami-Dade County had 16% of the state's total, or 5,000 per year. I wondered what were the forces that prevented these children from being adopted by parents in other states with lower populations of foster children? I was soon to learn that even in a county with a large concentration of foster children, **the placement process itself was a barrier to timely placements, favored "those we already know" over people who have never fostered before, and was a highly manual process.**

Through word of mouth, I learned of an option to adopt directly from the State of Florida and applied to the state's Department of Children and Families in the fall of 1999. I had already decided that I wanted to adopt siblings, preferably a boy and a girl or two girls, so that they would have a better sense of family, and because siblings were harder for the state to place together. After completing an extensive series of background checks and training courses, and visits to my home by several caseworkers, I was approved for four children because of the size of my home. I respectfully asked that they reduce this to two, because as a single, working mother, I felt it would not be fair to the children to take in more. Two children with one parent require four times the attention of a single child with two parents who can share the effort.

I asked that I be designated as a "strictly adoptive" home, because with all the losses in my life, I did not wish to be in a position to give back a child I had loved. I wanted to be considered for children that had already been terminated from their parents. **That's when my licensing counselor told me that they didn't have a computer system for "strictly adoptive" homes,** but she would give my name to the county's adoption counselor. That's when my real wait began. **I didn't realize that by not accepting the foster care designation, I would not get a permit to receive children in my home, which would actually prevent an adoption placement, even for children with TPR.**

I lost the placement of a 5 year old boy and his 7 year old sister, two children who had been on the state's waiting list for at least two years, because when the caseworker called to move them to my home as a pre-adoptive placement and learned I did not have a foster license, she had to find a temporary home that was licensed, and then when they were happy in that home, she was reluctant to move them again. So I contacted my home study caseworker, and told him I was rethinking my classification and wanted to find out more about being a "foster resource parent"—a classification for foster parents who wish to adopt the children if the biological parents' rights are eventually terminated from the children. Some paperwork had to be updated, but eventually I was issued my foster license in March of 2001—a year and a half after I had first applied to adopt. Still I waited with an empty home, and there were many other couples and singles like me in the county, designated as Foster Resource homes, but without children.

Despite now having my foster license, even volunteering to work at the shelters to read to children or hold babies proved difficult. At the direction of the District Director for DCF, whom I had met at a volunteer mentoring group for foster-adoptive parents, I was given a list of eight shelters with state contracts by the placement office, and of those, only one director would allow me to visit. I met my children there, met their caseworker with the help of the shelter director, but had to write a petition letter to actually have the placement finalized with me. The placement office didn't have these children on their "radar" yet, because they were in Protective Services as abuse and neglect victims, and had not yet been officially transferred to "foster care." Then the "preferred placement" was to be to a home that already had four children, requiring a waiver to accept two more, because one of the children had been placed there for two months the year before. Ultimately, due to my petition, in May 2001 the placement was re-reviewed by both the Protective Services and Foster Care departments and unanimously moved to me. My children were only in the shelter three weeks, but may have languished there far longer had it not been for the unusual set of circumstances that allowed me to meet them and work around the normal processes. The TPR took a year and a half, and it was December 2002, when the adoption was completed—three years after my initial ap-

plication to the state. My friends who introduced me to this option gave up on it, and privately adopted a little girl from Haiti through the INS.

Why And How The Mechanisms That HHS And The Individual States Have Established For Oversight Should Be Changed.

The Why:

You heard testimony from Dr. Wade F. Horn, Assistant Secretary for Administration of Children and Families at the Department of Health and Human Services that the timely achievement of permanency outcomes, especially adoption, for children in foster care is the weakest area of State performance. Judging from HHS tables of the annual number of children in foster care in each state, and total annual number adopted by state, this appears to range from a low of 4% to a national average of 9.5% per year adopted by non-relatives. My two were counted in the 2,206 adoptions reported from Florida in 2002.

Dr. Horn testified that AFCARS, one of the "principle mechanisms for Federal oversight" collects case level information on all children in foster care and those adopted, and it also includes information on adoptive and foster parents. However, this data is demographic only, and aggregate at best, and with data reported only twice per year, it takes HHS as long as two additional years to validate the data. This is hardly timely, and certainly not useful in tracking successful outcomes for children that can be responsive. With all due respect, I would hardly deem this "oversight."

The data structure required for submitting AFCARS data, designed in 1993, is available on the ACF website. **It asks no question about whether the children have siblings** and whether those siblings have separate placements. This not only might be, but also **should** be, a factor in their foster placement and adoption. My children have three older siblings. **There is no provision to determine the number of other children in the foster care setting, although "group home" as a classification is defined as from seven to 12 other children.** Although it asks whether an adopted child has moved to another state, it is in the format of a Yes/No answer, which fails to provide information on which state the child has moved to. We've moved twice since the adoption, and I can tell you that it has averaged three months each time to transfer into the new state system for Medicaid. I mean this facetiously, but what is the point of asking, "Date of Placement in **Current** Foster Care Setting," when we are still validating data two years after the fact? Hopefully the child has been adopted by then.

