

**STRENGTHENING CHILD WELFARE AND
PROTECTING AMERICA'S CHILDREN**

HEARING
BEFORE THE
COMMITTEE ON WAYS AND MEANS
HOUSE OF REPRESENTATIVES
ONE HUNDRED EIGHTEENTH CONGRESS
SECOND SESSION

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United States House Committee on
Ways & Means
CHAIRMAN JASON SMITH

FOR IMMEDIATE RELEASE
June 18, 2024
No. FC-28

CONTACT: 202-225-3625

**Chairman Smith Announces Hearing on Strengthening Child Welfare and
Protecting America's Children**

House Committee on Ways and Means Chairman Jason Smith (MO-08) announced today that the Committee will hold a hearing on strengthening child welfare through reauthorization of Title IV-B, a program serving children and youth in foster care. The hearing will take place on **Wednesday, June 26, 2024, at 10:00 AM in 1100 Longworth House Office Building.**

In view of the limited time available to hear the witnesses, oral testimony at this hearing will be from the invited witnesses only. However, any individual or organization not scheduled for an oral appearance may submit a written statement for consideration by the Committee and for inclusion in the printed record of the hearing.

DETAILS FOR SUBMISSION OF WRITTEN COMMENTS:

Please Note: Any person(s) and/or organization(s) wishing to submit written comments for the hearing record can do so here: WMSubmission@mail.house.gov.

Please ATTACH your submission as a Microsoft Word document in compliance with the formatting requirements listed below, **by the close of business on Wednesday, July 10, 2024.** For questions, or if you encounter technical problems, please call (202) 225-3625.

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these guidelines will not be printed but will be maintained in the Committee files for review and use by the Committee.

All submissions and supplementary materials must be submitted in a single document via email, provided in Word format and must not exceed a total of 10 pages. Please indicate the title of the hearing as the subject line in your submission. Witnesses and submitters are advised that the Committee relies on electronic submissions for printing the official hearing record. All submissions must include a list of all clients, persons and/or organizations on whose behalf the witness appears. The name, company, address, telephone, and fax numbers of each witness must be included in the body of the email. Please exclude any personal identifiable information in the attached submission.

Failure to follow the formatting requirements may result in the exclusion of a submission. All submissions for the record are final.

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Note: All Committee advisories and news releases are available on the Committee website at <http://www.waysandmeans.house.gov/>.

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STRENGTHENING CHILD WELFARE AND PROTECTING AMERICA'S CHILDREN

WEDNESDAY, JUNE 26, 2024

HOUSE OF REPRESENTATIVES,
COMMITTEE ON WAYS AND MEANS,
Washington, DC.

The committee met, pursuant to call, at 10:02 a.m., in Room 1100, Longworth House Office Building, Hon. Jason T. Smith [chairman of the committee] presiding.

Chairman SMITH. The committee will come to order.

Families form the bedrock of a strong society, and it is crucial to have systems in place that support children in moments of crisis and keep families intact whenever possible.

The Ways and Means Committee has jurisdiction over several child welfare programs, including Title IV-B of the Social Security Act. This program provides critical resources to states with the mission of preventing child abuse and neglect, supporting family reunification, and promoting adoption for children in foster care. The last time Congress reformed these programs in any significant way was in 2008, and the authorization lapsed in the fiscal year 2021.

Over the past year this committee has proactively conducted a top-to-bottom review. We have held more hearings on the subject than the last eight congressional sessions combined. We have heard from people engaged in the child welfare system day in and day out, including caseworkers, state administrators, and former foster youth.

From our review, it is clear that the child welfare system faces a number of challenges, including relatives that take care of children, also known as kinship care. They need more help and support. Almost one in three social workers leaves every year, leading to a severe case worker shortage. Bureaucratic red tape from Washington gets in the way of caseworkers caring for children. Families have slow hearings with family courts and lack access to lawyers. Unfair barriers facing Native American tribes trying to keep their families together. And trauma and mental health issues experienced by older foster youth. In addition, too many families experiencing poverty are wrongly accused of child neglect, when what they really need is community support.

Poverty should not be the sole reason a child is removed from their home. One particular case from Washington County, Missouri sticks with me. A mom and four kids were living in a shed with no central heat, no refrigeration, no running water, no beds, and little food. Those children went into custody because of these con-

cerning conditions and hygiene difficulties that would obviously accompany problems of this type. Three years passed between the time the children were removed from their home and the time the court deemed mom's living arrangements insufficient. Even though she had made substantive improvements to both her housing and transportation situation, the court deemed a one-bedroom apartment "too small," and a three-bedroom house with her boyfriend's children "too cramped." This resulted in termination of her parental rights.

In Missouri, the state estimates it costs \$30,000 per year to have a child in foster care. This particular case cost the taxpayers \$360,000. Spending even a fraction of those funds at the front end could have provided this family with adequate housing, laundry, and bathroom facilities, and assistance in obtaining and maintaining employment. It also would have kept the children with their mother and spared them the trauma caused by separation.

I am committed to addressing this issue, and appreciate the support and collaboration of my friend, Representative Gwen Moore.

In some cases we know living with one's family is not possible, and we should work to ensure services provided to foster children meet their unique needs and protect them from abuse and neglect.

For the 19,000 children who age out of foster care each year, we must pursue solutions that support these older youth in successfully transitioning into adulthood. A bipartisan coalition of Republican and Democrat members on this committee have introduced 16 bills aimed at enhancing and strengthening IV-B and supporting community-based organizations dedicated to improving outcomes for American children and families.

We also look forward to hearing from our witnesses today. A few months ago, I had the great pleasure of meeting with one of our witnesses, Ms. Paris Hilton. She shared an incredible story of suffering physical and psychological abuse at a congregate care facility as a teenager. What happened to her should never happen to any child in America. Since that difficult experience Paris has used her platform to shine a spotlight on abuse in the child welfare system. Standing with her are many foster youth who have also experienced abuse and trauma at a moment when they needed love and support most.

I am grateful to each and every one of our witnesses for joining us today. I eagerly anticipate working with members of this committee on both sides of the aisle on Title IV-B. This reauthorization is crucial to strengthening child welfare and protecting America's children.

I am pleased to recognize the ranking member, Mr. Neal, for his opening statement.

Mr. NEAL. Thank you, Chairman, and I want to thank you for calling today's hearing. And as I look out at the audience today, I think it is safe to say that this is the first time in my congressional experience that it would look as though the average age of Congress was about 25. [Laughter.]

As we look ahead to the reauthorization of Title IV-B, we must work together on comprehensive action to help our nation's young people in times of turbulence. All youth deserve a safe, stable environment that will allow them to learn and fully experience life. We

hope and believe that most youth can find that within their own families, sometimes with a little extra help. For those where foster care is the only option, we have a special responsibility to protect them from abuse and further turmoil, and also to deliver supports that will let them set out on a path to success and limit the time they spend in the care of others.

I want to thank all of those who have shared their lived experiences with us today, including our panelists, and particularly say thanks to you for being with us today, knowing your own schedules. Learning directly from the source allows us to better safeguard our nation's youth, keep them safe, and strengthen their families.

I am thrilled that many consensus bills have recently been introduced in this space. Our Worker and Family Support Subcommittee ranking member, Danny Davis, is working with his counterpart, Chairman LaHood, to lead legislation to deepen the relationships between foster children and their incarcerated parents. We know how important strong parent-child relationships are to success, and strengthening these relationships will help to sow the seeds of unity for tomorrow.

Social Security Subcommittee ranking member Mr. Larson wants to expand the use of child welfare funds for family resources, along with Congressman Carey.

Let me say to our panelists and others today, I know something about Social Security survivor benefits. But for those benefits, I don't know what my sisters and I would have done with the goodwill and graciousness of an aunt and a grandmother who took us in.

Vice Ranking Member Chu is spearheading an effort today to protect Native American children, keeping them with their tribes whenever possible, and ensuring states are following the requirements of the Indian Child Welfare Act.

Congressmen Kildee and Feenstra are working to expand the availability of evidence-based interventions to keep children out of foster care, which is complemented by legislation that is led by Congresswoman Moore and Congressman Adrian Smith to ensure child welfare agencies are guided by lived experiences.

Centering our work around these most affected is so critical, and it is how we create meaningful policy. Congresswoman Moore worked with our chairman on legislation to prevent separation of families when they find themselves in a crisis largely due to poverty.

Congressman Panetta and Steube teamed up to better understand what is happening at youth residential programs and safeguard them from abuse.

Finally, Congresswoman Chu and Congressman Blake Moore are leading a bill to invest in court improvement programs, allowing family courts to better work with the foster care system, and easing that burden on all.

I know there are other bipartisan collaborations still in progress, and I look forward to those further strengthening our work. I thank all of the members of our leadership and their commitment to our nation's future. Our children are just that. And by investing in this success, we are building a collective opportunity that we

owe to our most vulnerable citizens not only to help them to survive, but we want them to thrive.

Mr. NEAL. With that, let me yield back the balance of my time.

Chairman SMITH. Thank you. I will now introduce each of our witnesses.

The first witness will be Ms. Paris Hilton, a lived-experience advocate and CEO of 11:11 Media.

We have Mr. Rob Geen, who is a Bipartisan Policy Center fellow and the chair of the Board of Trustees for the Dave Thomas Foundation for Adoption.

We have Tori Hope Petersen, who is an author, speaker, and advocate.

And we have Alexis Mansfield, a senior advisor for children and families and relationship safety at the Women's Justice Institute.

Thank you all for joining us today. Your written statements will be made part of the hearing record, and you each have five minutes to deliver remarks.

We will start with you, Ms. Hilton.

**STATEMENT OF PARIS HILTON, LIVED-EXPERIENCE
ADVOCATE AND CEO, 11:11 MEDIA**

Ms. HILTON. Thank you. Chairman Smith, Ranking Member Neal, and members of the committee, I appreciate the opportunity to be here today to discuss how to improve care for the nearly 400,000 children that are living in the foster care system as we speak.

While my experience was not through the foster care system, I know from personal experience the harm that is caused by being placed in youth residential treatment facilities. When I was 16 years old I was ripped from my bed in the middle of the night and transported across state lines to the first of four youth residential treatment facilities. These programs promised healing, growth, and support, but instead did not allow me to speak or move freely or even look out a window for two years. I was force-fed medications and sexually abused by the staff. I was violently restrained and dragged down hallways, stripped naked, and thrown into solitary confinement.

My parents were completely deceived, lied to, and manipulated by this for-profit industry about the inhumane treatment I was experiencing. So can you only imagine the experience for youth who are placed by the state and don't have people regularly checking in on them.

I attended facilities with foster and adopted youth, and I heard their testimony that they feel like they were forgotten, being shipped from facility to facility their whole childhoods.

Today residential facilities are continuing to warehouse over 50,000 foster youth and an unknown number of adopted youth in lock-down facilities, innocent kids who have not committed crimes, kids whose parents didn't have resources to support them, kids whose parents passed away, kids who have already experienced trauma. This \$23 billion-a-year industry sees this population as dollar signs, and operates without meaningful oversight.

It costs approximately \$800 to \$1,000 per day to place a foster youth in a facility, significantly more expensive than serving them

in their own communities. What is more important, protecting business profits or protecting foster youth lives?

Sixteen-year-old Cornelius Fredericks was placed in a facility because his mom tragically died and his dad was in prison. His life ended after being tackled and violently restrained by eight staff members for nearly ten minutes after innocently throwing a sandwich in the cafeteria. They killed him on the floor of the lunchroom in front of dozens of other children. Emergency services had been called 300 times in the year leading up to his death, with 56 violations substantiated by the state. The state could have prevented this.

Ja'Ceon Terry's life ended at just seven years old. In his final hours he was publicly shamed, verbally abused, left in his room alone for nearly six hours, and physically restrained by staff members until he lost consciousness. When first responders arrived there was vomit in his mouth and throat, running down his cheeks and onto the floor.

Why can't we as a society see that these kids are hurting? They need love and kindness, not beatings and restraints.

As a mom, these stories break my heart. When your child is born, your heart is full of love, of all hopes and dreams you have for them. I assure you that these were not the dreams that were envisioned for Cornelius, Ja'Ceon, and thousands more who have suffered immensely.

I am here to be the voice for the children whose voices can't be heard. While this committee has responsibility to move bipartisan solutions forward to protect them, I strongly advocate for the reauthorization of Title IV-B. Families need resources and support so they don't need to come into the child welfare system in the first place.

For children who do end up in foster care, we cannot allow them to grow up in facilities. The treatment these kids have had to endure is criminal. These kids deserve to grow up in safe, family-centered environments.

I will not stop until America's youth is safe. I have helped pass nine state laws on this issue. I am strongly advocating for the Federal bipartisan Stop Institutional Child Abuse Act. I supported the Senate Finance Committee Report, "Warehouses of Neglect," that validates everything those with lived experience have been saying.

And I recently went to Jamaica to support and find appropriate placements for American adopted youth who had been raped, waterboarded with a hose, and held in solitary confinement in a facility internationally. Their parents had adopted them when they were young, promised them a better life, and then shipped them off to an international facility to be warehoused there until they turned 18. How could we let this happen to them?

Progress isn't an option anymore. It is a life or death responsibility. If you are a child in the system, hear my words: I see you, I believe you. I know what you are going through, and I won't give up on you. You are important. Your future is important. And you deserve every opportunity to be safe and supported.

Congress, please join me in creating a world where all children have a right to family, love, education, and the support they need.

Thank you for your time, and I am happy to answer any of your questions.
[The statement of Ms. Hilton follows:]

Paris Hilton Oral Testimony

Chairman Smith, Ranking Member Neal, and Members of the Committee. I appreciate the opportunity to be here today to discuss how to improve care for the nearly 400,000 children that are living in the foster care system as we speak.

While my experience was not through the foster care system, I know from personal experience the harm that is caused by being placed in youth residential treatment facilities.

When I was 16 years old, I was ripped from my bed in the middle of the night and transported across state lines to the first of four youth residential treatment facilities. These programs promised “healing, growth, and support,” but instead did not allow me to speak, move freely, or even look out of a window for two years. I was force-fed medications and sexually abused by staff. I was violently restrained and dragged down hallways, stripped naked, and thrown into solitary confinement. My parents were completely deceived - lied to and manipulated by this for-profit industry... so can you only imagine the experience for youth who don't have anyone checking in on them?

Today, residential facilities are warehousing tens of thousands of foster youth and adopted youth - innocent children who have lost their families and have nowhere else to go. This \$23 billion dollar industry sees these children as dollar signs and operates without meaningful oversight. We are sending youth a signal that profit is more important than their lives.

16 year old Cornelius Fredericks' was placed in a facility because his mom tragically died, and his dad was in prison. His life ended after being restrained by eight staff members for nearly ten minutes after innocently throwing a sandwich crust in the cafeteria.

Ja'Ceon Terry's life ended at just 7 years old. In his final hours, he was publicly shamed, verbally abused, left in his room alone for nearly six hours, and physically restrained by staff members until he lost consciousness. When first responders arrived, there was vomit in his mouth and throat, running down his cheeks and onto the floor.

As a mom, these stories break my heart. When your child is born, your heart is full of all the hopes and dreams you have for them. I assure you that these were not the dreams that were envisioned for Cornelius, Ja'Ceon, and thousands more who have suffered immensely.

I am here to be the voice for children who currently do not have one, while this committee has the responsibility to move bipartisan solutions forward to protect them.

I strongly advocate for the reauthorization of Title IV-B. Families need resources and support so they don't need to come into the child welfare system in the first place. For children who do end up in foster care, we cannot allow them to grow up in cold facilities that act like kid prisons. The treatment these children have had to endure is criminal. These kids deserve to grow up in safe, family-centered environments.

I will not stop until America's youth are safe. I have helped pass 9 state laws on this issue, I am strongly advocating for the federal bipartisan Stop Institutional Child Abuse Act, I supported the Senate Finance Committee report "Warehouses of Neglect" that validates everything those with lived-experience have been saying, and I recently went to Jamaica to support and find appropriate placements for American adopted youth who had been raped, waterboarded, held in solitary confinement in a facility internationally. Their parents had adopted them when they were young, promised them a better life, and then shipped them off to an international facility to be warehoused there until they turned 18. Progress isn't an option anymore, it's a life or death responsibility.

If you are a child in the system - hear my words - I see you, I believe you, I know what you're going through and I'm not giving up on you. You are important, your future is important, and you deserve every opportunity to be safe and supported.

Congress, please join me in creating a world where ALL children have a right to family, love, education, and the support they need.

Thank you for your time and I am happy to answer any questions.

Chairman SMITH. Thank you, Ms. Hilton.
Mr. Geen, you are now recognized.

STATEMENT OF ROB GEEN, BIPARTISAN POLICY CENTER FELLOW, CHAIR OF BOARD OF TRUSTEES, DAVE THOMAS FOUNDATION FOR ADOPTION

Mr. GEEN. Thank you. Chairman Smith, Ranking Member Neal, and distinguished members of the committee, as has been mentioned, I am currently a fellow at the Bipartisan Policy Center and chair of the board of trustees at the Dave Thomas Foundation for Adoption.

Over the past 35 years I have worked in research, philanthropy, and advocacy to advance data-driven reforms to improve our nation's child welfare system. During this entire period, bipartisanship has been a defining feature of Federal child welfare legislation.

In 1993 Congress created Title IV-B, subpart 2, now known as the MaryLee Allen Promoting Safe and Stable Families programs. While it is a relatively small program compared to the Title IV-E entitlement that supports foster care and adoption, IV-B has been a critical source of flexible funding available to states and tribes, enabling them to craft innovations that address the specific circumstances in their own communities. Compared to Title IV-E, states and tribes can use IV-B funds to serve a broader range of children, youth, and families with a wider variety of services. In this way, IV-B serves as a critical complement to Title IV-E funding. Title IV-B also includes dedicated funding for key functions of the child welfare system, including the Court Improvement Program.

However, two decades of steady erosion to the program's funding has limited the impact that Title IV-B can now have. With my time I would like to share several findings from an intensive, 50-state landscape analysis conducted by the Bipartisan Policy Center's Child Welfare Initiative.

An overarching finding from our research is that, while polarizing rhetoric often overshadows discussions of common ground, there are, in fact, many areas of agreement. For example, there is overwhelming support for the vision of the Family First Prevention Services Act. There is recognition that high-quality, short-term therapeutic residential interventions are needed for a small number of children.

There is also strong support for redoubling efforts to prevent child abuse and neglect and invest in family preservation services.

At the same time, there are frustrations in the field over the implementation of Family First. Many states are struggling to increase capacity of alternatives to residential settings as they seek to eliminate the use of non-therapeutic group homes. There is insufficient community-based service capacity to meet the high needs of youth in the system, especially effective mental health services.

States and tribes are running into barriers in taking full advantage of the prevention funding available as a result of Family First. This includes concerns about the Prevention Services Clearinghouse and how funding can be used to meet the concrete needs of families.

There is widespread concern that child welfare is becoming a catch-all system, being asked to make up for the failures of other systems, resulting in children and families being inappropriately involved with child welfare authorities. States are starting to address this by clarifying their definitions of neglect, making improvements in mandatory reporting and investigations, and enhancing legal representation for both children and parents.

There is widespread recognition of the challenges states and tribes face in maintaining a qualified workforce. There is considerable appreciation for the positive progress achieved in supporting kinship families, and yet recognition that there is far more work we need to do to make sure that all kin can adequately care for children.

There is a strong desire to improve the outcomes for older youth involved in the system, and frustration with the persistent challenges we face in meeting the basic needs of youth aging out of foster care at age 18.

Other topics that garnered significant interest and widespread support include strengthening the Indian Child Welfare Act; reducing the administrative burden that accompanies Federal funding, especially for tribes, while also improving system oversight and accountability; creating more flexible funding options that allow states and tribes to meet unique community needs; and finally, continuing to expand the evidence base for child welfare interventions.

I will end by recognizing the numerous bills introduced by members of this committee that seek to address many of the challenges I have just listed. I want to thank you for your continued commitment to keeping children safe and supporting families, and I will be happy to answer any questions you might have.

[The statement of Mr. Geen follows:]



Written Testimony of Rob Geen
Before the U.S. House Committee on Ways and Means
Strengthening Child Welfare and Protecting America's Children
June 26, 2024

Chairman Smith, Ranking Member Neal, and distinguished members of the committee, thank you for the invitation to testify today about the importance of strengthening child welfare.

My name is Rob Geen, and I have worked in research, philanthropy, and advocacy to advance data-driven reforms to improve our nation's child welfare system—in areas such as child abuse and neglect investigation, family preservation and family support, kinship care, foster care, residential treatment, adoption, and youth aging out of care—over the last 35 years.

I currently serve as a fellow at the Bipartisan Policy Center (BPC), a non-profit organization that combines the best ideas from both parties to promote health, security, and opportunity for all Americans. The organization was founded in 2007 by four former Senate majority leaders: Howard Baker, Tom Daschle, Bob Dole, and George Mitchell. BPC drives principled and politically viable policy solutions through the power of rigorous analysis, painstaking negotiation, and aggressive advocacy.

I also chair the board of trustees for the Dave Thomas Foundation for Adoption, a national, nonprofit public charity dedicated to finding forever families for the more than 140,000 children waiting to be adopted from foster care in the United States and Canada. Through its signature program, Wendy's Wonderful Kids®, the Foundation supports the hiring of adoption professionals, known as recruiters, who serve children most at risk of aging out of foster care without a permanent home.

History of Collaboration on Federal Child Welfare Legislation

Bipartisanship has been a defining feature of federal child welfare legislation for decades. Between 1980 and 2018, Congress passed more than a dozen significant bipartisan legislative reforms to help ensure that children have safe, stable families and to improve our nation's child welfare system. All of these reforms are examples of significant bipartisan agreement. In fact, all but one passed with unanimous consent. In addition, hundreds of members of Congress have been affiliated with bipartisan caucuses, such as the Congressional Caucus on Foster Youth and the Congressional Adoption Caucus. Those of us in the field often feel pride and appreciation for the long legacy of cross-party collaboration in child welfare.

In 1993, Congress created Title IV-B Subpart 2, now known as the MaryLee Allen Promoting Safe and Stable Families (PSSF) programs in response to the widespread perception of a crisis in our nation's child welfare system. The lingering impacts of both the crack cocaine and AIDS epidemics left a child welfare system facing high staff turnover and low morale, a shrinking supply of foster parents and foster homes, and a shortage of related support services such as drug and alcohol treatment and mental health care. Today, there are parallel concerns about the treatment needs of families suffering from opioid addiction and related substance use challenges, unmet mental health needs particularly among youth, and ongoing concerns about the lingering effects of the COVID crisis on our nation's child welfare system.

Ever since its creation, Congress has used the Promoting Safe and Stable Families program, through both policy and funding allocations, to highlight and address key challenges in child protection. The program requires that states and Tribes spend a significant portion of their funds in four key areas: (1) family preservation, (2) family support, (3) time-limited family reunification, and (4) adoption promotion and support. In addition to related evaluation and technical assistance, the program's set asides seek to improve child welfare judicial practices, ensure caseworker visits with children, help kinship caregivers access services and supports, and address the needs of children affected by caregiver substance misuse.

While a relatively small program compared to the Title IV-E entitlement that supports foster care and adoption, Title IV-B shines a light on areas in need of attention and has been a critical source of flexible funding available to states and Tribes, enabling them to craft innovations that address the specific circumstances in their communities. States and Tribes can use Title IV-B funds to serve a broader range of children, youth, and families with a wider array of services compared to Title IV-E funds. In this way, Title IV-B is a critical complement to Title IV-E funding. However, two decades of steady erosion to the program's funding has limited the impact that Title IV-B can have. For example, a recent financing survey of state child welfare agencies found that "Title IV-B expenditures have decreased by 14 percent over the decade."

Items for Congressional Consideration

I am pleased that the committee is examining how reauthorization of Title IV-B can continue to help strengthen child welfare and protect America's families and children through today's hearing. I came to the Bipartisan Policy Center in 2023 to lead BPC's Child Welfare Initiative and help organize policy discussions that result in effective, bipartisan solutions. One of the first undertakings of our initiative was an intensive 50-state landscape analysis that provided rich insight into the state and national policy environment. This included a [public opinion poll](#), a review of [child welfare legislation](#) in all 50 states, focus groups and stakeholder [interviews](#). The findings from our research track closely with the issues that Congress is deliberating as part of the Title IV-B reauthorization and related reforms.

An overarching finding from our research is that, although there are some areas marked by conflicting perspectives, there are many areas where bipartisanship runs deep. While polarizing

rhetoric often overshadows discussions of common ground, there are many areas of agreement. Some of the most relevant takeaways from our work as it relates to the committee's focus are the following:

- There is overwhelming support for the vision of the Family First Prevention Services Act. There is recognition that high-quality, short-term, therapeutic residential interventions are needed for a very small number of children. There is strong support for enhancing child maltreatment prevention and family preservation services.
- At the same time, there are frustrations in the field over implementation of Family First.
 - Many states are struggling to increase the capacity of alternatives to residential settings as they seek to eliminate the use of non-therapeutic group homes.
 - There is insufficient community-based service capacity to meet the high needs of youth in the system, especially effective mental health services.
 - States and Tribes are running into barriers in taking full advantage of the prevention funding available as a result of Family First. This includes concerns about the Prevention Services Clearinghouse and how funding can be used to meet the concrete needs of families.
- There is widespread concern that child welfare is becoming a catch-all system, being asked to make up for the failure of other systems and resulting in some children and families being inappropriately involved.
 - States are addressing this by clarifying their definitions of child neglect, making improvements in mandatory reporting and investigations, and enhancing legal representation for both children and parents.
- There is widespread recognition of the challenges that states and Tribes face in maintaining a qualified workforce.
- There is considerable appreciation for the positive progress achieved in supporting kinship families and yet recognition that there is far more work to be done to ensure that kin can best support children.
- There is a strong desire to strengthen the Indian Child Welfare Act.
- There is widespread support for reducing the administrative burden that accompanies federal funding, especially for Tribes, while also improving system oversight and accountability.
- There is significant interest in creating more flexible funding options that allows states and Tribes to meet unique community needs.
- There is a strong desire to improve the outcomes for older youth involved in the system, and frustration with the persistent challenges in meeting the basic needs of youth aging out of foster care at age 18 and ensuring that they have meaningful adult relationships.
- There is significant energy around re-examining policies and practices associated with terminating parental rights.

- There is appreciation for the growing role that foster youth, birth parents, and resource families are playing in child welfare policy and practice discussions, but also a sense that we are still not fully leveraging their lived experience and expertise.
- Finally, there is widespread recognition of the need to continue to expand the evidence base for child welfare interventions.
 - The Wendy's Wonderful Kids program referenced earlier is an example of the bipartisan support that exists for evidence-based efforts to improve child welfare. Supported in a number of states with IV-B dollars, Wendy's Wonderful Kids recruiters serve children in 47 states and the District of Columbia, and 19 states are scaling up their programs with a combination of public and private investment so that every child available for adoption can benefit from a dedicated recruiter. To date, more than 14,200 children and youth who were most at risk of aging out of care without a family, found permanency with this program.

Bills introduced by members of this committee seek to address many of the challenges listed above.

In addition to congressional bipartisan support, the American public also recognizes the challenges that our nation's child welfare system faces and the opportunity to better support families. A [BPC poll](#) found that Americans across the country see the child welfare system's mission as two-fold: ensuring child safety and strengthening families. Additionally, respondents:

- Appreciate the complexity of the decisions that child welfare agencies must make.
- Think that parents who have been neglectful can, with appropriate support, provide safe and nurturing care for their children.
- Overwhelmingly advocate for engaging extended family members when parents face challenges.
- Believe that child safety and family assistance should be a shared effort between government and community and religious organizations.

Thank you for your continued commitment to keeping children safe and supporting families. I encourage Congress to move on a bipartisan basis to reauthorize Title IV-B. Reauthorization is both overdue and critical to provide certainty to states and ensure the program is equipped to meet current challenges facing the child welfare system. I look forward to your questions.

Chairman SMITH. Thank you, sir.
Mrs. Petersen, you are now recognized.

**STATEMENT OF TORI HOPE PETERSEN, AUTHOR, SPEAKER,
AND ADVOCATE**

Ms. PETERSEN. Good morning. I am grateful to be here, and I am thankful to Chairman Smith, Ranking Member Neal, and the members of the committee for convening this hearing on reauthorizing Title IV-B.

I went into the foster care system twice in my life due to the physical and emotional abuse I endured. I hoped that going into the foster care system would allow me to escape the chaos of my first family, but instead I entered into a different form of chaos when I entered the system, and I moved through 12 different homes during my time in care.

Eventually, I moved in with a foster mom who took me to church regularly, and I was reunited with a woman named Tanya, who, when I lived with my mom, would come and pick me up when situations would become volatile. Tanya worked for a non-profit that mentored kids coming from hard places, and she became a mentor to me. The leadership of my church allowed me opportunities and encouraged me to share my story. By witnessing their love for me and other kids in the foster care system, I began to believe that Jesus might love me, too, and I gained a confidence that I didn't have before.

At the same time, I was running track in high school, and my track coach became my father figure. After I aged out of the foster care system, he invited me into his home, and under his training I became a five-time state champion in track, which allowed me to go to college on a full scholarship and become a part of the three percent of former foster youth to obtain a bachelor's degree when I graduated from Hillsdale College in 2018.

Now I am an author and public speaker. I share my story to help organizations raise funds to serve vulnerable children. I help communities and churches become equipped to fulfill the call of James 1:27, which is to care for the orphan and the widow. And my greatest honor is that I am a wife and a mom. I have two biological children, an adopted adult son. My husband and I are kinship providers for my biological sibling, and we are also foster parents.

As I look back on my experience, I see the crucial role my community, non-profits, and church played to bring me to where I am today. And I believe that I wouldn't be where I am without them. It has been over 10 years since I aged out of the foster care system, and there was not as much government assistance as there is today for youth coming out of care. Outside of being on food stamps for about six months, I received no financial support or government assistance after I aged out.

This experience taught me the value of hard work. I earned and saved money by working in a factory, in a diner as a waitress, and through various internships from organizations in my church. Handouts in the form of checks made me feel more like a charity case, but having a community of people believing in me enough to empower me, give me purposeful jobs, and mentor me to gain the skills needed to live a prosperous life is what has helped me break

generational cycles of poverty, abuse, neglect, homelessness, and so on.

Over the past couple of years my husband and I have mentored a handful of former foster youth by volunteering for a local non-profit. We witnessed them live off of free housing and stipends given to them while not maintaining work. We see these young adults continually fall out of these programs and into homelessness because these resources are not long-term solutions to the problems these youth face. Real relationships, connectedness, and love are.

As the famous quote states, "Give a man a fish and you feed him for a day; teach a man to fish, and you feed him for a lifetime." More plainly, we could offer youth housing or we could invest in them being taught the skills to acquire housing themselves, which could result in them having an investment to offer future generations, in turn breaking generational cycles of poverty.

When I was in foster care I remember receiving a duffel bag of hair products I couldn't use, a teddy bear I was too old for, and many other products that went untouched. Now, when a foster child moves into our home, we receive two duffel bags full of useless products. While the emphasis of this movement started with a pure intention of not letting any foster child carry their belongings around in a garbage bag, I feel it is now an over-saturated movement to make the giver feel like they have done their part.

We are here because our part is not done. I point to this illustration because it is a perfect example of how society treats foster youth as a whole: throw money at kids rather than invest time to nurture relationships with them; isolate young adults in free housing, rather than welcoming them in, or at least showing them how to obtain housing with roommate, like most young adults do, so they are not so alone.

These kids are all of our kids, and we justify treating them like they are not by handing them bags, clothes, products, and not our presence. While it is Title IV-E that offers youth and foster care these tangible resources and addresses these issues, it is crucial that we address Title IV-E alongside Title IV-B because right now it seems that the system is giving young adults basic necessities that they need to survive, but when we invest in them to have strong and authentic relationships in their communities, we give them what they need to thrive.

I was fortunate enough to form relationships with community members like my track coach, Tanya, and others from my church. And over time, they became the people who filled the role of my family. What they have given me, taught me, and how they have guided me has been invaluable. If we want young adults to learn self-governance, they need to be taught skills for their adulthood, and they also need caring adults to continue to guide them into adulthood.

It is important that Federal funding streams like Title IV-B are updated to meet the current challenges in the child welfare system. A special emphasis should be placed on community relationships and the role they play in helping youth gain the valuable skills they need for adulthood.

If you are a child or youth coming from a hard place, I hope you hear that you are deserving of love, and there is a beautiful purpose and plan for your life.

I want to especially express gratitude to Chairman Smith for offering me the opportunity to advocate for youth in this way, in finding value in my lived experience as a former foster youth but, more importantly, as a child of God. Thank you.

[The statement of Mrs. Petersen follows:]

Tori Hope Petersen

Good morning. My name is Tori Hope Petersen.

I am grateful to be here and I am thankful to Chairman Smith, Ranking Member Neal, and the members of the Committee for convening this hearing on reauthorizing Title 4-B.

Before entering into the system, I lived with my mom who I wholeheartedly believe did the absolute best with what she had, but she struggled with mental illness due to her own childhood trauma and being sex trafficked as a young teen into her adulthood.

I went into the foster care system twice in my life due to the physical and emotional abuse I endured. I hoped that going into the foster care system would be healing and allow me to escape the chaos of my first family, but instead I entered into a different form of chaos when I entered the system. Within months I was separated from my little sister, I struggled with the effects of complex trauma, and I moved through twelve different foster homes during my time in care.

However, in my final foster home, my foster mom took me to church regularly and I was reunited with a woman named Tonya who when I lived with my mom would come and pick me up when situations would become volatile. Tonya worked for a nonprofit that mentored kids coming from hard places and she became a mentor to me.

The leadership of my church allowed me opportunities and encouraged me to share my story. By witnessing their love for me and other kids in the foster care system, I began to believe that Jesus might love me too, and I gained a confidence I didn't have before.

At the same time, I was running high school track, and my track coach became my father figure. After I was emancipated from the foster care system, he invited me into his home, and under his training I became a five-time state champion in track, and in 2018 I became a part of the 3% of foster youth to obtain a bachelor's degree or higher when I graduated from Hillsdale College.

Now, I am an author and public speaker. I share my story to help organizations raise funds to serve vulnerable children. I help communities and churches become equipped to fulfill the call of James 1:27, which is to care for the orphan and the widow. And my greatest honor is that I am a wife and a mom. I have two biological children, an adopted adult son, my husband and I are kinship providers for my biological sibling and we are also foster parents.

As I look back on my experience, I see the crucial role my community, nonprofits, and church played in bringing me to where I am today. I believe I wouldn't be where I am without them

which is why I feel it is crucial that organizations, churches, and communities are supported through Title 4-B.

It has been over ten years since I aged out of the foster care system, and there was not as much government assistance as there is today for youth coming out of care. Outside of being on food stamps for about six months, I received no financial support or government assistance after I was emancipated.

However, I believe this experience was good for me as it taught me the value of hard work. I earned and saved money by working in a factory, in a diner as a waitress, and through various internships from organizations and my church. Handouts in the form of checks made me feel more like a charity case, but having a community of people believing in me enough to empower me, give me purposeful jobs, and mentor me to gain the skills needed to live a prosperous life is what has helped me break generational cycles of poverty, abuse, neglect, homelessness and so on.

I was prepared to step into higher education, the workforce, and manage my life when I turned eighteen because of the community that wrapped around me and because of the way I was prepared *before* I was emancipated. I left the system with knowledge on how to live independently, and with a community to guide me.

Over the past couple of years, my husband and I have mentored a handful of former foster youth by volunteering for a local nonprofit. We witness them live off the free housing and stipends given to them, while not maintaining work. I believe these tangible resources can be enabling more than they are empowering. Today, we gather, concerned that only 55% of former foster youth are employed as adults, yet the stipends and assistance handed out allows for many of these young adults to live off of them without having steady employment or consistently pursuing higher education. We see these young adults continually fall out of these programs and into homelessness because the tangible resources are not long-term solutions to the problems these youth face. Real relationships, connectedness, and love are.

While it is Title 4-E that offers youth in foster care these tangible resources and addresses these issues, it is crucial that we address Title 4-E alongside Title 4-B. Because right now, it seems that the system is giving young adults basic necessities that they need to survive, but when we invest in them to have deep and authentic relationships in their communities we give them what they need to thrive.

When I was a child in foster care I found it very difficult to attach to the foster parents I lived with, and as a foster mom now, I experience that attachment is something that has to be worked at. It doesn't always happen instantaneously. Because of this foster children often experience a gap in connectedness in their lives, which is detrimental to relationships and mental health.

I believe our society would significantly enhance outcomes for youth if we created greater incentives for churches, communities, and nonprofits to wrap around children, foster families, and kinship providers before youth turn eighteen, because the church, faith-based organizations, and our communities are a central component to the needs and well being of foster children, as they help prepare them for adulthood.

As a parent, I would not cover my adult child's housing, hand them checks, and send them on their way to attempt to manage it, because in the end that doesn't teach them self-governance nor does it require them to gain the skills they need to be successful adults.

As the famous quote states, "Give a man a fish, and you feed him for a day; teach a man to fish and you feed him for a lifetime."

As a youth, I was fortunate enough to form relationships with community members, like my track coach, Tonya and others from my church, and overtime they became the people who filled the role of my family. What they have given me, taught me, and how they have guided me has been invaluable.

I would also encourage the Committee to think about ways the program could be modernized to ensure states are providing former foster youth and parents with an opportunity to provide feedback and to play a role in decision making that directly impacts the child, particularly as it relates to keeping children with siblings and choosing kin, especially in situations of permanency.

It is important that federal funding streams like Title 4-B are updated to meet the current challenges in the child welfare system. A special emphasis should be placed on community relationships and the role they play in helping youth gain the valuable skills they need for adulthood.

If you are a child or youth coming from a hard place, I hope you hear that you are deserving of love, and that there is a beautiful purpose and plan for your life.

I have felt because of the way I speak about my faith, that my voice is not always welcome. So I want to especially express gratitude to the Chairman Jason Smith for offering me the opportunity to advocate for youth in this way, and finding value in my lived experience as a former foster youth but more importantly as a child of God. Thank you.

Chairman SMITH. Thank you so much.
Ms. Mansfield, you are now recognized.

STATEMENT OF ALEXIS MANSFIELD, SENIOR ADVISOR, CHILDREN AND FAMILIES AND RELATIONSHIP SAFETY, WOMEN'S JUSTICE INSTITUTE

Ms. MANSFIELD. Thank you. My name is Alexis Mansfield, and I am the senior advisor at the Women's Justice Institute on issues related to children and families. I would like to thank Chairman Smith, Ranking Member Neal, and the members of the committee for the opportunity to testify about how to strengthen the child welfare system and protect America's children.

I would also like to thank Representatives Davis and LaHood for introducing H.R. 8799, the PARENT Act.

The Women's Justice Institute, or WJI, is a national think-and-do tank based in Chicago that works to address women's mass incarceration.

In addition, I am the director of the Incarcerated Survivors Program at Ascend Justice, a civil legal aid organization focused on survivors of domestic violence and parents impacted by the child welfare system. I also sit on the Commission on Children of Incarcerated Parents and the Illinois Department of Corrections Adult Advisory Board.

Before I was a lawyer, I was a teacher in the Chicago public school system for eight years. One time, about halfway through the school year, the principal came into my classroom with a little six-year-old boy, and told me that he was my student now because he had been kicked out of the other two classrooms. That first day I met with him privately and I asked, "What do you need?"

He replied, "I want to write my mom." He explained that his mom was in prison, and that his last teacher had told him that he couldn't send letters to her because she was a bad person. I told him he could write. He could draw whatever he wanted to send to her. From that moment on, he changed completely. Knowing what I know now, I would not have just let him write her, I would have found a way to engage her in his education. But the fact remains, what he truly needed was his mom, and this is a pattern I see again and again with children.

In 2016 I co-founded the Reunification Ride with several other organizations. This monthly program, which is now housed at the WJI, brings children of incarcerated mothers to visit them in child-friendly settings to bond as families and to be together with other children sharing the same experiences. We sometimes have to skip a month, as we rely on private funding and crowd sourcing, and we don't always have enough money to go. But usually, once a month, approximately 40 children and caregivers make the journey three hours each way from Chicago, and sometimes even Indiana or Michigan. Hundreds of families have participated. We work with the Department of Corrections to create child-friendly processes and environments. This year we also assisted in creating a Father's Day program at the neighboring men's prison for over 60 children.

When we arrive and walk from the prison gatehouse to the gym, the kids start to walk a little bit faster and faster. And by the time we get to the gym, several of the children are in all-out runs. They

jump and leap onto their mothers, holding them tight in their arms. I remember the time that one 10-year-old girl, who had not seen her mother in person in several years, came with us. Within five minutes of seeing each other she had whispered to her mom that she was being abused. We were able to get her moved to a safe home within days.

In Illinois we have several model programs that promote critical bonds between children and their incarcerated parents. Unfortunately, children in foster care are excluded from almost all programs. For example, with the Reunification Ride, caseworkers from the Department of Children and Family Services will contact us, explaining they have no way of transporting children or staff to bring them, and will ask us if we will instead. We have to say no, because we have been unable to find a single private insurance company that will allow us to have foster youth participate.

We also have two rare important programs at Decatur Correctional Center. One is called the Moms and Babies Program, where newer pregnant mothers can live with their babies, and the other is a housing unit called the Reunification Wing, where children are able to spend full days with their mothers. Children in the foster care system are not allowed to participate in either program, despite the fact that foster youth are more likely to not live with relatives and to not have not be able to visit without support.

Ensuring visits between foster youth and their incarcerated parents supports individual court decisions that in-person visitation for the child and their parent is appropriate and beneficial for the child. The majority of parents are in jail or prison because of charges completely unrelated to their children, and their children need and deserve a chance for healthy bonding. Certainly, we do not want foster youth to feel punished by being denied these opportunities.

There are many ways for systems to collaborate, including improved supplemental visitation options, ensuring incarcerated parents can access abuse hotlines, aligning service plans with available programming, and increasing access to legal services. Funding and incentives for collaboration between corrections systems, child welfare systems, and private organizations is vital for children to bond for family reunification and to ensure that children are protected from harm.

Studies have shown that nurturing these bonds also reduces recidivism and represents a critical opportunity to prevent intergenerational incarceration.

This bill is an excellent way to demonstrate how we can give foster youth and their incarcerated parents meaningful opportunities to bond and promote healthy relationships. Thank you all for supporting families.

[The statement of Ms. Mansfield follows:]

**Testimony of Alexis Mansfield, Senior Advisor,
Children & Families and Relationship Safety, Women's Justice Institute
Before the Committee on Ways Means
Hearing on Strengthening Child Welfare and Protecting America's Children
June 26, 2024**

My name is Alexis Mansfield, and I am the senior advisor at the Women's Justice Institute on issues related to children and families. I would like to thank Chairman Smith, Ranking Member Neal, and the Members of the Committee for the opportunity to testify about how to strengthen the child welfare system and protect America's children. I will speak about how beneficial it would be for foster youth and their families if federal child welfare policy invested in helping foster youth remain connected to their incarcerated parents. In particular, I would like to thank Representatives Davis and LaHood for introducing H.R. 8799, the PARENT Act, that would create state and tribal partnership demonstration grants to maintain meaningful relationships between foster youth and their incarcerated parents.