The GAO reported that many states have different interpretations for answering: "Number of Placement Settings?" This is a very different question if your system is designed to track whereabouts, which are necessary for safety and security reasons, versus specific foster care assignments. All systems should be designed to track both. A child might be given to a different foster parent over a weekend to provide respite time for the foster parent of record, for example. At least under Florida law, babysitters are not allowed unless the sitter is another licensed foster care parent. The respite home may be the current whereabouts, but not the current assignment to a foster parent. Foster parents MUST be compelled to report the whereabouts of a child at any point in time, and the States should have a method for recording this information electronically. Hopefully both questions can be recorded separately so that the data purposes are not commingled.

There are many deficiencies in the design of AFCARS; these are just a few examples, and the design of AFCARS is under review. However, I contend that the whole approach to the system for AFCARS, along with SACWIS, requires a complete redesign and not just a "tweaking."

Over the last decade, $2.5 Billion has been spent automating state child welfare systems (SACWIS), and the best we can do is report data on 500,000 children two years after the fact? Further, only 29 states have operational systems, and of those, only 5 have been fully accredited by HHS. Without mincing words: **that is an abysmal track record after a decade of effort and that level of spending.** The GAO has written numerous reports pointing out these failures and has indicated that HHS failed to define the problem to be automated but rather suggested the states attempt to solve it on their own, with HHS telling them when they "got it right." Throwing money at a problem without defining the problem is not a solution.

I informally interviewed several state IT staff on an ad hoc basis, and as examples learned:

1. The Commonwealth of Pennsylvania, not counted in the "operational" group, spent $65 million on an effort to automate its child welfare system and was told by HHS to go back to the drawing board, an effort slated to begin again next summer.

2. The State of Maryland has spent over $20 million, and is only now nearing operational readiness with the software, although PC's were purchased for each caseworker close to four years ago which up to now have been used for email. The concern is that the hardware, running the Windows NT operating system, may be obsolete for this rollout.

Both of these states have in common that their child welfare systems are administered at a county level with state oversight. In Pennsylvania there are 67 separate counties, each with its own methods and procedures. A Pennsylvania state adoption clearinghouse told me that there are 67 different versions of home study forms used, for example, because every county does it differently, and "individual family court judges want different questions asked." I suspect that Pennsylvania is not the only state with this problem, and that it is far more likely to be prevalent not just in every state but also with every privatized agency in every state, as I learned about in Florida.

In total, AFCARS is designed to receive information from 3,230 counties, including US Territories. It is incomprehensible to believe that the demographics and legal systems are so different that we require 3,230 different system designs.

It is not surprising then, with so many different approaches and a lack of standards, that the Interstate Compacts for the Placement of Children across states are still wholly manual processes, and rarely used for foster care placements except for transfers of children to other relatives, or where large urban cities border other states, such as the District of Columbia with Maryland and Virginia. Your colleague in the Senate, Senator Larry Craig, stated in the magazine *Adoption Today* that there are "more hurdles in adopting in this country, especially if it is an out-of-state adoption" than adopting internationally.

Dr. Horn concluded by stating that States would continue to be required to:

a. Adhere to "requirements for conducting criminal background checks and licensing foster care providers";
b. Obtain "judicial oversight over decisions related to a child's removal and permanency";
c. Meet "permanency timelines";
d. Develop "case plans for all children in foster care"; and
e. Prohibit "race-based discrimination in foster and adoptive placements."

I recommend that those five mandates should form the basis to establish a ***National Child Welfare IT Task Force*** to create a ***Program-Management Office*** and ***Global Architectural Approach*** to designing a comprehensive national child welfare tracking system. **The mission of the Task Force would be to:** Create a streamlined nationwide system of placing, tracking, counting, classifying, protecting and coordinating children and service delivery to children in the foster care system that can be easily implemented at the local, county, state and federal level to unify the delivery of care to children and yet also enable community-based efforts to care for children.

The real key is to facilitate data interchange among all the jurisdictions and organization involved in the process. We need to define and create a national infrastructure that is at once centralized (the data) and distributed (some data and processes).

I'd also like to add one more mandate, or rather supplement Dr. Horn's list:

f. Provide a national "interstate" system for matching foster/pre-adoptive homes with waiting children (the 130,000 annual average since 1998), not just those desperate few (3,700 currently) already TPR'd without a permanency solution.

The need also to monitor case management metrics, such as timely abuse and neglect investigations and regular visits to children in their homes is also an ongoing requirement, and perhaps a subset of d).