The Women's Justice Institute, or WJI, is a national "think and do tank" based in Chicago that works to address women's mass incarceration, reduce harm and improve outcomes for impacted women and their children. In addition, I am the Director of the Incarcerated Survivors Program at Ascend Justice, a civil legal aid organization focused on survivors of domestic violence and parents impacted by the child welfare system, serving approximately 200 incarcerated mothers each year. I also sit on the Commission on Children of Incarcerated Parents and the Illinois Department of Corrections Adult Advisory Board.

Before I was a lawyer, I was a teacher in the Chicago Public Schools system. One time, about halfway through the school year, the principal came into my classroom with a little six-year old boy and told me he was my student now because he had been kicked out of the other classrooms. That first day, I met with him privately and asked him, "What do you need?" He replied, "I want to write my mom." He explained that his mom was in prison and that his last teacher had told him that he couldn't send letters to his mom because "she was a bad person." I told him he could draw and write whatever he wanted to send her. From that moment on, he changed completely. Knowing what I know now, I would not just have let

him write her—I would find a way to engage her in his education. But the fact remains, what he truly needed was his mom.

The importance of bonds between children and parents is crucial for child development. While this is critical for all children, it is even more vital for children in foster care, who are not living with either parent and more likely to not be living with a relative. This parental bond is strained when a parent is incarcerated, making it more difficult for children and parents to spend quality time together. In fact, experiencing parental incarceration is classified as an “Adverse Childhood Experience” (ACE), which correlates to challenges throughout childhood development, negative effects on health, and adverse impacts on employment and educational outcomes. A study by Dr. Nia Heard-Garris of Lurie’s Children’s Hospital found that children of incarcerated parents are more likely to have to use the emergency room rather than have regular medical care, more likely to become dependent on drugs, and can experience other ACE impacts, such as having higher cholesterol as adults. Unfortunately, there is often a lack of information concerning children with parents in prison or jail, because information and services for these families tends to be siloed.

In the United States, studies estimate that 5-to-7 million children have a parent who is or has been incarcerated. That is equivalent to 7% of all children in the country. A report by the Annie E. Casey Foundation in 2016, called *A Shared Sentence*, reviewed the number of children impacted by parental incarceration in each state. Unfortunately, this is one of the only studies to look at this issue in detail, and current estimates of impacted children by state are largely unavailable.

	Total			Total	
	Number	Percentage		Number	Percentage
United States	5,113,000	7	Missouri	98,000	7
Alabama	88,000	8	Montana	18,000	8
Alaska	18,000	10	Nebraska	41,000	9
Arizona	138,000	9	Nevada	55,000	8
Arkansas	61,000	9	New Hampshire	15,000	5
California	503,000	5	New Jersey	65,000	3
Colorado	60,000	5	New Mexico	52,000	10
Connecticut	36,000	5	New York	148,000	4
Delaware	15,000	8	North Carolina	178,000	8
District of Columbia	9,000	8	North Dakota	10,000	7
Florida	312,000	8	Ohio	271,000	10
Georgia	189,000	8	Oklahoma	96,000	10
Hawaii	16,000	5	Oregon	68,000	8
Idaho	35,000	8	Pennsylvania	181,000	7
Illinois	186,000	6	Rhode Island	10,000	5
Indiana	177,000	11	South Carolina	73,000	7
Iowa	58,000	8	South Dakota	17,000	8
Kansas	45,000	6	Tennessee	144,000	10
Kentucky	135,000	13	Texas	477,000	7
Louisiana	94,000	8	Utah	44,000	5
Maine	20,000	8	Vermont	7,000	6
Maryland	82,000	6	Virginia	183,000	6
Massachusetts	69,000	5	Washington	109,000	7
Michigan	228,000	10	West Virginia	34,000	9
Minnesota	67,000	5	Wisconsin	88,000	7
Mississippi	55,000	7	Wyoming	12,000	9

Chart from A Shared Sentence, Annie E. Casey Foundation, 2016

One of the unique factors between the incarceration of men and women is what happens to children when their parent is incarcerated. When a father is incarcerated, approximately 90% of children remain with their mothers. However, when a mother is incarcerated, children only remain with their fathers approximately 25% of the time. For children of incarcerated mothers, they live with a grandmother in over 50% of cases.

Supporting visits between foster youth and their incarcerated parents would support court decisions that in-person visitation for the child and their parent is safe, appropriate, and beneficial for the child. The majority of parents are in jail or prison because of charges for drug or property crimes that have nothing to do with a child. While we frequently think of foster care as being primarily for children who have been physically abused, the majority of children in foster care are there because of a finding of

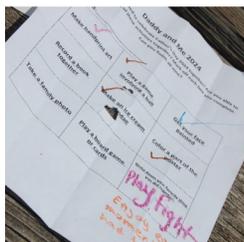
neglect. For the 75% of children who are in foster care due to a finding of neglect, this almost always correlates to drug dependency and poverty. The contact between a child in foster care and their parent is determined by a judge who, after considering all of the evidence and recommendations from multiple agencies and attorneys, recommends that the visits are in the best interest of the child and consistent with the goal of reunification.

I have seen time and again the positive impact of children and incarcerated parents spending quality time together. In 2016, I co-founded the Reunification Ride with several other organizations. This monthly program, which is now housed at the WJI, brings children of incarcerated mothers to visit them in child-friendly settings, to bond as families and to be together with other families sharing the same experiences. We sometimes have to skip a month as we are privately funded and rely largely on crowd sourcing and don't always have enough money. However, usually once a month, approximately 40 children and caregivers make the journey three hours each way from Chicago or even from Rockford or Indiana to see their mothers. Hundreds of families have participated, leading to several thousand visits. This year we also assisted in creating a father's day program at the neighboring men's prison for over 60 children. We work with the Department of Corrections to create child-friendly processes and environments outside of the visiting room.



I remember the time a ten year-old girl who had not seen her mother in person in several years went on the Reunification Ride. Within five minutes of seeing each other, the child had whispered to her mother that she was being abused. We were able to get her moved to a safe home within days. In other situations, we have had teenagers run away from their homes, only to return in time for the Reunification Ride visit, because they want to be able to see their mothers.

One important factor of the Reunification Ride, which is proposed in the PARENT Act, is that we ensure visits are child-friendly and promote healthy bonding. For example, our visits usually take place in



the gym. The mothers inside decorate the walls and post family pictures or beautiful backdrops. Unlike most visiting rooms, children are free to move around and cuddle with their mothers. We supply a variety of board games and toys, with Jenga and Connect Four always being popular. Many of the children enjoy playing active games while we visit, such as basketball, soccer, and catch. Mothers walk around teaching their

babies how to walk or braiding their children's hair. At our recent Father's Day visit, the families spent over three hours together outside in a beautiful field. A favorite activity for the day included face painting.



I remember one time when a correctional officer asked me why so many of the children traveled so far to visit only to play basketball for a portion of the time, instead of sitting with their mothers for our full three hours inside. I asked one of the teenage boys to explain. Without pause, he said, "At home, all my friends have their moms watching them at our basketball games. Today, my mom is watching me."



Another important factor is that we try to make visits feel as normal as possible. We eat a child friendly meal like grilled cheese or pizza. We have a full table of fruits and vegetables and desserts. Many children describe the visits as a family reunion or going on a picnic together. We always try to

have a special arts-and-crafts or holiday activity. For example, in October, children dress up in costumes and their mothers take them trick-or-treating throughout the different stations in the gym. In December, families hold a gingerbread house competition. In February, children and moms exchange Valentine's cards and pictures. For Mother's Day this year, children and moms dipped their hands in paint and made

beautiful pictures together. At our recent Father's Day visit, children and dads recorded themselves reading books together. The children then took the books home with them, along with the recordings. Now, each night, the children can look at the book while they listen to their father's voice mixed in with their own.



At the end of the visit, we all come together in a large circle. We share any news and updates, and then we ask each family to discuss a question amongst themselves. Recent questions have included things like, "what makes you proud of each other" or "can you share a favorite food memory you have together?" After the discussion, each family shares their answer. We then sing happy birthday to everyone celebrating that month, and then we do our closing hugs and goodbyes.

You might think that the end of visits would be full of tears and sadness, but this time is instead filled with quite a few smiles. The families have had a full day of love and fun, and so it does not feel as if they have been rushed in and out. For some of the new families, the children or moms may cry at the end of the visit, but we have noticed that each subsequent visit becomes easier. Many children have explained to me that knowing that they will come back to visit again on a set date makes it easier to say goodbye



and to celebrate the time together. It is when children are unsure that they will be able to visit again that they become emotional or act out. Despite having movies, snacks, and activities on the bus home, almost universally, all of the children take long naps. They are tired out from a special, happy day.

I have observed so many benefits for children and parents in this program. Children who have been failing school begin to improve their grades. Grandmothers and mothers who had strained

relationships begin to talk and reunite during the visits. Many of the children who participated have now gone on to college or the military, though they still ask to visit whenever they are home. Also, the impact on reunification and the ability for mothers and children to live together after the mother is released cannot be understated. The incarcerated participants have also had fewer disciplinary issues inside the prison, because they have family connections to motivate them.



Even the correctional staff is impacted by these child-friendly days. When we first began the program in 2016, correctional officers would usually yell loudly that the visit was over. You could see the families flinch. However, with training and collaboration, we were able to change that. Now, volunteers



go around and inform families when there is ten minutes left before our closing circle, and we end the visit before final hugs by singing together. Similarly, staff have been open to learning different ways to communicate with children. Now, staff members happily volunteer to work overtime for the Reunification Ride, saying it is one of their favorite things they do. I have seen many officers join in a basketball game or tell a mother how much her children look like her. It makes both the incarcerated individuals and the staff more human for each other.

In Illinois, we have several model programs that promote the critical bonds between children and their incarcerated parents like the Reunification Ride. Unfortunately, children in foster care are excluded from almost all of these programs. For example, with the Reunification Ride, caseworkers from the Department of Children and Family Services will contact us, explaining they have children who need to see their parents, but have no way to transport them or staff to bring them. I have been asked if I will act as a foster child's chaperone multiple times. We have to say no, because we have been unable to find a

single private insurance company that will allow us to have children in foster care participate. Despite the fact that foster youth need these visits as much or more so than other children, we cannot include them, through no fault of their own.

We also have two rare, important programs at Decatur Correctional Center. One is called the Moms and Babies Program, where new or pregnant mothers and their babies can live together at crucial time for bonding and also to promote healthy relationships post-incarceration. Studies have shown that even as infants, children who participate with their parents in substance abuse treatment are less likely to develop drug dependencies themselves, and their parents are more likely to be successful in their own sobriety. Unfortunately, mothers with involvement in the child welfare system are not allowed to participate in the Moms and Babies program. Similarly, there is a housing unit called the Reunification Wing. In this program, children are able to spend full days with their mothers. Once again, children in the foster care system are not allowed to be in this program. It is as though children in foster care are being punished by being denied participation in these programs.



Mothers frequently share with me that they fear their children are in danger of neglect or abuse, but they cannot make hotline calls to report it due to prison phone systems. During a recent visit to Pekin Federal Correctional Institute, one mother shared with me her belief that her son was being sexually abused. She had not been able to report it. In order to call a hotline number, they would first have to have the number on their approved call list. This process can take weeks or months. Even if the number is approved, parents in prison can only call a number where a live human answers, and cannot call anywhere that has a phone tree or wait message. Luckily for this mother and the other families I work with through the Incarcerated Survivors Program at Ascend Justice, she was able to access the Department of Children and Family Services and the court system, because we could provide legal assistance. However, legal

services are severely underfunded, and the majority of counties across the country have no representation available at all for incarcerated parents.

There are many other opportunities for collaboration between departments of corrections and child welfare agencies, including improved supplemental visitation options, aligning service plans with available programming, increasing access to legal services, and creating liaisons in all states and facilities. Almost all of my clients request parenting classes, yet they are difficult to obtain while incarcerated, and those that are available frequently do not meet the requirements for service plans. Many of these recommendations are laid out in the historic report produced by the Women's Justice Institute in 2021 called *Redefining the Narrative*. That report can be accessed at redefine.womensjusticeinstitute.org.

Funding and incentives for collaboration between correctional systems, child welfare services, and private organizations is vital for children to bond, for family reunification, and to ensure that children



are protected from harm. Studies have shown that protecting these bonds also reduces recidivism and represents a critical opportunity to prevent intergenerational incarceration. Children in foster care should not be denied these opportunities. The PARENT Act will provide the funds and motivation needed for agencies to work together to improve outcomes for foster youth and their incarcerated parents.

HR 8799 is an opportunity to demonstrate how we can give foster youth and their incarcerated parents meaningful opportunities to bond and promote healthy relationships. Thank you for supporting families.

Chairman SMITH. Thank each of you for your testimony. We will start with the question-and-answer session.

Ms. Hilton, you have personal experience with congregate care facilities, and you have been a champion for individuals impacted by their experiences in those care environments, especially teenagers. As you know, this committee is currently working on reauthorizing the child welfare programs and looking at how we can ensure additional resources are available to foster youth and children in need, with a focus on keeping them in their homes and united with their families.

Based on your experiences, is that a priority you believe we should be focused on?

And what reforms do you think we should be considering to achieve these goals?

Ms. HILTON. Thank you for the question, Chairman Smith, and thank you so much for visiting the facilities.

I want to applaud the committee for taking the time to consider how to improve the foster care system. These youth don't have a voice and anyone checking in on them, on their well-being.

Locking kids in facilities is harmful and, from my own experience, has caused me severe post-traumatic stress disorder and trauma that I will have for the rest of my life. We need to reauthorize Title IV-B and invest in kinship care placement with a relative, as youth should be with family or adults who know and love them.

I would also like to see the Stop Institutional Child Abuse Act passed, as we need more transparency of what is happening in treatment facilities serving foster youth. The cost of treatment is five times more in a facility than community-based services. It is a completely ineffective use of funds, and it hurts the kids and the—costs the taxpayers more.

Chairman SMITH. Thank you.

Mr. Geen, I think we can all agree that no child should be left in a home where they are suffering through neglect or abuse. At the same time, I hope that we all can agree that keeping children in their homes with their parents is the best course of action, so long as the child's well-being is not threatened.

Unfortunately, in Missouri and other states, a large percentage of cases where children are being removed from homes due to neglect are situations where the primary factor is poverty, not actual neglect or abuse on the part of the parents. Rather than resorting to removing children from their homes and their parents, what changes might we make to Title IV-B to address this situation?

And how might we go about collecting better data to help those potential reforms?

Mr. GEEN. I very much appreciate the question, particularly about data, because I do think we need to be data-driven in our decisions about how to use concrete needs—funding for concrete needs to support families.

As I mentioned in my testimony, states are looking at their definitions of child neglect. And yet policy is only so far in addressing the problem. When a caseworker or a mandated reporter or a judge has a family in front of them, they have a difficult determination in is this family just suffering from material deprivation, or do they

need child welfare intervention? So figuring out how Title IV–B can be a resource for concrete services is key.

I will mention outside of Title IV–B, looking at the IV–E prevention clearinghouse, there are many folks who will suggest that concrete needs need to be supported when they are delivered as part of a larger, evidence-based program, and that is something to consider, as well.

Chairman SMITH. Thank you.

Mrs. Petersen, yours is an inspiring story, and one that speaks to the important role community-based organizations play in our child welfare system. Based on your experience as a foster youth and now as an advocate for foster care reform, what changes do you see as needed to make sure that government is a helpful partner and not a harmful hindrance to the many private organizations working throughout our communities today to support those in need in foster care, including faith-based organizations?

Ms. PETERSEN. I believe we must have youth advisory boards and include those with lived experience to speak in policy if we want to see the child welfare system be improved.

As a foster child and as a foster mom, I have felt unheard by local caseworkers who have a lot of power locally because, really, the rules you make here are oftentimes not followed by caseworkers there. An example of this would be in 2014 the Normalcy Act passed, saying that youth in foster care can have the same privileges as youth who do not live in foster care. Yet I am still advocating and fighting for my teen foster daughter the same way I had to advocate for myself to have normalcy when I was in care 10 years ago.

As a youth I did once have a representative advocate for me at a local level, and it was very effective. The county saw that they didn't have—hold all the power, and they had to be held accountable for their actions. While I know representatives have so many issues that they have to balance, holding local meetings with counties where foster youth and foster parents speak about their experience and what they need help changing in their counties would make a world of difference. What we are doing here needs to be grassroots, and we need representatives present for effective change.

Chairman SMITH. Thank you. I want to thank all our witnesses.

There are two votes that have been called on the floor. The committee will recess immediately following the ranking member's questions, so I would encourage any members—they will be closing the board, they said, within 20 minutes. So I would encourage you to get there and then get back as soon as possible after two votes, and we will continue.

The ranking member.

Mr. NEAL. Thank you.

And Ms. Hilton, one of the things that we have learned from the committee is that, when we listen to people telling us about their own experiences, it can be very helpful and certainly enhance better policies for people like them. So I was honored recently to receive the Fostering Visionary Change Award from the National Foster Youth Initiative. They were really surprised when I told my own story. And I pointed out in reference to the testimony that has

been so capably offered this morning that no social service agency ever checked on us. We just moved in with an aunt and a grandmother.

But I want to reiterate the genius Mr. Roosevelt's survivor benefits initiative from Social Security, because that helped keep us together.

And in reference to Mrs. Petersen's comments, both the people that I have just talked about with great reverence were very religious, and they just saw this not as an opportunity to do this or do that, as much as it was you are just supposed to do it, and they accepted that responsibility. So the value of your experience and Ms. Hilton's experience this morning—I want to give you a couple of minutes each, if you could, to talk about that as you have enhanced and advocated for those who fall outside the protection sometimes of the system.

Ms. Hilton or Mrs. Petersen.

Ms. MANSFIELD. Thank you for that question. I think, for children of incarcerated parents, that is especially an important question to consider.

Parental incarceration is an adverse childhood experience, or an ACE, just by having a parent who is incarcerated. And it is often necessary for family members to step in through informal kinship care, not through any system.

And you are correct, one of the big challenges that children of incarcerated parents face is that there is nobody tracking them, there is no hub to consider their needs. They are very siloed in different systems.

And one of the unique factors between incarceration of men and women is what happens to their children when they are incarcerated. It is an ACE, no matter who is incarcerated of the parents. But when a father is incarcerated, approximately 90 percent of the time their children go to the children's mother, and they remain in the family. And when a mother is incarcerated, the children go to the father about 25 percent of the time, and 75 percent of the time they are with somebody who is not one of their parents. About 10 to 15 percent of the time for mothers, that is foster care, and about 3 percent of the time for fathers that is foster care.

But what happens to that other 60 percent of children? You are correct that a huge number of them are in informal care, and the services just do not exist. Even basic legal services like creating guardianships so whoever is caring for the child can take them to the doctor, so that they can access benefits, so that they can know what they are entitled to. And so that is a really important factor, and I appreciate you bringing that up.

Ms. PETERSEN. One of the reasons I think it is so crucial that we lean on the church for this is because the value of Christian faith is hospitality. After I emancipated, people did not just give me clothes or come and furnish my apartment and peace out. They let me live with them so I wasn't homeless, so I wasn't alone, so I had a family. And so I had an example of how to build a life for my family.

When we grow up in dysfunction, it can be easy to know that we don't want that, but we often don't know how to get what we do want for our own family because we haven't had it modeled for us.

I had people who let me into their home who I could learn from firsthand, who modeled to me what a good family was so I could have it myself.

Above all else, I believe that we need radical hospitality.

Mr. GEEN. Ranking Member Neal, your story is so instructive because the vast majority of children who are living with relatives are doing so outside of the child welfare system. And our entire safety net, including all the programs under your jurisdiction, were designed with nuclear families in mind. And so kinship caregivers often struggle to get basic assistance that they need to care for children.

I will also note that we tend to think of kinship care just as a placement resource, versus an opportunity to prevent placement in the first place. Relatives can be wrapped around birth parents when they are struggling to prevent placement.

Ms. HILTON. I think it is so important to listen to youth voices about foster care. It is so crucial because the ones who have experienced it are the ones who have a seat—who should have a seat at the table. They know the best, and I hope that everyone here prioritizes people with lived experience, as they are the true experts.

Chairman SMITH. Thank you. The committee will recess until immediately following the last vote of the series. Thank you.

[Recess.]

Chairman SMITH. The Committee will come to order.

I now recognize Mr. Buchanan from Florida.

Mr. BUCHANAN. Thank you, Mr. Chairman. I appreciate the opportunity, and I want to also thank our witnesses. I know Ms. Hilton has been in my office, a lot of other offices up here on the Hill.

So you are relentless, and I always—I am a grandfather of 10 children age nine and under. And so—but I read 20—the country is made up of—25 percent are kids, but they make up 100 percent of the future. So exactly. Your work and the committee's work is huge. I thought I would just ask you, what are the things you said you have been involved with?

Nine different states. Are the biggest potential impacts that we can help you and others to get the best return for the taxpayer, but have the biggest impact in terms of our kids in the country—I know there are a lot of needs, and it is very easy to get pushed in one direction or another. But what would be your couple of big things that we can make a big difference in and weigh in on?

Ms. HILTON. Thank you so much. I appreciate your kind words, and I appreciate your question.

And I am working at both the Federal and state level to enact change. At the Federal level I want to see Title IV–B reauthorized, and I want to see the Stop Institutional Child Abuse Act passed to provide transparency and data collection.

At the state level I have helped to outlaw abusive practices like restraint and seclusion, increased licensing requirements with unannounced site visits, required proper reporting and increased private communication with families and their child so they can report abuse if it is occurring.

All of this helps to reform these facilities, and I will not stop until all youth are safe.

Mr. BUCHANAN. Thank you.

Mr. Geen, let me ask you. Obviously, you have been involved for a lot of years. As you look out there, what more can we—you know, weigh in again, as I mentioned with her, on the biggest takeaways for us today in terms of policies or practices or things that have made a difference in various states or here in Washington.

Mr. GEEN. So I think the biggest thing that we can do is invest in the alternatives to what we know is not good for children, which is residential treatment when it is unnecessary. So we need to start by investing in keeping families together.

And then, for the relatively small number of children who do need to be removed, we need to invest in family, which includes kinship caregivers and non-kin family foster care.

Mr. BUCHANAN. Mrs. Petersen, you have an incredible story. All of you do. And you said you had a mentor, but you must have had other people that were supportive that made a difference in your life along the way. And then I was going to ask you is, how does your faith make a difference in terms of you getting through this process?

Ms. PETERSEN. I think that my faith gives me purpose to continue. You know, so many youth in foster care struggle with mental health issues, and faith is not this Band-Aid that slaps on and heals all, but I do believe that faith gives me a purpose to continue and to persevere when my mental health has been hard, when the trauma comes back, and when the effects of foster care play out in adulthood.

Yes, I think a continuous purpose is what my faith offers me.

Mr. BUCHANAN. Thank you, and I yield back.

Chairman SMITH. Mr. Doggett.

Mr. DOGGETT. Thank you, Mr. Chairman.

Certainly, the stories that you have told today are compelling, and they focus new attention on this problem. And the work you are doing as advocates, the work you are doing, Ms. Mansfield, very touching, the impact that you are having.

Unfortunately, the stories you are telling may be unique, but they are not new to this committee. We have heard about these problems for years, and the question is what we will do about them and what kind of resources we will devote to solving problems that the committee has left unsolved in the past.

So much of the abuse, I believe, results primarily from the failure of states like my home state of Texas to provide either adequate funding or appropriate oversight and enforcement of the foster care system, residential treatment facilities, and other youth-based settings. Texas has a truly disgraceful distinction of one of the highest rates of child abuse and neglect fatalities in the country. Children die because the state is negligent and indifferent to their needs.

What little oversight we have in Texas today is mostly the result of the work of United States District Judge Janis Jack, who has sought reform over the determined obstruction of the Abbott Administration and, before that, the Perry Administration. For over a decade, Judge Jack has penalized Texas for violating the con-

stitutional rights of foster children to be free from unreasonable risk of harm. Thanks to continued interference by the Fifth Circuit, who is responsible for so many other wrong decisions, Judge Jack's work has been more limited than she would have liked it to be to hold Texas accountable for weakened time restrictions again and again.

Appointed court monitors have reported little improvement in the foster care system, despite 13 years of ongoing litigation and supervision. Earlier this year she ordered a \$100,000-per-day fine against the State of Texas for routinely neglecting to adequately investigate and respond to allegations of abuse and neglect. In one outrageous example identified during a compliance hearing just this past December, the State of Texas failed to remove and prosecute a staff member accused of raping a young girl under his care at a residential facility. The girl had remained exposed to the worker for over a year until she was dumped into an emergency room alone, with her jaw broken in two places.

So the saddest part of your stories, I believe, is that they keep reoccurring, these kind of incidents, when states fail to do the job. And while the principal responsibility rests with the states, this committee could do much more. When I personally served about a decade ago as the ranking member of what was then called the Human Resources Subcommittee, I strongly advocated for much stronger Federal funding to ensure the safety of these children. Foster parents need more support, particularly when caring for the special needs of children, and we must strengthen our caseworker workforce to increase the visits and the counseling.

Ultimately, robust investments were never approved in the committee, following a long Republican tradition on the committee to insist that any improvements in the investments in the foster care system must be at the expense of other children under the jurisdiction of what was then the Human Resources Subcommittee. Even a proposal that I advanced that wouldn't have raised taxes but would simply have required the filing of a tax form for alimony payments and generated \$2 billion to protect our children was rejected. And the State of Texas ultimately obstructed even the Republican approach that was later advanced.

We know that in more recent times states, because of pandemic funding that we provided, have done some creative things. In Saint Petersburg, Florida, the Youth Opportunity Grants for youth that are aging out, in Madison, Wisconsin, more housing for foster children.

I would just like to ask Mr. Geen: With limited resources, with the battle we will have over them again, of the many things that you and the other witnesses have identified, where can we do the most good with the limited amount of money that is likely to be available?

Mr. GEEN. Thank you for the question, Congressman. You are asking an essential question for this committee, which is, how do you turn around a system in decline or not functioning without investing in the alternatives to what you are doing now? It is impossible to dismantle one part of the system without at the same time increasing the supply of alternatives.

You mentioned two areas of incredible need for investment. One, the workforce. Nothing can be done without a quality workforce. Every reform that you want to see requires that we have a strong workforce, and part of that strong workforce must include foster parents, kin and non-kin foster parents. One of the outcomes that is most critical for children is stability and care. It is not good to remove a child, we should be doing much more to prevent it. But when a child is placed in a foster home and they have stability, all of the outcomes we care about are better. So how do we support kin and non-kin foster parents to give kids that stability?

Mr. DOGGETT. Thank you. Thanks to all the witnesses.

I yield back.

Chairman SMITH. Thank you.

Mr. Smith.

Mr. SMITH of Nebraska. Thank you, Mr. Chairman and, certainly, thank you to our entire panel here for compelling perspectives and the experience and insights that you bring. This could very well be one of the most important hearings we have for a long time.

I was honored to chair the Human Resources Subcommittee that was just mentioned, and we were able to complete the work on the bipartisan Family First Prevention Services Act of 2018. It has been a while ago already, but even though we did that, I think it is important to note that when it comes to child welfare, we haven't done enough. I would argue we haven't even done anything, in many respects, since many of the children currently in foster care were even born. So there is much that we need to do.

I certainly appreciate the perspective that in pointing out the need to listen to those with lived experience, and I am very happy to introduce with my colleague, Representative Gwen Moore, the Youth and Family Engagement and Child Welfare Act. We just introduced that this week. This is something that I think is part of the solution moving forward, and I certainly appreciate, I think, a bipartisan approach on that, and bipartisan hearings such as we are having right now.

Ms. Petersen—Mrs. Petersen, excuse me—I really appreciate you sharing your perspective, and certainly your reflection on your faith-based perspective as it is, and that you can speak from your lived experience. And so, you know, we want to empower more youth to give us their perspective. I think it is important that we at the Federal level of government do not become overly prescriptive for state governments and end up tying their hands, rather than having an expectation of states doing positive things, and then replicating that perhaps one state to another.

But I am just wondering if you could reflect a little bit on how we have foster care and kids in foster care, adolescents who then age out. And given the fact that I believe our country has more opportunity than any other country in the world, it is inexcusable that we have foster care youth aging out and not linking with that opportunity that we know exists across America, but for some reason we are not linking up here.

What do you think we can do to have a—have better results, shall we say?

Ms. PETERSEN. Yes, thank you for your work and on this policy.

One of the things that I do in my work is that I take former foster youth and youth who have just come from hard places on trips with me. I am a public speaker, as I mentioned, and I bring them to speaking engagements with me, because I believe that they need to see other people who have had backgrounds like them be successful. Foster care is so isolating, so these kids need more opportunities, they need more exposure. They need to see other people who have grown up like them do what they could possibly do. They need to see what is possible beyond their experience and care, and if they could have relationships in the process, form those relationships in the process, that is what is going to change their lives.

Mr. SMITH of Nebraska. Okay, thank you.

Mr. GEEN. I am wondering if you could perhaps add some perspective here, as well, of how—you know, what is most appropriate for the Federal level to not go too far, as way too often happens, and yet have the expectation that states produce positive results?

So let me make two comments about the aging out question that you asked.

The first is the majority of young people who age out of care come in as teenagers. We have this feeling that they come in as babies and they spend long periods of time in care, but that is not actually true. And so we have adolescents coming into care, and many of them are not coming in for abuse and neglect, they are coming because of conflicts with parents, they are coming in because parents are desperate to find services and supports to meet that young person's needs. And so the best way to prevent children from ever aging out is to prevent them from ever coming into care. And that is central to what Title IV-B is trying to do.

On the opposite end of the spectrum, many states have extended foster care beyond the age of 18, and have that option in Federal law. Unfortunately, many states have not taken up that option. And even in states that have, a small percentage of young people decide to stay in care. And that is because foster care doesn't sound all that good. So how do we create a post-18 option for young people that is still in foster care, but treats them like adults rather than children?

Mr. SMITH of Nebraska. Just briefly, is there a state that stands out to you as best practices in that state?

Mr. GEEN. I will look at that and get back to you.

Mr. SMITH of Nebraska. Thank you.

I yield back.

Chairman SMITH. Thank you.

Mr. Thompson.

Mr. THOMPSON. Thank you, Mr. Chairman, for holding today's hearing, and thank you to all the witnesses from—for being here.

You know, this might be the best example of all of the wonderful people throughout all of our districts that are doing great work that is incredibly beneficial. This panel of witnesses is absolutely fantastic. So thank you all for what you are doing.

Title IV-B of the Social Security Act provides significant federal funding to target the root causes of the mistreatment of children, and provide critical services to help kids and families in need.

These funds help states provide a lifeline to kids and to families who have experienced or are in imminent risk of experiencing foster care problems, and to help support community-based services for struggling families. From hiring and training caseworkers, contracting with non-profits to provide prevention services, and improving family court services, this funding makes a real difference in the lives of children.

According to the—my home state, California—which is the answer, Mr. Geen, to your question—according to the legislative analysts in California, the average monthly caseload for our state's child welfare system is overwhelming. Everything from in-person investigations, maintenance support, reunification services, and permanent placement.

In my district there are over 1,200 children currently living in foster care, and 800 families involved in dependency court cases, and many counties are struggling to find beds and services for transition-aged youth. So I look forward to this reauthorization in a bipartisan way so we can provide the critical resources for our most at-risk constituents.

And Ms. Hilton, I want to thank you for your compelling and courageous testimony today, and the work that you have been doing not only to highlight the problems that you face, but the problems that many others face on a day-to-day basis. It is terribly troubling, and we need to do everything we can to change that.

And what do you think that this committee can do in our reauthorization legislation that would best help not only making these facilities more transparent, but ensuring that, if children are at these facilities, they receive the proper care and services that they need?

Ms. HILTON. Well, thank you so much. I really appreciate what you just said, and I think it is just important for there to be oversight and regulation. People need to know that they are being watched.

What I experienced in these places was inhumane, and it is something that will affect me for the rest of my life. And after speaking to thousands of survivors who have been through the same experiences, I think it is just important to listen to survivors because we have the lived experience.

And I just want to say again I am so grateful to be sitting here in front of all of you who could help make a difference in so many children's lives. And I think it is just continuing to do that and to pass this.

Mr. THOMPSON. Thank you.

Ms. HILTON. Thank you.

Mr. THOMPSON. Mr. Geen, you mentioned the capacity issue, and this is an issue—I can't imagine it being satisfactory in anybody else's district. It is certainly not in mine. What do we need to do to increase that capacity?

It seems—and we just lost a great facility in my district, and we—and that was not enough. We needed four or five more just in that one community.

Mr. GEEN. So let's be clear. If the testimony of those with lived experience doesn't move you, the research is clear: children do best in families, clearly.

There will always be a need for children to have different forms of care, and we have to invest in them. That means that there will be children going into foster care. It also means that, for a very small number of children, they will require a short-term intervention that may be residential-based. It is not a placement, it is not a place for a child to stay for a long time. But we need those very limited facilities to be exceptionally high-quality, to be therapeutic, to be involving family in those children. The purpose of that intervention is for the child to go home and succeed in a family, so we need to cover the landscape of the continuum that is needed.

Mr. THOMPSON. Thank you, and I think that—you said it best. This is about success for these kids. Mr. Buchanan was spot on when he said this is our future, and we can do a lot to help.

So thank you all very much, and I yield back.

Chairman SMITH. Thank you.

Mr. Kelly.

Mr. KELLY. Thank you, Mr. Chairman. Thank you for holding the hearing.

First of all, Ms. Hilton, I first read about your story in Vanity Fair. I don't usually read that magazine, my wife does. And she says, "You have got to read this story, and you won't believe what happened to her." Your very presence here—believe me, we have a lot of briefings here, but we don't get this type of a crowd, and we certainly don't get that many people who come in and—from the media and want to get pictures. You telling what happened to you in your life and what happened is absolutely incredible, and opens up a whole new vision for the rest of us to say, you know, if she has the courage to stand up and talk about this and relate what she went through, certainly we should look at our own lives and our own communities and say, why can't we also look at that and make sure? So I can't tell you how much I appreciate what you were able to do and why you did it. And I know it was selfless, but I know it has had a great impact. So thank you so much.

Ms. HILTON. Thank you so much. I have tears in my eyes. And tell your wife thank you so much, as well. And it is an honor and a pleasure to be able to do this for the children who have no voice, and be the hero that I needed when I was a little girl, terrified in these places. And it is just so heartbreaking to know that there is hundreds of thousands of children that are in these places right now. And for so many years, nobody has been believed or listened to, so I feel that maybe God put me through this and gave me this special gift so one day I could use it to help others not go through what I did, and really turn my pain into a purpose.

And thank you all for coming today, and everyone, because this is so important for the world to know what is happening, and the children in there to know that we are all here today to help make a difference in their lives.

Mr. KELLY. Well, you are making a difference in a lot of people's lives.

Ms. HILTON. Thank you.

Mr. KELLY. So I got to tell you now, my wife is one of nine, I am one of five. We have been blessed with four children and 10 grandchildren. And there is nothing in the world more valuable to us than those kids.

Ms. HILTON. Yes.

Mr. KELLY. So thank you for what you are advocating for.

Now, just real quickly, Mrs. Petersen, I think your story is absolutely incredible. In a place that talks about all the time in God We Trust, as long as you don't keep saying that because God is not allowed to be discussed anymore in the public forum, which I think is absolutely the worst thing that could happen to America, we have been so blessed for so long, and sometimes just take it for granted that we are always going to be that way.

Your story is absolutely incredible. What I never will understand is why faith-based organizations are held in a different manner than other ones, saying no, no, no, you cannot talk about the church, you cannot talk about Christianity, you cannot talk about faith-based issues, you cannot, you cannot, you cannot, and every night we pray that our kids and our grandkids will have a future. So your story, I thought, was really incredible. Why, with the story that you have, and coming out of the college that you have—had come from, why do you think people don't want to hear your story because you are talking about the force of faith in your life that absolutely transformed it?

I think your story is incredible, and I want to thank you for being here, all of you. Thank you for being here. I don't understand why it has taken this long to get to this point, because there is nothing in our lives more important than our kids. So if you could, I was just fascinated by what you said.

Ms. PETERSEN. Yes. Thank you, Mr. Kelly. Glory to God for what He has done in my life. And I do—I have felt at times that I have—my voice has not been welcomed because of my faith. I have felt at times that I have been pushed out of spaces that look a lot like this because I love Jesus, and I want to tell people about him.

James 1:27 calls Christians to care for the orphan and the widow. Then the next scripture is James 2:1, and it urges us to not show favoritism when a poor man comes to our home. So we are given the command, right, to care for the orphan and the widow, and then we are given the instruction to not show favoritism. And it says that we must put them in the same place that we would the rich man, and this is what we are supposed to do.

So if a child ages out without a family to call their own, like I did, communities, they need to step up like mine did. And I would just urge anyone listening to this, community-based organizations, people of faith, if there is a kid that you know in foster care, no matter what they have been through, believe in them as much as you would your own child. Fill the roles they are missing out in their life.

My community is not perfect. They didn't fill every aspect that a mother and father should and could. They will never be able to make up for what I did not have as a child, but they have given me people I know I can lean on. They have shown me a God that I know that I can lean on. And we need more communities and churches who will open their doors and their living rooms and go out of their ways for kids in care.

Mr. KELLY. Well, thank you so much for being here today. And my colleague, Mr. Schweikert, he should be on this panel. I got to

tell you, I have been with him, I have been with his family, I have been with his kids. It is absolutely the difference in their lives going—and thank you so much for never walking away from your faith and never being able to say I am not going to practice it.

I was in Normandy a couple of weeks ago, you know, with all of those guys—98, 99, 100. There are no atheists in foxholes. Thank you so much for being here.

Chairman SMITH. Mr. Larson.

Mr. LARSON. Thank you, Mr. Chairman, and I want to especially thank the panelists, as well, for your insights today.

I want to associate myself with the remarks of Mr. Neal, and focus a little bit on Social Security first. There are 2.7 million children who are Social Security recipients. And Mr. Geen, you remarked that most of the children receiving care are not infants. They come because of a deceased parent. Yet here we are, talking about what we need to do.

How about the fact that Congress hasn't voted to enhance Social Security in more than 53 years? Is there anyone on this panel who doesn't think that enhancing Social Security so it doesn't reflect what it was providing in terms of benefits in 1971 shouldn't be enhanced to take care of the very children you are talking about in terms of making sure they have the adequate resources?

Ms. Hilton, I will start with you.

Ms. HILTON. Thank you, Mr. Larson. Yes, I think it is extremely important, the point that you are making, and the fact that it has not been changed in over 50 years is ridiculous, especially with everything that is—inflation, everything that has been happening. It is a whole different world now. So these need to be addressed and changed, I one hundred percent agree with that.

Mr. LARSON. Thank you.

Mr. Geen.

Mr. GEEN. So I recognize the hearing today is about Title IV—

B—

Mr. LARSON. Yes.

Mr. GEEN [continuing]. And Title IV—B is a relatively small program. It is a critical resource because of its flexibility and the ability to test and pilot programs that can then be funded with other programs.

But your question raises the key concern that I have of understanding IV—B within the larger infrastructure of Federal funding. So we can't look at any individual program without understanding how does it interact with Title IV—E, TANF funds, the Social Services Block Grant, and other supports.

Mr. LARSON. Thank you. I couldn't agree with you more.

Mrs. Petersen.

Ms. PETERSEN. I feel like I don't understand the way that this works enough to answer it. And one of the things that I have really admired about people in my life is when they say, "I don't know", so I am going to say I don't know. Thank you.

Mr. LARSON. Ms. Mansfield.

Ms. MANSFIELD. Yes, I would absolutely support enhancements. I believe it is really critical for some of the reasons that we mentioned before, as well, that the majority of children are in kinship care, and for children of incarcerated parents in particular,

they are in informal kinship care, where they are not getting payments as foster care givers.

And we already know that kinship care payments, even for children in foster care, are often under what somebody might receive for a non-relative placement. And so it is really important to support those families, but also to support families before they get involved in the foster care system. And having those access to resources is just critical.

I know we mentioned other services like TANF. Well, TANF child-only grants can support caregivers of children of incarcerated parents who are not involved in the foster care system, but they are incredibly hard to access. And it is typically about \$115 a month, which, for anyone who has cared for a child, does not go very far. And we are also talking about the majority of these caregivers being grandparents who are already stretched financially and are now caring for their grandchildren, which can be a real challenge.

An additional thing to look at would be child care, both for the caregivers—

Mr. LARSON. I am glad you mentioned that—

Ms. MANSFIELD. Thank you.

Mr. LARSON [continuing]. Because that was my next question for everyone: Are you familiar with family resource centers?

The chairman will be happy to know that a native of Missouri, Dr. Edward Zigler, God rest his soul, the father of Head Start, said, “Look, we ought to wake up and utilize what we have in abundance: schools.” And so he authored family resource centers as a source for families, and also a physical place, too, that exists already that could be expanded upon and utilized and further professionalized.

What is your sense? Do you think Ed Zigler was on the right track with family resource centers?

We will start—

Ms. MANSFIELD. Absolutely. I mean, I was going to say we need child care and family resource centers not just for children who are with caregivers, but we also need it for families, and particularly for my clients during reentry periods, where they have all of these different things upon them but also need to have access to those resources.

Mr. LARSON. Train parents, as well.

Ms. MANSFIELD. Yes, and providing the resources that they need so we can have healthy families.

Mr. GEEN. Yes to family resource centers. They are funded in part by Title IV–B dollars. And also other similar types of mechanisms that are designed specifically for the communities, which gets to, again, the flexibility of this program. Missouri, Indiana, California can design their own types of interventions in their community. Many of them look like family resource centers.

Mr. LARSON. Anyone else?

Thank you.

Chairman SMITH. Thank you.

Mr. Schweikert.

Mr. SCHWEIKERT. Two years ago this week, all of a sudden I am getting these text messages that—from my office, saying there

is a social worker who needs me to call her. Okay, I immediately assume I have a family member that needs bail money. I call the social worker and the first words out of the mouth was, "Are you going to come pick it up?"

Pick up what? Apparently, the birth mother of the little girl we had adopted six years earlier had walked into the hospital, no prenatal care, substance abuse, and had a little boy. The little boy was very small, and going through withdrawals. So this is him exactly two years ago, and one of the greatest things that is ever happened in our lives.

But before we were able to walk out of that hospital with him, it turns out an adoption agency worker had gotten the birth mother to sign a piece of paper. Now, remember, the birth mother just said, "Hey, the Schweickerts had adopted my little girl. You know, this is the brother. Wouldn't that be nice if they could be together?" We were told we had to sign a piece of paper for \$40,000 before we were allowed to walk out the door with the baby, because the baby belonged to the adoption services. How does a middle class family ever adopt with these types of costs?