The How:

Economies of scale in system design and cost of implementation can be achieved when commonalities and best practices are recognized and shared, rather than completely separate efforts. National guidelines and directions would go a long way to reducing the rework as each state and many counties develop wholly separate systems. Ideally several states could take advantage of similar software modules, the way that software modules or custom packages are "vertically marketed" to like-businesses.

With many states facing fiscal crises, state funding for developing appropriate information systems has been cited as a significant barrier to timely completion of their SACWIS projects. This is all the more reason to have clear established guidelines for the future. More importantly, process efficiencies can be achieved when

data exchange is standardized, and counties and states can effectively and efficiently transfer child welfare information.

Every state is different in demographics, population size and laws affecting children in foster care. California has very different needs than Vermont, and the cities of Los Angeles or Chicago or Philadelphia each has greater automation needs for foster care than some entire states. However, standards for information can be established recognizing differences in scope, scale and processes. For example: "What is a case?" differs from state to state. Is it a single child or a single legal case representing several children in one family? Of course it is possible in establishing standards also to establish conversion tables that allow for necessary state or regional variations.

In the 35 states with county-administered systems, developing these standards is critically important. There are too many computer efforts that begin by automating in the same fashion what had previously been a manual process, rather than reengineering the process to take advantage of the new efficiencies of the computer architecture. Another common design mistake, when lots of focus groups are gathered, is to fail to differentiate between what is desired because of habit, versus what is a true processing or data need in the intrinsic nature of the work. In particular, if the variations occur simply in the format and semantics of a form that each county prefers, then creating 67 (e.g. Pennsylvania) separate programmatic versions of what is in essence a similar process that could be database driven for the essential and required variations in content, is highly wasteful and expensive to maintain in an ongoing fashion. **Poor design leads to high cost.**

A significant number of caseworkers were provided with systems that have simply converted what used to be manual forms into online forms that they now must type into the computer. Rather than relieving their burden, this process adds to it, because with so much of the data gathering happening in the field, it is difficult to carry around a laptop and type the data in the presence of the foster family, assuming the jurisdiction had money for laptops or even PDA's. The caseworker should be focused on interacting with the family and children and observing. My caseworker reported having to go into the office on her days off on Saturdays to re-enter her forms just to keep up with the paperwork requirements of the new Florida computer system. Clearly, design guidelines are needed that take into account these "human factors."

Today's computer technology is highly scalable. "Open systems" standards for software and hardware, as well as internet/intranet technologies, are being adopted by many governmental Chief Information Officers (CIO's) for their jurisdictions and agencies, making standards around hardware and software more flexible and "interoperable" than when AFCARS was conceived in 1993. The same software will run on many varieties of computers and operating systems.

The states arelooking to the Federal Government for guidelines. In the absence of any other legislative mandate or regulation, however, HHS has no choice but to carry on the programmatic directives of the past, and the States to attempt to comply.

The technical assistance furnished by HHS to the states has been focused on helping them to implement the current reporting requirements, the AFCARS requirements from 1993, which is like a "finger in the dike," rather than a proactive Program Management Office and Global Architectural role which would facilitate consensus on national standards. Placement is largely ignored by these efforts. Rather than looking at developing standards as strictly a Federal requirement, however, it should be looked at as a necessary collaborative process, which all levels of government have a stake in. **Further, this mandate must come at a policy-setting level, and therefore cannot be left to mid-level state staffs to "work out."**

Many industries have developed information exchange standards, beginning in the early 90's with invoice and ordering information, a set of structures and processes known as EDI, or "electronic data interchange." Today, far more information than strictly financial transactions is exchanged among businesses due to industry standards-setting committees that established the formats for the information. My recommendation is to mandate a similar standards development process for information exchange in child welfare among all agencies involved in service delivery to children and their families and monitoring of outcomes.

With 500,000 children in foster care and approximately 40,000 caseworkers nationwide, we are not talking about an extensive amount of data by comparison with other Federal requirements. The trick is not the size of the system, but the design, and in getting everyone to agree to data standards for exchange among all the different jurisdictions, and on the appropriate process flows to move children into permanency, whether through reunification or out-of-home placement. **Reducing the**

waiting time and the number of waiting children is the goal. This will be the real work of the Task Force.

Does this mean every entity and jurisdiction must operate the same way? Certainly not. If anything, it will enable innovation. No two stores always operate the same way, unless they are part of the same chain, and certainly retail vendors selling completely different goods operate differently. Data interchange between suppliers and stores is in widespread use in retail, however. **What they must agree on is the standards for the information they must exchange in order to work together effectively.** This is precisely the goal we need to enable private/public partnerships, community-based family services, cooperation between Foster Care Review Boards and the family court system, the mental health providers, and linkages among various jurisdictions and agencies, etc. This is what developing national standards is all about.