Ms. Hilton actually said something that was brilliant. It is about the money. How many others here have gone through the certification to be a foster parent? My wife and I spent years and years and years trying to adopt, and it is stunning. It is maybe a combination of fertility rates have collapsed, but we spent years and a couple heartbreaking—I mean just almost devastating—failed adoptions.

As you start to look at IV-B, I know there is flexibility in it, but I would encourage the policymakers here—Mr. Geen, you are going to have some of the expertise in this—something that is actually much more unified, and then here is my point of heresy.

Thirty years ago there was a national movement to fixate on family reunification. Having gone through the foster classes, having actually looked at the numbers, maybe our priority needs also to be the child and the child's welfare and the child's future.

When you have people like my wife and I, we have done okay in life. I have really bad choices in career paths, but—and yet—

[Laughter.]

Mr. SCHWEIKERT. But my point is, if you are really trying to find a unified theory of everything from the adoption side to the foster care side to those who have parents who—incarceration—stop doing it in silos. And the priority, number-one priority of our society needs to be those kids. We don't have a lot of them. We have schools closing all over the country because there are not enough children.

I love the Dave Thomas organization. They do incredibly moral work. I am adopted, all my siblings are adopted. My little boy is third-generation adopted, so is my little girl. Am I off my rocker thinking two things? Unified approach, so it is more than just IV-B, but it is also maybe we need to step up the prioritization of protecting the child and its future from even some of the others? And I know that is heresy in the common folklore.

Mr. GEEN. So I say this representing the Dave Thomas Foundation for Adoption. When we consider what is best for children, for the vast majority of children reunification is what is best.

We also need to invest in high-quality adoption. The Wendy's Wonderful Kids program, which is a signature initiative of the Dave Thomas Foundation, has led to 14,000—more than 14,000 children achieving permanency that would not have done so without. Seven hundred of those kids—this was their last chance of finding a home—were reunified. They were never actually given a chance of reunification sufficient so that when they were ready to be adopted there was still the opportunity to reunify them.

So I think we don't want to play adoption against reunification. And you are right, we do need a unifying framework. What is in the best interest of children?

Mr. SCHWEIKERT. We are up against time. How often—how common is our family's experience of you are not allowed to take the child home unless you have the cash?

Mr. GEEN. So what you are talking about is largely private adoption, rather than—

Mr. SCHWEIKERT. Yes, it was a private adoption service.

Mr. GEEN [continuing]. Public adoption. What I am referring to is—

Mr. SCHWEIKERT. My understanding is they had people stalking the maternity wards in the different hospitals, getting people to sign that piece of paper. So they technically had the—

Mr. GEEN. I will follow Tori's lead and say I am not an expert on international adoption or private adoption.

Mr. SCHWEIKERT. No, this was in Phoenix, in Phoenix, Arizona.

Mr. GEEN. Yes, private adoption and public adoption of children that are in the foster care system are managed under very different policy structures and the like. So your experience I don't have anything to add to.

Mr. SCHWEIKERT. Mr. Chairman, thank you for your tolerance on the time. I yield back.

Chairman SMITH. Thank you, Mr. Schweikert.

Mr. Blumenauer.

Mr. BLUMENAUER. Thank you, Mr. Chairman. I find this hearing very meaningful.

I have 190 days left in Congress, so I have been spending time on issues that bring people together rather than divide them. And I am struck that that is the majority of things before us. They may not make the headlines, it may not be MSNBC and Fox News and talk shows. But these are things that affect real people. They don't cost money.

One of the themes that you have made is investing up front actually saves so much that it pays for itself. We spend a lot of time around here—and you will see it today on the floor, and you will see it later in the week—beating each other up on things to get a—you know, to get a moment's headline, get a zinger in. These things aren't going to get enacted into law, they are not going to make a difference to the American people. It is a distraction, it is a sideshow. What you are talking about here is not a distraction. It is not a sideshow. And it is presented in a compelling way that even a Member of Congress ought to be able to understand the wisdom of what you are saying.

Mr. Chairman, I am hopeful in the next 190 days that you will join me on kind of a little tour. Congressman Wenstrup understands what I am talking about. We are looking, in a sense—it is legacy for all of us. And what you have presented today is part of what can be a legacy for any Member of Congress, regardless of party, regardless of where they live, regardless of what committee they are on.

I would love to think what would happen if we spent the month of July just talking about the things that we actually agree on, talking about things that are common sense and tug at the heartstrings, as you have presented. That if we spent morning caucus and conference meetings instead of maneuvering and thinking about scoring points and the presidential elections, it is—that is beyond, I think, the ken of most people. These are things that will mobilize support for the political process. They will bring people together. It won't cost money, it will save massive amounts of money.

I work with an organization in Oregon called Friends of Children that was started by a friend of mine who had a tough upbringing, and he has willed 30 programs around the country, and they pick kids who are going to fail, that have no chance of going forward. They take the worst of the worst. They bring them together. They give them a full-time mentor that stays with them until they graduate from high school, starting at age four.

I have got another friend who is working on the focus of the first 1,000 days of life. If we do a better job of focusing on those first 1,000 days before people are damaged and we are playing catch up.

And these are the things that I hope that you will inspire us to think about, and each in our own way focus on things that bring people together, that don't cost money, that aren't part of a game that doesn't get anybody anywhere and change any lives. These do.

Now, it may not have as much political zing as some of the stuff that occupies our time, but these are real people. This is real progress. And I think, in the long run, people who focus on that—actually, it might even be better politics.

So I deeply appreciate your coming together and focusing this in a way that I think anybody can appreciate, and that we all have an opportunity in our own way to be able to work in advancing these things you have challenged us to think about. We know what to do. We know it will not cost anything. It will save money, and it will bring people together, rather than divide them. I think that ought to be our mission, and I hope you inspire us to do that.

Mr. SMITH of Nebraska [presiding]. Thank you.

Mr. LaHood.

Mr. LAHOOD. Oh, sorry. Thank you, Mr. Chair. Let me thank the witnesses today for your valuable testimony and your compelling examples here today.

Mrs. Petersen, I want to particularly thank you for sharing your life journey. You are really a shining example of success and perseverance, and I appreciate your passion and courage.

We are having this hearing today as we consider reforms to Title IV-B, which, of course, is an important child welfare program that provides flexibility funding to states and tribes. As the chairman of the Work and Welfare Subcommittee, I take very seriously our responsibility to ensure we have a strong safety net for nearly

370,000 children in foster care who have experienced the trauma and hardships of abuse and neglect.

This Congress, the Work and Welfare Subcommittee has taken a deep dive into current challenges facing child welfare, continuing the decades-long tradition of doing so in a bipartisan basis. Last week I was proud to co-lead the introduction of the PARENTS Act with my fellow Illinoisan, Ranking Member Congressman Danny Davis, a bill aimed at finding ways to better nurture the relationship between foster children and their incarcerated parents.

Our subcommittee has held two child welfare hearings this particular Congress. In September of last year, we heard from witnesses about ways to modernize Title IV-B, and in January this subcommittee held a hearing on improving support for the 19,000 youth aging out of foster care each year. Witnesses at these hearings included state officials, leaders from community-based organizations, and former foster youth who shared recommendations on ways to improve the system moving forward. And this full committee hearing today signals important progress in our ability to work together to reauthorize Title IV-B of this Congress.

Mrs. Petersen, one of the policies that I focused on on our subcommittee is embracing the stories of those that have experienced transformational change from the power of employment brought to their lives by a job. The focus has been not just about the job, but the dignity of work. I appreciate your perspective on how we can encourage and promote this dignity for all vulnerable populations, including foster youth.

As you know, only about 55 percent of foster youth are in full-time employment past the age of 18.

In your opinion, why is the percentage so low, and how can we improve barriers to full-time employment for foster youth?

Ms. PETERSEN. Thank you for your kind words, and thank you for your work. It sounds very powerful.

I think this percentage is so low for two reasons. The first is that foster youth usually do not receive as many opportunities as their peers who are not foster children. That can be because foster youth tend to be stigmatized as troubled children, which makes it harder for them to gain employment as young people, or because foster youth usually move from home to home unexpectedly. This causes this to—causes them to miss out on opportunities like sports try-outs, or makes them have to leave jobs unexpectedly, which then makes them less hireable when they go to get another job.

There is also the piece that I briefly mentioned in my statement. One of the young men my husband and I were mentoring as a part of this non-profit, he was a former foster youth, and he was living off of free housing and getting a weekly stipend from Chafee funds. And those offering him these resources told him he would continue to receive the resources as long as he worked 20 hours a week, and he wasn't doing any higher education outside of—he wasn't—no higher education, just work. So what programs like this teach young people is that part-time work is sustainable for life, and they can live off of government resources.

The young man did get removed from the program because he wasn't meeting the requirements of working 20 hours a week, and he then fell into homelessness. But just a couple of months later

he gained full-time employment. He is now paying for his own housing. His mental health is doing much better because he can't sleep all day because he has to go to work.

And my husband and I see this pattern in young people again and again and again. And the point is not that we shouldn't help, but that there is a point when helping hurts. And it is our responsibility, as the helper, to figure out where that point is.

When resources are excessive, they can become enabling to young adults and communities, because communities are then given permission to not invest their time and energy and love into these youth. So we need to find that fine line of giving young adults what they need to survive in an empowering way, rather than an enabling way.

Mr. LAHOOD. Well, Mrs. Petersen, that is a great example of what we are focused on, on the importance of employment and the dignity of work. And we are grateful to have you here today. Thank you.

And I yield back.

Ms. PETERSEN. Thank you.

Mr. SMITH of Nebraska. Thank you. I now recognize Mr. Pascrell.

Mr. PASCRELL. Thank you, Mr. Chairman.

First of all, you have all been first-class witnesses, and I thank you for your courage. It takes courage to say what you said. You hear a lot of stuff around here which passes for courage. To me, courage means not only say it, but you do it. That is a tough transition, isn't it, at times?

Our job—I thought our job was to protect the least of these among us, our seniors and our children. We didn't do a very good job on the first thing. I mean, you saw what happened during the pandemic in those nursing homes. We don't know half the story. We never got it.

In New Jersey I personally listen to the advocates for Children of New Jersey, which has advocated for kids and families since—for 177 years. This is not a partisan issue. This is a humanitarian cause for all of us. If we agree with that, we are halfway home.

Each of our witnesses can offer testimony on children who navigate the foster care issue and then thrive. Thrive.

Of course, we must always be concerned about fraud and guard against Wall Street vultures snatching public funds to line their pockets to do what we are talking about today. Private equity is definitely not hot, and already has a troubling track record in new services. We cannot allow the private equity octopus to reach its tentacles in child services.

So Ms. Hilton, thank you for your comment that this \$23 billion industry sees children as dollar signs. You wrote that and said it. We are sending youth a signal that profit is more important than their lives. Very well stated. Just unpack briefly for us why the for-profit industry is so dangerous here in what we are talking about.

Ms. HILTON. Thank you so much for that. And it is so dangerous because they are caring more about profit than the safety of children, and that means that they are trying to spend as little money as possible, and the type of employees that they are hiring are people that are not being checked through. They are people

that should be nowhere near children. And just the entire situation, there is no education in these places. The food quality, the living conditions, there is mold and blood on the walls. It is horrifying, just what these places are like. They are worse than some dog kennels that are out there. It is just—it is terrifying.

And all of these private equity companies are seeing that this is such a profitable industry, so they are caring more about the bottom line than children's lives.

Mr. PASCARELL. So what you are saying, really, is there is a vacuum here of service. We are trying to fill that vacuum, yet other people are vacuuming up the money when they say that will be helpful here.

Ms. HILTON. Yes.

Mr. PASCARELL. This is dangerous to me.

Ms. HILTON. Extremely.

Mr. PASCARELL. Mr. Geen, can you expand on how we can strengthen the pipeline for a qualified workforce? Another big problem with senior housing and nursing homes: qualified workers. You can't get them. Who is going to protect our children?

Mr. GEEN. So as I said earlier, I do think that workforce is such a critical issue because any reform you want to do is dependent on having a qualified workforce.

I will say I believe the problem is less a recruitment than a retention problem. Our workers take two years to learn their jobs, from their mouths. And many of them quit within those first two years.

Mr. PASCARELL. Why?

Mr. GEEN. They quit for many reasons. One—and we will get into this—is the administrative burden. It is the paperwork that they are asked to fill out when they went to school to learn how to take care of families and to engage families and children. And instead they are working on paperwork.

There are lots of opportunities to get workers past the period where they are just new and learning their jobs. One of the challenges is the loan forgiveness program that currently exists for social workers. You have to be in your job for 10 years. Very few actually last that long. If we changed the duration of time that that was available, we would get people sticking it out past a year-and-a-half, two years, to the point that they now know how to do their jobs. They can become effective supervisors. And once they are at that point, they are much more likely to make that job a career.

Mr. PASCARELL. Mr. Chairman, it is a practical recommendation. Could we put it under review for the committee?

Mr. SMITH of Nebraska. You will want to talk to the full committee chairman about that, but—

Mr. PASCARELL. You are the chairman right now. [Laughter.]

Mr. SMITH of Nebraska. Well, I appreciate this hearing, and I think it is very productive, and we will get a lot of work done as a result.

Mr. PASCARELL. Okay, Mr. Chairman.

Mr. SMITH of Nebraska. Dr. Wenstrup, you are now recognized for five minutes.

Mr. WENSTRUP. Thank you, Mr. Chairman. This is something that is very passionate to me, and I think it is vital that we learn from programs that have found some success.

You know, but what is success? You just mentioned it is not paperwork. It is not getting paperwork done. That is not success. And often we vote for bills that sound real good, they have a really nice-sounding title, but they don't really bring the success that we should be looking at and what we are talking about today.

You talked about succeeding in a family, and I want to add to that. Succeeding in a family, even if you never had one growing up, that is where success comes in, in my opinion.

You know, and there is a difference between government oversight and a non-profit oversight, because the things I have been involved in, you know, when you are a donor to that non-profit, you take a role in oversight because you care, and there is volunteer oversight that is involved. And those are the right motives for what we are trying to do, you know, we visit, we get to know the children. We look for evidence-based solutions and, again, with a different definition of success, rather than it just being paperwork. And the idea that—moving from one chaos to another is just so heart wrenching.

You know, I have been a lot of things. I have been a big brother. Gosh, I have always been looking for opportunities for people that would not normally have them. And what we are talking about is an opportunity for a loving, caring, developing, and stable environment, especially for those that rarely get that opportunity. And my wife and I, we have a 10-year-old son and a six-year-old adopted daughter. It is one of the most beautiful things we have been able to do.

But I want to talk about the agency we used. So the woman who runs it, she is an attorney. She is an adopted mother of two. And she decided to become an adoption professional. And I have a letter from her that I will like to submit for the for the record here today.

Mr. SMITH of Nebraska. Without objection, so ordered.

[The information follows:]

Adoption Professionals, LLC
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Thank you Chairman Smith and Ranking Member Neal for hosting today's hearing on "Strengthening Child Welfare and Protecting American's Children.

My name is Sheryl Linne. I am an attorney and the adoptive mother of two daughters. In 2004, I founded Adoption Professionals, LLC, a private child placing agency which is licensed by the State of Ohio. Our agency completes adoption homestudies (the approval process) for prospective adoptive families, accepts the voluntary surrenders of children from their biological parents and places those children into permanent adoptive homes. To date, our agency has placed over 375 children and we have experienced NO disruptions. While the majority of our placements are healthy infants, our census of children has included children with Down's syndrome, drug addicted babies, and babies with severe cerebral palsy. I believe the absence of disruptions in our agency can be attributed to four factors:

In every situation, we place the best interest of the child at the center of our decisions – no exceptions!

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We give our adoptive parents complete control to make the best decisions for their family (no pressure and no judgment); and

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Mr. WENSTRUP. They talk about voluntary surrenders of children from their biological parents and making the best connection. In every situation they say we place the best interest of the child at the center of our decisions. And we see our role as a lifelong commitment to the children we have placed and the adoptive families that we have served. There is no aging out. There is no aging out. And we have a relationship with the birth mother. What child doesn't want more people loving them?

So there are a lot of different situations that exist. We have to have flexibility. You have to gear it towards the child, the child's needs, and what is going to work best for everyone involved.

I am involved with something in Cincinnati, I have for 30 years or so, Boys Hope Girls Hope. And this is a program that—it is a combination of what we talk about. You still have the family involved, and yet we get a better environment. And so parents say, I want my child in this program, and basically we call it a scholarship.

And as early as fourth grade, because the home situation is not good, the child lives in a home where they are mentored, where they are safe, where they are stable, where they are developed, and they go to good schools. And this is all private. And we see them through high school, college, and they come back. It is part of a family, and their families are involved. There is the Thanksgiving party, the Christmas party. They go home on the weekends. But we have turned this into a scholarship, and these kids are proud. There are opportunities all over the place. And yes, it is faith-based, but we don't proselytize. You don't make someone join your religion or anything like that. But it is those Christian values, Judeo-Christian values that are in place that make the difference.

I see you nodding. First of all, I am so proud you are from Ohio. Thanks for being my neighbor. But I just want to say, what are some of the things you would recommend to states, if they have flexibility with the dollars they get, to enhance successful programs, and maybe specifically through Title IV-B?

Ms. PETERSEN. I would love to see organizations do more job shadowing for youth, bringing them along. Like I said earlier, foster youth need more opportunities. They need to be shown what they are capable of. And so I would love to see more job shadowing from organizations.

And something that my church did was they invested in me before I aged out of the system. So I think that we talk about the foster care system and how to support youth a lot, like, once they age out. And that is actually a very reactive solution. These children deserve us to be proactive for them. And so we need to be serving them and reaching them before they age out of the system.

And so one of the things that my church did was they actually covered for me—they paid for me to go through this financial budgeting program. They prepared me. So by the time that I was aged out, I had had money saved up. By the time that I was aged out, I knew what a budget was, I knew what investment was, and I knew how to manage my life as an adult because of the work that was done before I was an adult.

Mr. WENSTRUP. Well, I would like just to finish with a quote I heard from a caregiver 100 years ago or more: "There are no bad

children, only bad environments, bad training, bad example, bad thinking.”

With that I yield back.

Mr. SMITH of Nebraska. Thank you. I now recognize Mr. Davis.

Mr. DAVIS. Thank you, Mr. Chairman, and I certainly thank Chairman Smith for holding this hearing, and all of the witnesses for sharing your experiences as well as your expertise.

Ms. Hilton, let me especially thank you for sharing your experiences and raising the issues in residential care settings. And I would certainly like to work with you to try and help reduce and alleviate them.

I also want to thank you, Mr. Geen and Mrs. Petersen.

Ms. Mansfield, let me thank you for being here and for the amazing work that you do for our children in Illinois. You and I have both experienced how it feels to bring children to visit their incarcerated parents, and it is amazing to watch those families be reunited. As a matter of fact, I and a coalition of community agencies just returned on Saturday from visiting the Sheridan facility as part of Fatherhood Week and Fatherhood Day, and it was off the charts.

But as you know, Chairman LaHood and I have introduced legislation to authorize new demonstration projects to identify and implement best practices in helping foster youth develop and maintain meaningful relationships with their incarcerated parents. Can you tell us more about why connecting with their parents who are incarcerated is especially important for foster youth, even though they are not going to be able to live with them for a while?

Ms. MANSFIELD. Thank you for that question, Congressman Davis, and thank you in particular for your continuous support of families impacted by parental incarceration.

For many years, I was, as I said, a teacher in your district for eight years, and I know the amazing work that you have done for families.

You know, as we talked about before, parental incarceration is an adverse childhood experience, as is being in foster care. And so for any child having that separation from a parent can be traumatic, and can have very long-lasting impact, but particularly for children who are not with a biological family member. And that is where foster care and incarceration can really intersect, that when a parent is incarcerated, typically children are with family members, but it is far less likely when that child then is in foster care. And so it is really important for children in foster care to have someone connected to them that they can feel like they can rely on. And they are even more in need of those connections.

There is often an element of self-blame that goes along with children who are experiencing either parental incarceration or who are in foster care. They often feel like maybe this is part of their fault, in particular for children of incarcerated mothers who are involved in the foster care system because we know that foster care cases—that indications of parents about 30 percent of the time also indicate a parent who is experiencing abuse, that a lot of times it is because the parent is themselves the victim of domestic violence that the children are then taken away, and then the children can blame themselves for what happened.

And so leading children to these experiences and giving them the reassurances that their parents are okay, that they might have been being harmed but now they are okay, or their parent doesn't blame them, that they are not abandoned, that they are still loved is really important, and it can predict success long term, not just for the children but for the parents, as well.

Mr. DAVIS. Let me ask you, given your knowledge of these programs and your history of engagement, should this grant program be developed? What kind of activities would you like to see take place?

Ms. MANSFIELD. I could give you a very long list of the activities that we would like to do, from small things to big things.

I can share that I just—we just did a Father's Day program recently, where face painting was the number-one thing that kids wanted to do. It was very exciting. But what I really want to see are some of the activities that we already do, but with increased frequency and span. What we do right now, if we are just looking at this one program, we do it monthly when we can. But even then, there is a wait list, and that is just from coming from one region of one state and going to a state facility, not even looking at the Federal facility.

We need to expand these programs to everywhere. We need to make them available, especially as we look at the benefits of having community-based, smaller facilities closer to communities. We need to be able to provide those opportunities for everyone.

I would like to see opportunities for older children. We have been talking a lot about youth aging out of care. Children don't stop being children when they hit 18, and a lot of the programs that exist right now, they are for a very limited age range. Some of these summer camps, for example, for children in foster care or children of incarcerated parents, they might be, like, 8 to 12 years old. We need to expand that. Our program does not have an age limit. We have 27-year-olds who go to see their parents sometimes, and they will cry more than a small child because they still need their parents.

So I would like to see those types of activities, and I would also like to see supportive activities like parenting classes, therapy, and groups for children and for parents to be able to experience things together and to be able to talk through their feelings and what they are experiencing.

Mr. DAVIS. Thank you very much. Our time has expired.

And I yield back, Mr. Chairman.

Mr. SMITH of Nebraska. Thank you, Mr. Davis. I now recognize Mr. Arrington for five minutes.

Mr. ARRINGTON. Thank you, Mr. Chairman.

Thank you to our witnesses for your passion and your commitment to being a voice for America's most vulnerable, probably the true forgotten people in this country. Thanks for giving them voice. Thanks for remembering them and helping us to remember that we need to put our very best forward to improve this system. Government can't do everything, but what we do ought to be effective, and people ought to be accountable, and we ought to have the highest standards, and that is what I am hearing from each and every one of you. And so thank you again. God bless you. Paris may be

known more than any of you, but you are all stars, every one of you, okay?

Now, Ms. Hilton, you talked about the several pieces of legislation that you have worked on throughout the country in various states. And so—and you mentioned that you had some folks checking on you that saved you from further abuse in the system. And you said, “Can you imagine what it would be like if you didn’t have parents and family who were checking on you?” So let’s talk about how we check on these vulnerable people in this system at the state level, and then I will get to the role of the federal government.

What is your experience in terms of the best practices around checking, oversight, and accountability? Just give me a few ideas that we could consider as best practices throughout the many states in this great country.

Ms. HILTON. Well, for me, all of my outside contact was completely controlled, and they would always have a staff member sitting right next to me. So if I said even one negative thing about the facility, they immediately would hang up the phone, and then I would be punished and either physically beaten or thrown into solitary confinement, and then they would take away my phone privileges and not let me speak to my parents, so they had no idea what was happening because they were continually being lied and manipulated by the staff that were trained to do that.

And there were other children in there, there were foster children, and they had nobody to call, no one to talk to. So all of the kids in these places, they are not able to speak to their families without someone sitting right next to them, so it is really difficult to be able to tell anyone what is happening in the outside world. And then a lot of these kids are not believed because these places tell the parents, oh, they are going to be lying, they are manipulating you, they want to go home.

So it is—I think it is really important that children are able to speak to their families without someone sitting directly next to them, or they can have unmonitored phone calls with their family. And if they don’t have a family member, that they should have someone on the outside world that they could talk to. Because otherwise, these children are in there and they have no voice, no one believes them, and it is extremely isolating. And it is extremely traumatic, and that is why I want to continue advocating for the Stop Institutional Child Abuse Act, as well, because children need to have the right to speak to someone to tell them what is happening.

Mr. ARRINGTON. Thank you.

Ms. HILTON. Thank you.

Mr. ARRINGTON. And thanks for sharing your story today.

Ms. HILTON. Thank you.

Mr. ARRINGTON. Mrs. Petersen, I am very encouraged and inspired by your boldness, your unabashed pride and joy for the love of your life which is Jesus, our Savior. And I just love when I hear somebody sharing how their Heavenly Father intervened. Not the system, not a program, but the God of all creation who knows your name and touched your heart and changed your life.

Ms. PETERSEN. Yes.

Mr. ARRINGTON. And by the way, that is the story of every Christian sinner saved by grace. Amen?

Ms. PETERSEN. Yes, amen.

Mr. ARRINGTON. Okay, I will get off my—that is a—I got that Baptist boy still trapped.

Ms. PETERSEN. You do, yes.

Mr. ARRINGTON. I let him out every now and then at these hearings. But you brought him out today.

But I want to—this is maybe a little bit of a tangent, but I want you to speak to this because you mentioned the verse in James. And when I think about that verse, pure religion, a religion that is pure and undefiled, is—

Ms. PETERSEN. Care for the orphans and the widows.

Mr. ARRINGTON. Those that care for the orphan and widow. I always took that as the mission of the church, and I find that—or I observe that over time the church has ceded to the state, that instead of the tithe that goes to the church, and the church that has that connectivity that you mentioned, that relationship, meeting those deeper needs—that is how it used to be. And I feel like the church has moved away from that, and now we pay taxes to the state, and now the state is doing all this work, and I am not sure they can ever do it quite like the church used to do it. And is that a philosophy that you could—that you share, or that you could at least just opine on briefly?

And then I will yield, I am—my time has expired. But Mr. Chairman, if you will let her just answer that question.

Mr. SMITH of Nebraska. Proceed.

Ms. PETERSEN. Yes, I think—as I look back on my experience, I know that I—my experience in my community and at my church was unique. They lived out what they preached. They lived out what Christians are meant to live out. And I don't think, unfortunately, that we always see that.

But I remember, you know, looking at my congregation and seeing all the adopted children. I remember on—we didn't call—we don't call Orphan Sunday Orphan Sunday, we call it the Long Sunday, because that is what it should be. And we had this language in our church specifically for kids in foster care because we cared about them. My church did trainings around trauma because when the kids came in, they wanted to be able to care for them. And so I know that this experience is very unique, but I hope that what people hear today is that more churches need to pick up the mantle and carry this out.

And I would just love to also echo Paris for a bit when she was talking about those visits. I just think it is a really important point because us, as foster parents, when our caseworkers come to visit our teen daughter, they don't ask to talk to her by herself. When I was in foster care there was so little accountability. I saw abuse in foster care, I was abused in foster care, and no one asked me, "Can I talk to you by yourself?" You know, they asked the questions to the foster parent, and it is very easy to say all of the right things. It is a lot harder if—I think that it would—we would benefit a lot—abuse would be minimal, limited, few if homes were actually observed, rather than just visits were, "Let's sit down and talk," because we can make up a lot of things. We can say what

is—what they want to hear. But it is a lot harder to show them that you are not living and caring for kids with integrity if you are not.

Mr. ARRINGTON. Thank you very much.

Thank you, Mr. Chairman.

Mr. SMITH of Nebraska. Thank you. I now recognize Ms. Sewell for five minutes.

Ms. SEWELL. Thank you so much. I want to thank all of our witnesses today, especially those who gave such heartfelt testimonials of your own personal experience.

Before I came to Congress, I didn't know much about the foster care system, but I have to tell you my classmate and a former colleague of ours, Karen Bass, took it on as her cause célèbre, and she started the Congressional Foster Care Caucus, of which I am a member. And every year for the last seven years we have a shadow day, where we have a foster youth shadow us. And I have learned so much from my foster youth that have shadowed me for that day. It is a day long, and it is on the Senate side and the House side. For those members who are not signed up to have a shadow, a foster youth to shadow, I would recommend the program, and I would recommend the Caucus.

I know that Title IV-B is not perfect, and we know that it is up for reauthorization. So I wanted to ask both Mrs. Petersen as well as Ms. Hilton, what one big reform would you like to see?

And yes, that is my question. If you had to just sum it up to one thing that you would like to reform in section IV-B.

Now, I know, Mrs. Petersen, you also talked about IV-E.

Ms. PETERSEN. Yes.

Ms. SEWELL. So I will just say section 4.

Ms. PETERSEN. Yes, I would love to see more—other—outside of what I have already spoken about, to add to that is that I would just love to see more services in terms of mental health because, when I was in the foster care system, one of the—as a child, one of the things that I found really difficult was to attach to my foster parents.

And now, as a foster parent, I know what is considered to be attachment theory. And so it is about the different ways that parents attach to their children and children attach to parents. And as a foster parent what I have learned, and what is kind of taboo to say, is that when you are a foster parent this attachment doesn't always happen instantaneously. You have to really work at it, and it is for the child and for the parent.

And so what happens is that children receive this big gap in connectedness, this big gap in attachment. But that attachment—someone referred the first 1,000 days, right, like of life. The attachment in those first 1,000 days is absolutely—

Ms. SEWELL. Critical.

Ms. PETERSEN. Crucial.

Ms. SEWELL. Yes.

Ms. PETERSEN. Critical to the development of children, no matter what age they are.

Ms. SEWELL. Right.

Ms. PETERSEN. And so I would love to see—

Ms. SEWELL. That is a good point.

Ms. PETERSEN [continuing]. Just more education on attachment theory. How do we do it well? How do we continue to work at it when it doesn't come naturally? And how do we reverse, you know, that trauma that comes from the disconnectedness?

Ms. SEWELL. Thanks. If you had a magic wand and could do one reform for Title IV, what would it be?

Ms. HILTON. My wish would be that children would not be put into facilities in the first place. I think it should be about community-based care, and children shouldn't be put in places and be more traumatized than when they came out, so I think that that is just crucial. And having family-based care and just not having them even get into the system in the first place.

Ms. SEWELL. Thank you.

Ms. HILTON. It is so important.

Ms. SEWELL. Ms. Mansfield, can you talk a—I know you know about the government programs for incarcerated persons with children in the foster care system. Can you talk about some of the private—public-private partnerships that you know about that also help?

Ms. MANSFIELD. Yes, thank you, Congresswoman.

There are some programs, but they are few and far between. There just are not very many. But I have seen the benefit of public-private partnerships, certainly. Like at the Women's Justice Institute, we have a grant through Cook County Health that is funded by SAMHSA.

Ms. SEWELL. Yes.

Ms. MANSFIELD. And that grant allows us to provide client care coordination for women leaving jail or prison with substance use disorders. And the program is led by a formerly incarcerated woman, and all of our client care coordinators are also formerly incarcerated, and this wouldn't be possible without those public-private partnerships. And it allows us to move really quickly in response to needs, but also to make use of Cook County Health's—like, their expertise and their resources. And I think that that is possible when we are speaking about these types of partnerships, as well.

I mentioned that the Reunification Ride is one example of a program. I cannot have foster children participate because we cannot find private insurance that allows foster children to take part. And if we could leverage the public resources, we could use that insurance that is available. We could be under that auspice, and then foster children would be able to participate.

And I think that we also can meet some of those staffing shortages that are occurring in the Department of Corrections and departments of Children and Family Services or other child welfare agencies, where there are staff shortages and also that turnover that was mentioned before. And so, as a private organization, we can help to have these programs in those non-profits. In addition, we can have the expertise that is needed for things like child welfare to have the child development angle, all of those things.

And also, just the last thing is these programs often don't exist or they exist in very limited ways because we don't have the funding, and we don't have the assurance that it is going to continue. And one of the most damaging things to children is when they have

one visit and they don't know when the next is going to be. And we don't want to have where we scrape together enough money to get there one time, and then we can't come back like we see with so many different programs.

And so those are some of the powers that could happen with this.

Ms. SEWELL. Thank you, Mr. Chair, for allowing us to exceed our time. Thank you.

Mr. SMITH of Nebraska. Thank you. I now recognize Dr. Ferguson for five minutes.

Mr. FERGUSON. Thank you, Mr. Chairman.

I want to echo a chorus of thank yous to each of you for coming today. I know sometimes witnesses may wonder if their presence here matters. And whether it is in this hearing room or whether you are coming to our congressional offices, you being able to tell that story to us matters. So thank you for doing that. Thank you for helping us do the right thing on behalf of this country.

Yes, your stories, in which—particularly Mrs. Petersen and Ms. Hilton—in which the way you tell them, the grace with which you present them, probably belies a lot of the pain and the hurt that preceded you being here today. So thank you for having the courage to do it, and thank you for being so candid with us. I want to start with a couple of questions here.

And Mrs. Petersen, I will start with you. You have talked a lot today in your testimony and also in response to questions about this cliff that so many people hit when they turn 18, and then there is an expectation of work and productivity and leading life. And you have spoken very eloquently about how important it is to have that work and those steps going forward.

I was particularly interested in the piece that you talked about with your own experience of understanding a budget and understanding, you know, how to move forward. I think that is really important when you look at trying to break the cycles of poverty. But I would—tell me your thoughts on not only teaching that to our foster children but, in many cases, to the parent, to the foster parents that are there, as well. Because all too often, many of our foster families, you know, suffer from lack of financial knowledge and financial resources, as well. I would be happy if you could comment on not only the need to—financial literacy with foster youth, but the families that are taking care of them.

Ms. PETERSEN. Yes, well, first I want to say thank you for acknowledging that telling our stories is hard. But I also want to say that, you know, being able to do this is so healing. When you see that the worst parts of your life, and the worst things that you have been through, and all your pain might be able to be used for some kind of good, it is a very healing experience. So thank you.

Yes, in terms of foster parents needing financial literacy, I haven't seen that or necessarily experienced that, so that is something that is needed. But what I—you know, we know that 30 to 50 percent of foster parents quit within the first year. It is so hard to retain foster parents, and that is because of all of the things that are required of us.

I love being a foster parent, but it is actually the—probably the most frustrating thing that I have ever done, and it has actually completely changed my perspective of my foster parents. I think I

used to be a lot harder on them, and now I realize that I think they did actually quite well with what they had, considering everything that they—all the red tape and all the requirements that they had to meet. And I know those things are for liability and accountability, and they very much are needed, but I say all this because I think when we are talking about what do we need to support youth as they age out of care, we need to meet them, again, before they are aging out, and we need more foster parents. My husband and I have to say no to a foster placement every week—

Mr. FERGUSON. Thank you, Mrs. Petersen.

Ms. PETERSEN. And it is devastating, but we can't do it all.

Mr. FERGUSON. Thank you. I am going to—if I could, because I have got a—I want to move on to another question.

Ms. HILTON, I have—you know, it is—something that concerns me greatly is the mental health of our youth in general, but it is also very challenging in the foster care program. And there seems to be a major problem with just over-prescribing psychotropic drugs, and just saying, here is a handful of pills. Can you share with the committee your experience with that?

And do you think that that is a problem in our system today, and what you think you should do to correct that, or what we should do to correct that?

Ms. HILTON. I think it is a huge problem. Before I went to Provo Canyon School, the only medication I had ever taken was a Tylenol or an Advil for a headache. I had never been on any medications that they prescribed, which weren't even prescribed by a doctor.

And every morning, every lunch, every afternoon they would give us all a cup full of pills. I had no idea what they were. All I know is that I would feel dizzy, I would feel—my memory would be gone. It was almost like they were just trying to make everyone like zombies. It was just very concerning. And I think that they are definitely abusing that power, where they are just giving children medication that they don't need. And I think that is something that really needs to be looked into because I think—

Mr. FERGUSON. Well, one answer—and Mr. Chairman, if I—if you could indulge me here for just a few seconds, we have a—one of our colleagues, Mrs. Steel, has a bill that addresses this on foster youth mental health support, and it really does try to address some of these standards. So I would like to commend my colleague from California for taking up—taking this up, and we need to be supportive of her bill.

Again, thank you all for being here. Thank you for telling the stories and helping us be better at what we do up here.

I yield back, Mr. Chairman. Thank you.

Ms. PETERSEN. Thank you.

Mr. SMITH of Nebraska. Thank you, Dr. Ferguson. And pursuant to committee practice, we will now move to two to one questioning. So I will recognize Mr. Smucker, followed by Ms. Chu.

Mr. SMUCKER. Thank you, Mr. Chairman. I appreciate the chairman holding this hearing today.

And I would like to, as others have mentioned, thank the witnesses for traveling here to share your stories and share your experiences with the child welfare system. And I will say again what

others have said. We can all agree that one of the most meaningful aspects of our work in this committee is the opportunity to work on legislation to help more kids in the child welfare system.

The changes that we are talking about today won't just impact those who have been directly involved with Child Protective Services, but also any child, family, or individual that is in danger of entering the child welfare system. Over the years we have reformed our programs to engage with families before children need to be removed from their homes, and we all know that leads to much better outcomes all around.

Certainly, every child deserves a safe and loving home, and here on this committee we have an opportunity to advance legislation that can help make this a reality for more children.

Mrs. Petersen, I want to talk briefly about a bill that I have introduced. We know that kinship care providers play an essential role in caring for children, and they do so many times without access to resources that they wish they had. The bill that I have introduced that hopefully gets included in a package we do here, the Empowering Kinship Caregivers and Youth Act, clarifies that kinship caregivers are eligible for services under Title IV-B, and I just wonder if you could talk a little bit about that.

I know you have had access to services and supports and maybe supports that you didn't receive, and just talk about the importance of kinship care being eligible for coverage.

Ms. PETERSEN. Yes, that bill sounds like a very important one. Thank you for working on that.

Our family has never received any resources or assistance from the government for the kinship care that we provide. When my sibling started living with us, we tried to reach out to human services to officially become kinship caregivers and get access to those resources. But we weren't considered a priority because they knew my sibling was safe and already living with us. We never received a response, a court date, not a paper to sign, and our other options would be to hire a lawyer to serve papers to get their attention. But I wasn't willing to give human services any more of my time because I gave them enough of that as a youth.

My husband and I were in our mid-twenties when we took in my sibling, still very much establishing our lives, and it wasn't easy, especially in the beginning, but we knew we would make it work, like many kinship care providers do, no matter what. My sibling did graduate high school this year, and will be headed to college in the fall.

And the greatest injustice to us not receiving those services from the county and being ignored is that—it was actually to my sibling because, though she has lived with us for years now, if the county would have documented her in our care the way they should have, she would be receiving financial assistance with college. But because we were ignored, my sibling does not qualify for the financial help that she should be receiving for college, and we didn't realize that would be a consequence that she would face when we didn't put up a fight.

Mr. SMUCKER. Thank you. I am going to go to one additional question for Mr. Geen.

I have heard—and I want to get your thoughts on this—certainly, we want accountability for child welfare agencies in our communities and states. But I have also heard the paperwork, the federal reporting requirements are burdensome, they are tedious. And I have introduced another bill which would call for an evaluation of the requirements and reporting for the Title IV–B dollars with a goal of reducing that burden by at least 15 percent.

If we were successful—first, do you agree that that is an issue?

And then, if we were successful in reducing paperwork by that amount, how could they use that time to better support the individuals in our communities?

Mr. GEEN. So the administrative burden you talk about is a theme that we heard a lot of during our landscape assessment. And that burden not only affects workers' ability to spend time with families, it affects their morale and the likelihood of them turning over.

But the biggest complaint we heard about the administrative burden is that it is largely unrelated to accountability. So much of what we collect are process measures that feel like checking boxes, rather than truly holding agencies accountable for outcomes. So there certainly seems like there is an opportunity to both reduce administrative burden and focus on accountability more, recognizing that our data systems right now don't do a good job of always tracking the outcomes that we experience.

Mr. SMUCKER. Thank you for that answer. I hope we can take this opportunity to streamline that, and ensure that the accountability still exists but we can eliminate some of those tedious requirements. Thank you.

Thank you, Mr. Chairman.

Chairman SMITH [presiding]. Thank you.

Ms. Chu.

Ms. CHU. Ms. Hilton, I want to thank you for using your high visibility to give voice to the voiceless. By doing that you are going to help so many thousands of youth that would otherwise be forgotten. And I was very moved by your testimony. I could not believe the horrific conditions that you faced in those facilities.

And I want to thank you for saying that you believe that Title IV–B should be reauthorized. There is a debate in this committee on whether the funding should just remain the same, or whether it should be increased. It has remained flat since 2006. So people who are using Title IV–B have to really scrape by. So what do you think about the funding of Title IV–B? Should it be increased so that we can make a difference in preventing children and families from coming into contact with the child welfare system?

Ms. HILTON. Thank you so much. And yes, I do believe that they should be increased, and I think that community-based supports and resources are vitally needed, which is why we should support the Title IV–B reauthorization.

And we know that community-based prevention support helps families before they even come in contact with the child welfare system, and that will keep children out of facilities. So yes.

Ms. CHU. Thank you for that.

Ms. HILTON. Thank you.

Ms. CHU. Mr. Geen, I wanted to have you make some comments about the Indian Child Welfare Act, or what we call ICWA. This requires Native American children to be placed first with extended family and then with tribes so that they don't lose their cultural identity. And that was passed in 1973. In 1994 Congress added a Title IV-B plan requirement, directing states to develop an ICWA implementation plan in consultation with the tribes.

But 30 years later, native children continue to be disproportionately represented in the foster care system, with higher rates of injury and longer lengths of stay. In fact, in California they are 4.5 times more likely to enter care than their counterparts, despite being a smaller portion of the population. And that is because, despite the requirement under Title IV-B, federal oversight of states' compliance with this requirement is unclear and not always exercised. And that is why I have introduced a bipartisan bill, the Strengthening Tribal Families Act, along with Representative Don Bacon, to direct HHS to assess how state child welfare agencies are implementing federal protections for tribal children, as laid out in Title IV-B.

Can you talk about how this would help states and improve outcomes for tribal children and families?

Mr. GEEN. So I don't claim to be a tribal expert, but I will say over the past year and a half we looked at legislation in all 50 states and what was introduced, and it was striking to see how many states have introduced legislation protecting and strengthening the Indian Child Welfare Act bills on both Republican and Democratic dockets.

There is no doubt that, if you talk to tribes, they will talk about the need to strengthen ICWA. The field generally looks at ICWA as best practice not just for Indian children, but for all children. And so it is certainly something that is needed.

Ms. CHU. And I would like to go back to Title IV-B, Mr. Geen. There are improvements that could be made in this reauthorization. In fact, I have got a couple of bills, the Helping Hands for Families Act, which I am sponsoring with Congressmember Carol Miller, which would allow states to use Title IV-B to access online portals that connect families with local resources, as well as the Court Improvement Program Enhancement Act, which I am co-leading with Congressmember Blake Moore, which would provide additional resources to allow court proceedings to take place virtually.