To draw on another example from business: many companies today have established systems to help them keep track of the information on all their interactions with their customers, and to manage those relationships. After numerous mergers and acquisitions, large companies discovered their customer information was fragmented across numerous operational and financial systems. In the IT industry we call it a "data warehouse" which allows you to generate specialized reports and views of information by pulling it together from all your operational and financial systems.

Child welfare demands a focus on the children and their families and on processes that will rapidly highlight deviations or delays that hinder successful outcomes. With so many jurisdictions and agencies involved in service delivery, it is critical that there be a method to bring this data together. Let me give you a personal example: After my children were adopted, I sold my home in Miami and moved to a suburb of Philadelphia. I called the Adoption After Care unit of Florida's Department of Children and Families to let them know my new address. They had to use email to send a note to someone in the Miami-Dade County finance office to change my address in their accounting system's "vendor" file. How much more fragmented can a process get?

Once the mandate for a standards setting process is agreed to, the first step in establishing effective standards is to study the variations in policies and practices among the target organizations, in this case specific states and counties. However, rather than pore over manuals and legal regulations, the easiest and most efficient way to study these differences is to let the computer do the comparing.

For example:

1. *Developing national standards on home studies:* By collecting electronic copies of the home study form from as many jurisdictions in every state as possible, and from privatized agencies as well, we can electronically convert the questions and upload each question into a database tagged by source, which we can query for keywords and phrases to identify questions in common to most, and questions that are unique. In this fashion we can develop a result set showing the number of occurrences of a particular question or topic, and in which jurisdictions they originate. Then a cross-functional committee could evaluate the reported findings, with representation from independent associations, state agencies, or others that should or wish to be involved in establishing the standards.
2. *For criminal background checks for foster parents:* Although perhaps disconcerting to some to create linkages to Justice Department information, for background checks, there certainly is an overlap. The work just completed by the Global Justice Information Sharing Initiative with help from the National Association of State CIO's for Homeland Security may prove a useful source for information about current state IT infrastructures and a starting point for streamlining this function.
3. *For the data structures:* Most states have at least started to develop SACWIS systems, and it is important not only to develop standards for the future but also a migration path for each State to "get there," which requires understanding the starting point. By extracting the "data dictionaries" (file formats, layouts and relationships) from their existing systems, we can do a comparison electronically and develop data mapping reports and definitional documentation.

Here are examples of possible additional benefits from developing data interchange standards and a national or regional "data warehouse(s)" of child welfare information:

- Certain functions could be "web-enabled" so appropriate individuals would have direct access to update information, reducing the data entry load on the caseworkers.
- With appropriate standards for privacy and security and "need to know" access, records on the children could be stored in an accessible format, such as health records (with appropriate HIPAA compliance), so that caseworkers don't have to spend time chasing these down and can more easily print them out for foster parents to have ready access to immunization records, allergies, and other vital information on special needs children, which is essential in the first week of placement for school enrollment, doctors' visits, etc. and often difficult to come by.
- Research data would be more robust and could be aggregated from the specific records, keeping private the information on individuals. For example, knowing the specific drugs used by parents (methamphetamines, crack cocaine, OxyContin, etc.) is useful to the court preparation for a TPR, but aggregated at a county level, and mapped using Geographic Information tools, could demonstrate dramatically the specific patterns of drug use across the country and in specific regions, and correlated with other family service data could demonstrate the highest concentrations of need for planning purposes, without a lot of effort.

CONCLUSION:

The 10-year effort to automate child welfare by leaving it to each individual state has done little to streamline the complex process of managing case loads and ensuring successful outcomes for children in the child welfare system, as the data on adoptions demonstrates. Oversight at a Federal level has been hampered by the lack of completed state efforts.

Solving the problem of a high number of children waiting for adoptive homes, as well as matching them with the large number of Americans interested in adopting children requires:

> *A national mandate to establish the design of a national child welfare information system infrastructure that is standardized, and can be integrated and distributed among all the jurisdictions and agencies at a state, county and local level.*

Every child should have a family.

Statement of Patricia de Santos, Claremont, California

I wish to convey my research and experience dealing with the children's welfare system. My perspective is especially important because despite the enormity of the legislature's efforts and policy writings the ultimate policy must be able to affect the proposed intent. The children, my great nephews, and myself I have cared for over the past ten years are the people this children's welfare policy affects. Therefore, I hope my perspective will be of interest to you.