And there are also problems with workers and burnout. There is, in fact, a tremendous burnout problem with workers, which also could be addressed with Title IV-B. Could you address these issues?

Mr. GEEN. Let me tackle the court improvement first, and that is that I see the court improvement program as one of the real successes of the Title IV-B program. IV-B provides both the flexibility that states need, but also it provides the opportunity for Congress to have set-asides for key issues that have been under-invested in. And if you take a look at the success of the court improvement program, you see how it is impacting the quality of hearings every day in the United States.

The courts certainly learned during the COVID crisis about remote hearings, and yet they are also not a panacea. We do need to make sure that, if we use those type of remote hearings, they are done in a quality way, and it requires the training of judges and other court personnel to make sure that children and parents' rights are protected.

Ms. CHU. Thank you, I yield back.

Chairman SMITH. Mr. Estes is recognized.

Mr. ESTES. Well, thank you, Mr. Chairman, and thank you to all our witnesses for being here today and for all the work that you do to help youth and their opportunity that they have.

And thank you, Ms. Hilton, for all of your work with the Stop Institutional Child Abuse Act.

And it is great for us in this hearing today to be able to talk about the committee's continuing effort to build a society and a culture that values life. These hearings—and through legislation we are uncovering ways we, as a society, can better support children, parents, and families.

I want to start by sharing a little bit of a story about a family in my 4th congressional district in Kansas. My constituent, Bruce, is a loving grandfather who happens to be blind. When Bruce's son lost custody of his children, Bruce stepped in to care for his grandchild—or grandchildren. These children became some of the more than 2.5 million children across the country who are cared for by family members and grandparents, which is a great advantage. Placing children in kinship care reduces trauma, and provides a higher chance of reunification with parents.

As Bruce sought custody with his grandchildren, however, he encountered significant difficulties, one due to his age and—but also his blindness, even though he was well equipped to lovingly care for his grandchildren. These unnecessary hurdles to kinship care—that the kinship care process added to the uncertainty of Bruce grandchildren—Bruce's grandchildren were already dealing with. Thankfully, in the end, Bruce was able to gain custody of his children.

I am glad Bruce and his family reached this positive outcome, but I know about other grandparents or aunts and uncles or siblings in similar situation for whom things have turned out differently, those who didn't know how to advocate for themselves and their young, vulnerable family members in order to help keep them and help care for their family. Bruce's story underscores the burdens to kinship care that we should examine and correct, and that is why we are here today with our panel of witnesses to discuss how we can improve the kinship care process.

When a child is no longer able to be in the care of his or her parents, every effort should be made to keep the child within the family, assuming those relatives are well disposed to care for the children. Mrs. Petersen, I know you have direct experience with the foster care children, and you have covered a lot of things today, as well as dealing with the kinship care process. Can you describe the challenges you faced in going through the kinship care process?

Ms. PETERSEN. Yes. As I stated before, just being ignored, not having access to resources, not being made a priority because they knew my sister was safe. It definitely has been an uphill battle to

advocate for our family but, more importantly, to advocate for her. I do think that kinship families are often—kinship providers are looked at as lower priority than foster parents and adoptive parents, and that can be really challenging.

Mr. ESTES. Well, and thank you for sharing your personal story with us today and all the details.

And it is an issue that in my home state of Kansas we have run into a lot over the last several years in terms of how do we make sure that we do the best job that we can for the children in our care.

I mean, I know at times different barriers come from a good place, wanting to make sure that we protect and ensure the well-being of children, but too often they end up causing more problems and lead to adverse outcomes. Mr. Geen, how do we strike that balance between ensuring the safety and well-being of children without putting in place unnecessary barriers for things like kinship care when this is the best option for the children?

Mr. GEEN. It is the best option, and I do think research clearly shows that children are safer in kinship care, and their well-being is better in kinship care.

The question is the licensing process. Fortunately, HHS has new regulations out that give states flexibility in designing kin-specific licensing standards, and hopefully states will take advantage of that.

When there is a concern that a kin can't care for a child, as in your example, what can be put into the home to make it safe? Rather than just say it is not acceptable, work with the kinship caregiver. If they don't have the right space or don't have the right equipment, then provide that, rather than cancel them out as an option.

Mr. ESTES. Yes, and thank you. And thank you for all the panelists.

Ms. Mansfield, did you want to add to that?

Ms. MANSFIELD. Would you mind if I added something to that?

Mr. ESTES. Yes, please. Go ahead.

Ms. MANSFIELD. I just wanted to add that one of the challenges that I often see is—for the families that we work with and for our own staff, which is at the Women's Justice Institute, mainly formerly incarcerated—that criminal records can be a huge issue, that somebody—a grandparent might have had a conviction 20, 30 years ago, and now they are not allowed to be a kinship placement for their grandchildren, or somebody for their sibling, something completely unrelated to the children. We put these barriers in the way, and then the kinship caregivers don't seek to get assistance because they are scared the children will be removed from them because of these unnecessary barriers, looking at somebody's record instead of their ability to care for a child.

Mr. ESTES. Yes, and thank you all for what you have covered. You covered a wide variety of issues that deal with how do we best care for children.

And with that I yield back, Mr. Chairman.

Chairman SMITH. Thank you.

Mrs. Miller.

Mrs. MILLER. Thank you, Chairman Smith.

And I want to thank all four of you, as we say at home, all y'all. Your stories, your information, and your feedback is so important to us to help—I am not sure we are solving this as cracking open such a huge, huge issue.

I am a wife, a mother, and a grandmother, which is really cool. But my boys were in lots and lots of sports, and I never knew how many feet would be underneath my table at dinner. Many, many nights there were a lot of extra feet. I had a couple rules. One was no hat on your head, you had to wear a shirt, and you had to say grace. And so I have always had an empathy for children who may have just been hungry, but the social welfare that we have for our kids, the system, is so important to me, and I am encouraged that our committee is willing to take the necessary steps to discuss what needs to happen.

Many children entering the child welfare system have an urgent material need that can be addressed without direct government intervention. In West Virginia, where I am from, 53 percent of our foster children are cared for by relatives, often older grandparents like me, who are retired, and they struggle to afford unexpected expenses, things like car seats, you know, formula, things that haven't been in their venue for a while. And given the rural nature of my state, accessing so many of these much-needed resources can be very challenging.

I introduced H.R. 476, the Helping Hands Family Act, with Representative Chu, as she mentioned earlier, to be able to use the electronic services and tools that connect families to the essential services that support them online. Mr. Geen, do you believe that providing more flexibility in how Title IV-B services are delivered could better serve the families, particularly in rural areas like West Virginia?

Mr. GEEN. So there is no doubt in my mind that the type of coordination and navigation you are talking about is essential, essential for the birth parents, essential for the kinship caregivers.

My understanding or my read of Title IV-B would say that it is already something that is allowable. So clarifying that with HHS might be a first step.

Mrs. MILLER. Thank you for that. I think flexibility within Title IV-B is hugely important.

Another policy that I have worked on with my colleagues would be providing additional flexibility within the Court Improvement Program. The Court Improvement Program helps courts conduct hearings on child abuse and neglect in a timely manner, and provides training to judges with trauma-informed care. This will ensure that children who enter these courts have the support that they so desperately need.

Along with Representatives Blake and Chu, I introduced the Court Improvement Program Enhancement Act, and it will allow CIP funds to be used towards improving technology support for remote hearings, and allow state courts to use the CIP funds to improve parent, family, and youth engagement in their child welfare proceedings.

Once again, Mr. Geen, can you speak to the importance of ensuring that everyone involved, like in child welfare proceedings, is ap-

propriately trained, and how more remote hearing flexibilities would allow for a better overall outcome?

Mr. GEEN. Yes, I think that child welfare system as a whole learned a lot during COVID. The courts, absolutely. And many courts experimented with remote hearings. And my reading of the experience is that it was mixed. They definitely appreciated the opportunity, and it is a vital component moving forward, but it is not a catch-all. It is not a silver bullet. Just because we have a remote hearing doesn't make it a high-quality hearing.

And so we need to keep a close eye on what those hearings look like, and make sure that everyone involved is trained to use the technology in a way that we are treating families fairly. But as an option, absolutely.

Mrs. MILLER. Thank you so much.

I would like to turn to you, Ms. Hilton, now. First and foremost, thank you for using your platform and personal story to bring attention to such troubling experiences that so many youth are actually facing in our foster and residential treatment homes. It is critical that we keep the well-being of children at the forefront of all these discussions, and you have been tireless in turning your personal trauma into advocacy on the behalf of troubled youth.

And we hear a lot about the increase in mental health disorders in youth, including disorders like ADHD, depression, anxiety, suicide. In my home state of West Virginia, we also struggle with high rates of substance disorder children, and have been fighting the opioid epidemic for years and years and years. And far too many young children are struggling with mental health and unable to get the support they need. Parents are often at a loss as to how to help their children, and they don't really know how to access.

How do you think we can improve the support we give to teens and youth to help them cope, and to have a healthy transition into adulthood, especially when you are talking about foster youth who have already had so much trauma?

Ms. HILTON. Well, thank you so much, and I am grateful that we are having this discussion to figure out what kids need.

I think that the first step is asking the youth. We should prioritize lived experience voices to ensure that we truly understand what could help them, and then figure out how to do that.

I believe youth need access to mental health in their communities, mentorship, and community. We do have a mental health crisis for our kids, and it scares me for my own children. I am confident that we can bolster support for children and their parents in the community, and will prevent trauma by removing children and placing them in facilities, as no child should spend their childhood in a facility.

Mrs. MILLER. Thank you so much for your testimony.

Ms. HILTON. Thank you.

Mrs. MILLER. I yield back.

Chairman SMITH. Thank you.

Ms. Moore.

Ms. MOORE of Wisconsin. Well, you all look a lot different down here than you did up there. [Laughter.]

Thank you so very, very much.

Let me start out by just thanking all of the people who are foster parents, including Ms. Hope Petersen here, all the people who make sacrifices to try to prevent abuse and neglect of our children, and just to be grateful that we have a safety net of some type.

That being said, I just also want to just introduce myself further. I am the chair of the Congressional Caucus on Foster Youth, and I am so happy to learn that there are numbers of Members who want to join and participate and want to get the education from foster youth. It was a real epiphany for me when I had my first foster youth, and they did turn us on to the notion that we have to dig into mental health, that we need navigators as people age out. So I think that has really been impactful.

And they, you know, they come on the Hill. And while they are foster kids, for one day they become the teachers and professors.

That being said, I have really appreciated all four of you for your testimony today, and we have talked a whole lot about prevention, about focusing on family unification, avoiding congregate care. I guess the thing that concerns me the most is that, as I sort of look at—you know, I am just sort of figuring out how much we spend on this, maybe something between the states and the federal government, over \$40 billion on foster care and foster programs. And still, that turns out to not be enough in certain categories.

And one of the things that I am observing—and maybe Mr. Geen and Ms. Mansfield, you can help me walk through it—I will—just as an example of the federal child welfare funding by purpose, you know, I am looking at \$11 billion that the Congressional Research Service prepared this memo, and that is not the state match, this is the federal funding, you know, almost \$5 billion spent on foster care free money, another almost \$5 billion on adoption and guardianship assistance. And so when we—I can't see that well—so when we start talking about prevention services, we are talking about \$182 million, or Chafee services for older and former foster youth to help them walk through, help them transition, we are still only talking about \$187 million.

So my question to the two of you is, if we are aspirational about wanting to prevent congregate care, to prevent kids from getting in foster care in the first place, how do we dismantle, as it were, the huge amounts of money that is being spent to have this system which involves taking kids away from parents?

Mr. Geen, yes.

Mr. GEEN. So I think this is an issue that our field has been struggling with for years. There is a recognition that we are spending far too much money after the fact, and not enough before. I will provide example of Wendy's Wonderful Kids, which I have mentioned before.

By providing some upfront investment to increase the capacity of a public agency, the foundation dollars allows the state to move from the status quo to best practice. And then over time, the state then takes up that responsibility themselves without the private dollars. There needs to be a way for states to have the flexibility to turn their system around. If so much money is focused on the foster care and adoption side and very little on prevention, where are the resources for them to make that shift?

I will note that the Bipartisan Policy Center has formed a work group focused on financing and accountability to tackle problems exactly like this.

Ms. MOORE of Wisconsin. Ms. Mansfield.

Ms. MANSFIELD. Yes, I would echo that, but I would also just say if we spent the same amount that we spent in stipends and support for foster care families, especially for non-relative families to invest in families before involvement or in intact family services, we would prevent so much. And instead, there is this judgment given that we can't fund families to keep them together. But that really would be a way to prevent so much.

Ms. MOORE of Wisconsin. Amen belongs right there. Just let me say something to Mrs. Hope Petersen and to Ms. Hilton.

Ms. Hilton, I met you before in Katherine Clark's office, and I have had an epiphany about congregate care for people who are not poor. We are talking basically today about poor, poor, poor children, and you were not poor. But, you know, when there is a fracture or a break in the family, predators are easily—easy to get in when there is a breakdown, because they have the authority. And I am so sorry that this has happened to you, and I empathize with you. And, you know, I am just delighted that you are using your voice.

Ms. Tori, you were in 12 foster homes. I mean, it is a miracle, a sociological miracle you are. And I just don't think you should have depended on good luck, somebody just happened to come by and help you. Thank God that they were. But, I mean, that is part of the breakdown of our system, that we just have to—excuse me for using your name—we just have to hope that somebody is going to find you and take care of you. We can't—our kids deserve something better than hope, you know.

And so with that, Mr. Chairman, I almost made it to ranking member today. But that being said, I yield back.

Chairman SMITH. You spoke the length of a ranking member, so thank you, Ms. Moore.

Mr. Kustoff.

Mr. KUSTOFF. Thank you, Mr. Chairman, and thank you to the witnesses for appearing today.

Ms. Hilton, if I could to you, could you talk more about your bill, the Stop Institutional Child Abuse Act, and maybe specifically why you think it will make meaningful reforms to congregate care?

Ms. HILTON. The most important thing about the Stop Institutional Child Abuse Act is about transparency and accountability, and people need to know what is happening behind closed doors.

Mr. KUSTOFF. And you believe, if it passes, if the bill passes, that it will achieve that means to an end?

Ms. HILTON. I think it is the first steps to it. I just think it is so important for people to know that—people to be held accountable for what they are doing, and for there to be transparency. These are our children. This is our future. And there needs to be checks and balances on what is happening to these, the most vulnerable people in the world.

Mr. KUSTOFF. Thank you. Thank you for sharing your story today.

Ms. HILTON. Thank you.

Mr. KUSTOFF. Mrs. Petersen, thank you also for sharing your story.

Mr. Geen, if I could with you, we know in the past few years that the rate of congregate care has declined. Some of this is due to the Family First Act. Now, despite declines, there is a national shortage of foster homes. In your opinion, how do we balance the two?

Mr. GEEN. There has been a steady decline in the number of children in group settings, which is a good thing. We know that far too many children are placed in residential settings, not because that is the type of therapeutic intervention they need, but it is the only place to place a child.

And so it is not a question of balancing, it is a question of doing right by children. Children need to be in families. If they need an intervention to allow them to be successful in a family, then residential treatment that is high-quality, that is therapeutic, that involves the family is an option.

We are facing right now, as you note, a crisis in finding enough places. I think that is twofold. One is we don't invest in enough with kinship care, as we have mentioned. And two, we have a foster parent retention problem. I don't call it a recruitment problem because the data clearly show there are lots of people interested in becoming foster parents.

One person has talked about the sacrifice of foster parents. They don't see it as a foster parent—as a sacrifice. They see it as a joy. They get frustrated during their time as foster parents, and tend to quit. And it is not about money. Frankly, it is largely about the support they get. And I have listened to foster parents talk to me about how they gave up on themselves, not the children, that they would see children and they thought, "I should be doing a better job because so and so isn't doing well," and what they really needed was a dedicated worker to listen to them on a Friday night cry because their child that they were caring for wasn't doing as well as they wanted that child to do. They didn't want to give up on foster parenting. And so we do need to do a much better job on retaining the foster parents we have.

Mr. KUSTOFF. Thank you very much. Thank you for everybody's testimony.

And Mr. Chairman, I will yield back my time.

Chairman SMITH. Thank you.

Mr. Fitzpatrick.

Mr. FITZPATRICK. Thank you, Chairman Smith.

We all know our children represent roughly 22 percent of our population, but 100 percent of our future. I thank you all for being here today to be a voice for them.

It is no mystery that our nation is facing critical shortages of foster homes. This has led to children, as we have heard today, in dangerous situations, often sleeping in unsafe places, including hotel rooms and caseworker offices. And as we have discussed at this hearing, any youth treatment facility and congregate care program receiving Federal child welfare funds must be meeting the standards of a qualified residential treatment program.

In addition to concerns of shortages of care options, we must grapple with findings and finding safe and secure placements for children with severe trauma and behavioral issues. No child should

fear sleeping in a hotel room or in an office space. We have a role to play in ensuring that our kids are not missing crucial components of their development.

I want to start with Mrs. Petersen.

In your testimony you mentioned that programs like Title IV-B provide crucial support to both children and their families. You have experienced this, both as a foster child yourself in the foster care system, and now caring for children in the foster care system. How can programs like Title IV-B be improved to provide the services to help families avoid the foster care system?

Ms. PETERSEN. What we have witnessed, especially—we are from a rural area—is that not every caseworker and county believes and understands that children remaining with their biological family, if safe and if possible, is the best option. It can be really easy to villainize biological parents.

And so, even when it is possible, they will remove the child. My mom, as an adult, despite what she did to me, I believe deserved compassion because, as—I believe you said this, but often times it is the parents that have experienced abuse or that are being abused. And so if we can treat them with the same care that we would treat the child, and give them the same resources that we would a child in terms of therapy and help and care, children could often remain with their biological families.

Mr. FITZPATRICK. And Ms. Hilton, I want to talk about community-based organizations. Oftentimes, unfortunately, the federal government, the state government misses these signs and signals that they should be catching. And oftentimes, at the community level, groups are able to address specific issues that otherwise are missed by our government agencies.

As a leading advocate in this space, as you have been—and thank you for talking to our Problem Solvers Caucus last year, by the way, on your bill—how can community organizations and stakeholders be emboldened to be larger voices in addressing problems in the child welfare system and work with the federal government to implement change?

Ms. HILTON. I just want to first thank you for being a sponsor of the Stop Institutional Child Abuse Act. I really appreciate you.

And the community organizations that are on the ground working with impacted individuals, they are so important, and we should work with them to ensure that we get the policies right.

Mr. FITZPATRICK. Thank you, Ms. Hilton.

Lastly, Mr. Geen, we are currently facing a shortage of foster homes and youth treatment facilities not meeting appropriate Federal standards. Can you speak to the issue of the shortage itself, and the impact on our foster youth and children, specifically those kids with behavioral issues?

Mr. GEEN. So clearly, children sleeping in hospitals, hotels, or emergency rooms for weeks on end is not right. It is not right. And yet, let me be very clear. The answer is not more residential beds. We need to meet the needs of children in family-based settings. That may include therapeutic foster homes, it may include additional training for foster parents in meeting the mental health needs of children, but it cannot mean placing a child who doesn't need that level of restriction in that type of facility.

Mr. FITZPATRICK. Thank you, Mr. Geen, and thank you, all of you, for being a voice for the voiceless. I do appreciate it. And—

Ms. MANSFIELD. Could I just add one thing?

Mr. FITZPATRICK. Sure.

Ms. MANSFIELD. I just wanted to add that I have worked with many families where the parents had to make the choice—because they could not afford the appropriate level of care for their child—to reach out and access the child welfare system to say, “We can no longer care for our child. We can’t afford the treatment that they need.”

And so there have been some states which have taken the action of making it that you do not have to place a child in foster care for a family to use the resources of foster care, and that then allows for more children to stay while they are accessing those resources in their biological home.

Mr. FITZPATRICK. Thank you for adding that, Ms. Mansfield. We appreciate it.

Mr. Chairman, I yield back.

Ms. VAN DUYNE [presiding]. The chair now recognizes the gentlelady from California, Representative Sánchez, for five minutes.

Ms. SÁNCHEZ. Thank you. And I want to, first and foremost, thank all of our panelists for your testimony today.

And Ms. Hilton, when I met you last year I was impressed by your courage in speaking out in the face of the horrific circumstances that you experienced, and the fact that you are using your platform to be a voice for those—for some of those who are the most vulnerable in our society.

As the mom to a teenager, I am horrified to hear of the abuse that many children go through in the name of “protecting them,” so I do appreciate you taking the time today in emphasizing, in particular, the importance of reauthorizing the Title IV–B program, which, I have to say, has not seen an increase in funding since 2006. So reauthorizing Title IV–B is a bipartisan effort. You have heard there is plenty of support on this dais for that. But even modest improvements to this program can make a huge difference for at-risk youth, and surely we can all agree here that we need to do better by the children who are put in our care.

But doing better by these kids isn’t free. We need to increase the funding towards safe and quality programs that ensure children’s safety, and we need to be funding programs that stop children from entering foster care in the first place. So things like investing in community-based prevention and protection services, and ways in which we can help keep kids with their parents or their extended family members or even just within their own communities, I think, is really critical.

I just want to know—Ms. Hilton, I will start with you—would you agree that providing increased funding for programs that help keep kids out of foster care and ensure that they can remain with their families would be a better benefit to these kids?

Ms. HILTON. Yes, I do agree with that. I believe that we need to keep children safe in their own homes and with their families as much as possible, and I believe that we should reauthorize Title

IV-B to provide necessary funding to help bolster community resources and to help keep families together.

Ms. SANCHEZ. Is there anybody on the dais that doesn't think that an increase in funding would be helpful?

Mr. GEEN. I will just note that you were being kind in saying that the funding level has remained the same, because after inflation, as I think I mentioned in my written testimony, it has a 14 percent less buying power than it did back then.

Ms. SANCHEZ. Correct, you are correct. So I think you are all in agreement that, not only is it critical to renew the program, but to really put our money where our mouth is when it comes to child well-being.

Ms. Mansfield, I want to come to you because you mentioned the huge role that poverty plays in the removal of children from their families, and I think you stated that 75 percent of the children who are in the foster care system, due to a finding of neglect, very highly correlates to poverty. Is that right?

Ms. MANSFIELD. Yes, to poverty as well as to substance use disorders and drug dependencies.

Ms. SANCHEZ. So, you know, would increasing funding to things like, you know, SNAP, the Supplemental Nutrition Assistance Program, or WIC, the Women, Infants, and Children nutritional assistance programs, or even programs like Head Start, would those go—you know, do anything in terms of reducing the numbers of kids from poor backgrounds that end up in the system?

Ms. MANSFIELD. Absolutely, as well as increasing funds for child care so that people can actually work and have safe care for their children, and especially when something happens and they might have to miss work and not to have to rely on people who then might put them in danger of the child welfare system becoming involved, as well as programs like TANF.

Ms. SANCHEZ. Amen, sister. As a working mom, I totally feel that.

It is just interesting to me that we can all agree that keeping kids out of the foster system is the better result, and yet we are not willing to make the investments in the programs that are going to keep those kids out of the foster care system.

And before I—my time is expired, I would be remiss in failing to mention the huge disparities that face children in the foster care system, because we see Black and Latino children heavily over-represented in the foster care system. And in fact, in—over the past five years, the rate of Latino children in foster care in this country has risen by more than five percent. So, you know, we need to look at the fact that these issues don't happen in a vacuum. The racial disparities in our justice system, our foster care system, and our economy, they are all interconnected, and they sort of create this perfect storm, which causes parents who can't economically support their kids to have to surrender them into the system.

I really believe in early interventions, again, to try to keep kids from ending up in the foster care system in the first place.

And I want to thank the chairman for her indulgence, and I yield back.

Ms. VAN DUYNE. Thank you. The chair now recognizes the gentleman from Florida, Greg Steube.

Mr. STEUBE. Thank you, Madam Chair.

Ms. Hilton, thank you for sharing your experience with us today. Your testimony is extremely powerful and moving. What happened to you and countless other children is unacceptable, and is a moral failing in our country. And we must do better.

The Ways and Means Committee has jurisdiction over child welfare programs, and it is our responsibility to ensure that all children in care receive the highest quality care, and that taxpayer dollars do not support abusive practices. The 2022 GAO report on residential facilities highlighted the need for improved information sharing, data collection, and best practices between states and residential treatment facilities.

We have heard horrific accounts from survivors about their time in congregate care facilities across the country. At the same time, we know that there are many facilities in many of our districts that do crucial work that provide necessary services. I hope that we can work together to both root out abuse and better enhance youth facilities that do good work.

However, it is clear better federal guidance and information sharing is needed to root out abuse and keep America's youth safe. Congress has the power to act, and we must exercise our authority to ensure better oversight and accountability of residential youth programs receiving Federal funding.

Your advocacy has brought these issues to the forefront, and that is why I have introduced a bipartisan bill with Mr. Panetta of California. Our bill, H.R. 8817, aims to increase transparency for residential treatment facilities by developing guidance on best practices for Federal agencies and states. The guidance will focus on collecting data and sharing information related to youth well-being and residential treatment facilities, improving data on maltreatment, and enhancing oversight of youth residential programs that receive federal funding.

My first question, Ms. Hilton, is, do you think it is important that federal agencies work with each other to address these issues?

Ms. HILTON. Thank you. It is so great to see you again, and thank you for your dedication on this issue by introducing that bill. All the survivors and I are so grateful to you for taking action on this issue.

And I believe that interagency collaboration is very important. These facilities treat foster youth, kids in the juvenile justice system, youth with disabilities, and youth with mental health issues. I think all the agencies must work together to address the abuse and neglect that is happening, and we can't fix the issue if we don't look at it as a whole.

Mr. STEUBE. I know you have worked with state legislatures to pass legislation for enhanced oversight of youth residential facilities. Can you share any examples of states that have implemented particularly effective reforms?

Ms. HILTON. I know, with Utah, that we have made a lot of progress with children being able to speak to their families without someone sitting right next to them. Also with medical restraints, that is another issue that we have been—resolved almost.

And yes, I think it is just important that we continue using our voices so that we can pass this bill.

Mr. STEUBE. Mrs. Petersen, would you like to add to that, other states where you have seen reforms that have made effective changes?

Ms. PETERSEN. I am not familiar with any necessary policies, but I do believe that it is crucial that children are able to talk to parents, able to talk to caseworkers about the situation in their homes, what their foster parents are doing, what is happening in the residential facility that they are living in, confidentiality, and alone so that they can tell them if anything is happening that is dangerous.

Mr. STEUBE. In the time I have remaining, Mr. Geen, is there anything you would like to add?

Mr. GEEN. So when you talk about accountability, I would like to point out the data that we tend to lack on the children who experience group settings. One is, who are these children? What are the conditions that led them to these facilities in the first place? We have this assumption that these children have severe mental health needs, and yet research shows that a large percent of them have no diagnosis whatsoever. We tend to think of kids going into group settings after bouncing around from foster home to foster home. Most children who spend time in a group setting do so their first night in foster care. They were never given the chance to succeed in a family.

We know that high-quality residential care can usually be delivered within 90 days. Within 90 days is generally the intervention that needs to take place, and yet the average length of stay in many places is 9 months or more. So we need to understand what is actually happening, in addition to the horrific abuse that you have heard about from things. So it is all of that.

Mr. STEUBE. Thank you for all the witnesses that are here today. I yield back.

Ms. VAN DUYNE. The chair now recognizes the gentlelady from New York, Claudia Tenney.

Ms. TENNEY. Thank you, chairman, and also thank you to the ranking member.

And thank you to the witnesses for your really heartfelt testimony and your compassionate view of this really important issue. And it is long overdue that we update Title IV-B in order to combat the many problems our nation's child welfare system faces today, and you have highlighted a lot of those. I really appreciate that. You know, reauthorizing this program will allow us to prevent future abuse and neglect, ultimately mitigating the substantial long-term abuse that you have all outlined today, and the costs of current child welfare programs.

So I come from the state of New York, where there are over 25,000 children in foster care. Our child care system is plagued with all the problems this committee and all of you have outlined and aim to address in trying to fix this with this reauthorization. High costs, homelessness, challenges entering the workforce when they completed foster care, and a lack of legal representation, which is something that really hits home to me.

When I was a full-time practicing lawyer, I did a lot of pro bono work for the Legal Aid Society in upstate New York, and I worked with families for free on child custody, visitation, abuse and ne-

glect, adoption cases. It is very complex. I had an issue—a district and a region that was big cities, medium-sized cities, rural areas, suburban areas, and it was all the same issue coming up. And I really appreciate that.

And I wanted to first ask Mr. Geen, because I know this is what—I know it is a huge issue. The Administration of the Children and Families Division within HHS has recently finalized a rule allowing states to use their Title IV–E funds to cover legal fees for children and parents involved in these child welfare cases. In response to this rule I introduced H.R. 8810, the Ensuring Legal Representation for Child Welfare Act, which calls on the states to outline their approaches to providing legal representation and supporting families. The legislation aims to bolster state planning and encourage strategies that enhance family support.

Could you tell us how legal representation for children and parents, typically those with legal representation, tend to have better outcomes within the child welfare system and compare those to without?

And I know there are a lot of—I love the Legal Aid Society and our ability to give pro bono work, but sometimes it really just helps that we have people that are assigned to these cases.

Mr. GEEN. So I appreciate you raising the issue of legal representation.

In my opening remarks I talked a little bit about the polarizing rhetoric that sometimes gets in the way of bipartisan solutions. And this is an area where I hear some folks talking about parents' rights and other people talking about children's rights as if they are somehow in conflict. Yet people in the field know that both are required to move a case forward. And the earlier in the process that families are engaged with legal representation, the more likely it is that they are going to have successful outcomes and that the cases will move forward expeditiously.

Ms. TENNEY. Well, great. Thank you so much for that.

And I wanted to say thank you to Ms. Hilton for doing—being such a leader on this issue. And it was really a, you know, a unique opportunity for me to see you and how well you have done. And albeit it was a Zoom call, but with your adorable son, he was—you are just a loving mother. I have to say that this experience for you must have impacted you so greatly, as you have described.

But I want to—you talked a little bit with my colleague about how, you know, the bill provides transparency, and you mentioned that Utah is providing some reforms. But what specifically do you think we could do to add mental health and counseling support?

And how do we—how can we incorporate that in the bill, along with trying to meet the goals that are already in this reauthorization?

Ms. HILTON. Well, thank you. I enjoyed our Zoom call, and I love your jacket. The sparkles are amazing. [Laughter.]

Ms. TENNEY. I had a little bling here for today.

Ms. HILTON. Yes. I want to find out who made it later.

But I think the most important thing is they need access to therapy counseling, mentorship, and other community-based programs. And I think it is also important to not label these kids as troubled or bad. I think it makes these children feel like they aren't be-

lieved, and that is something that is important for them to not feel that way.

And yes, I think it is just about showing kindness and love and compassion and support, and giving these kids life skills that they can use in life because otherwise we are just setting them up to fail.

Ms. TENNEY. Did you have access to any of this therapy or anything when you were in your situation?

Ms. HILTON. No. And, you know, I was only sent there because I was getting bad grades, I was just ditching classes, I had—I have ADHD, and that was something that they weren't really talking about back then. So somebody recommended that I go to these schools. My parents had no idea. They just thought it was going to be a normal boarding school. And when I got there, there was no therapy. We would just constantly be torn down, abused, screamed at, yelled at, no education whatsoever. I learned nothing there except trauma.

Ms. TENNEY. I think my time has run out, but I want to say thank you to you and everyone. You all were terrific. I wish I could have answered—asked you all a question, but this is a great hearing, and I thank you to the chairman and I yield back.

Ms. HILTON. Thank you.

Ms. VAN DUYNE. The chairman now recognizes the gentlelady from Washington, Representative DelBene, for five minutes.

Ms. DELBENE. Thank you, Madam Chair, and thanks to all of our witnesses. Thank you for taking the time to join us.

In 2021 Democrats expanded the Child Tax Credit through the American Rescue Plan. And not only did this historic piece of legislation slash the U.S. poverty rate nearly in half in just six months, but it also enabled parents to pay for essentials like housing, groceries, daycare. And as a result, parents no longer had to fear losing their kids to the foster system due to economic adversity.

Ms. Hilton, I was—during your time advocating for children and families, I assume you have met former foster youth who have expressed that they would have been helped by economic support, or that that would have helped them avoid being in foster care. Is that true?

And if so, do you have any stories to share?

Ms. HILTON. Yes, definitely. I have talked to so many survivors, and that is what they needed. They needed to have that support, and they didn't. And it is just so heartbreaking to know that these kids didn't belong in these type of places just because they lost—maybe their parents did something that—they weren't able to take care of them, or one of their family members died and it just was—it was really heartbreaking just to always hear these stories of them not getting any support whatsoever, and then being these innocent kids who were then sent to these places and just being exposed to so many things that no child should ever have to witness. And if they would have just had that support, maybe things could have been different for them.

Ms. DELBENE. Thank you. Mr. Geen, from your experience with the Dave Thomas Foundation for Adoption—and I know Congresswoman Sánchez brought this up, too—how important is securing fi-

nancial stability for the well-being of families who are at risk of entering the foster care system?

Mr. GEEN. So there is a growing body—and I would call it probably a robust body now—of research that clearly shows that additional financial assistance reduces the risk of child maltreatment, and that is on the front end of the spectrum.

Once children are involved in the child welfare system, financial resources are needed to keep kids out of the system and also to make sure that they are cared for while they are in the system.

Ms. DELBENE. And what role do you think financial support measures like the Child Tax Credit play in preventing kids from entering foster care?

And what are the consequences when these kinds of benefits expire?

Mr. GEEN. So as I said, I think the research is now pretty clear that giving families additional financial assistance reduces maltreatment. If children aren't maltreated, they are much less likely to end up in the foster care system. So there is a direct link there.

Ms. DELBENE. Yes, we have lots of data on the expanded Child Tax Credit and the benefit.

And again, to kind of follow up to something Congresswoman Sánchez was saying, if we invest now and prevent kids from being in these situations, not only do we have better outcomes for our kids, we save a lot of money along the way, too. So we can make smart investments, help families, help kids have great outcomes, and be fiscally responsible at the same time.

You know, I am from the state of Washington, and the Washington State Department of Children, Youth, and Families relies on IV-B funding to provide critical community services, including family preservation, family reunification, family support, and adoption promotion support. Unfortunately, the allocated IV-B grant amounts are often exceeded by the need.

Mr. Geen, again, knowing that the intent of IV-B is to support more upfront and family-focused efforts, how can Congress ensure that states are receiving the necessary IV-B grants in the amounts that they require to be successful?

Mr. GEEN. So I think that we have to understand how Title IV-B interacts with other funding streams. IV-B is a very small amount of overall investment from the Federal Government.

I think part of the question is how can IV-B be a pipeline for the development of programs that then can be funded through the prevention side of Title IV-E. So we think—we need to think about these programs together.

Ms. DELBENE. Thank you. And as Congress looks to reauthorize IV-B, what barriers must Congress remove to help states and tribes take advantage of the preventative funding made available by the Family First Prevention Services Act?

Mr. GEEN. Yes. So as I mentioned, there is tremendous support for the concept, the vision of Family First. People want to believe in prevention, and they are running into real challenges.

The clearinghouse, for one. The definitions in the clearinghouse of what it means to be supported, well supported, promising, are not consistent with other rigorous databases. So we can't just take

programs that have already been proven to be successful in other databases, and then bring them into the clearinghouse.

You mentioned the tribes. A lot of the evaluation criteria within the IV-E prevention program are really not aligned with the way that tribes operate. So there is work to be done.

And then I have also mentioned the idea of how to provide concrete supports, getting to your financial assistance question. How can we provide that as part of IV-E? There is a concern among some that we don't want child welfare to become a parallel financial assistance system. We don't want there to be an incentive to come into child welfare. We are already concerned that too many families are being referred.

At the same time, there are some opportunities with limited—time-limited funds to keep families together and out of child welfare that doesn't serve as a magnet. So how can we use the IV-E prevention program for that?

Ms. DELBENE. Thank you.

I yield back, Madam Chair.

Ms. VAN DUYN. I will remind the members that there is a five minute time limit.

The chair now recognizes the gentleman from Oklahoma, Representative Hern.

Mr. HERN. I thank the chair, I thank the witnesses for being here today, and I really appreciate it very much.

I have spoken many times on this committee about the circumstances in my early life which led me to run for Congress. Growing up in the environment that I did, it took hard work, education, and the right opportunities for me to make it to this point in my life. I am not confident today, where we stand now, that a child growing up today in a similar or other uncertain circumstances would have the same opportunity or ability to achieve the American dream.

In 2021 in Oklahoma, over 7,000 children were in foster care, and over 13,000 children were the victims of maltreatment. The vast majority of these cases were neglect. Child welfare programs funded through Title IV-B give states the flexibility they need to help their vulnerable children, ideally before they have to enter the foster care system.

I appreciate the witnesses being here today to testify so that we can make the necessary changes to ensure we are ready and reaching as many children as possible.

One way to do this is by reducing the regulatory burden so that Title IV-B funding recipients can spend more time helping children and families, and less time waiting through the red tape. Right now, child welfare payments are made to tribes through two different funding allocations. One of these goes through states, rather than directly to the tribal grantees, an outdated and fragmented system that needs to be updated. In Oklahoma, the larger tribes are already paid directly, while the state must contract with each smaller tribe individually. This process involves determining which tribes are eligible, creating contracts with eligible tribes based on the scope of their child welfare work, facilitating tribes' claims, and issuing reimbursement.

The current process is slow and burdensome for both parties, while impacted children are waiting on much-needed help. This is why I am working on legislation to modernize this funding structure by allowing Indian tribes to be paid directly without decreasing funds to the states.

Mr. Geen, you mentioned in your testimony that there is a widespread support for reducing the administrative burden associated with Federal funding, particularly for tribes. Can you give us a little more information on that, and what you think about the administrative burden as it is impacting states' and tribes' ability to provide aid to impacted children?

Mr. GEEN. Absolutely. I have heard tribes tell me that they have declined federal resources because the amount of work it takes to get it is more than the value of the grants. If the administrative burden was related to ensuring that we understood how funds were being spent and holding states accountable, it would be one thing. But as I have mentioned before, to a large extent, many of the reporting requirements we have are nothing more than an exercise of checking a box.

And so we do need to talk about accountability. We do need to make sure that children are doing well, and that federal resources are being spent effectively. But the burden that we are placing on states is not achieving that, and it is coming at a cost of taking time away from doing the work that we have to do with children and families.

Mr. HERN. I appreciate that response. What do you see as the policy solution to alleviate the burden?

And do you think allowing direct funding to tribes would help mitigate this problem?

Mr. GEEN. I have certainly heard from tribal experts that that is something they are seeking, so I will defer to their knowledge and suggest that that seems to be in line with what they want.

Mr. HERN. So you don't have any direct solutions at this moment to share.

Mr. GEEN. Again, I would take a look at all of the reporting requirements and say, what is this getting us? Is this really assuring us that we are doing well by these children, or is it making us feel good that we are getting a report or something signed that suggests something is being done?

Mr. HERN. I appreciate your response. It makes me think of a particular Member of Congress that often asks us about the work we do here. Are we doing good or are we just feeling good? So I really appreciate it.

I yield back, thank you.

Ms. VAN DUYNE. The chair now recognizes the gentleman from Utah, Representative Moore, for five minutes.

Mr. MOORE of Utah. Thank you. Thank you to Chairman Smith and Ranking Member Neal for holding this important hearing today. Being able to come together to discuss Title IV-B funding is not always the most, you know, headline-capturing work that we do here, but it is crucial. This funding provides—it is an essential component providing funding to state courts to enhance their connection with child welfare systems, for effective case management, and supporting timely hearings for children in foster care.

Alongside Representative Miller and Representative Chu, I introduced the Bipartisan Court Improvement Program Enhancement Act to promote modernization efforts, including the utilization of technology for remote hearings and best practices.

Mr. Geen, I appreciate the work that you do and your connection to the Dave Thomas Foundation for Adoption. I got a chance to meet him my senior year in high school. My life was never the same after that. So thank you for working on such an important thing. And I assume, with your celebrity status and social media presence, that is why we are experiencing such a high volume of participation and audience today. [Laughter.]

Mr. MOORE of Utah. Can you elaborate—back to this court improvement program—why it is such a critical element for Title IV-B reauthorization, and how modernization and technological advancements can further improve outcomes for children in foster care?

Mr. GEEN. Yes, and I will reiterate a couple of the things I said earlier.

We focused on the flexibility of IV-B, and it is absolutely essential. And yet there are some set-asides. And Congress has made some really intelligent choices about areas that have suffered from under-investment and lack of attention, and the court improvement program is one of them. It is a relatively small amount of money, but it is a critical resource to improve the quality of the hearings that take place every single day.

When you talk about the technological innovations—I have mentioned this before—the states learned a lot during COVID. They were forced into a different situation, and they had to figure out how to continue to hold hearings in an environment of COVID and safety procedures, and so they experimented a lot. And I think that there is a lot to be learned from that period of time.

Court organizations that have looked at those remote hearings have suggested there are some very, very good positives coming out of it, but it is not a universal positive. You still need to hold those hearings in a quality fashion. And so investing in the training and understanding of how to use the technology in an effective way seems like a good investment.

Mr. MOORE of Utah. Thank you. The work that the Dave Thomas Foundation for Adoption and other folks that are trying to find your forever families—Mrs. Petersen, part of your testimony was really touching, just to hear your struggle and to be able to find that stability in your life. I mean, the negative impacts that take place from timing out of foster care are catastrophic for our communities and for the individual, obviously. So just thank you for your work on that.

Ms. Hilton, great to see you again. Thank you for the work that you do, the advocacy work that you do not only in my state of Utah, but here at the Federal level, as well. We have had a few chances to meet. From your perspective and interactions with former foster youth, how can Federal and state governments better collaborate with community organizations and other stakeholders in our communities to improve outcomes for children and families in the system?

Ms. HILTON. Thank you. So good to see you again, as well.

And I think it is important for people to work together and figure out ways where they can make the biggest difference. And I think it is important for there to be transparency so that people know what is happening in both places.

Mr. MOORE of Utah. Excellent. And as I was mentioning earlier, this isn't the most headline-grabbing topic, Title IV-B funding, but your presence and advocacy also does lend a hand to helping us, you know, get this out there more. So thank you for your voice in this.

And lastly, Mrs. Petersen, as I mentioned your story earlier, is there anything you would like to add with the involvement?

As I talk about state and federal government and local community, religious organizations also play a big role. And is there anything that we need to do to make sure that they have a place and a voice in this—the outcomes here, as well?

Ms. PETERSEN. Yes. I would just like to mention the small percentage of youth who are like me, who couldn't go back with their biological parents. I endured years and years of abuse and years of trying reunification in which it didn't work. And I was labeled unadoptable. And I just believe that no child should be labeled that, that every child is adoptable. And it is why it is so crucial that communities, churches, and organizations come together so that children can be in families.

Mr. MOORE of Utah. Thank you so much.