BRIEF BACKGROUND

In 1994, I took in a sibling group of three infant boys. These brothers had been placed in three separate fosters homes, two in the State of Hawaii and one child in the State of California. I am the boys' maternal great aunt and the placement of the children with me achieved unification of the three brothers. Over the following eight years I worked diligently not only providing support for the reunification services, which ultimately failed, but also for the boys special needs as all were later diagnosed with psychological problems (ADHD) and mental health disorders (Bipolar). These were extreme needs and I was never wavered in my efforts for the children or my intent to adopt all three children.

Nevertheless, in July of 2001, our family was "blown-up" by our social workers. What is more disturbing is that a false report regarding my care of the children was generated and used to prohibit the return of the children to me. When the two older boys, then 8 and 9 years old, were deported by the County of Los Angeles back to their jurisdictional State of Hawaii, Hawaii investigated. The investigation determined that the allegations in the false DCFS report were "unfounded." I obtained custody of my two older boys in December of 2001. Unfortunately, Los Angeles County has not and will not return custody of my youngest son, which effectively has separated the three brothers.

PURPOSE OF THE SUMMARY

I bring my story to you because in my search to understand what happened to my children and me in July of 2001, I necessarily initiated legal proceedings. Through these legal processes I reviewed, for the first time, the social workers' reports. Although, for many years the reports of my care of the children was favorable it was not complete. In fact, the over-simplification of my extreme efforts in caring for three special needs children from infancy was an egregious omission of the facts necessary to fully evaluate our situation. Moreover, when our last social worker began her relationship with us her representations and information to me were false based on her reports to the court AND her reports to the court were misrepresentations of the truth. Attached to this summary are two documents: 1) my research thesis with my findings overlaid on my own experiences, entitled, *Disrespecting Children: Disclosing the Adverse Effects of Children's Public Policies. An Autobiographical Case Study*, and 2) a copy of a letter addressed to Robert R. Walmsley, a children's attorney, describing a chronological summary of the events that transpired during my family's relationship with our social worker.

In further research of the problems I was encountering with the Los Angeles County Department of Children and Family Services I began to uncover horrendous accounts of vile behavior by social workers and the children's welfare system. Who would believe that the benevolent positions of protectors of children would behave in such ways? Until I researched this enigma I had no idea of the autonomous power social workers and children's welfare implementers possess. Until I reviewed hundreds of case records I did not understand the full extent of absolute immunity. Until I pursued public policy in my graduate work I did not realize the inherent government failure connected with children's public policies. I came to realize the difficulties of implementing children's public policy but most importantly, I saw *why* there is such a distortion within the children's welfare system and the protection of children.

The most devastating failure of the children's welfare system is that the funding bureaucracies within the system are in direct contradiction with the best interest of the child. Social services is in a position of serving two masters, the money stream which comes from legislators, and, doing what is best for the kids. In any bureaucratic system it must remain solvent and therefore social services look to these veins of income to remain self-sufficient. Unfortunately, when a decision is made based on funding it is inherently done against the best interest of the child because you don't put the child first. In order to do what is in the best interest of the child the child must be first and foremost. Double-talking this pursuit leads to a murky grave of this system. Clearly, the purpose of your sub-committee is a reflection of this failing.

A SUMMARY OF *DISRESPECTING CHILDREN*

My thesis is a dissection of three specific children's policies, 1) The Special Education System, 2) The Foster Care System (Dependency), and 3) the Juvenile Delinquency System. Although this sub-committee is looking specifically at the children's welfare system, I believe, you cannot effectively address a problem in one system without affecting another system. These systems are the links of a child's life and they cannot be addressed in isolation. To do so would be like fixing a broken arm while allowing the body to be ravaged by cancer. It is a daunting task, to step back and look at the enormity of the effort, but if it is not done correctly and completely, the problems you are addressing in this hearing are doomed to be repeated with horrendous and continued social consequences. The goal is to help and protect children. My research, my findings, and my experience determined that the bureaucracy itself is also part of the problem.

The Special Education system is a support system where a majority of children placed in Foster Care need to be. Nevertheless, this system is burdened and therefore excluding of as many as can be determined to fall above the very low standard for learning disability. Children in the foster care system often decline in their educational performance, but stay at borderline. Not enough to get them special education services, but receiving a minimal education at best. And if a foster parent were inclined to pursue special education services on behalf of the child, the process is delayed (despite statutory requirements) and the current Foster Care System is notorious for moving children multiple times. If by some luck the child stays in the same home for more than one year, the uphill bureaucracy of getting a borderline child are impossible as many children who fall below the standard are continually declined special education services, procedurally or effectively.

[This segment is a description of the wall of obstacles in the way of children in the foster care system to find support for their educational needs.]