I yield back.

Ms. VAN DUYNE. The chair now recognizes the gentleman, Representative Kildee, for five minutes.

Mr. KILDEE. Thank you, Madam Chair, and I thank the chairman and ranking member for holding this really important hearing. It is really important to me, personally.

A long time ago, my first job, my first real job, was working in the child welfare system and working in an agency that, Donald M. Whaley Children's Center in my hometown of Flint, which for 98 years now has been doing an extraordinary job of treating and dealing with the challenges for our most at-risk kids in our society.

And I think one of the things that I take away from this hearing, despite the fact there was, I think, really important critique of some of the residential settings—and certainly the life experience of Ms. Hilton points to that—it is important that we recognize that the entirety of the system should be pointed at bringing kids back to a permanent, loving, stable home. Often that means reforming our foster system. Often that does mean also ensuring that, when residential treatment is required—and we have to acknowledge that there are conditions where it is required—that it is done so at the highest possible level, with the greatest possible scrutiny, with ample funding to make sure that that care is delivered in a way that as soon as possible puts that child in a position to be in a safe and loving home.

The entire system needs that attention. I have been happy to work with my friend, Congressman Feenstra, on legislation to deal with some of that. Our Strengthening Evidence Based Prevention Services Act, which is legislation that would support families, reduce the number of kids that are in foster care, is a really important step.

Back in 2018 also, this committee spearheaded efforts, the Family First Prevention Services Act signed into law. That fundamentally reoriented our child welfare system to keep more kids safely in their homes whenever that is possible. It did that by providing Federal funds to states to offer those prevention services that we have been talking about. Our bill would expand access to those services across the country by creating a new grant program to help fill the gaps—and Mr. Geen, you mentioned this in your opening testimony—to help fill the gaps in the research, in the data that we need to see what really does work.

So I wonder, Mr. Geen, if you might, in your—in the few minutes, talk a little bit about how investing in that additional research and evaluation would help us overcome some of the barriers to the utilization, the effective utilization, of these funds.

Mr. GEEN. There is a frustration amongst the states at the slow progress of programs being approved for Title IV–E prevention funding. There is a need to figure out, how can we speed that process up? How do we invest in the research necessary to turn promising approaches, practice-based evidence into research? And there are opportunities to look at other databases of effective programs and figure out how can we make them available for child welfare.

If I might, I do want to comment on your conversation about residential treatment, because I have said this, and I believe high-quality residential treatment is lifesaving for the children who need it. It is a twofold problem. One is we need to make sure it is only being used when it is absolutely necessary, but when it is used it does need to be of exceptional high quality.

There are people who will grimace related to the QRTP, or Qualified Residential Treatment Program standards, but I will tell you that I feel like they are below the minimum level of what I would consider if I had to place one of my children. So as we look at those standards, consider what those actually do. It is really a very, very low bar.

Mr. KILDEE. I really appreciate you making that point. My work experience told me that, is that meeting the minimum standards is not good enough for our kids. We have to have organizations, agencies that have as their aspiration, as their sole goal to try to lift these kids out of the circumstance they may be in and get them into a permanent, loving family home and not see it—again, as Ms. Hilton referenced in her testimony—not see it as a business to churn these kids as if they are a product in a material system. These are human beings. Their aspirations are the same as everyone else. Their potential is enormous.

I meet kids—of course, they are not kids anymore—occasionally I will meet someone who I think is older than I am, and suddenly I realize it was a child that I may have worked with decades ago, and they recall the smallest acts of kindness that some of us just take for granted as something that we do every day out of hand. The smallest acts of kindness are remembered.

Unfortunately, the other side of the coin is also true. They can be hurt by some of the most callous acts of people who don't see them in their basic humanity. So I appreciate this panel, I really appreciate the work you are doing.

I am sorry for going a few seconds over, and I yield back.

Chairman SMITH. Thank you.

Mrs. Steel.

Mrs. STEEL. Finally, it is my turn. And thank you very much, Chairman Smith, for hosting this hearing. And thank you very much for all witnesses staying how many hours here. So I really appreciate it.

But this is a really important issue that—I have worked with foster and other at-risk youth in California, and I have been seeing these kids.

And thank you, Mrs. Petersen, that you were talking about that. You know, we really have to do the work before, you know, age out of the system, because I saw a lot of kids when they hit 18, and a lot of kids joining gang members, or they become homeless people in California. So I saw that.

And thank you, Mr. Geen, that, you know, family setting is much better than group homes because when I was serving one—the commissioner on Children and Family Center, you know, I saw a 12-year-old was having her second baby. So, you know what? It was really shocking to me that, you know, how we are going to really solve this problem.

So thank you for all coming today. We really have to fix this system.

And as Congressman Ferguson mentioned, I recently introduced the Foster Youth Mental Health Support Act. And my bill would create more consistent access to crucial mental health services for children and teenagers in foster system. Many children who have experienced time in foster care system have complex trauma from their removals and changing placements and, sadly, many children do not get access to mental health resources.

So Mrs. Petersen, from your experience in foster care and as a mother caring for children with complex trauma, what kind of mental health challenges do children in foster care experience?

Ms. PETERSEN. In my first foster home there was abuse that happened, and I reported it and I was placed in a residential facility. And I see now—I always look back on that experience and I think, wow, I really needed the therapy that was offered to me. But when I look back on that, I also realized that I could have used that therapy in a family setting. It was when I was in a family setting that all of the things that were taught to me and that were spoken over me in therapy, that I was loved, that I was important, that I was chosen, like, those things were spoken over me, but I didn't believe them until a family showed them to me.

And so I think that is why it is so important. We have to have the mental health services, but we also have to have the family setting that proves to children who they truly are.

Mrs. STEEL. Thank you. And Mr. Geen, you highlighted in your testimony that bipartisanship has long been a hallmark of federal child welfare legislation. Could you discuss how maintaining bipartisan support is critical for the success of child welfare initiatives and ensuring that children have safe, stable families, and to improve our nation's child welfare system, especially if we want effective mental health services?

Mr. GEEN. I am going to answer that, I just want to add on to what Tori said about mental health, which is when we talk about

mental health, we often talk about—and I hate to use these words because I don’t like it—but “fixing children, rather than giving them what they need, and giving their caregivers what they need. So we need to help parents care for kids. So that is also a part of it.

To your question about bipartisanship, first I will say that this very committee has demonstrated that, both historically with legislation through Family First and through the series of hearings that you have had over a year, the importance of bipartisanship.

I was very much struck during the landscape assessment we did as part of the Bipartisan Policy Center project, how often there was commonality in a diagnosis of what was wrong with the system and the solutions. And yet it was the language that people were using that made discussions hard.

I will also note the wide variation that we have in states and communities. You are going to pass legislation which will then have to be implemented. It will have to be implemented in a host of different environments. It is absolutely essential that you get all of those different perspectives as part of the legislative process to ensure that when it goes out into the field to be implemented, that it will meet the local needs.

Mrs. STEEL. Thank you very much.

Mr. Chairman, I yield back.

Chairman SMITH. Ms. Van Duyne.

Ms. VAN DUYNE. Thank you very much, Mr. Chairman.

Today’s hearing has given us the opportunity to highlight the important work that this committee is doing to ensure child welfare agencies and those in the foster care system have the resources and the tools that are needed to provide care to those most vulnerable. The reauthorization of Title IV–B provides an opportunity to discuss ways in which we can introduce program efficiency and modernize child support programs.

During our hearing last November on strengthening child support enforcement, one of our witnesses, Ms. Turetsky, cited the State Department’s passport denial program, which prohibits passport renewal or replacement for parents who owe more than \$2,500 in child support, as one of the most effective mechanisms that the federal government has to enforce past-due support obligations. That is why I introduced the Ensuring Children Receive Support Act to expand this effective program by not only prohibiting renewal of a passport, but by requiring that the passport also be revoked.

We need outside-the-box ideas to ensure our children have the resources they need and deserve, and this serves as a prime example of the type of effective child welfare program that we should aim to advance as we move forward with reauthorization. We need to be elevating policies and programs like the passport denial program that are proven to work effectively.

Mr. Geen, given your experience, what are some key strategies or policies that you believe could help improve the overall quality of child welfare services?

We have heard from some of our members on the other side of the aisle that it is about money, that we need more funds. I can’t tell you how often I am in office, and everybody who comes into my

office, We need more money. I would remind the panelists and the members here that a lot of times, when we throw more money at a problem, it increases the cost while decreasing the care and decreasing the quality. I can give you examples in health care. I can give you examples in education where that is the case. It is not always about the money.

Tell me how we can more effectively help the industry, and how we can be more supportive without just throwing more money at it.

Mr. GEEN. So I will start with I agree with you that it is not just about the money, it is how that money is spent. And so one of the questions is—we talked earlier about the disproportionate amount of Federal funds that are allocated for foster care and adoption. And you are reauthorizing a program that is four percent of Federal funds for child welfare. How do we figure out more—a way to be able to incentivize the performance of states to achieve the outcomes we want for kids, and still be able to maintain the level of Federal investment?

Today, if you prevent a child from going into foster care, you actually lose the Federal investment on the foster care side by spending prevention money. So that is not how caseworkers think. They don't, like, make a decision based on whether they are getting Federal reimbursement. But the ability to keep a child out of foster care is based on what else is out there. And part of the challenge is, as we try to reduce something we have to increase something else.

Ms. VAN DUYNE. Yes, I appreciate—

Mr. GEEN. That is where the new money is actually needed. It is not a permanent increase. It is an ability to shift what you are doing from the status quo to best practice.

Ms. VAN DUYNE. All right, thank you.

Earlier this year, an alarming article highlighted Texas's expenditure of over \$250 million on housing foster children in unsafe, unregulated facilities following the termination of parental rights. Federal court documents and testimonies revealed that these facilities often lacked essential services, including basic necessities such as readily available food and consistent supervision, crucial for the state's most vulnerable foster children. Astonishingly, the budget documented allocated no funds for mental health treatment, despite extensive documentation these youths have high mental health needs and exhibit aggression.

This situation highlights a challenge that states across the country are grappling with the shortage of placements for foster care with mental health needs. Texas ranks among the top states for kids in foster care, with more than 31,000 children in the system, most of whom suffer neglect, drug abuse by a parent, and physical abuse. The further mistreatment and lack of proper care for these kids is inexcusable.

Ms. Hilton, from your experience, what are the outcomes for youth placed in these kinds of facilities?

Ms. HILTON. Thank you for highlighting that article, and it is so concerning, what foster youth have experienced. The outcomes for this youth are horrible, and children are being abused and

dying in these kind of facilities, and just surviving is the best-case scenario.

I feel grateful where I am in life after my experience, but most don't end up having access to education and they end up homeless, having trauma, and a high percentage commit suicide because they don't know how to deal with the experience. The government is paying for this abuse, and we must stop it.

Ms. VAN DUYN. Thank you very much, Ms. Hilton.

And I yield back.

Ms. HILTON. Thank you.

Chairman SMITH. Mr. Beyer.

Mr. BEYER. Mr. Chairman, thank you very much.

And I thank all of you for hanging in for four hours already. You are patient and brave.

And I also want to comment that I have been really thrilled to listen to my colleagues on both sides of the aisle with the compassion, the concern that they have expressed for this issue.

Also, Mrs. Petersen, I heartily approve of your faith-based approach to this. I know this is Christianity, but it is also Judaism, and Islam, and others. I see tons of faith-based non-profits in the areas I represent committed to trying to lift up everyone. The challenge, of course, for us, as leaders in government, is that the faith-based things are not enough in our current society. You also have to figure out how do we use government to address this constructively.

Ms. Hilton, thank you, too, for your bravery to mention your own traumatic experiences with seclusion and restraint when you were in those facilities.

The horrible truth is that so many families are left in the dark about this. When I got here 10 years ago I inherited a bill called the Keeping All Families Safe Act, and we have been working on it for 10 years unsuccessfully. But it is recognizing that there are at least 22 states that have absolutely no guidelines, laws, rules about seclusion and restraint in schools or in other facilities. Many states that do have it, they are insufficient.

Can you—in terms of your own experience, how harmful was it to you, or how harmful do you see it for other children to be inappropriately secluded and restrained, and the long-term consequences?

Ms. HILTON. From personal experience, it was extremely traumatic. And just experiencing that on a daily basis, seeing my other peers being restrained and just for no reason, it was just—the power was abused all the time by the staff members. And restraint and seclusion are extremely dangerous, and they create life-long trauma.

Restraints and seclusion have also led to numerous child deaths in these facilities. Cornelius Fredericks, he was restrained until he couldn't breathe, and died at 16 years old. A 12-year-old in a North Carolina facility just yesterday, his death was confirmed a homicide for staff locking him in a restraint and seclusion tent overnight until he couldn't breathe.

And restraint and seclusion are not therapeutic. Ask anyone who has experienced it. And I believe that Congress should do more to protect youth from these practices.

Mr. BEYER. It is very helpful to have you say that and to speak up firmly.

You know, the office—the U.S. Department of Education’s Office of Civil Rights is responsible for collecting all the data, and they suggest 2,300 times per school day, on average, upwards of 102,000 students per academic year are subject to the seclusion and restraint. Sadly, we tend to underfund that agency, so we are pushing hard to make sure that it has the resources it needs to do that.

How important do you think it is to be able to measure this, to have the federal government have those statistics on the states and schools?

Ms. HILTON. It is extremely important. We need to know what is happening inside the walls of these facilities, as the industry is not transparent. Staff are often taking the easy route of restraining or secluding a child instead of actually helping them, and this causes the child to have trauma, and we must provide them with treatment and not subject them to harm.

Mr. BEYER. Yes. Mr. Geen and Ms. Mansfield, I am not sure who is the best answer to this. Years ago I was a Big Brother for a young man named Clifford, who was a foster child living in a home that was desperately poor. It was very clear that they took him in because of the cash that came with him. Not that it was a lot of cash, but it was enough to help feed the other three children in the household. And yet we hear from Mrs. Petersen today—and I have heard scores of times—that the typical foster child experience is to move from home to home to home. And yet, Mr. Geen, you talked about that the problem is retention, that recruitment.

How do we deal with the fact—or what is to account for the fact that so many foster children have bad experience after bad experience—Mrs. Petersen, 12 different places—and yet we apparently have a surplus of people that want to be responsible foster parents? This doesn’t make sense to me.

Mr. GEEN. Well, let me start by saying that your experience with a foster parent “doing it for the money,” is an incredibly rare exception. The vast majority of foster parents spend far more on their children than they receive from government agencies.

The reason that I say it is a retention problem and not a recruitment problem is the number of people who start inquiring and get involved in foster parenting. If we held on to them, we would have enough homes for every single child in care. Foster parents tend to give up when they don’t think they are doing a particularly good job. What they need most is not money. Yes, they do need financial assistance. Many of them are challenged financially. What they need most is support from their peers and from someone who will listen to them and help them care for the child that has been placed in their home.

Mr. BEYER. My time is up, but at some point I would love to hear from Mrs. Petersen why she gave up on them or why they gave up on you.

Chairman SMITH. Mr. Feenstra.

Mr. FEENSTRA. Thank you.

Thank you, Ms. Hilton, for coming forward and telling your story, writing the book and your memoir.

And Mrs. Petersen, thank you. That is a bold step. We are all created in God's image, and we are all children of God. We always have to remember that. So thank you.

In 2018 Congress passed the Family First Prevention Services Act, one of the largest child welfare reforms in state history. The bill represented a shift in how we approach child welfare, recognizing that children do best when they grow up in a family and in their communities. That is so big. We started to focus more on helping strengthen families by responding to the root causes that were splintering them apart and leaving children in the foster care program. The goal of prevention is to help families stay together, and the importance of this has only grown as the foster care program seems to increasingly get strained because of maximum capacity.

Mr. Geen, you highlighted the successes of the progress of the Family First Prevention Services Act in your opening statement. However, there are still barriers in the full implementation. It is crucial to have a wide variety of evidence-based programs available in the clearinghouse. Representative Kildee and I introduced the Strengthening Evidence Based Prevention Services Act to establish a new competitive grant program aimed at supporting prevention programs through research and evaluations which are required to receive federal support.

So my question is this, Mr. Geen, do you believe that there is a need for a more diverse array of programs in this clearinghouse?

Mr. GEEN. So as a recovering researcher, I certainly support evidence-based policy and evidence-based funding decisions. At the same time, there is absolutely no doubt in my mind that states need a broader array of programs to invest in.

What we don't want to happen, and what I fear could happen is a state looks at the clearinghouse and says, this is what is well supported, so this is what we are going to pay for and invest in, without an understanding of whether these programs actually meet the needs of children and families in their community.

And so there is absolutely a need to expand the variety of the programs so that each state and community and tribe can look at their own circumstances and find out what works for them.

Mr. FEENSTRA. And what barriers—so I agree, you and I agree on this, but—so what are the barriers? Why aren't we doing this?

Mr. GEEN. So I think there are a number of things. One, it gets down to the way the legislation was written.

Mr. FEENSTRA. Yes.

Mr. GEEN. And the words that we use for "promising practice," "well supported," and "supported." There was a period of time when Congress had a temporary authorization to allow states to get reimbursement if 50 percent of their programs were either supported or well supported. Now we are back to what the traditional legislation says, which is it has to be 50 percent of well supported. This is why I worry about states just looking at those well supported programs without the knowledge of what do they actually need in their community.

Mr. FEENSTRA. Yes, yes. So—exactly right. So we have 50 states. How do we manage this, partnering then with the states and their programs?

Mr. GEEN. So I will say there is progress being made, which is good. We are seeing states investing more in prevention through IV-E. There are growing numbers of programs being approved by the clearinghouse.

I do think reauthorization of IV-B plays an important role here. States can use IV-B to test a program that is not yet approved on the clearinghouse. They can test it. They can say, yes, this meets our needs, and then hopefully it will get through the approval process.

I do think that approval process needs to be sped up.

Mr. FEENSTRA. Yes, thank you. Thank you so much for that.

Mrs. Petersen, I have just got a question after Mr.—Congressman Kildee noted. So if you had to look back, okay, you look back and you were in, what, 12 homes or something like that? What was the root cause, I mean, of these families and changing homes and all this stuff?

I mean, do you have any solutions to say, all right, we don't want this for other children what happened to you?

Ms. PETERSEN. Yes. My time in care I was—so the second time I went into care, I was in care as a teenager. And we know that teenagers, it is hard to find placements for them more so than it is young children. Teenagers in foster care are stigmatized and viewed very unfairly. I was a 4.0 student, I was a good athlete, and it was hard for me to find placement, and it was hard for me to retain placement because people—foster parents want to adopt little children, and so little children would come into the home and then I would be moved to the next home.

And there were also—there is a lot of rules in the foster care system, revolving youth in foster care. And the Normalcy Act passed, which I mentioned earlier, after I had emancipated. But a lot of those rules I didn't follow, and I would be kicked out of homes. Those rules were rules that my peers did not follow because they weren't putting me in danger, they were just—I wanted to have a normal experience as a teenager, as any teenager would.

And so I was either usually moved out because the family was establishing their family through adoption, or because of rules that I didn't follow.

Mr. FEENSTRA. Thank you. Thank you for that.

Ms. PETERSEN. Thank you.

Mr. FEENSTRA. We need solutions, and I yield back.

Chairman SMITH. Mr. Carey.

Mr. CAREY. I want to thank the chair and, as a point of personal privilege today, my mother and father were divorced when I was probably no more than three or four months old, but today is my mother's birthday. So I am not sure how many people are watching C-SPAN, but I know that she is.

So happy birthday, Mother. [Laughter.]

Mr. CAREY. Listen, I just want to tell you, this is some of the bipartisan stuff that many of us got elected to Congress to actually do. Many of us don't like to shout at the rain all day. We want to find solutions. And I wish that many of you could join us for our lunch in between.

You know, I was with my dear colleague on the Democratic side, Beyer, and Schweikert, and we had a great discussion about this

issue, not for the cameras. But I just want you to know that there are people in Congress, whether they are Republican, whether they are Democrat, whether they are independent, that really want to keep this country moving forward. And this is a big issue that we do have bipartisan support.

So to that end, Mr. Chairman, I also want to thank you for having this hearing. I want to thank the ranking member, as well. But I also want to thank the witnesses for being here today to discuss this critical need to reauthorize the IV-B of the Social Security Tax Act.

Last week, alongside my dear friend, Representative Larson, I introduced the Promoting Community Based Prevention Services Act. This legislation will allow states greater flexibility in their allocations of funds to family resource centers. When parents feel supported, families thrive. And that is why I am proud to help guarantee these resources can be available in every community across the country for every family that might need them.

Ms. Hilton, I do want to say you have got a tremendous team, and I see some of them behind you today. They work extremely hard. They are in our offices a lot, talking about the issues that are very important to you and all credit to your team on that.

Family First requires the Qualified Residential Treatment Programs, or the QRTPs, to have a licensed clinical staff available 24/7. Based on your advocacy and the experience, are these staffing requirements being met consistently and effectively?

Ms. HILTON. Thank you. My team and I love working with you and your team. And happy birthday to your mom, as well.

Mr. CAREY. Thank you.

Ms. HILTON. And I appreciate the committee's work on Family First. I am not a policy expert, but based on my lived experience, the staff are untrained and unfit to work with children.

Licensed staff is important, but the floor staff, the people who do the overnight shifts and the hard work, they need to be looked at, as well. These facilities keep staffing costs as low as possible to increase the bottom line. In my case, many staff enjoyed abusing the children because they knew they could get away with it. They would take kids to rooms without cameras, beat them up, and physically and sexually abuse them.

There is a lot of sexual abuse that happens. I just heard a situation right now where a 12-year-old foster youth is pregnant because she was sexually abused by staff. I think we need stronger oversight over who works with children, as children are dying at the hands of these staff.

Mr. CAREY. And really, kind of as a follow-up to that, what further training or education requirements should be imposed on staff in these facilities to better support and protect our youth, in your opinion?

Ms. HILTON. I think that there needs to be checks on these people, and background checks, as well, and they need to be trained in how to deal with children.

And I think that you guys could speak better on that for—

Mr. CAREY. Well, that is all right. I am about down to a minute, and I appreciate your testimony.

Mrs. Petersen, I did want to talk to you.

But Mr. Geen, I wanted to touch upon something because your opening testimony—all of you mentioned the young people that are in foster care that are—through the adoption process today, and that help is on the way, and that we want to—we want them to be—we want them to know that there is something on the other side. And to that end, your founder, Mr. Thompson, he is—Thomas—has been a legend in—not only in Columbus and the 15th congressional district, but across the world.

And what I want people to know today. I know his daughter, Lori, is a dear friend of mine. His granddaughter, Ally, is a good friend of mine. But what he was able to do, given his situation—and if you look at the franchisees with the Wendy's Corporation across the country—because of what he did, he created more than 200,000 jobs. Every life matters. And I want everybody who is listening and watching today to know that.

And I appreciate all of you coming in here today. It means a lot.

And with that, Mr. Chairman, I yield back.

Chairman SMITH. Thank you.

Mr. Panetta.

Mr. PANETTA. Thank you, Mr. Chairman. I appreciate it.

Ladies and gentleman, thanks for being here. And of course, thanks to Chairman Smith and Ranking Member Neal for having this hearing on not just an important issue, as obviously, you understand, but also you are hearing—we understand that. What I mean by that, this is a bipartisan issue which—I want to echo the sentiments of my colleague, Mr. Carey, as to when it comes down to these types of issues, you know, good governing isn't sexy sometimes. But let me tell you, good governing is good politics in my book. And so I appreciate you being a part of the—this good governing that you are seeing right here today.

However, as you have testified, though, you know, we want to make sure that we can do everything we can to ensure the well-being of our foster youth. There was a 2022 Government Accountability Office report that, unfortunately, revealed that there are an absolutely alarming amount of instances of maltreatment and abuse in federally-funded youth residential treatment centers. And in that report the GAO recommended certain steps that need to be taken to address the abuse, but also how federal agencies can support local agencies and also make sure that there is better oversight.

That is why I am working and partnering with my colleague, Greg Steube on this committee, on the bipartisan H.R. 8817, a bill that would mandate relevant federal agencies to collect the appropriate data, collaborate to develop guidance and best practices for those states receiving Title IV-B funds, and report on how we can improve the well-being of youth in residential treatment facilities.

The goal of this bill is to provide proper oversight for those youth residential programs that receive federal funding, and we have consulted with a number of federal agencies on our bill. And the agencies that would be mandated to share this information and collaborate include HHS, Department of Education, the Administration for Children and Families, the Center for Medicare and Medicaid Services, the Department of Justice, and—I quote—"other policy experts."

Mr. Geen, my first question to you. Who should those other policy experts be, in your opinion? And are there any agencies that we should be consulting with on this matter?

Mr. GEEN. So I would be remiss if I didn't answer this question looking at the people next to me. One of the folks who needs to be—or the category of folks that needs to be involved are people who have lived experience in the system. They need to have a voice into making sure that what is being developed is sound.

Let me also say that we absolutely need to be able to collect data on the abuses in these facilities. That is not enough. Would you place your child in a facility that you knew didn't abuse them? Well, that is the minimum you possibly need. You want to look at quality. You want to make sure that they are not taking in young people who don't need to be there. You want to make sure they are not holding on to young people for longer periods of time than they need the intervention, right? What difference does it make? They will continue to get paid. You want to make sure, as another one of your colleagues mentioned, there is not the abuse of psychotropic drugs or policy pharmacy use.

So as we look into this accountability, it goes far beyond just saying they are not abusing kids.

Mr. PANETTA. Understood, and that is exactly why in that bill we want these agencies to come up with best practices for the states that are receiving these types of funds.

Let me take it one step further, though, Mr. Geen. Obviously, we have a direct role overseeing funds that place children in these settings, but we don't have the same power of the purse when it comes to private facilities and private insurance. Can you talk to us about the leverage that can be used over private facilities that are not paid through the Title IV-B program?

Mr. GEEN. It is my understanding—and again, there are people on this panel who may know differently than I—that many of these private institutions are serving kids from multiple different populations. Some are caring for foster kids, juvenile justice kids, truant kids, the rest. And so I think having all of those agencies at the table to talk about their use would be important, and could advise you.

Mr. PANETTA. With 30 seconds left, would anybody want to add to that answer as to what type of leverage we could use over private industries and private residential treatment facilities?

Mr. GEEN. Let me just add one thing, because this has come up over and over again. Private institutions aren't by nature evil. There are private facilities that are probably doing good work. There are non-profit facilities that are doing work that is at least abusive, if not more. And so, while I appreciate the question, I want to make sure that we look at the totality, and not focus on one or the other.

Mr. PANETTA. Absolutely, and that is why I focused on both, basically, those facilities that are receiving Federal funds and private facilities, as well, and obviously, making sure that we come up with solutions to ensure the proper oversight on both. Thank you. Thanks to all of you.

Mr. Chairman, I yield back.

Chairman SMITH. Thank you.

Ms. Malliotakis.

Ms. MALLIOTAKIS. Thank you very much. I want to thank you all for being here. It has been, obviously, a very difficult, heart-breaking hearing, but very important that we put the spotlight on these atrocities that are happening, and that we work together for solutions to end the abuse of these children.

You know, I represent New York City, and in New York City, sadly, there have been a number of instances over the last few years of children that were killed. They were killed either in their home by their parent because their cases fell through the cracks. We had one child, a three-year-old, who was beaten by their father. ACS knew about it, but he was taken away and then put back into the home, which was a homeless shelter, and he ended up being beaten to death. Another three-year-old who was in a foster care facility—a foster home, ended up with a drug overdose and died.

How do we work with these local agencies? What can the federal government do to have more accountability for these local agencies? Because it is a balancing act, right? We had this whole hearing about how we don't want to unnecessarily take children from their homes if we can help rectify the situation. But then, on the other hand, you have these children that are falling through the cracks. They know there is an issue, but they leave them there and then they ended up dead.

Do you have any thoughts, any of you—Mr. Geen, in particular—about what we can do as a federal government to try to hold some accountability for our local partners?

Mr. GEEN. So I will start by saying that a single child death involved in the system is a tragedy. And we also can learn from those instances and localities, do child death reviews, and use the information from those reviews to talk about how could we prevent this in the future.

At the same time, we don't want to make the problem seem larger than it is. The child fatality issue is an important one, but we don't want to expand it to make it—we think that it is larger than it actually is.

Ms. MALLIOTAKIS. Okay. I still think that we need to have more accountability measures to find out why those children fell through the cracks, why they were neglected. Was it a staffing issue or is it something that is a little bit—

Mr. GEEN. And recognizing the impossible decision that we are putting upon—and I will be stereotypic—a 20-something-year-old new case worker making a decision with very limited information—it is unfortunate, a tragedy that children die. It is impossible to make that best decision. Removing the child harms them, causes them trauma. It is often not the best scenario. And so we don't want to overreact to a child death, as well. Making policy based on a small number of incidents usually lead to outcomes that do more harm than good.

Ms. MALLIOTAKIS. Well, thank you.

And I am proud to sponsor the bill being advocated for by you, Ms. Hilton, the Stop Institutionalized Child Abuse Act. I think it is a really great step. I know that you have had some success in passing this legislation on the state level. Can you talk a little bit

about the changes that you have seen happening in the States as a result of this—similar legislation?

Ms. HILTON. Yes, we have helped pass nine state laws, but that is not enough. It needs to be on a federal level.

But the positive part about it is that people know that they are being watched, but abuse is still happening, and children are still dying in the name of treatment. So that is why the Stop Institutional Child Abuse Act is so important. And thank you for supporting it, I really appreciate that.

Ms. MALLIOTAKIS. Today NBC came out with an article that says the states fail to track abuse in foster care facilities housing thousands of children, and this was based on a U.S. Health and Human Resources Office of Inspector General report. We talked about transparency, the need to report these instances of abuse, and for states to share the information because if you have state—one facility operating in one state and they are operating in other states, and those states are still contracting with that same company, that is an issue.

What other transparency measures would you like to see that could help us with the accountability and oversight component?

[No response.]

Ms. MALLIOTAKIS. Well, I have another question if you want to—let me get this question, and then you can expand, because I am running out of time.

The topic of Social Security benefits being garnished by states for foster care has been a growing issue, and we know that a small portion of forced foster youth are eligible for SSI benefits, sometimes inheritance from their parents who passed away. And this can be particularly helpful for them when they—as, you know, as they work to prepare to transition from foster care, maybe give them some—a basis to start with. And I am concerned about the lack of transparency of that issue in these SSI benefits being taken by the states. Could you comment on that, and if that is something we should look to reform?

Mr. GEEN. Sure, and I think transparency in that is essential. I also think it is an incredibly complex issue.

Children often come into care without SSI benefits, and they get SSI benefits because the state agency applies on their behalf. They then use that money to reimburse themselves for a portion of the cost.

There is a concern, at least among some, that if states are told they are not going to be able to use any of that SSI money, they won't go through the trouble of applying for SSI for children. So we want to make sure that children who would be eligible are going to be found eligible. And if the child welfare agency doesn't do it, they may wind up leaving care still without SSI benefits.

In addition, if a child had SSI benefits with a parent, the parent could use a portion of the SSI benefits to care for the child. So there probably is some middle ground here between the idea of you are not allowed to use any of the SSI funds for any state purpose versus we get to take all of it and you don't get anything. And so I think that it is a complex discussion that is worthy of further debate.

Ms. MALLIOTAKIS. Yes, I think certainly the committee should examine it further, and we would love to work with you more on how we can come to a good, equal ground on that. Thank you.

Chairman SMITH. Last, but certainly not least, Mr. Gomez.

Mr. GOMEZ. Thank you so much, Mr. Chairman.

First, let me thank all of you for being here on this important topic.

Ms. Hilton, I am happy to have a fellow Angeleno here. I am proud to represent Los Angeles in Washington. And just thank you for sharing your story.

When I was getting briefed by my staff about the hearing and about the issues, they told me about your story and I was thinking about how much time you must have spent. And I was thinking months, not years. So just to hear the fact that you were in this facility for two years is just astonishing to me, especially, like, knowing—I have—I know some people that were in the California Youth Authority for less time. So it is mind boggling that somebody can be held. So—and at the same time, they told me about how your advocacy has been very thoughtful, and has been moving the ball forward. So thank you so much.

And I am a new parent. I have a 22-month-old toddler, I have the scars to prove it, physical scars from him trying to bite me once in a while. But we are—I know that we are trying to do more here, and that is why one of the things I did was I started the Dads Caucus, so that dads would actually do more at home to help raise children, but also for dads to do more here in the halls of Congress to fight for family-friendly policies that really help kids and families everywhere.

And in your testimony, Ms. Hilton, you mentioned that families need resources and support so they don't need to come into the child welfare system in the first place. Could you elaborate on the need for more federal resources for children?

Ms. HILTON. I think it is really important because a lot of the things that are happening to these children is because they don't have the funds, and then they are going to be going into the system because of that. And sometimes their families can't afford to take care of them, and it is just heartbreaking that because of that reason that they would be taken away and then locked away in these facilities and being abused. So I just think it is important for that to be taken care of before, so that they will never have to go into the system and be put through this abuse.

Mr. GOMEZ. And I agree with you. A lot of what we want to try to prevent is to prevent these children from entering into the foster system in the first place, to have smart policies, a national paid family leave program so people can take the time off to care for a kid.

The Child Tax Credit, we did pass a bipartisan bill here that did—that is not what we would have written as Democrats, but it was still a good bill. We moved it forward.

Affordable child care, because families—too many families are struggling, and we have to think about how does—how do parents—how do we help parents make it a little bit easier on them to raise those kids?

And as a new dad, I kind of realize we do a lot in how we influence how a child is raised. It is almost like what you put in is what you get back. And making it easier for them, parents, to do that is crucial. And we are going to keep fighting for those.

Also, one question—one issue on the foster care system is when it comes to LGBTQ youth. Because what I have read in certain reports is that LGBTQ youth represent about—represent about 30 percent of all children in the foster care system. Five percent are considered—identify as transgender. What can we do to support those children? Because those are often the ones that don't end up being—ever finding a home, living on the streets, and then often being put in terrible situations.

Ms. Mansfield.

Ms. MANSFIELD. I am not sure that I have the answer to that, unfortunately. But I will speak from my own experience growing up with foster siblings, that my brother originally could not be placed because they identified that he should not be in a home environment because of his sexual orientation. And no child should be labeled like that or not be placed in a home environment because of that. It is a huge issue, and I wish I had the solutions to it. I do not.

But I appreciate you bringing that up because it is something that comes up frequently, both for children in foster care as well as those children who then become adults and often become the incarcerated mothers that I work with, as well.

Mr. GOMEZ. Thank you.

My time is up. I just want to thank the chairman. Although we don't always see eye to eye on solutions, we do believe that there is a problem that we have to be—that has to be dealt with.

So thank you, Mr. Chairman.

Chairman SMITH. Thank you.

I want to thank each and every one of you for spending the time on this important hearing. Hearing your powerful testimony, it definitely is making a difference.

Please be advised that members have two weeks to submit written questions to be answered later in writing. Those questions and your answers will be made part of the formal hearing record today.

With that, the committee stands adjourned.

[Whereupon, at 2:37 p.m., the committee was adjourned.]

MEMBER QUESTIONS FOR THE RECORD

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Congress of the United States
House of Representatives

COMMITTEE ON
WAYS AND MEANS

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HEALTH SUBCOMMITTEE

**Question for the Record for Alexis Mansfield, Senior Advisor, Children & Families and
Relationship Safety, Women's Justice Institute**
Hearing on June 26, 2024
Strengthening Child Welfare and Protecting America's Children

Dear Ms. Mansfield:

I appreciated your exchange with Congressman Gomez regarding LGBTQ+ youth, especially transgender youth, being overrepresented in the child welfare system, and the challenges that these youth face when it comes to finding supportive and affirming placements. Could you expand more upon this topic?

Thank you for responding to this question.

Sincerely,

Danny K. Davis
Member of Congress

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American Academy
of Pediatrics



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June 26, 2024

Comments of
Benjamin D. Hoffman, MD, FAAP
President, American Academy of Pediatrics

On behalf of the
American Academy of Pediatrics

Testimony before the
House Committee on Ways & Means

“Strengthening Child Welfare and Protecting America’s Children”

Benjamin D. Hoffman, MD, FAAP- American Academy of Pediatrics
"Strengthening Child Welfare and Protecting America's Children", 6/26/2024

Chairman Smith, Ranking Member Neal, and Honorable Committee Members:

My name is Dr. Benjamin D. Hoffman, and I am the President of the American Academy of Pediatrics, or the AAP, a non-profit professional organization of 67,000 primary care pediatricians, pediatric medical sub-specialists, and pediatric surgical specialists dedicated to the health, safety and well-being of infants, children, adolescents, and young adults. I am submitting the following testimony on behalf of the AAP. In addition to my role with the AAP, I also work for Doernbecher Children's Hospital and Oregon Health and Science University, where I serve as a Professor of Pediatrics, Vice-Chair for Community Health and Advocacy, Director of the Oregon Center for Children and Youth with Special Health Care Needs, and Medical Director of the Child Injury Prevention Program.

The AAP appreciates the opportunity to submit testimony for this hearing on ways to strengthen child welfare and protect children and youth. The AAP believes that safety, permanency, and well-being are the critical precepts that should guide the work and mission of the child welfare system. Each of those precepts is deeply connected to the health and development of children. For years, the AAP has advocated to improve child welfare policies to better address the needs of children and families.

Children thrive in their families, and most families can safely remain together with well-resourced services and supports. The U.S. House Ways and Means Committee's bipartisan role in enacting the 2018 *Family First Prevention Services Act* is a testament to that goal and a means for redirecting child welfare policy to achieve it. Despite that progress, current federal policy still relies too heavily on separating children and is insufficient to meet the challenges of the current moment.

Insufficient funding and a lack of needed reforms have left many child welfare agencies, service providers, families, and most importantly, children and youth in foster care, without the necessary support and resources to help families thrive. Child welfare systems throughout the country are facing significant shortfalls in available resources and capacity to address the underlying needs that bring families to the attention of child welfare systems in the first place.

This is why the AAP is grateful to the House Committee on Ways & Means for holding this hearing. Congress has a unique opportunity to come together and modernize the child welfare system by reauthorizing and improving Title IV-B of the *Social Security Act*. Title IV-B funds key state, local, and Tribal services around family preservation, reunification, and overall child welfare services and systems development. This critical child welfare law provides flexible funding to support thriving families, including prevention of maltreatment, supporting kinship and foster caregivers, and helping reunify families separated by the child welfare system.

The AAP is also grateful to this Committee for its continued bipartisan oversight of congregate care and youth residential treatment facilities. The AAP expresses our profound sorrow and condolences to the many young people who have been affected by the abuses that have occurred at these facilities. The AAP is deeply concerned by continued reports and testimonies of incidents of physical, sexual, and verbal abuse, inappropriate restraints and seclusions, unsafe and unsanitary conditions, and the lack of necessary behavioral health care at several of these residential facilities. These reports reflect why children and youth should be

Benjamin D. Hoffman, MD, FAAP- American Academy of Pediatrics
"Strengthening Child Welfare and Protecting America's Children", 6/26/2024

placed in family-based settings with strong community-based mental health services, and not these long-term, inappropriate residential treatment facilities. The AAP continues to call on Congress to increase investments in community-based alternatives for care, and we look forward to working with the Committee to invest in community-based alternatives for care, including for high-quality, trauma-informed mental health services.

The AAP is grateful for the Committee's bipartisan work to strengthen the child welfare system and protect children and youth, and we offer the following feedback to further guide the Committee's work:

Reauthorize Title IV-B

General Feedback: As the Committee considers ways to strengthen child welfare, the AAP urges the Committee to reauthorize Title IV-B of the Social Security Act, an important child welfare law. Title IV-B is a critical child welfare law providing flexible funding to support thriving families, including preventing maltreatment, supporting caregivers, and reunifying families. Title IV-B reauthorization offers policymakers the opportunity to continue aligning federal child welfare resources with the best outcomes for families, based on research and the insights of individuals who have experienced the child welfare system. Reforms to the Title IV-B program can play an important role in shaping child welfare policy and services nationwide.

While the AAP appreciates that Congress extended Title IV-B in the recent Fiscal Year 2025 spending package, this extension unfortunately came with no new funding or policy improvements. And absent Congressional action, Title IV-B is facing expiration or another short-term extension on December 31st. Allowing this program to expire or reauthorizing it on a short-term basis does not provide the needed funding or supports that child welfare agencies, service providers, families, and children and youth in foster care urgently need. The AAP has joined with over two dozen essential stakeholder organizations, including implementing jurisdictions, adoption organizations, service providers, medical and public health organizations, child welfare advocates, and organizations representing individuals with lived experience, in developing and endorsing a set of Title IV-B [consensus recommendations](#) that explains our shared priorities for any Title IV-B long-term, comprehensive reauthorization.

Additionally, the AAP recently joined [a letter](#) calling for substantial new mandatory funding sufficient to sustainably support full implementation Title IV-B and adjusted prospectively for inflation. Title IV-B needs increased funding to support children and families. Increasing Title IV-B resources will help keep children with their families whenever it is safe and possible to do so. Additionally, investing in Title IV-B now will save costs in the future; healthier children learn better, are more successful adults, and when a child lives in a safe, stable, and nurturing household, they are imprinted with successful and healthy parenting strategies that they can utilize in their future.

The AAP urges Congress to support and reform the child welfare system by passing a comprehensive, long-term Title IV-B reauthorization, and we offer the following recommendations to guide Congress in the development of a comprehensive Title IV-B reauthorization that will support the health and well-being of children and youth throughout this country:

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Funding Title IV-B for Families: Title IV-B needs increased funding to support children and families. Increasing Title IV-B resources will help keep children with their families whenever it is safe and possible to do so. Additionally, investing in Title IV-B now will save costs in the future; healthier children learn better, are more successful adults, and when a child lives in a safe, stable and nurturing household, they are imprinted with successful and healthy parenting strategies that they can utilize in their future.

Increasing Investment in and Support for Reunification: The AAP calls on Congress to increase investment to support reunifying children with their families. Almost half of children in foster care return home to their families at some point. It is important that Congress fund and support expanding Title IV-B’s focus on reunifying families to help them succeed and prevent re-entry into the child welfare system. Safe and effective reunification can provide better outcomes for families and costs less than long-term foster care, but it requires intentional forethought in the policy frameworks that support this critical aspect of child welfare services, including needed funding.

Strengthen Kinship Supports: The AAP has long held that when children cannot remain safely with their parents and need to enter foster care, kinship care arrangements with relative caregivers should be prioritized over non-family foster care arrangements.¹ Relative or kinship foster family placements promote familial and cultural connection and improve child health and wellbeing outcomes. For example, this is a crucial reason the AAP continues to steadfastly support the *Indian Child Welfare Act* (ICWA), a gold-standard federal law that instantiates the core principles behind kinship care in the context of supporting Indigenous self-determination. Kinship caregivers often have limited supports and multiple barriers to receiving benefits, which hinders the availability and stability of needed kinship care placements. The AAP encourages Congress to expand existing investments to develop and prove the effectiveness of innovative kinship approaches, eliminate barriers to kinship placements, and clarify Title IV-B services can support kinship families.