The Foster Care System is inherently a brutal system. Children are continually removed from a home with little or no evidence. Those families who attempt to fight Child Protective Services are immediately portrayed as deviant, dysfunctional, combative, or worse. Yet the natural instinct for any parent is to protect your child without concern for yourself. Many of the families that react in this instinctive manner are characterized as abnormal. When an intrusion enters the Constitutionally protected domain of the home, there must be safeguards to these psychological dynamics. Otherwise, the abuses that occurred to my family and me and to many families whose stories are told and untold will continue to the detriment of the children the system is designed to protect.

Now, add in the enormous and autonomous power social workers have acquired over the years in implementing children's welfare policy. In an effort to protect children legislators have provided social workers, (fallible human beings) an immune license to tear up, split apart, and destroy families without accountability. Why does this happen? Because, it is allowed to happen. The basic rule of law is that no one should have the absolute power of authority over anyone else without a check and balance. The children's welfare system has lost this check and balance.

But most important is the life of the child in foster care. It has been well established that children are inherently placed at great risk once put in the children's welfare system and they are subjected to enormous cruelty while in the child welfare system. Talk to anyone who has *lived* inside the system. The reason for this are many, but one major factor is simply that once in the system the child becomes anonymous. There is no one who knows the child, (e.g. history, moods, problems, fears), that can effectively understand the child's reactions and behaviors while in foster care. Psychological care providers do not live with the child. And the attention a child is rationed is cruelty beyond belief.

Children are complicated beings and to diminish their individuality to the need for food, shelter and school is to ignore the entire basis for this Congressional inquiry. And children live life minute by minute. The slow moving wheels of the juvenile court system, not to mention noteworthy Congressional hearings and public policy-making, will leave a child slowly suffering a fate they do not understand. For this reason, as this issue is again on the table, please put the time in to do a complete job so children will not needless have to suffer the waiting of another tragedy to occur to convene another subcommittee.

To understand what is needed from legislators, legislators must first re-evaluate the basic structure of what has grown into an enormous bureaucratic system, children's welfare. Consider it renovation, if you will. This system as it was designed in the middle of the 20th Century no longer stands tall in light of recent knowledge of social behavior and social public policy. In an effort to protect children we, as a society, have made them prisoners. What other victim is taken and incarcerated in a strange location, incommunicado? What other victim's voice is muted by those assigned to protect them?

[This segment is a recount of the malicious and false information used by our social workers to affect their goal of removing a child from a safe and loving home, against statutory prohibitions, for the purpose of punishment and personal gain. Please also see attached letter to Mr. Robert R. Walmsley, children's attorney.]

The Juvenile Delinquency System is the last stop before the criminal justice system completely swallows up the life of another individual. Sometimes it is justified, sometimes it is a road that one lacks the skills to get off of, and sometimes it is both. But for those children that come from the Foster Care System, it is an abhorrent testament of the children's welfare system. The child does not fail, the system fails the child.

[This segment is the result of the failure of the special education and foster care systems.]

CONCLUSION

I am an educated woman who, through a series of circumstances, found herself a single mother of three special needs children. The children and I formed a family, by design and direction of the Department of Children and Family Services. We lived together for eight years. These three children who were injured by their biological parents at infancy were later brutalized by their social workers and the system designed to protect them. To what end? It was proven that the social worker report was false and I was guilty of no wrongdoing. My children suffered and continue to suffer from bureaucratic abuse. AND, MY STORY IS NOT UNIQUE.

In the summer of 2001, our social workers portrayed me as a negligent, non-caring, self-serving caregiver/mother. At that time anyone looking at our case and at the depictions of me by the social workers would not have known of the deceptions being waged. It has taken over two years to bring these malicious acts by the social

workers and the system to light. This is in part because the system itself refused to acknowledge its own actions.

To first determine the problem is you must examine the credibility of the system. No human being or system is infallible. The system that is currently allowing abuses of the authority over children and families is also not infallible. In addressing the problems connected with the problems in the care of the children in New Jersey look to the system and the players as a whole. Any one story is only a symptom of the whole system.

My thesis is my research and my experience based on an academic format. I would be willing to stand up to any further scrutiny of the facts of my story. I welcome any interest.

Pompano Beach, Florida 33064
January 28, 2004

Chairman Wally Herger
Subcommittee on Human Resources
Committee on Ways and Means
Washington, DC 20515

Dear Sir,

I have but one voice, one pen, but let it be known to you and your committee that my words are uttered in the hearts of every member of my family and every generation of family to come "that we will never experience the joy, the laughter, the hope of two wonderful children that were ripped from our lives and lineage by the Department of Social Services in Massachusetts".

If I fail to communicate to you the how this intrusion touches their lives and ours, then you sirs, are equally responsible. They have not only taken from us our anticipated and expected right to pursue life, liberty and happiness, they have taken from us our right to love. I ask that you not think of my grandchildren as you read my letter to you, I ask only that you think of your own.

Six years ago, I called to the Department of Social Services. My daughter is an addict and for her sake, and the sake of her daughter, I called this Agency for help. The records will show that Department of Social Services spent nine of their ten days investigating the reporter and after one three hour visit to the reported, determined the report vindictive in nature. A few months later, a second report was filed and substantiated. The child remained in the custody of her mother for the next 5 years during which time a second child was born. During her pregnancy and under the "born alive" statutes in Massachusetts, I attempted to get protection from the courts for this unborn child but my petition was denied. Three months later this child was born prematurely and with chronic asthma due to Placenta Abruption associated with drug use. He was then taken into custody by the Department of Social Services. My daughter entered several Drug Rehabilitation Facilities with her children and in spite of the chronic non-compliance and continued drug use, they remained in her care for the next five years under the watchful blind eye of DSS. My daughter was terminated from one facility for drug use, another for threatening a caseworker. She was put out and put up in a hotel in the middle of December with two children in tow. She spent the better part of a year in several shelters with her children. The incidents that occurred from 1998 to 2003 included, domestic violence, drug use, rape, threat of bodily harm with a weapon (gun), physical abuse, mental abuse and abandonment. These incidents are documented in the files and at no time was anything done to protect the children. The Agency protected it's decision. Compounding the issue of drug use, my daughter was finally diagnosed with serious mental disorders yet the Department of Social Services having no knowledge of this, once again, returned the children to her care and custody. In the process and relying upon the outcome of the original complaint and diluted reports of a drug addict, this family has had no contact with these children in almost six years. Had the Department attempted to contact family members to secure assistance with respect to the intervention and care of these children, none of this would have happened.

This Agency continues to stand firm with respect to it's decisions regarding the safety and well being of these children. This Agency stands firm in spite of the fact that it did not meet six of the seven safety and well-being requirements of the Federal Government. This Agency is given license, without recourse, to help or harm. This is unacceptable.

The Department will submit that lack of funding, communication and data systems is responsible for the problems. There was no lack of communication in this

case. One should ask, "How often does this type of response happen?" You won't hear about it or read about it because the children didn't die, but they very well could have. It will be recorded as another "success" story because ultimately the children were "adopted".

The problem sir, is this Agency depends upon the ability of human beings to handle situations, that for all purposes, was never intended to be their responsibility. A State cannot function like a family. They are disposed to extreme prejudice and inflated opinions. These prejudices and opinions are unavoidable and at no cost to them. With this in mind, it can no longer be a matter of "fixing or correcting" a system that is destined to fail, no matter how much funding, computers and data system you provide. The Government, if it intends to help at all, would better serve these children by first alerting family, keeping in mind that is not and never should be a family's obligation to live up to the State's definition of family. Some families are poorer than others, but rich in love. Some family's in spite of a States preoccupation with size of rooms, and ability to send them to college, are more than able to provide these children with what they need most, "familiarity and LOVE". The State does not love the children in their care and no one knows that better than the children they serve. The State(s) are rapidly earning themselves a reputation of marketing children, sanctioning abuse and held above the law when through neglect or omission children are beaten, raped, starved and murdered. NOT ONE CHILD should ever be threatened by a system that is supposed to protect them. More and more children are dying and it is nothing new. The public and the Government have been and continue to be aware of the statistics. It has been happening for years, ten maybe twenty and all the hearings in the world are not going to change it.

If we are going to have to endure this intolerable system than at least, at minimum, make them accountable. If they were held responsible for the decisions they make, no matter what the "excuse", I can assure sir, that their performance would change dramatically. If rewards (Adoption Bonuses) are available then it stands to reason that there must be consequence and accountability. The qualifications and experience of those who control the quality of care for the children would miraculously improve. There is no greater persuasion than risk.

I hope my voice rings true in your ears for a long time to come and the next time you see a picture of a dead child in a newspaper, you will either pat yourself on the back for trying to be part of the solution, or hang your head in shame.

Respectfully,

Judith G. Evans-Baxter

Voice Application Specialists International, Inc.
Woodstock, Georgia 30189
February 6, 2004

The Honorable Wally Herger
2268 Rayburn House Office Building
Washington, DC.

Dear Mr. Chairman,

I am writing this letter today to introduce our company Voice Application Specialists (VAS) International, Inc. a Georgia based voice biometrics company who has developed an application we believe will greatly enhance the accountability and overall protection of our children nationwide.

I recently viewed the testimony from your January 28th 2004 Subcommittee meeting you held with respect to some of the issues regarding the Child Welfare problems in this country, and am sending this letter as per the instructions for submittal of written statements, and sent a similar letter to Mr. Shay Bilchik.

As we all know the issues around our children's safety are paramount and the purpose of this outreach is to provide a solution we developed around our technology, offering some tremendous relief for our at-risk children.