Support Foster and Adoptive Families: The AAP urges Congress to strengthen kin and non-kin foster parent recruitment and support foster and adoptive families. While the AAP believes that kinship care should be prioritized, if kinship care is not possible, the AAP supports placing children in the care of emotionally and physically safe and caring non-relative family foster homes.

The AAP is deeply concerned by ongoing reports of foster youth sleeping in hotels and office lobbies due to the lack of available foster families. The AAP encourages Congress to look at legislation like the bipartisan, bicameral *Recruiting Families Using Data Act of 2023* (S.1313/H.R. 3058) as a template for legislation to take a modest positive step in helping to solve this issue. This bill, which the AAP has endorsed, would improve the likelihood that children and youth in foster care can be placed in foster families by improving data-driven recruitment and retention of foster families. Expanded funding and support for recruitment and retention of high-quality foster families will also be essential to addressing the ongoing shortage of foster care placements while avoiding unnecessary institutionalization of children and young people.

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Strengthen Tribal Child Welfare Protections: The AAP encourages Congress to include provisions to strengthen the gold-standard *Indian Child Welfare Act* (ICWA) to ensure its continued protections for American Indian and Alaska Native (AI/AN) children and families. The AAP calls upon Congress to increase resources for AI/AN children and families and support autonomy for Tribal child welfare services in any Title IV-B reauthorization.

The AAP is a steadfast supporter of ICWA, a 44-year-old federal law that protects the wellbeing of American Indian and Alaska Native (AI/AN) children, and the AAP is grateful the recent U.S. Supreme Court decision in *Brackeen v. Haaland* recognized this and upheld ICWA. ICWA reaffirms the rights of Tribal nations to be involved in child welfare matters, while also keeping AI/AN children connected to their community and culture. It has been recognized as a gold standard of child welfare law and has been crucial for promoting the health, development, and wellbeing of AI/AN children.

While ICWA plays a critical role in promoting continuity of connection to family and culture, Tribal children are still more likely to enter the foster care system compared to the general population. Implementation of ICWA also varies significantly by state. Effective implementation of ICWA is critical to promoting the health and wellbeing of AI/AN children.

The AAP encourages Congress to include two bills that the AAP has endorsed in any Title IV-B reauthorization. The first bill is the *Strengthening Tribal Families Act*, which would require states to include compliance with ICWA in their Social Security Title IV-B child welfare plans. The bill also requires that the Children's Bureau include these efforts in its Child and Family Service Review (CSFR) process. This will create a meaningful ICWA compliance role for the U.S. Department of Health and Human Services (HHS) and ensure state IV-B agencies are appropriately implementing ICWA. Currently, HHS lacks the authority to ensure states comply with ICWA standards, and there is very little federal data collection on the effectiveness of state implementation.

The second bill is the *Tribal Family Fairness Act* (H.R. 2762), which would provide flexible child welfare funding for tribes under the Promoting Safe and Stable Families Program of Title IV-B of the *Social Security Act*, which funds flexible family preservation and support services. The *Tribal Family Fairness Act* would streamline the reporting and application requirements for tribes, increase funding for Tribal court improvement grants for Tribal family courts, and establish minimum grant amounts for Tribal communities. Both of these bills would provide more equitable funding for Tribal child welfare systems, support culturally appropriate services for AI/AN Tribes, and benefit public health and AI/AN child health.

Reauthorize and Expand the Court Improvement Program: The AAP urges Congress to reauthorize and expand the Court Improvement Program, which plays a vital role in ensuring courts connect families to resources that prevent unnecessary foster care.

Reauthorize and Expand the Regional Partnership Grant Program: The AAP calls on Congress to reauthorize and expand the Regional Partnership Grant (RPG) program to allow more jurisdictions to support families who are affected by substance use disorders to prevent placement and reunify parents and their children.

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In 2022, the AAP supported the *Regional Partnership Grants Reauthorization Act of 2022*, which would have helped states effectively implement the *Family First Prevention Services Act* (Family First) and improve the child welfare system. The bill would have reauthorized the Regional Partnership Grant program through fiscal year 2027, helping to ensure funding for this critical program. Additionally, the bill would have strengthened the RPG program's focus on building the evidence base for what works when providing substance abuse services to children and families in the child welfare system. The bill would have ensured that state and local agencies are able to use the grants to ensure parents receive appropriate treatment and services to stay together with their children when possible and strengthen implementation of *Family First*. The AAP encourages Congress to use this bill as a foundation for crafting a reauthorization and expansion of the RPG program.

Building the Workforce Families Need: The AAP believes a strong and stable child welfare workforce is necessary for the implementation of child welfare reform. Currently, the child welfare workforce faces unprecedented strain and secondary trauma, and it needs urgent attention and investment to bring innovative solutions to severe workforce shortages. A lack of investment in and support for the child welfare workforce challenges puts children and families at risk and undermines the efforts of the critical frontline workforce doing this vital work. The AAP calls on Congress to pass a Title IV-B reauthorization that values, supports, and resources child welfare workers to support thriving families.

The AAP encourages Congress to give child welfare staff the education, training, and mental health support they need for their complex work supporting children and families. The AAP supports more funding to hire, train, and adequately compensate child welfare professionals to ensure they can effectively serve children and families' needs while reducing secondary trauma and preventing burnout.

Increase Mental Health Resources

The AAP is grateful for the Committee's bipartisan interest and work to support the mental health needs of children and youth. The AAP believes that children thrive when their families thrive. When families encounter the child welfare system, they have likely already experienced trauma and often have significant unmet mental health needs. Children in foster care experience disproportionate exposure to trauma and need access to coordinated, high-quality, and trauma-informed health care. The AAP urges Congress to include investments and improvements for Title IV-B to complement ongoing bipartisan mental health efforts and support a trauma-responsive child welfare system.

The AAP encourages Congress to provide funding, training, technical support, and accountability so states and Tribes can improve access to community-based mental health services for youth and families, to address trauma, improve outcomes, and reduce unnecessary institutionalization. For example, state Health Oversight and Coordination Plans offer an opportunity to advance improved mental health for youth in foster care, but the lack of funding and technical assistance to support their implementation is a key barrier to their effectiveness.

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The AAP supports including provisions in a Title IV-B reauthorization that improve quality child welfare data collection, which is crucial to the improvement of children's health and wellbeing. As state and local child welfare agencies look to improve the overall health of the children in their care, effective and robust data collection tools are increasingly necessary. By collecting information related to child health and identifying trends, Congress can help better promote the health and wellbeing of children in the foster care system. This can provide long-term benefits to the youth and save costs in the long term.

The AAP urges Congress to include provisions that will help facilitate the recruitment and training of staff and caregivers with skills and motivation necessary to nurture family bonding, affirm the racial, cultural, and ethnic diversity of children and families served by child welfare, and effectively treat trauma, including secondary trauma among staff. Recruiting and training staff and caregivers who are equipped with these skills and motivation is necessary for the mental health of children and families.

The AAP also calls on Congress to draw on and utilize research on child development and neuroscience to better understand, prevent, and treat trauma. The AAP believes that parents' own trauma histories impact their parenting styles and capacities and understanding this is essential for the health and well-being of both children and parents. It is important for all individuals involved in supporting the child welfare system to use trauma-informed strategies to meet the needs of children and families.

As part of efforts to improve child welfare data collection, the AAP urges Congress to include provisions to increase information regarding the nationwide increase in parental substance use disorders, which has resulted in more children entering the foster care system, particularly infants and toddlers, with significant trauma. Children can manifest this trauma by developing various physical, developmental, educational, and mental health conditions. By having a greater understanding of how this trauma is affecting children, jurisdictions can help children receive needed services sooner and better heal from the trauma that they have experienced.

Leveraging the success of the RPG program, we also urge Congress to consider including in IV-B reauthorization a comparable multidisciplinary partnership approach to address the trauma and mental health needs of children and families who enter the child welfare system. Based on what has worked to improve collaboration on addressing parental SUDs and child welfare involvement, this approach could support innovative approaches to trauma and mental health needs, reduce unnecessary foster care, and support permanency and family stability.

The AAP also urges Congress to increase investments to support the well-being of children and families, including providing flexible funds for states and Tribes. Many states and Tribes use flexible Title IV-B funds for critical services that address families' trauma and healing needs. This is especially important for families of young children who have experienced trauma during early development.

Support Placing Children in Family-Based Settings

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General Feedback on Congregate Care & Youth Residential Treatment Facilities: For years, the AAP has advocated to improve child welfare policies to better address the needs of children and families. The AAP has long held that the long-term institutionalization of children and youth is harmful to their health and well-being, and we have instead called for increased community-based mental health supports that allow them to live safely in family settings.

This is why the AAP was proud to have endorsed and championed the Family First Prevention Services Act ("Family First"). The bipartisan Family First is a landmark child welfare reform law that is creating critical policy change to better serve vulnerable children and families in two ways: 1) preventing unnecessary foster care placements with services to keep families safely together; and 2) prioritizing family-based placements for children who do need to enter foster care, and ensuring that residential treatment settings are high-quality and appropriate when children require specialized time-limited care not available in a family setting. This law has the potential to continue to significantly shift child welfare policy upstream and emphasize the importance of prevention.

Family First made critical policy changes to improve standards for residential treatment. These reforms emphasize that children and youth only enter such a setting if they have a need that cannot be met in a family placement, and if a particular setting is high-quality enough to meet those needs. Family First does this by creating a new program model, the Qualified Residential Treatment Programs (QRTP). The law is designed to ensure QRTP placements are appropriate, time-limited, and meet a child's treatment needs so that they do not languish in settings which do not support their growth, development, and healing. QRTPs also must offer aftercare supports to facilitate a transition to the community after residential treatment. These standards align with what physicians and other child health experts know: children fare best in families.

The House Committee on Ways & Means plays a critical role in ensuring that Family First is properly implemented so that children in foster care have access to coordinated, high-quality, and trauma-informed care and support, as well as ensuring that all youth residential treatment facilities are meeting the standards as required by law. Children in foster care experience disproportionate exposure to trauma and, as a result, often have complex health needs across multiple domains, including medical, developmental, educational, and behavioral and mental health problems. The AAP encourages the Committee to ensure that the actions of federal, state, and local governments involved with the child welfare system, as well as all youth residential treatment facilities, adhere to these three key precepts and properly implement laws like Family First.

Continue Congregate Care Reforms: Last year, the AAP published a new report, "[Family First Implementation: A One-Year Review of State Progress in Reforming Congregate Care](#)," which reviewed state-level implementation of the congregate care reforms included in *Family First*.ⁱⁱ This report was developed with experts from Chapin Hall of the University of Chicago, individuals with lived experience in foster care, and pediatricians to examine state-level implementation of the congregate care reforms contained in *Family First*. Through a survey of all 50 states and targeted focus groups, the research examined issues like: how states are

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reforming their congregate care settings, how they are implementing and financing congregate care reform, and what barriers, success, and recommendations states have for implementing changes to congregate care outlined within Family First.

From this report, the AAP was pleased to see that the majority of states have changed their provision of congregate care to align with Family First. This was accomplished after extensive engagement with diverse stakeholders, including child welfare agency staff, congregate care providers, legislators, among other involved groups, to implement Family First. The majority of states attributed those changes to both Family First and pre-existing and ongoing state-led reforms. Additionally, compared to pre-Family First implementation, fewer youth are entering congregate care in some states. More states reported placing 10% or less of youth in foster care in congregate care. Kinship foster care has come to play a larger role in states’ placement array, with congregate care playing a smaller role.

However, while the report showed some improvements due to Family First, the report also showed that there is work to be done to support youth in foster care. First, many states indicated that top barriers to Family First and congregate care reform implementation are related to resource needs in: (1) workforce and staff; (2) therapeutic foster care models; (3) funding; and (4) foster families. Many states also indicated that in order to address workforce and staff issues, ensure therapeutic models are available, and successfully recruit foster families, more funding is necessary to overcome these barriers. Additionally, the report’s group participants, including young people with lived experiences, child welfare administrators implementing Qualified Residential Treatment Programs (QRTPs), and leaders of QRTP facilities, all reported significant concerns regarding QRTP staff training and capacity to tailor treatment to youth’s needs. Many participants noted that staff shortages, retention, compensation, and a lack of sustainable careers for staff in QRTPs have contributed to these concerns.

The report offers the following recommendations to better support youth in foster care and the child welfare systems throughout this country: (1) Provide states with additional state and federal resources such as technical assistance and funding; (2) Facilitate cross-system collaboration to successfully implement Family First; (3) Provide clear funding guidance to implement QRTPs; (4) Require oversight for the full array of congregate care placements, including supervised independent living and settings for survivors of sex trafficking, and the use of out-of-state QRTP placements; (5) Professionalize and invest in QRTP staff to ensure high-quality, individualized treatment; (6) Establish standards and youth advisory boards for youth- and family-driven QRTP treatment; (7) Integrate QRTPs into a continuum of prevention and aftercare; (8) Establish performance- and outcome-based monitoring of QRTPs.

The AAP encourages the Committee and the rest of Congress to invest in and support family support services by expanding funding and resources as well as invest in mental health services based on the recommendations in the report above.

Oppose Unnecessary Institutionalization: While there are many community-based mental health services and reforms that the AAP supports, the AAP strongly opposes any bills that could lead to the further institutionalization of children and youth in foster care. The numerous reports and testimonies on the abuses and neglect at several youth residential

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treatment facilities make it clear why the federal government should not incentivize these facilities with further federal funding.

In particular, the AAP strongly opposes the *Ensuring Medicaid Continuity for Children in Foster Care Act* (S. 3196). The AAP is concerned this legislation will cause significant unintended harm by prioritizing institutionalization of children and youth who instead need more community-based mental health supports to live safely in family settings.

The AAP would like to emphasize that this bill is unnecessary as Congress does not need to enact a new policy to prevent children in foster care from losing Medicaid eligibility as a result of institutional placement. Nothing in current Medicaid law pertaining to institutional placements rescinds an individual’s Medicaid eligibility. Under existing law, children in foster care are already eligible for Medicaid. Current Medicaid protections against over-institutionalization of children do not change a child’s Medicaid eligibility. Rather, these policies prevent a state from receiving federal funds for impermissible institutionalization, without impacting a child’s Medicaid eligibility or enrollment.

Family First made critical policy changes to improve standards for residential treatment. These reforms emphasize that children and youth only enter such a setting if they have a need that cannot be met in a family placement, and if a particular setting can provide the specialized services and high-quality care tailored to that individual child or young person’s needs. Family First does this by creating a new program model, the Qualified Residential Treatment Programs (Q RTP). The law is designed to ensure Q RTP placements are appropriate, time-limited, and meet a child’s treatment needs so that they do not languish in settings which do not support their growth, development, and healing. Q RTPs also must offer aftercare supports to facilitate a transition to the community after residential treatment. These standards align with what physicians and other child health experts know: children fare best in families.

The *Ensuring Medicaid Continuity for Children in Foster Care Act of 2023* (S. 3196) would create a major federal exemption from Medicaid oversight law for Q RTPs. The Medicaid Institution for Mental Disease (IMD) exclusion generally prohibits federal Medicaid funding for services provided by facilities that primarily provide mental health and substance use disorder treatment services if they have more than 16 beds. By significantly expanding investment in residential treatment instead of community-based settings, S. 3196 would create an incentive to place more children in large-scale institutions, undermining the bipartisan Congressional intent behind Family First.

At a time of pediatric mental health crisis, we need more bipartisan investment in community-based mental health services. Prioritizing institutionalization through significant changes to longstanding Medicaid policy will not expand those needed services and will instead drive interventions via residential treatment. The AAP encourages Congress to invest instead in the community-based services that support young people’s success in families. This will help both avoid unnecessary institutionalization and ensure there are needed supports for those transitioning from residential treatment to a family.

The AAP is fully committed to the success of Family First. It is essential to ensure that there are not unintended consequences from interactions between the IMD exclusion and

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Family First's QRTP requirements. Today, Medicaid waiver authority supports states in creating a comprehensive, coordinated system of care for serious mental illness and serious emotional disturbance that can include residential care such as a QRTP; this targeted authority ensures that Medicaid can meet the needs of its enrollees when states take a holistic approach to mental and behavioral health. However, enacting a sweeping federal exemption for all QRTPs could create unintended consequences that lead to children and youth languishing in large facilities, without the community-based supports they need to thrive in families.

We would welcome the opportunity to have discussions with the Committee and other critical stakeholders about how to ensure the effective implementation of Family First without creating unintended harms or undermining the intent of Family First, particularly through investment in community-based services that can promote the least restrictive environment.

Conclusion: Thank you for the opportunity to submit this testimony. The AAP urges Congress to pass a long-term, comprehensive Title IV-B reauthorization that funds IV-B for families, supports families' mental health, and builds the workforce that families need. The AAP looks forward to working with the House Committee on Ways & Means and the rest of Congress to improve the child welfare system and support the health and well-being of children and their families. If the AAP can be of any further assistance, please do not hesitate to contact Nathaniel Lim in our Washington, D.C. office at nlim@aap.org.

ⁱ American Academy of Pediatrics. Rubin, D, et al. "Needs of Kinship Care Families and Pediatric Practice." *Pediatrics* (2017) 139 (4): e20170099. Available at: <https://doi.org/10.1542/peds.2017-0099>.

ⁱⁱ American Academy of Pediatrics, Chapin Hall. "Family First Implementation: A One-Year Review of State Progress in Reforming Congregate Care." <https://downloads.aap.org/DOFA/AAP%2050%20state%20Review%20of%20Congregate%20Care%20Reform%20Across%20America.pdf>.



Chairman Jason Smith
Ranking Member Richard Neal
House Committee on Ways and Means
1139 Longworth HOB
Washington, D.C. 20515

June 28, 2024

Re: Hearing on Strengthening Child Welfare and Protecting America's Children

Dear Chairman Smith and Ranking Member Neal,

My name is Amy Harfeld, and I am the National Policy Director, representing the Children's Advocacy Institute (CAI) at the University of San Diego School of Law. We are dedicated to advocating for the rights and well-being of vulnerable children, particularly those in and aging out of the foster care system.

In conjunction with the Committee's efforts to strengthen child welfare through reauthorization of Title IV-B, I am writing to urge the Committee to consider legislative clarifications that would protect federal benefits that belong to eligible children in foster care, as set forth below.

Background and Need for Clarification:

Foster youth, among the most vulnerable populations in our country, are often eligible for various federal benefits, including Social Security Survivor and SSI Disability benefits. However, due to the lack of clear and definitive federal law, not all states screen foster children upon entry for such benefit eligibility; apply for those benefits on the child's behalf; properly manage and account for the use or conservation of those benefits; or use those benefits in the child beneficiary's best interest. In fact, most states intercept those benefits and use them to offset or reimburse themselves for the child beneficiary's cost of foster care. Federal clarification is needed to help ensure that eligible foster youth receive the federal benefits to which they are entitled.

Additionally, youth aging out of the foster care system often face daunting challenges stemming from their involvement with the child welfare system. Many of these youth were victims of credit fraud and identity theft while in care, and/or never received vital records and documents. Despite the enactment of federal law requiring credit checks and repairs for youth 14 and older and requiring the provision of vital documents to foster youth, information and data from the Annie E. Casey Foundation indicates that fewer than half of youth are getting these vital documents before leaving care, and that credit checks and repairs are not consistently occurring as required by these federal laws.

Proposed Action:

Federal law currently requires states to ensure that children receive safe and proper care and that services are provided to the child that address the needs of the child while in foster care.

However, Congress must clarify that such care and services encompass the requirement that IV-B child welfare agencies:

- screen all children immediately upon entering care to identify potential eligibility for federal benefits such as survivor benefits and/or SSI;
- timely apply for those benefits on behalf of the child;
- if serving as the child's representative payee, refrain from using the child's benefits to offset, or reimburse themselves for, the child's foster care costs; and
- if serving as the child's representative payee, properly use, manage, and regularly account to the child and his/her legal representative regarding the use and/or conservation of the child's benefits.

Further, clarification is required with regard regarding the allowance of IV-E administrative reimbursement to child welfare agencies for engaging in these IV-B agency functions, as well as for civil legal services provided to young people transitioning to adulthood from foster care and covering issues including credit, vital documents, and public benefits.

Conclusion:

By clarifying that certain services by IV-B child welfare agencies are encompassed in existing federal law, and that Title IV-E administrative reimbursements are available for the provision of critical services relating to federal benefits, we can ensure that child welfare agencies are equipped to perform the necessary functions to secure and, where necessary, manage benefits for foster youth in their best interest. I urge the Committee to prioritize these issues and provide the necessary clarifications to existing law that are crucial to ensure the well-being and future success of these vulnerable children.

Thank you for your attention to this important matter. I am available to provide any additional information or support as needed.

Sincerely,

Amy Harfeld
National Policy Director
Children's Advocacy Institute
University of San Diego School of Law



U.S. House of Representatives Committee on Ways and Means
*Written Comments for Hearing, "Strengthening Child Welfare and Protecting
America's Children"*
June 26, 2024

Chairman Smith, Ranking Member Neal, and Members of the House Committee on Ways and Means, thank you for the opportunity to submit this statement for the record.

The Child Welfare League of America (CWLA) is a coalition of hundreds of private and public agencies that since 1920 has worked to serve children and families who are vulnerable. Our expertise, leadership and innovation on policies, programs, and practices help improve the lives of millions of children across the country. Our impact is felt worldwide.

We are grateful to the Chairman and Ranking Member for holding this important hearing and we appreciate the opportunity to submit our recommendations for the reauthorization of Title IV-B of the Social Security Act. CWLA acknowledges and applauds the long history of bipartisan leadership on child welfare issues. During the hearing, we heard many important themes and good ideas with which we agree, which we will highlight below. We also wish to offer our recommendations and priorities for Title IV-B Reauthorization.

CWLA has previously submitted comments on the two Title IV-B hearings held by the Subcommittee on Work and Welfare, "[Modernizing Child Welfare to Protect Vulnerable Children](#)," in September 2023, and "[Pathways to Independence: Supporting Youth Aging Out of Foster Care](#)," in January 2024, and for the Stakeholders Roundtable in December 2023. We continue to be thankful for the Committee's attention to this important child welfare program this Congress.

The Importance of Title IV-B

Title IV-B is a small but important portion of federal funding for child welfare. It provides flexible funding to states to target root causes of maltreatment, provide services and resources to stabilize families, and provide families with connections to other systems for support. The very limited funding for prevention services stands in contrast to the far greater federal investment in paying for the costs of foster care, covered by Title IV-E, despite widespread recognition of the need to invest in upstream prevention. The Family First Prevention Services Act provides additional funding for evidence-based services to prevent families from entering foster care,

while the flexibility of Title IV-B funds can complement the more rigorous requirements of Family First and help develop evidence-based models.

Key Focuses for Title IV-B Reauthorization

Reauthorization of Title IV-B offers an opportunity to make meaningful changes to child welfare law that can provide additional investment in services for children and families, increased support for Tribal child welfare programs, and support for the child welfare workforce.

Increased Investment. Title IV-B funding has declined over the years. Child Welfare Services funding peaked at \$295 million in 1994 with current funding now down to \$269 million. Between mandatory and discretionary funding for PSSF, the services reached their peak in 2004 at \$405 million. It is down to approximately \$360 million today. Title IV-B has never been fully funded at the levels authorized, never mind the levels needed to truly transform our child welfare systems. As Representative Sanchez demonstrated during her questions, all of the hearing witnesses support increasing the funding for Title IV-B.

The reality is that the mission and purpose of Title IV-B cannot be accomplished with the current funding levels of the program. If congress had maintained these two block grants adjusted for inflation at their peak levels:¹

- The 1994 peak funding for Child Welfare Services/Stephanie Tubbs Jones total of \$294 million would be at **\$602 million (instead of \$269 million)**
- The peak 2003 funding for Promoting Safe and Stable Families (PSSF) in 2003 total \$405 million (for the core non-set asides) would be **\$666 million (instead of \$360 million)**
- A total of **\$1.268 billion for the two IV-B programs**

Increased funding in Title IV-B would allow states to better address the crises they are facing, such as workforce concerns, a shortage of resource families, and the need for concrete supports and services, and to also proactively work to improve core child welfare services such as family preservation, prevention, kin finding, and others. Programs and funding that focus on preventing child abuse and neglect and keeping children safely in their homes help to reduce the number of children entering the child welfare system, thereby reducing trauma and stress for families and reducing state and federal spending on costly out-of-home care and mental and behavioral health services for children and caregivers down the road.

Congress has committed to supporting upstream interventions by allowing Title IV-E funding to be spent on evidence-based solutions through the Family First Prevention Services Act (FFPSA). However, some families need concrete and economic support, not evidence-based programs, to keep their children safely in the home – increased investment in CWS and PSSF would allow states to provide more of these supports to families. The Committee should increase the

¹ Inflation Calculator. Federal Reserve Bank of Minneapolis. <https://www.minneapolisfed.org/about-us/monetary-policy/inflation-calculator>

availability of flexible funding for child welfare agencies to address primary prevention and family preservation to reduce child welfare involvement through increased Title IV-B funding.

Increased funding could be used to develop evidence-based approaches that will strengthen implementation and effectiveness of FFPSA. CWLA has endorsed Representatives Feenstra and Kildee's proposal, H.R. 8814, the *Strengthening Evidence-based Prevention Services Act*, to provide additional funding for such research. Too often, needed research at both the federal and state level is pushed aside for other priorities; this bill will help states and agencies to prioritize this research. We believe this proposal is a first step in the direction of a full and robust array of services available in the Title IV-E Prevention Services Clearinghouse, and we encourage the Committee to include this bill in any reauthorization text that moves forward.

Support the Child Welfare Workforce. A major theme that emerged from the witness testimony and Member questions was the need to better support the child welfare workforce; Mr. Geen in particular drew attention to workforce concerns multiple times during the hearing, noting the need for better recruitment and retention of qualified caseworkers.

All the reforms enacted by Congress in recent years and any new improvements included in a Title IV-B reauthorization are dependent upon the individual caseworker serving children and families. Supporting the workforce is a key component of achieving better outcomes for children: a Government Accountability Office (GAO) analysis of 27 available Child and Family Services Reviews (CFSRs) in 2003 showed that staff shortages, high caseloads, and worker turnover were factors impeding progress toward the achievement of federal safety and permanency outcomes.² The report noted that staffing shortages and high caseloads disrupt case management by limiting their ability to establish and maintain relationships with children and families. Research in Milwaukee and Illinois suggests that children are more likely to achieve permanence if they are assigned fewer workers over the course of their stay in foster care.³ In past hearings, your members have heard testimony from youth formerly in foster care (lived experience) who have recounted instances whereby their lives and trajectory have been helped by a key caseworker with whom they had an ongoing relationship.

Strengthening the workforce and ensuring caseworkers have manageable workloads will achieve a reduction in child abuse, reduce the number of children going into foster care, and increase adoptions and permanency for children of all ages. Title IV-B reauthorization offers an opportunity to address the workforce crisis. CWLA endorses Representative Smucker's bill, HR 8745, the *Child Welfare Workforce Development Act*, that would update the Monthly Caseworker Visits program by removing penalties and refocusing the funds on workforce recruitment, training and retention, one of the original goals of this provision when this Committee included it in 2006. This proposal is a good first step in addressing child welfare workforce concerns.

² HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff. Government Accountability Office. March 2003. Retrieved from <https://www.gao.gov/assets/gao-03-357.pdf>

³ The Impact of Turnover on Families Involved in Child Welfare. National Child Welfare Workforce Institute. 2023. Retrieved from <https://ncwwi.org/wp-content/uploads/2023/02/The-Impact-of-Turnover-on-Families-Involved-in-Child-Welfare.pdf>

CWLA also recommends⁴ the following investments and policy changes:

1. Increase funding for workforce development and training. There is currently \$20M designated for the Monthly Caseworker Visit Program. Increase this set aside to \$60M.
2. Promote recruitment and retention. There are several promising practices that are helping agencies address these key issues, and Congress should create new competitive or formula grants in Title IV-B with additional funding for states to address both recruitment and retention.
3. Increase funding for prevention and family preservation. Programs and funding that focus on preventing child abuse and neglect before it happens and keeping children safely in their homes help to reduce the number of children entering the child welfare system. Congress should increase the availability of funding in PSSF to reduce caseloads for workers by keeping families together.
4. Compile and disseminate best practices. Congress should create taskforces or direct existing entities to compile and disseminate best practices on nationwide issues, such as creating psychological safety and wellness for staff, racial disparities in child welfare and promoting a diverse workforce and reducing barriers to social work licensure.

Increasing access for Tribal programs. CWLA is grateful for the Committee’s commitment to reducing barriers to funding for Native American and Alaska Native child welfare programs and we appreciated the field hearing, “Empowering Native American and Rural Communities,” which focused on this topic. The requirements of Title IV-B often make the funding inaccessible to Tribal child welfare programs, particularly those in smaller, less-resourced tribes, and the amount of funding available is too small to justify the effort needed to secure it. CWLA has endorsed H.R. 8621, *The Strengthening Tribal Families Act*, from Representatives Bacon and Chu and we encourage the Committee to prioritize the inclusion of this bill in Title IV-B Reauthorization negotiations. CWLA is also supportive of increasing the tribal set-aside in PSSF.

Recommendations Beyond Title IV-B

Throughout the hearing, there were many important comments and recommendations that fell outside the scope of the Title IV-B program, but within the jurisdiction of the Committee.

Addressing Poverty for Families with Child Welfare Involvement. CWLA applauds Chairman Smith and Representative Gwen Moore for raising the need to address poverty for families involved in, or at risk of involvement with, the child welfare system. Reducing, and eventually eliminating, child poverty is a critical step in achieving important child welfare policy goals like preventing child abuse and neglect, prioritizing and increasing family preservation, and reducing the need for foster care. Too often, poverty and the lack of economic support that exists in

⁴ Transform Child Welfare through Support for the Workforce. Child Welfare League of America. Retrieved from: https://www.cwla.org/wp-content/uploads/2023/11/CWLA_PolicyBrief_WorkforceR3.pdf

impoverished communities contribute to circumstances that may prompt involvement of children and families in the child welfare system.⁵

Title IV-B accounts for only 4% of child welfare funding nationally; even with a meaningful increase in funding, there is not enough money in this program to address the root causes of poverty in a significant way, nor could states lift families out of poverty through this program. PSSF funds can provide emergency stabilization funds for families, but there are other programs that can better address the issues faced by children in families with low incomes.

As the House tax writing committee, the Ways and Means Committee has the ability to amend the tax code to provide support for families to escape poverty. Chairman Smith's bill, the *Tax Relief for American Families and Workers Act*, has the potential to do much more to address the needs of families at risk of child welfare involvement by directly providing additional financial resources for families that need them; CWLA has endorsed and supported this bill. Furthermore, a fully refundable Child Tax Credit would provide relief for families with the lowest incomes and CTC monthly payments would provide steady support for such families, allowing them to meet basic needs on a consistent basis. Research from the Expanded Child Tax Credit has found that most families spent these monthly payments on meeting basic needs, such as food, essential bills, clothing, school supplies, housing and child care.⁶

The Temporary Assistance for Needy Families (TANF) program offers another opportunity to address child and family poverty; CWLA submitted comments for the record for the two TANF hearings this Congress, "[*Welfare is Broken: Restoring Work Requirements to Lift Americans Out of Poverty*](#)" and "[*Where is all the Welfare Money Going? Reclaiming TANF Non-Assistance Dollars to Lift Americans Out of Poverty*](#)." TANF is important to child welfare for three reasons: its role in providing support to relative caregivers, its significant financial support to wrap-around child welfare services, and its potential to address child poverty, which research has shown is a risk factor in abuse and neglect.

As of 2019, States were spending approximately \$1.7 billion of their TANF funds on child welfare-related spending, including to address the concrete and economic needs of families; this spending is more than double the total funding of Title IV-B. The first purpose of TANF is to allow children to remain at home, making the program complimentary to Title IV-B's focus on family preservation. The TANF block grant has not been increased, and was actually reduced in 2012, despite rising inflation and cost of living eroding its value by 40 percent. An increase in the TANF block grant would provide additional support to caregivers with low incomes. Some of the proposals to modify Title IV-B funding could be better addressed by reauthorizing and expanding TANF, returning the program to one of its vital uses from 1996: allowing states to provide much-needed emergency services, supports and assistance. Additionally, as TANF funding has shrunk, it has not supported relative/kinship caregivers at the same levels as it did in the past.

⁵ Lift Children out of Poverty. Child Welfare League of America. April 2024. Retrieved from: https://www.cwla.org/wp-content/uploads/2024/04/2024_PB_HT_ChildPoverty_e.pdf

⁶ Megan A. Curran. 2021. "Research Roundup of the Expanded Child Tax Credit: The First 6 Months." Poverty and Social Policy Report. Center on Poverty and Social Policy, Columbia University. Vol.5, no.5. www.povertycenter.columbia.edu/publication/child-tax-credit/research-roundup

CWLA supports the inclusion of poverty reduction as one of the core purposes of the act, as we did more than two decades ago. We feel this is an important step in helping to focus TANF on assistance for families who are poor. TANF reform is an opportunity to focus on reducing poverty for children, and re-focusing the mission of the TANF program on child poverty would provide critical relief to families both in and outside of the formal child welfare system and could reduce reports of suspected child maltreatment due to poverty-related neglect.

Title IV-E Reform and Investment. Although the hearing was focused on Title IV-B reauthorization, many of the concerns raised could be better addressed in Title IV-E, the largest funding source for child welfare programs. Ms. Petersen, in her testimony, spoke to the lack of support for young people who transition from foster care to independence, and Mr. Geen acknowledged the need for additional funding and support for youth in care. The Chafee program offers these services for older youth, and additional funding for this program and the Education and Training Vouchers (ETVs) would help states to provide more support for these young people.

Additionally, CWLA has endorsed H.R. 7010, the *Increasing Access to Foster Care Through 21 Act*, introduced by Representatives Chu and Houchin, which would incentivize states to extend foster care through age 21, providing additional stability and support to young adults who choose to remain in care.

Chairman Smith and Work and Welfare Subcommittee Chairman LaHood have expressed a desire to modernize child welfare law to meet the current needs of families and communities through Title IV-B reauthorization. While there are certainly many updates that can and should be made in Title IV-B, some of which are listed above, it is impossible to talk about modernizing child welfare without acknowledging that Title IV-E eligibility is still tied to the 1996 Aid to Families with Dependent Children (AFDC) eligibility. We cannot claim that we are modernizing child welfare if we continue to accept an eligibility standard that is nearly 30 years old and excludes more than 60% of children in foster care;⁷ the Committee must address this outdated framework. CWLA is eager to work with the Committee to identify alternative eligibility criteria to meet the needs of families and communities today.

Residential Treatment. Although the hearing was not specifically about residential treatment, as Title IV-B does not typically fund residential care, we acknowledge and thank Ms. Hilton for her testimony about her experiences in residential facilities and her advocacy work on the topic. CWLA has endorsed the *Stop Institutional Child Abuse Act*.

CWLA submitted a [statement for the record](#) for the recent Senate Finance Committee hearing, “*Youth Residential Treatment Facilities: Examining Failures and Evaluating Solutions*,” drawing on CWLA’s Standards of Excellence in Residential Services and the CWLA National Blueprint for Excellence in Child Welfare. Many of CWLA’s recommendations fall outside the jurisdiction of the Ways and Means Committee, but Committee members and staff with expertise

⁷ Title IV-E Programs Expenditure and Caseload Data 2022. Department of Health and Human Services. Administration for Children and Families. Children’s Bureau. September 2023. Retrieved from: <https://www.acf.hhs.gov/cb/report/programs-expenditure-caseload-data-2022>

in child welfare programs and services have an opportunity to inform and work with counterparts in other House Committees and across the Capitol to advance policies that raise the standard for residential treatment, provide more oversight and accountability for programs that are privately funded or owned by private equity firms, and support the full array of mental- and behavioral health services needed before, during and after residential treatment.

Conclusion

We wish to again thank Chairman Smith and Ranking Member Neal for hosting this hearing and for their attention to and support of the children and families involved with the child welfare system. Reauthorization of Title IV-B offers an opportunity to improve our policies and funding to make a difference in the lives of children and families. CWLA stand ready and eager to work with the Committee in ensuring that federal child welfare funding best supports our agencies and communities as they work tirelessly to prevent and address child maltreatment.

Terri Sorensen
Chief Executive Officer
Friends of the Children

Testimony to the U.S. House of Representatives Committee on Ways and Means
Strengthening Child Welfare and Protecting America's Children
Through Reauthorization of Title IV-B

Hearing Date: June 26, 2024

On behalf of the Friends of the Children national network, comprised of 28 independent chapters working in 37 local communities (rural, mid-sized and urban) in 22 states including partnerships with Sovereign Tribal Nations, I thank Chairman Smith, Ranking Member Neal, and members of the committee for the opportunity to provide testimony in support of the committee's discussion regarding the reauthorization of Title IV-B with a focus on keeping families together, preventing child abuse, and ensuring support for kinship care providers.

At Friends of the Children, we meet children between the ages of 4-6 and invite them and their families to have a paid, professional mentor walk alongside them until they graduate from high school – 12+ years, no matter what. We take mentoring out of the volunteer realm, recognizing that for children and families facing the hardest things in life like foster care, having a trained, supervised, paid professional mentor who stays for the long-haul is the key to impacting generational change.

As noted by witnesses in oral testimony on June 26th, as well as by committee members, Congress has an opportunity with Title IV-B Reauthorization to invest in child abuse prevention and in strategies that are proven to stabilize families and keep them together. Our decades of experience show that investments in children and families – both in concrete and relational supports – can result in fewer children needing to go into foster care, without compromising child safety. This reduces trauma and its life-long impacts and saves taxpayers money.

In partnership with child welfare systems, schools and community-based organizations across the country, Friends of the Children works with communities to identify the children and families most at risk of foster care – or who are already experiencing foster care – to enroll in our program. For example, our chapter in Austin, Texas works with the Court Appointed Special Advocates (CASA) program to enroll children who have been in foster care and are returning home to their families. In Austin, children who have been in foster care and go home to live with family typically go back into care about 10% of the time within one year. Within five years, that number goes up to 40%. Now, more than three years into the CASA partnership, **not a single reunified child with a professional mentor in Austin has gone back into foster care.** In Los Angeles, our chapter works with child welfare offices and community-based organizations to select children that the County has determined are most at risk of foster care entry – children in families with multiple hotline calls, who have already received voluntary services and whose caregivers are experiencing behavioral health challenges like substance use and mental health. Like in Austin, **not a single child with a professional mentor in the Los Angeles site implementing this focused enrollment approach has entered the foster care system.**

Friends of the Children attributes these successes to the highly individualized, data-driven approach we take with our model, as well as to the fact that our mentors are paid, professionals. A professional mentor specializes in relationship-building and applies a proven, intentional practice model to advance outcomes. Professional mentors are also trained to leverage best practices developed within related fields, such as education, mental health and social work. Like a peer mentor, professional mentors bring lived expertise as well as experience to the work, i.e., are trusted members of and/or have an unusually close understanding of the community served. Professional mentors, however, also commit to the vocation of mentoring full time. They meet specific standards for experience as well as education, training and supervision. A professional mentor's job it is to build individual capacity to achieve personal goals through activities that are: a) intentionally designed to advance intermediate and long-term outcomes; and that are b) highly personalized to the strengths, culture, and environment of the mentee. Finally, professional mentors measure their efforts and outcomes, and then use that data to reflect and adjust their practice.

Friends of the Children has developed a strong reputation based on the achievement of proven, measurable outcomes for youth and families facing the greatest challenges. We don't just achieve strong program outcomes – we celebrate lasting life outcomes for young people. Young adults who experience involvement with the foster care system and who graduate from the program achieve our three long-term outcomes at the same rate as all our program participants – remarkable results considering the national statistics for youth transitioning out of foster care: 83% of youth with Friends graduate high school, while 55% without a Friend graduate high school; 93% of youth with Friends avoid the juvenile justice system, compared to 74% without Friends avoid the juvenile justice system; 98% of youth with Friends avoid early parenting, while only 74% without a Friend wait to parent until after their teen years; and In addition, while young adults who've experienced foster care are just as likely as their peers to have college aspirations, only 32 to 45 percent pursue higher education after high school. At Friends of the Children, we celebrate the fact that 92% of our program graduates go on to enroll in post-secondary education, serve our country, or become employed in a living wage job.

The Harvard Business School Association of Oregon study on Friends of the Children found that **every \$1 invested in Friends of the Children yields more than \$7 in return to the community in savings.**

As you heard from advocate and public speaker, Tori Hope Peterson, sustained meaningful relationships are critical to creating hope and opportunity. Her experience is supported by decades of research that shows that transformational change is possible when children have a long-term, consistent relationship with a caring adult who believes in them.

Congress has a tremendous opportunity through reauthorization of Title IV-B to support pathways to prevent harmful and costly outcomes and promote greater well-being so youth and families can thrive. We ask for consideration of the following policy recommendations:

- We encourage the committee to leverage the reauthorization of Title IV-B to specify in the purposes of Title IV-B that funds should focus on where there is the greatest opportunity for impact, i.e., family permanency goals for youth, including preventing the need for foster care by strengthening families, and supporting young people who are at highest risk of foster care entry (including older youth) but who don't qualify for Families First/IV-E funding.

- We also encourage an accountable, outcomes-focused approach to State Title IV-B (Child and Family Services) Plans. Prioritize youth and family voice for purposes of accountability, and consider programs like Friends of the Children, that regularly solicit input from youth and caregivers about what is and isn't working, and whether they'd recommend the program.
- Finally, we encourage the prioritization of investment of IV-B funds in relationship-based interventions that provide highly individualized services and supports to families, in recognition that transactional approaches struggle to effectively meet the needs of young people from a range of communities and backgrounds.

Thank you again for this opportunity to provide testimony in support of this critical federal funding that has the potential to create a better future for all of us by investing in better outcomes for young people, including those impacted by foster care. Friends of the Children stands ready to assist the committee by providing further information, data, and insights to guide your decisions.

Written Testimony of Raquel Anne Ross, Esquire
Before the U.S. House Committee on Ways and Means
Strengthening Child Welfare and Protecting America's Children.

Chairman Smith, Ranking Member Neal, and the distinguished members of the committee, thank you for allowing me the opportunity to provide written testimony and comment to be included in the hearing record from June 26, 2024 on Strengthening Child Welfare and Protecting America's Children.

My name is Raquel Anne Ross, Esquire. I am a retired attorney, licensed to practice law in Pennsylvania. Prior to my retirement, I worked for over a decade as the founding attorney of Raquel Ross Law, LLC, where I focused on Family law, Guardianships and Special Education law, and then spent time as a legislative drafting attorney for the Commonwealth of Pennsylvania Legislative Reference Bureau. In addition, I represented children as a Guardian *Ad Litem* for multiple counties in Pennsylvania.

I live in Pennsylvania with my husband, WO-1 Stephen Ross, and our daughter, Isabel. After Isabel's birth in 2013, I became involved in non-profit advocacy work for individuals with complex special needs, serving as Policy Advisor for the Pennsylvania Down Syndrome Advocacy Coalition, as an Ambassador for the National Down Syndrome Society, and as a member of the Down Syndrome-Autism Connection. Locally, I served as President of the Centre Region Down Syndrome Society, and co-founded the Arthur C Dale Foundation, which serves to raise awareness for disabled veterans and individuals with special needs. I retired in 2019 to care for my daughter full time, but continue to consult and advocate for individuals with special needs, specifically those with complex diagnoses. I believe that advocacy for children with complex diagnoses and special needs is important and relevant to the topic of this hearing, but would like to take this opportunity to provide specific testimony on my own experiences as a youth.

My experiences are similar to what Ms. Hilton detailed in her testimony to the Committee on June 26th. Between 1993-1997, when I was a teenager, I spent approximately two and a half (2.5) years in various residential facilities, psychiatric group homes, psychiatric hospitals, and drug treatment centers. Like Ms. Hilton, I was a teenager engaging in moderate behavioral issues, such as skipping school, sneaking out of my biological parents home, alleged drug and alcohol use, running away, participating in several fights at school, and general acting out. In a Petition filed by Centre County, Pennsylvania Children and Youth Services, hereinafter referred to as "CCCYS", in April 1995, the reasons for my dependency status and placement were specifically stated as: 1. Refusal to obey the "reasonable rule and limits" of my biological parents; 2. "[O]ngoing unresolved issues" between me and my biological parents; 3. Diagnoses of Major Depressive disorder - recurrent w/out psychotic features, Post Traumatic Stress Disorder (PTSD) - moderate severity, and self-defeating personality features; 4. Suspected cannabis dependence and alcohol abuse; and 5. Parents request.

My first placement occurred in June, 1993, when I was 13 years old. School officials contacted Bucks County, Pennsylvania, Children and Youth Services, hereinafter referred to as "BCCYS", to report that I was exhibiting signs of physical abuse on my body. I recall meeting with a caseworker one (1) time. After the report was filed, I continued to live with my biological parents and the severity of the abuse increased. My grades suffered. I was involved in several fights at school and snuck out of the house on a few occasions. Instead of being placed with a family member or foster home, I was admitted into Eugenia Psychiatric Hospital in Lafayette, Pennsylvania.

I was inpatient in Eugenia Psychiatric Hospital for approximately two (2) months. I recall being with older patients, some of them adults. My roommate was an older female teenager, or possibly young adult, who proclaimed herself to be a skinhead. Every night during my stay she forced me to stand against the wall in our room and choked me until I passed out. She told me that I should like it, it was like "being high", and did not care when I begged her to stop. It was terrifying. My screams and pleas to the staff were ignored or disregarded. Eventually, I pretended to like it and tried to not look terrified, because I thought it would be so much worse if she knew I was not enjoying myself. As far as treatment, no interventions were conducted with my biological parents, nor were the circumstances of my home life explored. I was discharged back into the custody of my biological parents. The day after I was discharged, my biological parents moved my siblings and I out of Bucks County, Pennsylvania. As far as I am able to recall, I was not contacted by BCCYS during my hospitalization or after my discharge. As an adult, I learned that County Children and Youth Services agencies in Pennsylvania are required to contact other County Children and Youth Services agencies in very limited circumstances.

I continued to live with my biological parents, and suffer abuse; thus, I continued to exhibit problematic behaviors, such as skipping school and fighting in school. At some points, my behavior was perceived by school officials and therapeutic providers as being suicidal, although this was not the case. It was stated in the CCCYS Petition that I was engaging in drug and alcohol abuse, but my actual experience with drugs and alcohol was limited. I was not out of control. I was not committing crimes, or engaged in serious drug use. I was begging for help, and being ignored and worse, punished, for trying to remove myself from the horrific abuse I was suffering at home.

CCCYS became more formally involved in my care and placement and from the fall of 1994 to February, 1995, I was placed multiple times, each placement a psychiatric facility or drug and alcohol rehabilitation center for a term less than two (2) months. Each time my placement would conclude, I would tell providers I did not want to return home, and give detailed reasons for this request. My biological parents would also tell providers that they did not want me returned home unless I rescinded my "claims" of abuse and "agreed to behave". All evidence of abuse against my biological parents was refuted or ignored, not only by my biological parents, but also by the caseworker for CCCYS, even when reported by the placement facilities. Instead, I was provided therapeutic "supports" and prescribed psychiatric medications to address my problematic behaviors.

In February, 1995, I ran away from home. I was discovered after less than a week and immediately admitted into another psychiatric hospital for two (2) weeks. During this hospitalization, staff noticed bruising on my body and burns on my hands and arms from cigarette burns in different stages of healing. When questioned about these injuries, I hesitated to tell the staff these injuries were inflicted by my biological parents out of fear that they would report the abuse to CCCYS, but still return me to the custody of my biological parents. After I refused to answer their questions, staff accused me of injuring myself. In response to this accusation, I lied and reported that one of my biological grandparents was responsible for the injuries and abuse. I recanted this claim before I left the hospital, and tried to explain why I lied, but this lie was used by my biological parents and CCCYS caseworker to refute any prior or future claims and evidence of abuse.

Upon discharge from the psychiatric hospital, I was immediately transferred to a drug and alcohol rehabilitation center. By this time, I was 15 years old. I had no real experience using taking drugs or alcohol. Quite frankly, given the amount of time I spent in facility placements, there was little opportunity for me to use drugs or alcohol. And yet, this was my second placement at a drug and alcohol rehabilitation center.

I was not the only adolescent being sent to multiple placements throughout Pennsylvania. By the spring of 1995, I would consistently come across teens who were also being placed into multiple facility placements by various agencies and guardians throughout Pennsylvania. Some of us began to cross paths in these placements. As time progressed, those of us who had become familiar with one another would compare our placement histories, sometimes even boasting about the number of facilities we had been in. We would discuss staff, caseworkers, medication regimens, and general treatment in these various placements. I wish I could write that my experiences were unique, but sadly, they were not.

After being in the drug and alcohol rehabilitation center for two (2) weeks, I was immediately transferred to a shelter for dependent or delinquent teens, Adelphoi Hilltop Shelter, hereinafter referred to as "Hilltop" in Hollidaysburg, Pennsylvania. The same day I was relocated to Hilltop, my biological parents signed a Voluntary Placement Agreement with CCCYS transferring my custody and care to CCCYS. In the Voluntary Placement Agreement, the reasons for my placement were: 1. My excessive anger at my parents, making me "uncontrollable at home"; 2. Unspecified mental health problems; 3. Drug and alcohol usage; 4. Running away from home; and 5. The recommendation that I "be placed out of [my biological parents' home]" by the drug and alcohol rehabilitation center. By this point, I had spent the majority of the last seven (7) months in facility settings as opposed to a home.

Per the Pennsylvania Juvenile Court Judges' Commission 1989 Resource Directory, Hilltop was for both dependent and delinquent males and females, and designed for "youth who are unable to be successful in a public school and have no desire to return to public school". Hilltop was located in a residential home, and set up in a similar fashion. Most of the rooms upstairs were bedrooms, each with multiple sets of bunk beds. One room was designated as an activity/school room.

I spent approximately one (1) month in Hilltop. While there, I did not attend school or perform any type of school work. Most of the days were spent inside the home, either in scheduled activities or trying to find ways to pass the time. The staff were relaxed, most of them appearing to be in their early 20s. This was by far the placement I remember most fondly. The staff, while young, were nice and the other kids were not abusive, with some of them even being friendly. It was the placement that felt closest to an actual home.

In April, 1995, a Petition Under Juvenile Law Act was filed by CCCYS requesting I be declared a dependent and remanded to the care and custody of CCCYS. The Petition was granted. The next day, I was transferred to a group home, AYS - Rosemary House, hereinafter referred to as "Rosemary House", in Windber, Pennsylvania. Per the Pennsylvania Juvenile Court Judges' Commission 1989 Resource Directory, Rosemary House was for both dependent and delinquent girls, with admission restricted to juvenile girls with "severe drug and alcohol dependency, serious medical problems, severe personality disorders or known arsonists". Most of the females in the group home had been adjudicated by a Pennsylvania Juvenile Justice System and were awaiting placement into a detention center. I did not fit into the admission criteria, nor was I involved with the Pennsylvania Juvenile Justice System, and yet my CCCYS caseworker determined that Rosemary House was the appropriate placement for me.

Like Hilltop, Rosemary House was located in a residential house, but set up more formally. The upstairs rooms contained multiple sets of bunk beds and each room housed multiple females. There was no TV or music. Contact with individuals outside of the group home was limited to CCCYS and my biological parents.

I was in Rosemary House for approximately three (3) months. Upon my arrival, all of my personal effects were confiscated, including clothing and jewelry. Residents wore a makeshift uniform consisting of knee-length shorts and solid color t-shirts. My hair was cut against my wishes.

Most of the days were spent at the group home or at "The Day Treatment School." The schedule was rigid. We performed household labor tasks or would sit at the large wooden table on the first floor or on our designated beds. Many times we were not allowed to speak or interact with the other residents. At night, you would hear residents assaulting one another.

On different days we were driven to "The Day Treatment School" in Ebensburg, Pennsylvania. The "school" resembled a warehouse. We spent the time at the "The Day Treatment School" in a single room, sitting at desks, not allowed to speak. There was no teacher, no books, no curriculum. Nothing was taught to us. We simply sat at desks in silence until we were instructed to go back to the group home.

One day, a staff member told me I had a doctor appointment scheduled, specifically a gynecological exam. While the other residents went to "The Day Treatment School", I stayed at the group home. I was told the doctor appointment would take place at the group home and

directed to a room right off of the kitchen. I was told a doctor would be examining me, and instructed to take off my shorts and underwear and lay down on a table. An individual performed an exam. The details are difficult to recall, but I remember being penetrated. After the exam, one of the staff members told me the doctor had to see me for multiple follow up appointments to treat me for an STD. No evidence has been provided to me of this medical professional or the alleged diagnosis.

Each follow-up “appointment” occurred at the group home while the other residents were at the “The Day Treatment School.” Each time, I would go into the same room, take off my shorts and underwear and receive a “treatment” that involved being touched and penetrated. It did not dawn on me until decades later that I was being sexually assaulted. In fact, at the time, as horrifying as this is, I would look forward to the appointments because I did not have to go to “The Day Treatment School” and was allowed to lay in my bed afterwards.

After transporting me to Rosemary House, I did not speak to my CCCYS caseworker again until May, 1995. She and I met one time at the group home. We sat at the dining table. She reviewed my treatment plan and bluntly explained that I would stay in Rosemary House or a similar type of placement until I “aged out”, unless I agreed to recant all allegations of abuse towards my parents and return to their residence. I adamantly refused, but about a month and a half later, I contacted her via telephone and agreed to her conditions. I recanted all of my statements about abuse by my biological parents and agreed to return to their custody. This is one of many instances where I was forced to decide between the abuse in a placement and the abuse in the home of my biological parents.

At the end of June, 1995, my placement with CCCYS concluded and I was transferred back to the custody of my biological parents. I restarted my sophomore year of school, attending a Motivational Resource Centre (MRC) Classroom in the local school district. I worked with counselors at YSB - Youth and Family Services Reunification Program, hereinafter referred to as “YSB”, and received a CSI-Intensive Casemanager, hereinafter referred to as “ICM”. While these services were aimed at providing reunification and supports for the entire family, I was the only one in the family working with these agencies.

As before, my biological parents intensified their abuse. In October, 1995, I ran away from their home again after my biological father physically assaulted me, stomping on me so hard that my stomach and back bore the imprints of the soles of his shoes. I went to Stormbreak, a teen shelter located in State College, Pennsylvania. My injuries were noted by staff but are absent from any CCCYS reports or Petitions. However, it was recommended by YSB and ICM that I remain at Stormbreak.

In November, 1995, again without my knowledge, I was placed into the care and custody of CCCYS. My CCCYS caseworker informed me that she had decided once again to return me back to custody of my biological parents after being at Stormbreak for thirty (30) days. She later noted in a Family Service Plan that my behavior escalated during my final week at Stormbreak,

and yet, she either did not or refused to understand that my actions were in fact a reaction to the plan to reunify me with my biological parents. Instead, the caseworker stated in reports that I was the one responsible for the injuries I sustained prior to running away.

In December, 1995, right before I was placed back into the custody of my biological parents, I ran away from Stormbreak, and went to stay with my maternal Aunt and Uncle. CCCYS was contacted, but refused to consider my relatives as a kinship placement. Instead, after being placed into a foster home for one night, my CCCYS caseworker picked me up and told me she was driving me back to my biological parents. Per the Placement Amendment to Family Service Plan, I “informed the [CCCYS] caseworker that [I] cannot return home because [I am] at more risk of self-harming”. This is not what I recall. I remember sitting in the passenger seat of her vehicle as she was driving, crying and begging her to not return me to their home, telling her I could not take their abuse any longer. Instead of returning me to their home, the CCCYS caseworker transported me to The Meadows Psychiatric Center, hereinafter referred to as “the Meadows”, in Centre Hall, Pennsylvania.

The Meadows, per their website, is “a 119-bed private behavioral health care facility on a 52-acre rural campus” that provides “comprehensive mental and behavioral health treatment services to children, adolescents, adults and older adults”. The Meadow is owned by Universal Health Services, which runs dozens of hospitals and operates 335 behavioral health inpatient facilities. It is accredited by The Joint Commission.

I remained in the Meadows for just shy of one and a half (1.5) years. For the first one and a half (1.5) months, I was an inpatient on the Adolescent Dual Diagnosis Unit. After that, I was transferred to their newly opened Residential Treatment Unit.

The Residential Treatment Unit, hereinafter referred to as “the RTU”, was a co-ed adolescent residential placement. Although it was offered by the Meadows and located on the campus, the RTU was supposed to be a residential placement separate from the inpatient psychiatric center. The RTU was located in its own building. The building formerly housed an inpatient psychiatric unit, so the design was the same as the other inpatient psychiatric units.

Because it was a residential placement, initially, the rules, goals and schedule were different from the inpatient psychiatric units, resembling more of a residential placement. The doors were unlocked. Residents worked to achieve different levels and with each new level came privileges. For example, residents were allowed to have personal items as music, posters, musical instruments, jewelry, hygiene items like razor blades, and makeup. If residents continued to progress in their goals, they were afforded the opportunity to participate in outings. Unfortunately, over time these key differences were reduced and before long the RTU disguised a long-term adolescent psychiatric facility that housed individuals like myself who did not meet the qualifications or diagnoses necessary for such a restrictive placement.

Staff, particularly low-level staff, were frequently transferred to and from other units, further diminishing the distinction between the RTU and other units in the Meadows. The same methods of restraint used in the psychiatric units were used in the RTU. I was frequently “coded”, a term used by the staff and patients to describe physical restraint and restriction of movement. On one particular occasion, I was coded by a male staff member. He picked me up and threw me to the ground in the hallway. Once on the ground, he rubbed my face into the carpet so severely that the side of my face was covered in rug burn. Years later, I randomly ran into this man in the community. He not only recognized me but told me that he was horrified by the things he did to me and other residents while he worked there.

Aside from physical violence by staff, residents frequently committed violence against one another, and this was often ignored by staff. On several occasions, I witnessed residents physically or sexually assaulted by one another, or was the victim of such abuse. Roommate changes rarely occurred. Sexual intercourse was not generally monitored or taken seriously. Rooms were not locked, so residents and staff alike frequently ransacked and stole personal items. Eventually, the RTU was locked down, outings ceased, and almost all personal items were banned.

In addition to physical restraint, chemical restraint seemed to be a widespread practice. By the time I was discharged, I was prescribed seven (7) different psychiatric medications, including: Trazadone, generally used for the treatment of depression; Depakote, generally used for treatment of bipolar disorder; Thorazine, generally used for sedation and the treatment of schizophrenia and bipolar disorder; Lithium, generally used for the treatment of bipolar disorder; Prozac, generally used for the treatment of depression; and Haldol, generally used for the treatment of schizophrenia and schizoaffective disorders. Given that my only psychiatric diagnoses were Major Depression and Post Traumatic Stress Disorder (PTSD), the majority of these medications were unwarranted.

Isolation was also used by staff as a means of punishment, sometimes for extended periods of time. Residents would be isolated in their rooms or in a specifically designated “safe room”. At several occasions, the entire RTU was placed on lockdown and residents were unable to leave our rooms. This could last for a part of a day or days. Contact with individuals outside of the unit was also severely limited and at times restricted completely.

Daily schedules and activities on the RTU resembled those on the psychiatric units and generally consisted of group meetings or time in our rooms. One of the staff members who frequently led the group meetings was a self-proclaimed former drug addict and alcoholic who had spent time in prison. He would frequently scream at residents and taunted us by describing how we would be assaulted or murdered if we went to prison.

Physical fitness was virtually non-existent, and generally consisted of infrequent, short walks around the grounds. The food was what can only be described as basic institutional food, without much nutritional merit. When restrained or on lockdown, food was not always provided.

Even in the RTU, residents were not provided with any essential or basic life skills. I do not recall working on concrete discharge goals. The RTU did have an educational program, titled The Residential School Curriculum, but I was not provided with any real education or curriculum to follow. By the time I was discharged, I had not completed a single semester of high school academics. I was provided with a couple of self-paced courses supplied by the Texas Tech University Division of Education, and completed each course with an A or A- average. However, Even so, I was labeled as non-compliant and uninterested in education.

I did not participate in the design or implementation of my treatment goals. My CCCYS caseworker continued to focus on reunification with my biological parents until February, 1997. Like all of the other placements, my biological parents were permitted to visit me every other week completed only a few visits.

In March, 1997, CCCYS filed a Petition Under Juvenile Law Act requesting a hearing to declare me Emancipated, stating I no longer met the criteria necessary to stay in treatment. The next day, after a hearing, I was legally Emancipated by Order of Centre County Court of Common Pleas. The next day, with little fanfare, I was discharged from the RTU and moved to my final placement, Stepping Stones Independent Living Program in State College, Pennsylvania.

My transition was difficult. I did not have any life skills. I was expected to quickly transition into a functioning adult, yet I did not understand how to function outside of a locked facility. I also did not understand the impact of my psychiatric medications or the consequences of discontinuing them without consulting with a psychiatrist. I did have one very valuable person on my side, my ICM. She pressed me to take the G.E.D. and S.A.T. I. Without her encouragement and persistence, I would not have done either. I was blessed to have her in my life would not be where and who I am today without her help. I am eternally grateful to her.

In June, 1997, I left the Stepping Stone Independent Living Program, and thus the care and custody of CCCYS. I spent the next year and a half virtually homeless in Philadelphia and the surrounding area. By the grace of something higher and more powerful than myself, I recognized the path that I was heading down and the horrors that would inevitably come with it before these horrors became my reality.

I moved back to Centre County, Pennsylvania and applied to Pennsylvania State University. A woman in the Admissions Office hand-carried my application through to a provisional acceptance. As with my ICM, I am eternally grateful to her. I graduated from Pennsylvania State University in 2002 as a member of the Schreyers Honors College with *high distinction* and a Bachelor of Science in Human Development and Family Studies. In 2006, I graduated from the University of Connecticut School of Law with a J.D. and passed the Pennsylvania Bar in 2006. Soon after being admitted to practice law in Pennsylvania, I had the honor of practicing in front of the very judge who granted my Emancipation, and dedicated a large part of my practice to

representing children as a Guardian *Ad Litem*, and advocating for children with complex special needs.

I would love to state that my experiences are unique or no longer relevant. Unfortunately, this is not the case. In June, 2022, Journalist Paul Blest published an article in VICE News titled *Inside the Rural Psychiatric Hospital Staff Call a '21st Century Asylum'*. This article is about the Meadows. I contacted Mr. Blest shortly after this article was published, horrified that the abuses I encountered in the Meadows were still rampant almost 30 years later. As far as I am aware, the Meadows has made no changes to their policies or procedures.

In October, 2021, The National Disability Rights Network (NDRN) published a report titled *Desperation with Dignity: Conditions of Children Placed in For Profit Residential Facilities*. This report outlines two critical actions that must be taken in order to protect children placed in for profit residential facilities: "1) state and county governments must immediately stop placing children in dangerous residential facilities, 2) community-based systems of support must provide a continuum of services to meet the needs of children and youth with disabilities."

The reauthorization and reform of Title IV-B is a vital step towards achieving these actions, and I thank the committee members for identifying the importance of the reauthorization of Title IV-B and for introducing legislation that will reauthorize and amend Title IV-B, in addition to the legislation introduced by members of this committee that will assist in identifying ways to keep children in the care of child welfare agencies safe. Additionally, I would like to thank Ms. Hilton and various members of this committee for their support and sponsorship of H.R.2955 - Stop Institutional Child Abuse Act.

Finally, when children make the courageous choice of coming forward and telling someone in authority that they are being hurt, they should be believed. When there are repeated reports of abuse or multiple placements, investigations should be conducted by multiple individuals to help dispel bias or inaccuracy. And while I agree with committee members that parents are fierce advocates for their children and that parents and children should not be viewed as opposing parties, there are many situations where children need their own representative and advocate, and this representative/advocate should be separate from parents, guardians, custodians and welfare agencies. When children have complex diagnoses and special needs, a representative and advocate should have understanding and experience with those needs.

As a youth, I recall on several different occasions trying to decide if it was better, safer, to live with my abusive biological parents or in facilities where I would suffer abuse at the hands of the staff and other children. I would regulate my behavior as I oscillated between what seemed to be my only two choices. As an adult, I know that there are children who are still facing this impossible decision, as well as children who cannot even communicate the need for help due to complex diagnoses and special needs. If possible, I would the members of this committee to please go and talk to children who are currently in kinship placements, foster care and facility placements. Please ask them about their experiences. Listen to the changes they would make.

Thank you for your continued work and commitment to keep our children safe. You are imperative advocates for children.

Please do not hesitate to contact me with any questions.

Raquel Anne Ross, Esquire
(814) 574-9425
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Written Testimony of Jeremy Kohomban, PhD
Before the U.S. House Committee on Ways and Means
Strengthening Child Welfare and Protecting America's Children
June 26, 2024

Chairman Smith, Ranking Member Neal, and distinguished members of the committee, thank you for the opportunity to testify today about the challenges and successes we encounter in our efforts to protect America's children.

My name is Jeremy Kohomban. My journey in child welfare began during my undergraduate studies at Emporia State University in Emporia, Kansas. Over the past 25 years, I have served in various roles across the United States, engaging directly with child welfare issues ranging from investigations and preventive services to family separation and residential treatment.

For the past two decades, I have had the privilege of serving as the President and CEO of The Children's Village. In addition, I am an advisor to the Bipartisan Policy Center's child welfare initiative and hold several local and national roles focused on advancing evidence-based strategies to reduce family separation, strengthen families, and enhance the safety net that safeguards and promotes success for America's children.

Founded in 1851 as the public/private partnership known as the New York Juvenile Asylum, The Children's Village has been [deeply intertwined](#) in the complicated history of child welfare.

Today, The Children's Village is recognized for transforming itself from an organization that was primarily focused on residential care into an industry-leading provider of a full continuum of family-focused, community-based programs. These include affordable housing in [desirable neighborhoods](#), primary prevention, community behavioral health, family reunification, life coaching and peer mentoring. We have embraced authentic partnerships with credible messengers – those with lived experience inside child welfare, juvenile justice, and related systems – to incorporate the voices of youth and families and make our programs more responsive to the needs and preferences of those we serve.

We also fully operationalized the model described when I first [testified](#) before this committee in 2015 in support of the Families First Preventive Services Act (FFPSA). Our [residential programs are the standard](#) for Qualified Residential Treatment Programs (QRTPs) as required by the FFPSA, providing rigorous short-term, evidence-informed treatment followed by intensive home-based aftercare, as well as long-term life coaching and support. Our model prioritizes family involvement during the treatment phase and pairs frequent family therapy and visitation with concrete supports, case management, and direct investment in communities. In so doing, we have done what many could not or would not do: improved residential treatment while also

drastically reducing its use, going from over 700 beds to under 150 beds today. The programs that remain prioritize working with teens who have not been adequately served elsewhere, including victims of sex trafficking, those with serious mental illness, and justice-involved teens who would otherwise be in youth or adult jails.

Residential care is not a solution; efficacious, time limited residential treatment is needed:

Child welfare has historically heavily favored various forms of residential care. Initially focused on orphans, immigrants, and indigenous populations, residential care models adopted assimilation and reeducation ideologies that claimed superiority over biological families and local communities. Captain Richard Henry Pratt's 1892 call for Indian residential schools to "[Kill the Indian in him, and save the man](#)" epitomizes this ideology. Over time, the language has evolved to sound more acceptable, often invoking mental health terminology, yet the belief persists that charitable and governmental systems can better care for children and produce successful citizens. This ideology coupled with the growing "kids in beds" business model detailed in the Senate Committee on Finance's report "[Warehouses of Neglect](#)," means that the use of evidence-deficient, under-resourced, understaffed, and costly long-term residential care remains resilient in certain corners of our sector.

The reality is stark: children in the child welfare system are predominantly poor, residing in rural isolation or urban segregation. These communities often lack quality education and accessible community-based medical, mental health, substance abuse, and supportive services. While child welfare investigations can and do target families of all races and ethnicities, [black and tribal families disproportionately suffer the impact of family separation](#). Our experience, supported by national evidence, shows that [black children progress more quickly](#) to more restrictive forms of care (such as residential and juvenile justice), remain there longer, and face poorer outcomes upon exiting. Often transitioning into other taxpayer-funded adult systems or worse. Tribal families follow a similar trajectory.

We believe the majority of children referred to organizations such as ours do not require lengthy doses of residential treatment. Most are referred to residential care [due to the lack of appropriate community-based supports and interventions](#). Evidence indicates that poor white, black, brown, and tribal children referred to residential treatment do not exhibit clinically validated mental health conditions at higher rates than middle-class children in well-supported communities. Instead, the children referred often suffer from the stress of abject poverty, lack of community safety, limited opportunities, and, in about [38% of cases](#), parental substance abuse is the identified reason for family separation. For most, the mental health and behavioral issues identified at referral are situational, not chronic. Family separation and institutional care cannot adequately address these situational mental health challenges. Effective treatment that involves [surrounding the children and family with evidence-based, responsive, supportive services that fosters healing, however, can](#).

For the small percentage of children referred to The Children's Village with clinically validated mental and medical needs, a well-resourced, evidence-informed, family-focused, short-term residential treatment program aligned with the Federally supported Qualified Residential Treatment Program (QRTP) model is required. Prompt access to efficacious clinical and medical treatments, followed by transition to family or community care, enhances healing. Children thrive best within families, ideally their own parents or appropriate extended family. When biological family is unable or unwilling, creating a new supportive family becomes imperative. At The Children's Village, we believe that every child requires at least one caring adult who provides unconditional and implicit love; it is the non-negotiable foundation for successful treatment.

We are a stronger and better child welfare system today, but we have much more to do

Child welfare is difficult to get exactly right, but we are making progress. In states like New York, successive public and private sector leaders, including our current child welfare commissioners in New York City and New York State, are leaning on the evidence to create a more supportive environment by improving the regulatory systems and allowing private organizations to take risks and innovate in ways that government cannot easily do.

In New York, these innovations led to a transformation of the residential care system, greater support for families through community embedded resources and the most exciting, the advent of people and youth with lived experience, serving alongside professionals. These credible messengers are leading us to greater sensitivity and success in ways that I could have never imagined when I encountered child welfare in Emporia, Kansas years ago.

I will close by briefly describing the work of two new organizations that are showing us all the way: Bravehearts and Fair Futures. We are fortunate at The Children's Village to be collaborating with both. They are a natural fit for us because we believe that those "closest to the problem, are closest to the solution" and these amazing young people who have experienced the child welfare system confirm our belief every day. These two models also incorporate the learning of the evidence-informed [WAY program](#) that was developed at The Children's Village 40 years ago.

The [Bravehearts](#) are the first authentically youth-led advocacy organization in New York State representing the voice of young people impacted by the child welfare, juvenile justice, and mental health systems. They have developed a training curriculum that has been endorsed and disseminated by the NY Office of Children and Family Services to all State licensed providers, developed a statewide "warm line" to provide support to young people impacted by child welfare throughout New York State, and received a 2018 Blueprint for Excellence Award from the Child Welfare League of America. The [BraveLife Intervention](#) model, which provides mentoring and support to transition-age youth, has been shown in preliminary studies to significantly reduce youth homelessness, and is now being disseminated in in other States as well.

[Fair Futures](#) was founded in 2019 as a youth-led coalition of 100+ organizations advocating for all young people in NYC's foster care system to have access to the supports they need to achieve their potential. These young people told us that they needed someone to stick with them "no matter what," including after they exited foster care, until age 26. Someone who would believe in them, let them lead, and help them achieve their goals and potential.

Like the Bravehearts, the Fair Futures model is completely centered around the unique needs, goals, and aspirations of each individual young person it supports. At the heart of the model is an authentic, trusting relationship between a young person and their Coach.

The Fair Futures model has shown strong early results and is making a systemic impact on NYC's child welfare system. Due to Fair Futures coaching, high school graduation, post-secondary enrollment, college persistence, and engagement in career experiences for young people in foster care has significantly increased across the board. For the first time in history, students in foster care are entering high schools with average graduation rates above the system average, reversing a trend of being overrepresented in the bottom 25% of schools.

Strengthening child welfare and protecting our children is extremely difficult work made more difficult by our historical legacy of disproportionate action against some Americans, leading to needless family separation, hurt and long-term system dependency. Yet, despite these difficulties, thousands of us, representing the broad diversity of our nation, proudly serve on the frontlines of child welfare and remain dedicated to this work. We are intervening to keep children safe; supporting families, foster families, and kin families; creating new families when needed, [asking ourselves the tough questions](#) and doing everything we can to help these amazing children and youth reach their American dream. Thank you for your continued leadership, your attention and your bi-partisan support of Title IV-B. The important work we do will ensure progress on the frontlines of child safety and family support.

Conference of Chief Justices Conference of State Court Administrators

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July 1, 2024

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The Honorable Richard Neal
Ranking Member
House Ways & Means Committee
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United States House of Representatives
Washington, DC 20515

Re: Hearing on Strengthening Child Welfare and Protecting America's Children, June 26, 2024

Dear Chairman Smith, Ranking Member Neal, and Committee Members,

We are writing on behalf of the Conference of Chief Justices and the Conference of State Court Administrators to address a specific aspect of the reauthorization of Title IV-B of the Social Security Act: the reauthorization of the Court Improvement Program (CIP) which is part of the Marylee Allen Promoting Safe and Stable Families Act (PSSF).

The Conference of Chief Justices (CCJ) was founded in 1949 to provide an opportunity for the highest judicial officers of the states to meet and discuss matters of importance in improving the administration of justice, rules and methods of procedure, and the organization and operation of state courts and judicial systems. For decades the Conference has made recommendations to bring about improvements in such matters. The CCJ membership consists of the highest judicial officers of the fifty states, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, and the territories of American Samoa, Guam and the Virgin Islands.

The Conference of State Court Administrators (COSCA) was founded in 1955 to assist state court administrators in developing a more just, effective, and efficient system of justice by providing a strong network for the exchange of information and methods to improve the operations of state courts. Like the CCJ, the COSCA has made many recommendations to bring about improvements in court organization and operations. Its membership consists of the top state court administrator in the states and territories noted above.

Congress created CIP in 1993 (P.L. 103-66) to assist state courts in improving their handling of child abuse and neglect cases. It is the only source of federal funding to state courts to help them fulfill their responsibilities under federal law to oversee child abuse and neglect cases and ensure that reasonable efforts are made to prevent the need for foster care and, when children must be removed, to achieve timely reunification and permanency. Because CIPs exist in every state, they are well-positioned to address challenges in the administration of legal proceedings in child welfare. CIPs provide an essential link between the courts, the legal community (including

Chairman Smith and Ranking Member Neal
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July 1, 2024

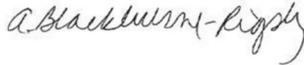
attorneys and Court Appointed Special Advocates – CASA), and state and federal child welfare agencies. Moreover, by providing funding and technical assistance to court systems in every state and territory, the CIP grants have facilitated the development of a national community of practice, enhancing the spread of best practices and mutual support between jurisdictions.

CIP funding, and the accompanying training and technical assistance, has been vital to the court systems that our Conference membership leads. The Conferences continue to make child welfare reforms a priority and continue to undertake initiatives in partnership with our CIP programs to strengthen court oversight and processing of child welfare cases. We rely on our CIP programs to make system improvements and to evaluate the effectiveness of those improvements.

CIP funding was last increased in 2006 when Congress showed its confidence in the CIP framework by considerably expanding the scope and funding of the program. Congress appropriated new CIP grants of \$10 million each directed at increasing courts' efforts to provide multidisciplinary training and to improve data collection and analysis. Total CIP funding has remained frozen at \$30 million since that 2006 increase except for a one-time 2021 emergency grant to CIPs for responding to the Coronavirus Pandemic. While CIP is a relatively small component of Title IV-B funding, it is an essential part of the program and Congress should strongly consider increasing funding for these grants to state courts. As the Pew Commission on Children in Foster Care stated in 2004, "No child enters or leaves foster care without an order of the court."

Thank you for your leadership and considering this request to join the state courts in addressing the needs of children and families in our child protection courts. If you need additional information or assistance, please feel free to contact us or Chris Wu at the National Center for State Courts. Mr. Wu can be reached at (925) 349-8917 or cwu@ncsc.org.

Sincerely yours,



Hon. Anna Blackburne-Rigsby
Chief Judge, District of Columbia Court of Appeals
President, Conference of Chief Justices



Greg Sattizahn
State Court Administrator
South Dakota Unified Judicial System
President, Conference of State Court Administrators



Hon. Susan Christensen
Chief Justice
Iowa Supreme Court
Co-Chair, CCJ/COSCA
Courts, Children, and Families Committee



Mr. Corey R. Steel
State Court Administrator
Nebraska Supreme Court
Co-Chair, CCJ/COSCA
Courts, Children, and Families Committee

cc: Members, House Ways and Means Committee



Rod Kempkes
President and Chief Executive Officer

July 9, 2024

To: House Ways and Means Committee

From: Boys Town National Headquarters
14100 Crawford St,
Boys Town, NE 68010

Re: Full Committee Hearing: Strengthening Child Welfare and Protecting America's Children

Dear Chairman Smith and Ranking Member Neal:

On behalf of Boys Town, thank you for the opportunity to provide comments on the June 26 hearing, *Strengthening Child Welfare and Protecting America's Children*.

Since our founding in 1917, Boys Town has been working with American children experiencing the most complex needs. The children we serve have suffered abuse, neglect, abandonment, and often involvement in the juvenile justice system. The inspired vision of our founder, Father Edward Flanagan, sparked a revolution in child and family care that echoes today in the work and mission of Boys Town. His heartfelt desire to make the world a better place for children lives on because people continue to believe that every child deserves to be valued and loved, and to live a healthy positive life.

At Boys Town, we believe that every child, regardless of circumstance, deserves the opportunity to succeed. We also recognize that every child is an individual with unique needs. That's why, over many decades, we have developed a distinctive, research-based approach to achieving our vision that has proven successful for tens of thousands of children and families.

Boys Town believes that children and families must be provided the right services and interventions at the right time to yield results. Boys Town programs include in-home services, community-based prevention-intervention services, school-based services, mental health and addiction treatment for children and adolescents, and serve as a vitally important alternative to incarceration. While our flagship campus is best known nationally for its high quality, family style, evidence-based residential program that primarily serves youth impacted by or at risk of entering the juvenile justice system, it is important to recognize that fewer than one percent of youth served by Boys Town each year receive services outside their own homes and communities.

Boys Town applauds the June 26 hearing, *Strengthening Child Welfare and Protecting America's Children* for centering the voices of people with lived experience. Boys Town incorporates youth leaders within our care models. For example each year, students vote for the Village of Boys Town Mayor and Vice Mayor, who lead and represent the student body. These youth are members of the Village board and are engaged in planning activities and participating in many decisions about the care provided and well-being of the youth served on our campus. Boys Town offers educational experiences to help youth learn to advocate for themselves and others, weigh-in on needed judicial and policy discussions and help lead student-centered forums that will inform and shape better systems of care and support. We collaborate

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BoysTown.org

Saving Children, Healing Families®



with external partners to identify current or former Boys Town youth to speak on national and state panels and to serve on committees that seek the voice of young people who have lived experiences of being system involved.

We simply cannot improve the child welfare system without putting people with lived experience at the center of the work, which is why we are proud to endorse H.R. 8815, the *Youth and Family Engagement in Child Welfare Act*. The bill ensures that families and youth with lived experience are consulted to ensure their voices and perspectives are represented in the development of State plans.

Children and youth should be served in their own homes and communities whenever safely possible. Our In-Home Family Services professionals meet with families in their homes, in a non-judgemental way, to address the underlying stressors that put families at risk of involvement with the foster care system, including substance abuse, domestic abuse, and extreme behavioral challenges with the goal of keeping families together. Another core prevention program, Common Sense Parenting® (CSP), is a parenting program that can benefit every family. The program's easy-to-learn techniques address issues of communication, discipline, decision making, relationships, self-control and school success.

The proactive skills and techniques taught in CSP classes have helped parents from diverse backgrounds create healthy family relationships that foster safety and well-being at home, in school, and in the community. A randomized controlled trial found CSP improved positive parenting practices and emotion regulation skills in children, with reduced adolescent substance use, delinquency, and school suspensions (55%).¹

When home is not a safe option, family based residential care plays a vital role in the continuum of services for at-risk youth. In over 100 years of delivering child-centered, family-oriented services, we know there will always be a small number of children and families who need higher levels of intervention. Many youth and families often have exhausted all other services and options leaving parents overwhelmed and in need of more intensive professional interventions. High-quality congregate care for the most at-risk children and youth ensures that both they and their families receive the right services at the right time to address their unique needs.

The following core elements are essential to a safe environment, protecting youth and supporting them in achieving positive life outcomes:

- Focus on youth rights
- Require student and family orientation, including clear, accessible policies and procedures
- Require and ensure opportunities for participant involvement in their own treatment plan
- Ensure a model of care that is evidence based and backed by research and fidelity
- Elevate and support sophisticated continuous quality improvement as part of the culture
- Require accreditation and state licensing compliance

The Boys Town Model® is based on the approach that each child is an active participant in the teaching and learning that occurs. The goal is not to control children, but to help them to take control of their own

¹ Duppong Hurley, K., Lambert, M. C., Patwardhan, I., Ringle, J. L., Thompson, R. W., & Farley, J. (2020). *Parental report of outcomes from a randomized trial of in-home family services*. *Journal of Family Psychology*, 34(1), 79–89, at: <https://doi.org/10.1037/fam0000594>, and, Mason et al., 2015, 2016, Peer Network Counseling as Brief Treatment for Urban Adolescent Heavy Cannabis Users, at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5148746/>



lives by teaching them pro-social skills, new ways of behaving and how to develop and maintain healthy relationships. That's what Boys Town's programs are designed to do, and the outcomes tell the story.

In 2023, Boys Town's High Quality Family Home-style Program served 661 youth between the ages of 9 and 18. Females represented 42% and 58% were males who presented at admission with challenges such as: relationship problems with immediate family, failure to follow instructions of authority figures, verbally aggressive toward others, poor anger control, relationship problems with peers, and court involvement. After staying with us for an average of 13 months, 76% of youth met their goals which included: returning home, living independently as a young adult, and continuing in other treatment. Approximately 24% continue to struggle due to homelessness, incarceration, or other unknown circumstances. The data from 2023 are on par with previous years and we continually strive to help students achieve positive and meaningful outcomes. Finally, and as noted in the introduction, the number of students participating annually in Boys Town home-style care represent fewer than 1 percent of students served across the United States.

Residential programs that produce poor outcomes rely on outdated, ineffective, and harmful models of care that emphasize punitive and coercive practices (Gillen, 2012; Mohr et al., 2009). Tragically, some for-profit "providers" have caused abuse and other kinds of unconscionable harm. They should not be placed in the same category as evidence-based residential programs with proven intervention models and high-quality operating standards. There are a number of high-quality non-profit residential care programs such as Boys Town's, rooted in sound science and administered by highly trained and supported staff who can provide individualized care in a safe, welcoming environment, where people are prioritized over profits.

Many youth make behavioral and academic progress while in residential care, but face challenges maintaining these skills after they depart. Boys Town's On the Way Home® program targets and supports youth transitioning from out of home care and their families through school dropout prevention, parenting education, and homework support that encourages parental involvement. We are proud that our Common Sense Parenting® and On the Way Home® programs are listed on the Title IV-E Prevention Services Clearinghouse as promising practices. The overall goals are to help youth maintain the gains they make, keep them at home and in school, and prevent future out-of-home placements.

Title IV-B plays a critical role in preventing child welfare system involvement; the flexibility of this funding allows for investment in supports to mitigate abuse and neglect risks and preserve family safety and wellbeing. Increasing these flexibilities will allow for this work to be done with primary prevention as a model and that will ensure families never have to access the child welfare system and that address and help meet family's needs based on risk factors. By increasing Title IV-B funding and flexibilities for states and streamlined reporting, the need to come into a system will decrease, while the likelihood that children and families get the necessary services and supports needed to be successful and united will increase.

Title IV-E makes possible interventions to strengthen child safety, as well as improve family stability and wellbeing, so youth may return to permanency. In particular, Kinship Navigation and Kinship and Relative



placement support to reduce trauma for children and youth placed out of home; and support of housing and life skills education for former foster youth transitioning to independence have been shown to improve the long-term success of systems-involved youth.

Boys Town applauds the Committee's commitment to keeping families together whenever possible and safe, providing prevention services that keep children out of foster care, and to increasing community-level capacity to support children and families. Thank you for taking these recommendations into consideration, and for your bipartisan commitment to the wellbeing of children and families at risk or involved in the foster care system.

Sincerely,

Rod Kempkes
President and Chief Executive Officer



Driving Systems Change
In Child Welfare

**Testimony for the Record of Sixto Cancel
On Behalf of Think of Us
Before the U.S. House Committee on Ways and Means
“Strengthening Child Welfare and Protecting America’s Children”
June 26, 2024**

Chairman Smith, Ranking Member Neal, and Honorable Members of the House Committee on Ways and Means, thank you for holding the hearing on *Strengthening Child Welfare and Protecting America’s Children* and for the opportunity to submit written testimony. On behalf of Think of Us, I want to express gratitude to the Committee for its bipartisan commitment to comprehensive reauthorization of title IV-B and its attention to building a child welfare system that is family-centered and prevention-focused.