VAS's software application TrueStudentID uses a person's voiceprint to verify them, in the same manner as other biometric technology. The accuracy rate is over 99.99967% and sadly to write there are some children as young as ten years old using this in the State of Florida (through our partner Voicevault the world leaders in voice verification) but shows how easy and flexible the system is.

With TrueStudentID the child is enrolled in the system by simply dialing into a toll free telephone number asking to speak their name and to repeat the numbers 1–10. The whole process takes about 65 seconds, and the child's voiceprint is en-

rolled in the voice vault, that has the highest security related hardware and software in the world.

In cases where children may be at risk in a home or foster family, and where a state Division of Family and Children's Services has placed them in one of the ratings assigned by the state, voice verification can also be used to check on a child in the interim period. Again, nothing replaces the on-site visit by the caseworkers, but is another verifier.

We have gone one step further in this verification process and that is with the caseworker. As we know, some caseworkers either from sheer overwork or from forgetting to stop by and see an at-risk child, have written down on a log that they did in fact visit the child at the home, only to find out later they did not but no matter what the case, a better control and daily verification process is needed.

TrueStudent enrolls the caseworker the same as we have done for the child, then dials out to the child's home during the day (whether it was a pre-determined time to meet or just a drive-by) asks for the caseworker by name and ask him/her to repeat a set of 4 numbers randomly given and changed by the algorithms each time the user is asked their name.

Once they have been asked to provide the name and numbers the caseworker is either positively identified within less than one second, and if they are not who they "say" they are, an instant notification is sent back to a pre-determined number (by telephone, fax, pager, or e-mail) to a supervisor in the form of an alert management overview.

We are currently working with one of the major cell phone distributors with their use of camera technology to be able to take a picture of the child, upload it to a database and send it along with a voiceprint. If the child's parents do not have a telephone, the caseworker simply dials into the toll free number and the child is asked to repeat his name, and a set of numbers.

Either way we have a voiceprint of the child who can be accurately identified by a caseworker (or a police officer), and by calling out to the child's home and using Automatic Numbering Identification (ANI) we can also see if the call was trying to be call-forwarded to another number or a cell phone.

This application is used as a trust by verify role, and in the event a caseworker has a problem getting to a house, the supervisor will have an almost immediate notification, and if needed a third level notification can be sent to a local supervisor.

There is also a latchkey application for the child who may be arriving home who may not have a parent/guardian nearby. In this instance TrueStudent would dial out to the home during a pre-set time period ask for verification of the child, and the parent would then receive a notification either through a phone, pager, fax or e-mail of the status of the call (and would continue to call up to four times if needed until the parent arrived home).

How do we know this works? We have been working in the voice applications business since the late 1980's and wrote some of the functional specifications for a very similar application used in home detention based environments for low risk prisoners who currently number over 170,000 nationwide. We designed TrueStudentID to secure the safety of some of the at-risk children and to provide an additional layer of accountability.

This enrollment system uses a tool free number, so a child who has been enrolled in one state, who moves to another (due to a parents transfer etc. . .) will then be enrolled in the new state without any problems. The only change would be in the telephone number being dialed and the new caseworker.

Clearly, our intention with the enrollment process in all the above cases is to provide further documentation AFTER a caseworker has visited a child's home, and a verification that those parents/guardians who may want to try and continue to abuse these at-risk children, that there is another verification tool, and random check of the child than can be verified within less than a second, and an alert management system designed to have a call placed to a local police officer for a "drive-by" if the child's voice does not match the voiceprint.

Sadly, Mr. Chairman one of the reasons for your meeting was due to the recent case in Collingswood, New Jersey, and we presented this application to the Speaker of the House of New Jersey 6 months BEFORE this case, due to the other problems the state of New Jersey was having, and believe could have helped those children as well as to verify the caseworker's claims of when they were there.

What is the cost for this? Since this is a secure hosted environment, and no hardware or software is needed, we charge a flat $5.00 per day for each person who is verified (with a maximum of four in-bound of out-bound calls). The initial enrollment phase can be a pilot program of where we would take a high problem area and implement a program there, and the $5.00 per day is ONLY spent when calls are in fact placed.

Chairman Herger, I am not trying to sell you anything, but to present a proven application that can assist every state agency throughout the U.S. and could be a deterrent to those who continually want to harm children.

We plan on sending a similar letter to Secretary Tommy Thompson to seek funding from the Department of Health and Human Services and other institutions, and would welcome any others you may feel can assist.

Lastly, Chairman Herger, my husband who is the chief architect of the TrueStudentID will be in DC during the second week of March, and after reading this if you or members of your staff would like to meet with him please have someone from your staff reach me directly at 770–591–3400.

Sincerely yours,

Maricriz Nolan
CEO/Chairman of the Board

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