Think of Us is a research and design lab dedicated to fundamentally rearchitecting the child welfare system, with the children, families, and communities that have been impacted by the system at the center of shaping what it should be. Founded and co-led by people with lived experience in foster care, Think of Us engages system-wide in participatory research, virtual support services, proximate policy, and innovative partnerships with state and local governments. Since 2020, Think of Us has engaged with over 50,000 individuals with lived experience. Our recommendations are based on the invaluable insights shared by those who have been touched by the system and child welfare organizations.

Think of Us commends the Ways and Means Committee for holding this impactful hearing and for the diligent attention that the Committee has paid to advancing a comprehensive reauthorization of title IV-B. We were especially pleased to see the strong bipartisan emphasis on supporting families before they ever have need of the child welfare system and building the conditions wherein children are able to get the support they need within a family, not an institution. We further commend the four witnesses, who spoke resoundingly of the importance of community-based services that support families and ensure children have the resources and relationships they need to heal, develop, and thrive.

Think of Us is proud to have joined with dozens of child welfare organizations to advance the [consensus recommendations](#) for title IV-B reauthorization and reform and to have [called on Congress](#) to restore funding levels for this vital program to where they were twenty years ago. We believe firmly that these recommendations are directly in line with the powerful testimony of witnesses at this hearing and with the sentiments expressed by Committee members on both sides of the aisle. To fulfill our duties to children and families, we must invest in the strength of families, child and family mental health, and the capacity of the workforce to meet child and family needs.

Grounding Principles for Title IV-B Reauthorization

Underpinning our recommendations are two essential truths. All reforms must be grounded in the expertise of children, families, and communities that have been impacted by the system, and additional resources are necessary to meet the mandate of title IV-B.

Centering Lived Expertise

To be successful, child welfare reform must recognize and reflect the inherent wisdom of affected communities. This extends beyond simply seeing children and families touched by the child welfare system as experts in their own needs. We must recognize that they are experts in the inner workings of the system itself, bringing critical perspectives that are necessary to understand the details of how the system is and is not working. Any reforms made without those perspectives will be, at best, incomplete, as they will not be responsive to the nuances of how the system truly functions and how it impacts families.

The newly-introduced, bipartisan *Youth and Family Engagement in Child Welfare Act* (H.R. 8815) is an important step toward creating a system that centers lived expertise, and Think of Us is proud to endorse it. Still, authentically engaging impacted communities is complicated practice, and child welfare agencies will need support to effectively implement these new requirements. We hope that Congress will swiftly pass H.R. 8815 and will provide additional support for States, Tribes, and Territories, including technical assistance and additional resources that allow them to authentically engage. Additionally, we call on the Administration for Children and Families (ACF) to issue comprehensive guidance and technical assistance regarding meaningful, authentic, and effective integration of lived expertise into policy and practice. Engaging in the policymaking process can be traumatic for lived experts, and policymakers and practice professionals would benefit from educational materials and direct support. Lived experts should be engaged to develop and deliver this guidance and technical assistance.

We applaud Representatives Smith and Moore for introducing this important legislation that would require consultation with impacted children and families in title IV-B planning. We urge Congress to build on their leadership to encourage integration of lived expertise at all levels of the child welfare system. The Committee should also consider opportunities to use title IV-B funds to encourage or require consultation and co-design with lived experts in child welfare practice. In assigning competitive funding to child welfare agencies and community-based providers, applicants could be required to outline the ways in which they will meaningfully engage those impacted by the child welfare system in designing, implementing, and evaluating services and programs, and lived experts should be included in the teams evaluating those proposals. Additionally, lived experts should be called upon to deliver technical assistance and to engage in or lead title IV-B-funded evaluation, research, and training programs. Child welfare agencies should be encouraged to prioritize services and programs that are built by and centered around the needs of their communities.

Further, it's imperative that people with lived experience be compensated for their expertise. In addition to requiring consultation with lived experts, the Committee must ensure that sufficient financial resources are available for child welfare agencies and grantees to meaningfully engage and compensate those experts, whether by increasing overall funding or by earmarking funds specifically for lived experience engagement and compensation.

Restoring Title IV-B Funding

Over the last two decades, funding for the title IV-B program has failed to keep pace with inflation. From FY2004 to FY2023, funding declined from over \$1.2 billion in inflation-adjusted terms to just \$710 million.¹ This has not only prevented child welfare agencies from providing critical services to children and families that needed them. It has also stifled innovation by limiting the flexible funding that jurisdictions need to create and adapt services to meet the unique needs of their communities and to invest in innovative technology practices and technology to improve efficiency and quality of programs.

States, Tribes, and territories are the laboratories of innovation in child welfare, and the flexibility of the title IV-B program has allowed these jurisdictions to develop and adapt program and service models that meet the unique needs of different populations within their jurisdiction, especially as it relates to prevention services. However, as title IV-B funding has fallen, so, too, has the capacity of child welfare agencies to innovate.

This is particularly important given the bottleneck that has been created by the Title IV-E Prevention Services Clearinghouse (Clearinghouse). While Congress intended the Clearinghouse to be a partner in identifying a wide array of evidence-based services, it has functioned, instead, as a gatekeeper, establishing overly stringent evidentiary standards that go far beyond what is required in the statute. These standards stifle innovation and limit the array of available services for States, blunting the ability of States to match services to the individual needs of their communities.

As the programs that are able to meet the strict standards imposed by the Clearinghouse are mostly those that have historically had the resources to pay for costly evaluations, this means the services allowed under the title IV-E prevention program are mostly often normalized around wealthy urban communities. Accordingly, the burden of the Clearinghouse falls most on families that are already underserved by the current child welfare system including families living in rural communities and those that are poor, Black, or Indigenous.

The goal in child welfare must always be to provide children and families the right services, in the right dose, at the right time, but the title IV-E prevention program alone does not provide a pathway for this. An adequately-funded title IV-B would complement title IV-E by creating a

¹ See the Congressional Research Service memo, "Trends in Funding Provided Under Title IV-B of the Social Security Act" sent April 19, 2024 by Emilie Stoltzfus, Specialist in Social Policy

pathway for specially designed programs and adaptations of existing programs to meet the unique needs of native families, rural communities, children and families of color, and communities of faith that are not properly served by programs that have met the rigid standards of the Clearinghouse. It would further allow these programs the flexibility needed to improve and to build the evidence base to get into the Clearinghouse, so that the services that are available reflect the needs and realities of the communities they are meant to serve. Investment in program innovation is necessary to ensure the Committee's historic, bipartisan achievement in passing the Family First Prevention Services Act can be realized.

Further, declining investment in title IV-B has stifled the ability of child welfare agencies to invest in technology, leaving the child welfare field decades behind. Modern technology offers numerous opportunities to increase efficiency of child welfare agencies, to cut unnecessary costs, and to vastly improve service delivery for families, but child welfare agencies, due to lack of investment, are still using outdated, costly case management systems that fail to meet the needs of child welfare staff and the families they are meant to serve.

Caseworkers are overburdened by these systems, with many reporting that they spend most of their time on paperwork and compliance rather than casework, leading to low rates of staff retention, poor outcomes for children, and high rates of unnecessary institutionalization. If child welfare agencies had the resources to invest properly in developing or procuring technology, they could empower caseworkers to focus on meeting the needs of families.

Technology also has extraordinary potential to support the child welfare workforce, from training through casework. Looking to other fields, we can see important applications for virtual and augmented reality in training caseworkers to safely and effectively respond to crises in the field. Predictive analytics offer the opportunity to micro-target services to where they are needed, so that child welfare agencies can make smart, efficient investments in prevention that avoid costly government interventions.

During the COVID-19 pandemic, child welfare agencies began to tap the potential of technology to support casework by leaning into telehealth and tele-casework. Continued innovation is particularly important in rural and remote communities and for families with mobility challenges, including children being raised by older kin caregivers. Technology can be used in this way to facilitate deeper, more consistent connections between youth and their families, not as a replacement for in-person visitation, but as a complement. This is especially true in instances where youth are placed away from their communities or in institutional settings. Pandemic adaptations also showed the tremendous opportunity afforded by technology to improve family engagement in court systems, facilitating involvement of the child's family and other stakeholders who cannot attend in-person proceedings.

Investing in technology requires investment. Rather than build a family-serving system on the cutting edge of technology, lack of flexible investment has starved the system of opportunities

for innovation, leaving a system that is ill-functioning and decades behind what is possible. The system cannot avoid a world that is suffused with technology. By not embracing these possibilities and investing in technological innovation, we do a profound disservice to the children, families, and communities we purport to serve.

Restoring funding for title IV-B to levels that allow for enhanced service delivery and innovation is a moral imperative. As Mr. Geen asked during the hearing, “how do you turn around a system that is not functioning without investing in the alternatives to what you are doing now?”

Focus IV-B on Families

Decades of research and the testimony of those with lived experience are clear: Children do best in families. Title IV-B is a critical source of flexible funds dedicated to ensuring that children can get the support they need within families. Though it is a comparatively small source of funding, it has substantial impact. Below, we expound upon some of the provisions that were included in the consensus recommendations.

Increase investment in family support services to keep families from coming into the child welfare system

Think of Us firmly agrees with Chairman Smith’s assertion during the hearing that keeping children at home with their parents is the best course of action so long as the child’s well-being is not threatened, and that we need additional resources to be available to keep youth home with their families. Title IV-B investments are crucial because of their ability to flexibly serve families with services that aren’t available under the title IV-E prevention program and to serve families before they interact with the child welfare system. Title IV-B is as an important complement to the historic, bipartisan investments the Committee made in Family First, allowing for development of innovative programs that can create a pipeline to the title IV-E.

Support Families’ Mental Health

We further affirm the testimony of witnesses who spoke about the need for more investments in community-based services, particularly community-based mental health services. Across the country, we face a crisis of children’s mental and behavioral health, with children reporting unprecedented rates of anxiety and other needs. While this extends well beyond the foster care system, children in foster care experience this crisis more acutely because of the trauma they have experienced that brought them to the child welfare system, and the subsequent trauma of family separation and foster care.

Congress has made major investments in community-based health in schools, but community-based mental health support is still deeply insufficient. In the absence of a more comprehensive system, foster care has become the de facto tool for dealing with children’s mental and behavioral health challenges. A not-insubstantial number of young people also enter care through voluntary placement agreements, not because of any abuse or neglect

but simply because their families cannot afford mental health treatment. If we had an effective community-based mental health system, we would not have a placement crisis, because children would be able to remain at home instead of ever coming into care.

For children who do enter the system, community-based mental health services are imperative to improving children's stability, addressing the trauma they have experienced, improving their outcomes, and ensuring that they avoid unnecessary institutionalization. Title IV-B is critical to building the conditions wherein children are able to receive the support they need in family-based settings and should be used to provide funding, training, technical support, and accountability so States and Tribes can improve the quality and availability of community-based mental health support.

There are further opportunities to improve States' investments in children's mental health through the health coordination and oversight plans in 42 U.S.C. 622(b)(15), including by requiring a focus on mental health and by improving oversight of psychotropic medications. These opportunities are discussed at length in my testimony for the Work and Welfare Subcommittee's hearing, *Pathways to Independence: Supporting Youth Aging Out of Foster Care*.

Strengthen kinship supports

Think of Us is grateful to the Committee for its steadfast support of kinship care, including in title IV-B reauthorization. Commitment to advancing kinship care is crucial because children who are placed with people who know and love them do better on nearly every measure. Decades of research has shown that, compared to non-kin foster care, children raised by kin experience greater stability and sense of belonging, improved educational outcomes, and fewer mental and behavioral health challenges and experience less abuse in care.

There are myriad opportunities for Congress to build on its long history of bipartisan support for kinship care through title IV-B, including: making explicit that kin are eligible to receive support under the MaryLee Allen Promoting Safe and Stable Families Program that is provided to foster and adoptive families, ensuring that the same support that is given to adoption in title IV-B is given to guardianship, and investing in peer support programs for kin. By making these important investments in kinship, the Committee will ensure more older youth in care are able to receive the benefits of kinship care.

Further, title IV-B should be amended to provide up-front investments in the development and evaluation of kinship navigator programs, as they have done through appropriations since 2018. The Committee recognized the value of kinship navigators in Family First, making them allowable expenses for the title IV-E prevention program. Unfortunately, despite clear Congressional intent that the Clearinghouse should consider these programs differently than other title IV-E prevention interventions, they have struggled to receive approval for reimbursement, as the Clearinghouse's evidentiary requirements do not fit the realities of

kinship navigation. As a result, the kinship navigators that are eligible for prevention program funds cannot meet the needs of families across jurisdictions, especially kin in rural communities who often face greater difficulties accessing a sparse array of services. Increasing funds for kinship navigators and guaranteeing them through a multi-year appropriation will allow States and Tribes the funding certainty to invest in the multi-year evaluations necessary to ensure programs are efficient and able to meet the needs of communities that need them.

Support foster and adoptive families.

The Committee should focus on strategies that support recruitment, support, and retention of foster families, such as those identified by the [CHAMPS campaign](#). When it comes to building a sufficient supply of foster family placement settings, the data are clear that retention of foster families is an even bigger barrier than recruitment. Effective foster parent retention strategies include access to crisis supports and mental health services, peer support and peer mentorship programs, and dedicated staff members they can call when they need help.

Additionally, as Mr. Geen asserted during his testimony, it is important that we offer kin and non-kin foster parents additional training to help them meet the mental health needs of children in care, including the opportunity to become licensed as therapeutic foster homes.

Strengthen Tribal child welfare protections.

As we work to reform title IV-B, it is imperative that we work to strengthen the Indian Child Welfare Act (ICWA) to ensure continued protections for American Indian/Alaska Native (AI/AN) children. The bipartisan *Strengthening Tribal Families Act* (H.R. 3461) would take important steps to strengthen ICWA by requiring States to work with Tribal partners to improve ICWA compliance and data collection, by encouraging the Department of Health and Human Services to work with the Department of the Interior to improve ICWA implementation, and by requiring biennial reports to Congress on the impact of ICWA implementation.

Beyond ICWA, it is also imperative that the way title IV-B funds are allotted to Tribes is reformed to increase resources to and autonomy for Tribal child welfare services. Current funding systems do not support the vital importance of Tribal child welfare, both for children in Tribal child welfare systems and for AI/AN youth in State child welfare systems. The Tribal set aside for the Stephanie Tubbs Jones Child Welfare Services Program is only \$6 million per year and roughly half of all federally-recognized Tribes receive less than \$10,000 per year under the program, with some receiving as little as a few hundred dollars each year. The MaryLee Allen Promoting Safe and Stable Families program provides only \$13 million each year for Tribes, and the statutory formula only allows Tribes that would receive more than \$10,000 to qualify for any money at all, so more than half of all federally-recognized Tribes are unable to receive any PSSF funds.

It is important that we right-size both the funding and administrative requirements for Tribes. The bipartisan *Tribal Family Fairness Act* (H.R. 2762) would increase the Tribal set aside from 3% to 4.5% and would increase the funding for Tribal child welfare courts. It would also streamline the reporting requirements for Tribes receiving under \$50,000 and would allow in-kind payments to meet match requirements. Including both of these pieces of legislation in a comprehensive title IV-B reauthorization would make important steps toward mitigating the impact of the child welfare system on Tribal communities and recognizing the rights of Tribes to exercise self-determination.

Fund workforce development

Child welfare reform can only happen at the speed of the child welfare workforce and, accordingly, we must invest in giving child welfare staff the education, training, and mental health support they need for their complex work supporting children and families. Title IV-B reform that does not include robust investment in workforce stabilization is, at best, incomplete. It will be impossible to address the underlying issues of the child welfare system without addressing the dramatic workforce crisis and rampant caseworker turnover. As Mr. Geen correctly pointed out during his testimony, it takes two years for a caseworker to learn their job, but most caseworkers don't remain on the job that long. A major factor in this is the fact that, as previously stated, the percentage of a caseworker's time and attention that is spent on paperwork, particularly paperwork that is unrelated to accountability or child well-being, which greatly damages caseworker morale. We must ensure resources are available to provide caseworkers the training and support they need and that we reduce unnecessary and unproductive burdens to allow them to dedicate their time and attention to the needs of children and families.

Thank you for the opportunity to provide testimony and for your focus on advancing a more family-based, prevention-focused child welfare system. Think of Us is eager to provide any support we can as the Committee navigates the reauthorization process. If you have any questions or if we can provide any further details about any of the ideas contained in this testimony, please contact Steven Olender, Senior Advisor for Policy Innovation at steven@thinkofus.org.



CENTER FOR THE RIGHTS
OF ABUSED CHILDREN

Strengthening Child Welfare by Reauthorizing Title IV-B of the Social Security Act to Provide Traditional Counsel for Children

The Center for the Rights of Abused Children supports H.R. 8810 to encourage states to provide abused and neglected children with traditional legal representation by an attorney to represent the child's expressed interests in dependency proceedings.

Written Testimony

Center for the Rights of Abused Children
3900 E Camelback Rd. Ste. 300
Phoenix, AZ 85018
(602) 710-1135

**U.S. House Committee on Ways and Means
On Strengthening Child Welfare and Protecting America's Children**

Wednesday, June 26, 2024, at 10:00 a.m.
1100 Longworth House Office Building
WMSubmission@mail.house.gov

Chair Smith and Members of the House Committee on Ways and Means:

Due process, equal protection of the law, and justice demand that children have a meaningful opportunity to be heard, have their position accurately advocated for, and have their rights protected. The best way to accomplish these objectives is to give children a voice in abuse and neglect proceedings through traditional attorneys appointed to represent the child's expressed interests, to protect the child's rights, and to hold the child protection system accountable.

Despite how crucial it is for children to have a voice in abuse and neglect proceedings, only ten states offer traditional legal representation to children of all ages.¹ Furthermore, 13 states provide no guarantee of child representation by an attorney.² The remaining states offer some variation of legal representation, either providing representation through attorneys who represent their opinions concerning what is in a child's best interest as a guardian ad litem (GAL) or a hybrid representation

¹ Ctr. for the Rts. of Abused Child., *States with Right to Counsel for Children* (last visited June 25, 2024) https://www.thecenterforchildren.org/wp-content/uploads/2024/05/2023_Center_for_Children_Map_Statutes_final-003-2.pdf.

² Nat'l Ass'n of Counsel for Child., *State Models of Children's Legal Representation* (May 2023), <https://counselforkids.org/wp-content/uploads/2023/05/Model-of-Rep-Chart-2023.pdf>.



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model where some children get a GAL while others are appointed a traditional attorney.³

As the committee investigates ways to improve child protection through the reauthorization of Title IV-B, the Center for the Rights of Abused Children (Center) urges the committee to incentivize states to provide children with independent legal representation. While the Center strongly supports efforts to provide all children, regardless of age, with traditional attorneys to represent children's expressed interests in abuse and neglect proceedings, we also support House Resolution (H.R.) 8810 and urge enactment.

Policy Discussion

Pending language for H.R. 8810 will require states to take steps to ensure "information about and access to available independent legal representation is provided" to child victims of abuse and neglect. This slight change provides an incentive for those 13 states⁴ to progress toward independent legal representation for children, and hopefully, toward the best practice of appointing traditional attorneys to all children in care to represent children's expressed interests in abuse and neglect proceedings. The Center asks the committee to pass H.R. 8810.

Attorneys Protect Children's Constitutional Rights.

Children possess fundamental rights. Among these rights are basic necessities, education, family, and freedom from abuse.⁵ Without fit parents to provide for and protect them, and because of the state's woeful inability to serve as a good substitute, abused and neglected children are often left without an advocate.

After being removed from their homes, children are thrust into legal proceedings where decisions that impact children's fundamental rights and liberties will be made. In these proceedings, judges decide what is in children's best interests, determinations that can influence familial and community relationships, physical and

³ *Id.*

⁴ States include: Alaska, Florida, Hawaii, Idaho, Illinois, Indiana, Maine, Minnesota, New Hampshire, North Dakota, South Carolina, Texas, Washington. Counsel for Kids, *Right to Counsel Map* (last visited June 25, 2024), <https://counselforkids.org/right-to-counsel-map/>.

⁵ Tim Keller, Ctr. for the Rts. of Abused Child., *Asserting, Arguing, and Appealing the Constitutional Rights of Children in Foster Care 7* (2024), https://www.thecenterforchildren.org/wp-content/uploads/2024/01/2024_Center_Practice_Manual_Digital_Final_012324.pdf.



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mental wellbeing,⁶ educational attainment,⁷ economic stability,⁸ likelihood of incarceration,⁹ and even mortality rates.¹⁰

Acknowledging children's due process rights is imperative when so much is at stake. When fundamental aspects of children's liberties hang in the balance, children must be heard and express their perspectives and concerns, facilitated by the appointment of a traditional attorney to articulate children's goals and safeguard their rights and interests.

Although a different arena of juvenile law, the United States Supreme Court found the Due Process Clause of the Fourteenth Amendment applies to juvenile defendants.¹¹ Consequently, juvenile defendants must be notified of their right to counsel. If they cannot afford counsel, an attorney must be appointed in delinquency proceedings.¹²

The court rejected arguments that other adults – such as parents, probation officers, and judges – could effectively protect the child's interests.¹³ When facing a serious loss of liberty, the court found:

The juvenile needs the assistance of counsel to cope with problems of law, to make skilled inquiry into the facts, to insist upon regularity of the proceedings, and to ascertain whether he has a defense and to prepare and submit it. The child "requires the guiding hand of counsel at every step in the proceedings against him."¹⁴

Children needing state care are not juvenile defendants accused of committing a crime. In dependency proceedings, they are victims of abuse and neglect. Like youth in juvenile delinquency proceedings, children who are victims of abuse and neglect are placed in the state's custody and have serious liberty interests at stake. They are removed from their homes and granted limited, if any, visits with parents and siblings.

⁶ Am. Acad. of Pediatrics, *Health Care of Young Children in Foster Care*, 109 *Pediatrics* 536, 536 (2002). See also, Md. Dep't of Legis. Servs., *Overview of Homelessness and Homeless Services in Maryland* 15 (Sept. 2015).

⁷ Mark E. Courtney, et. al., *Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at Age 26*, 20 (Chapin Hall, 2011), <https://www.chapinhall.org/wp-content/uploads/Midwest-Eval-Outcomes-at-Age-26.pdf>.

⁸ U.S. Dep't of Health & Hum. Servs., *Coming of Age: Employment Outcomes for Youth Who Age Out of Foster Care Through Their Middle Twenties*, at i (2008), <https://www.urban.org/sites/default/files/publication/31216/1001174-Coming-of-Age-Employment-Outcomes-for-Youth-Who-Age-Out-of-Foster-Care-Through-Their-Middle-Twenties.PDF>.

⁹ *Supra* note 8.

¹⁰ U.S. Dep't of Health & Hum. Servs., *Child Maltreatment 2020*, 58 (2023) <https://www.acf.hhs.gov/sites/default/files/documents/cb/cm2020.pdf>.

¹¹ *In re Gault*, 387 U.S. 1, 41 (1967).

¹² *Id.*

¹³ *Id.* at 35.

¹⁴ *Id.* at 36 (citing *Powell v. State of Alabama*, 287 U.S. 45, 69, (1932).)



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Often children are placed in the care of strangers and moved from one placement to another, lacking crucial stability. In some instances, children are placed in group facilities that are more akin to warehouses than homes. Children can experience significant educational disruption, leading to poor educational attainment. In summary, the decisions made in abuse and neglect proceedings have far-reaching impacts and can infringe upon children's fundamental rights. Children need genuine legal representation to manage legal proceedings, ensure due process, and chart the course for finding a family and flourishing. They also need assistance to hold the child protection system accountable.

Because traditional legal representation is crucial to protecting individual liberties, children in state care must have the right to an attorney. Yet, repeatedly, we hear foster youth condemning the system, quipping, "Nobody listens to us," or "Nobody cares what we think or what we want." What these children and youth need is an advocate. Someone who will make their voice heard and zealously protect their rights to safety, stability, family, and swift permanency. Providing children with an attorney accomplishes this.

Traditional Attorneys Improve Children's Outcomes.

In addition to satisfying the demands of justice, in states where children are represented by their own independent, traditional legal counsel, a developing body of research shows improved case outcomes that align with Title IV-B's objectives.

Consider the following findings:

- **Children with counsel exit foster care at rates up to 3.5 greater than children who do not have counsel.**¹⁵
 - Represented children exited to any type of permanency at rates 1.4 and 1.6 times higher than comparison children.¹⁶
 - Most of this difference appears driven by higher adoption rates (between 2.8 and 2.9) and long-term custody (between 1.7 and 3.5) as the permanency outcome compared to comparison children. Represented children were also slightly more likely to be reunified (up to 1.23 times higher than comparison).¹⁷

¹⁵ Andrew E. Zinn and Jack Slowriver, *Expediting Permanency: Legal Representation for Foster Children in Palm Beach County*, Chapin Hall Center for Children at the University of Chicago (2008), <https://search.isuelab.org/resource/expediting-permanency-legal-representation-for-foster-children-in-palm-beach-county.html>.

¹⁶ *Id.*

¹⁷ *Id.*



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- **Children and parents with legal representation obtain better results than those who do not, including less time in foster care or group settings, shorter time to adoption or guardianship, and more successful reunifications.**
 - Children represented by specially trained legal counsel were:
 - 40% more likely to leave foster care within six months;
 - 45% higher reunification rate with their biological parents;
 - 30% reduction in the rate of placement moves; and
 - 65% reduction in the rate of unnecessary school moves.¹⁸
 - Further, a cost-benefit analysis of a Washington program offering legal representation to dependent youth found a hypothetical cost savings of over \$1.2 million, without accounting for potential cost savings outside of the child welfare system, such as in the educational, employment, health, or criminal justice domains.¹⁹

Conclusion

Traditional legal counsel ensures children’s constitutional and fundamental rights. Appointing attorneys who can and must build trust, assert children’s voices, and protect children’s liberty interests in complex proceedings satisfies justice and leads to expedited permanency and improved child wellbeing.

The Center supports reauthorizing Title IV-B to provide children with attorneys to serve as the child’s independent legal counsel. H.R. 8810 sets states on a path to providing children with independent counsel, centers children’s rights and promotes family integrity or timely permanency. We urge you to support this measure and to take a significant step toward recognizing and protecting the rights of abused and neglected children.

¹⁸ Natalece Washington, *Counsel for Kids Information Sheet*, Nat’l Ass’n of Counsel for Child. (2022), <https://zmcc18.p3cdn1.secureserver.net/wp-content/uploads/2022/02/Counsel-for-Kids-Information-Sheet-2022.pdf>.

¹⁹ Wash. State Ctr. for Court Research, *Evaluation of the Washington State Dependent Child Legal Representation Program, 2021* (2021), <https://www.courts.wa.gov/subsite/wscrr/docs/DCLR%20Report%202021.pdf>.

**House Ways and Means Committee Hearing
Strengthening Child Welfare and Protecting America's Children
June 26, 2024**

Written Statement

**Dr. Melissa Merrick, President and CEO
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Chairman Smith, Ranking Member Neal, and Members of the Ways and Means Committee:

Thank you for this opportunity to submit comments after the recent hearing on Strengthening Child Welfare and Protecting American's Children. [Prevent Child Abuse America](#) (PCA America) is the nation's oldest and largest organization committed to preventing child abuse and neglect before it happens. We are a nationwide network of state chapters and nearly 600 [Healthy Families America](#) (HFA) home visiting sites. PCA America supports policies that strengthen community-based prevention by investing in practical solutions and focusing child welfare and public health resources to support kids and families before they are in crisis, helping them to thrive and avoid costly interventions.

We applaud the Committee's interest in and focus on Title IV-B. As the nation's oldest and largest national non-profit focused on the primary prevention of child abuse and neglect, PCA America believes the reauthorization of Title IV-B is an opportunity to invest in prevention efforts. The best place for children is with their families and funding should prioritize ensuring families have the best chance to be successful so that children can remain in their homes.

Our national network of state chapters relies on multiple funding streams to piece together the prevention work they do. With robust investments in Title IV-B and a focus on prevention, funding could make a dramatic difference for the important work PCA America state chapters engage in every day to protect children and support families. Prevention efforts are critically important to ensuring children and families never touch the child welfare system, and can reduce the costly interventions downstream, like child welfare and foster care.

To build the efforts focused on prevention and dramatically reduce the cost of child welfare, PCA America shares the following recommendations for improvements to Title IV-B:

- **A new grant program should be created with dedicated funds for prevention.**

Title IV-B reauthorization presents a unique opportunity for the Committee to design a bill that would prioritize prevention. As costs of child welfare and foster care continue to remain high¹ and the capacity of child welfare agencies continues to diminish under the increased pressure

¹ <https://sgp.fas.org/crs/misc/IF10590.pdf>

and turnover of the staff², a focus on prevention would alleviate some of the challenges. There could be a shift to a much-needed greater impact on children and families, while also reducing the burden on the child welfare and foster care systems.

- **The grantees for the prevention funding should be one other than a child welfare entity.**

The organizations who have the capacity to implement prevention programs are not child welfare. The expertise for prevention efforts lies with public health or non-profit agencies who understand primary prevention and approach solutions from a different perspective³. Organizations engaged in the primary prevention of child abuse and neglect understand the community context and work within those to better address the needs of a community.

- **The target population for prevention funding should be children and families who have not yet encountered the child welfare system.**

Prevention funds must be dedicated to families who have not yet come in contact with child welfare. If families' needs can be addressed before encountering child welfare, more children can stay with their families and less trauma will occur for families and children⁴.

- **Prevention programming should complement (not duplicate) Family First.**

Evidence-based or evidence-informed prevention approaches, including concrete and economic support, coordination of service models, parent supports services, fatherhood supports, and family resource networks are all activities that could prevent encounters with child welfare and are considered primary prevention.

- **Evaluation of new approaches is encouraged.**

Evaluation should be aimed at building evidence for upstream approaches that could eventually be included under the IV-E Prevention Services Clearinghouse. Outcomes might include fewer calls to child welfare, and/or a reduction of foster care placements.

Title IV-B should robustly and comprehensively support community-driven, innovative prevention strategies. Title IV-B is a small but important federal program that complements Family First. Title IV-B's flexible structure allows communities to implement and develop research informed prevention strategies that meet specific family needs in their community, without the eligibility and other requirements of Family First. This allows for more innovation and the ability to reach families

² <https://www.casey.org/turnover-costs-and-retention-strategies/>

³ Herrenkohl TI, Higgins DJ, Merrick MT, Leeb RT. Positioning a public health framework at the intersection of child maltreatment and intimate partner violence: Primary prevention requires working outside existing systems. *Child Abuse Negl.* 2015 Oct;48:22-8. doi: 10.1016/j.chiabu.2015.04.013. Epub 2015 May 12. PMID: 25979133; PMCID: PMC6134208.

⁴ Rivera M, Sullivan R. Rethinking Child Welfare to Keep Families Safe and Together: Effective Housing-Based Supports to Reduce Child Trauma, Maltreatment Recidivism, and Re-Entry to Foster Care. *Child Welfare.* 2015;94(4):185-204. PMID: 26827482.

further upstream, prior to candidacy for Family First. This type of funding is particularly critical to rural and Tribal communities that are more limited in the kinds of Family First strategies that are accessible to them. Together, Family First and Title IV-B can offer an array of services to meet the needs of families to prevent maltreatment and subsequent child welfare system involvement.

We recommend that Congress increase Title IV-B funding to better prevent families from becoming involved in the child welfare system. We recommend that Congress dedicate new Title IV-B dollars to support upstream prevention services, and have the funding flow through community partners, such as a state children's trust fund or other organizations that braid funding to support resources and services for children and families. Robust funding of Title IV-B is critical to the prevention of child abuse and neglect and will keep more families together.

Thank you for your ongoing, bipartisan commitment to supporting children and families and decreasing costly involvement in child welfare. We look forward to working with you in the coming months and years to strengthen community-based prevention efforts and helping children and families to thrive.



**Ways and Means Committee Hearing on Strengthening Child Welfare and Protecting
America's Children, June 26, 2024**

Testimony Submitted by: Jenny Pokempner, Youth Law Center
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Submitted via Email: WMSubmission@mail.house.gov

Date of Submission: July 10, 2024

Thank you for the opportunity to provide testimony on this important topic. The Youth Law Center ("YLC") is a national organization based in California, founded in 1978, that advocates to transform the foster care and juvenile justice systems so that children and youth can thrive. Through legal, legislative, and policy advocacy, YLC works to advance the rights of young people who come into contact with the juvenile justice and child welfare systems and to strengthen the supports available to them so they can transition successfully to adulthood and thrive. Key to young people thriving is growing up with family in the community. One of Youth Law Center's initiatives is the Quality Parenting Initiative (QPI). This systems change approach is designed to ensure that young people in foster care receive excellent parenting from their caregivers and centers the need of youth for strong and nurturing relationships. QPI has been implemented in over 80 jurisdictions across 10 states and is committed to developing the supports that youth need to be raised and supported in their communities by their families and supportive adults. We strongly believe that when we invest in youth and families and their communities all young people can flourish.

Title IV-B is a critical funding stream that can be used for prevention services and to fill in many of the service gaps in the child welfare continuum. The demand for services funded by IV-B has grown and the funding available does not meet the demand. We urge the committee to recommend an increase to the IV-B allocation *and* take actions to modernize and make IV-B more responsive to committee needs, especially in the area of prevention. In addition, we urge the committee to look beyond Title IV-B and consider actions to modernize Title IV-E and the Chafee Program, and continue the steps that the Family First Prevention Services Act took to increase investments in family and community based services. The testimony below will focus on the following three areas that were discussed at the hearing:

- A. **Congress Should Take Action to Actively Support the Development of Treatment and Supports for Children and Youth in the Community**
 - B. **Support Proposals to Create a Responsive and Comprehensive Array of Behavioral Health Supports for Young People in Foster Care**
 - C. **Modernize and Enhance the Chafee Program So that It Provides Transition Aged Youth the Support, Care, and Launching Pad to Adulthood All Young People Deserve**
- A. **Congress Should Take Action to Actively Support the Development of Treatment and Supports for Children and Youth in the Community**

The Family First Prevention Services Act (FFPSA) took critical steps to impose financial dis-incentives to group care, *but it did not create any incentives to create alternatives to group and residential care*. Federal leadership and investment is needed to successfully complete what FFPSA started. Below are several actions Congress can take to incentivize and support service provision in the community that can keep youth out of the child welfare system and in lower levels of care when they enter the system.

1. Fund a Core Array of Services and Supports for Caregivers and Youth through Title IV-E that Will Provide Meaningful Alternatives to Institutional Care

Retaining excellent caregivers—kin and non-kin—is critical to supporting youth in their communities and avoiding the need for higher levels of care. Caregivers have clearly told us for many years that they need more support. When they are well supported by the child welfare agency and related systems, they are able to support children and youth in their own communities, including youth with higher levels of need. Currently, many do not feel they have the support they need—this accounts for caregivers opting out of fostering and kinship caregiving or never beginning in the first place. Caregivers have told us that they need the following: peer support (mentoring, coaching, assessment, crisis intervention, advice, referrals, and related support services), reliable respite care, training, crisis support, youth development activities, individual and family counseling and behavioral health services, and child care.

Law should be developed that makes these core supports a central part of the Title IV-E program and made available to all caregivers. States should be required to develop a core set of supports for caregivers that reflects what the caregivers have identified as in need and that the agency has identified to correspond to the needs of system involved young people. Legislation should provide IV-E reimbursement for a percentage of these services and supports to incentivize their provision, which have been shown to improve placement stability as well as caregiver retention. When caregivers can rely on and easily access these supports, they have the confidence and resources to care for children and youth even those with higher levels of need who may otherwise end up in residential care or group homes.

2. Require the Administration for Children and Families (ACF) and the Centers for Medicare Medicaid Services (CMS) to Develop Detailed Guidance on How Child

Welfare and Juvenile Justice Systems Can Best Leverage Medicaid to Enhance the Community Based Behavioral Health Service Array

We have seen innovative work in states that has resulted in responsive behavioral health systems that better support caregivers who want to provide care to children in the community through Medicaid Waivers and other options. Youth and families report behavioral health services not being adequate and not being accessible; young people need more high quality and varied services and services must be available when they are needed. Many youth end up in higher levels of care because we do not have the right services for them and their caregivers are not able to access the right services at the time they are needed.

Medicaid allows states to apply for several types of waivers that allow, among other things, demonstration projects, flexibility to provide home and community based services, and flexibility in the delivery of services through managed care organizations. For many states this has led to the development of a mental health and behavioral health service array that provides much more support to youth and their caregivers in the home and community. These are continuums of services that are much more expansive and varied than what most youth currently have access to and they are much more easy to access than many services currently are. For example, through a Medicaid Demonstration Waiver California is making the following services available to system involved young people in need with few barriers: Intensive Care Coordination, Targeted Case Management Services, Therapeutic Behavioral Services, Intensive Home Based Services, Crisis Intervention Services. This waiver also has allowed managed care organizations to provide young people with an array of interventions that young people and caregivers have requested: the provision of peer support, art therapy, and access to healing enrichment activities. There are excellent examples from other states as well.

This excellent work that helps keep youth in their homes and communities could be the norm for states rather than the exception if federal action is taken. Congress should develop incentives for states that opt for waivers that expand their community based mental health service array and for waivers that center the involvement of youth and families in their development.

This excellent work could also be replicated in more states if the Centers for Medicare and Medicaid Services (CMS) and the Administration for Children, Youth and Families (ACYF) provide targeted and detailed guidance that is directed at state Medicaid agencies and Child Welfare and Juvenile Justice Agencies so they have a road map for creating these robust service array. We recommend guidance in the following three areas:

Area 1: Guidance on Expanding Peer Support Services through Medicaid

There is great consensus on the benefit of peer support in the delivery of behavioral services. Young people in and from foster care and the juvenile justice system have identified high quality

peer support services as an effective and important service that supports their treatment and wellness. While there has been consensus on the value and effectiveness of this service and

CMS has provided some guidance on how Medicaid can be used to fund peer support, young people in and from foster care and juvenile justice have limited access to this critical service.

To expand access to peer support services for youth in and from foster care and juvenile justice system, we ask that legislation include a provision that CMS issue joining guidance with ACF on the various ways states can leverage Medicaid to provide peer support to youth with experience in foster care and the juvenile justice systems and examples of best practices. Guidance should include:

- The different ways states may choose to deliver peer support services through several Medicaid funding authorities including, but not limited to, the state plan rehabilitative services option, and Section 1915(b) or 1915(c) waivers.
- The flexible ways that services can be delivered.
- The flexibilities states have to provide the service without a diagnosis.
- Ways to provide training and credentialing that streamline service access and maintain quality.

Guidance should also include recommendations on how young people can be included in developing peer support.

Area 2: Guidance on Use of Medicaid to Fund Services that Support Wellness and Address Trauma for Youth in Foster Care

Young people in and from foster care and the juvenile justice systems experience high rates of trauma and behavioral health challenges. Not only do they face barriers to access traditional services like talk therapy, they face limited access to services and activities that complement more traditional behavioral health services and promote wellness and resilience. Examples of activities include, but are not limited to: yoga, recreational activities, equine therapy, etc.

To expand access to peer support services for youth in and from foster care and juvenile justice system, we ask the legislation require that guidance be developed on how states can use the rehabilitative services and in lieu of options as well as other avenues provided by Medicaid to fund these types of services as well as strategies for streamlining the process to allow an array of health care practitioners to provide services. Guidance should also describe how to improve access to these and other more traditional mental health services by removing medical necessity requirements as discussed in recent CMS guidance.

Guidance should also include the ways that Medicaid funded crisis response can be used to prevent system involvement, help youth in the child welfare system stabilize their placements, and connect youth with community based treatment and support.

Area 3: Guidance on Use of Medicaid to Improve Care Coordination for Youth in and Leaving Foster Care

Care coordination across youth service systems and between youth and adult serving systems continues to be a challenge especially for youth in the foster care and juvenile justice systems

who may touch multiple systems and not have the support of a caregiver or parent to ensure coordination. The harm to a youth, especially a youth who is aging out of foster care, when

system coordination does not occur can be significant. Critical insurance coverage, treatment, and care can be interrupted or lost. This happens far too often in the child welfare system.

To address this problem we recommend that CMS and CCF provide joint guidance on how Medicaid can be used to improve care coordination and access, including, but not limited to the use of Health Care Homes, specialized case management and rehabilitative services. Ensure that guidance includes how this coordination can be maintained as a youth transitions from child to adult systems and should be aligned with the child welfare transition plan.

b. Support Proposals to Create a Responsive and Comprehensive Array of Behavioral Health Supports for Young People in Foster Care

As described above, the lack of sufficient and adequate behavioral health services available in the community is a reason why many young people end up in the child welfare system and in more restrictive placements. Making these services more widely available can prevent child welfare system involvement and can keep youth in community based placement if they do enter foster care. In addition to recommending the actions above, we urge the committee to support the two bills below as steps to help address the behavioral health needs of you at risk of entering foster care and who are in the foster care system.

1. Support the Foster Youth Mental Health Support Act, HR 8643 which Would Enhance State Planning and the Provision of Mental Health Supports for Youth in Foster Care

HR 8643 takes an important step to ensure that state child welfare agencies are developing plans for the provision and delivery of care that include mental health services in addition to physical health services. This bill would amend the requirements of the Title IV-B health oversight and coordination plan to include several important elements related to the provision of mental health services. It would also require that states have a plan for overseeing the prescription of psychotropic medications that includes procedures for informed consent of youth and is in compliance with professional practice guidelines. This increased oversight should reduce the problem of the over-use of psychotropics and encourage more effective and engaging treatments.

2. Support the Foster Youth Mental Health Act, S 2836 which Would Create A National Navigation Program and Invest in a More Comprehensive Behavioral Health Array for Youth and Families

The Foster Youth Mental Health Act, S 2836, is a bill that would expand and enhance the community based continuum of behavioral health care and supports to youth and families. Passing this bill would be an investment in the types of services that do keep young people out of residential and institutional care. The bill would create a national navigation program to support the mental health and wellbeing of foster youth and former foster youth. This navigation program would serve current and former foster youth, their caregivers, families and

parents. It would help them navigate and connect youth and caregivers with behavioral health services and other concrete resources that families need to support young people. Importantly, the navigation program would be “staffed by youth who were formerly in foster care and individuals with expertise in helping young people navigate and access service to treat and support their mental health and well-being, insurance coverage and renewal, housing, childcare, skills training and education, extracurricular activities, and other critical services for young people with experience in foster care.”

In addition to the development of this navigation program, the bill requires states to expand their health care oversight plan for youth in foster care “to ensure states have in place key components of a comprehensive children’s mental health system, including prevention, early intervention, and treatment. “ Among other things, this system must include:

- the use of peer specialists; training of caseworkers on connecting young people with therapeutic supports; therapeutic supports and community-based resources that are appropriate for the needs of youth (including meaningful extracurricular activities and wellness support); processes to address privacy concerns; and planning for continuity of care.
- protocols for assisting youth access all available mental health services and supports, and community-based resources, such as parenting classes, community-provided financial and in-kind material support, behavioral health care, and community engagement opportunities;
- that the case plan for a youth who needs treatment includes documentation that options for treatment have been discussed with the youth and a plan for delivery of treatments has been made.
- Procedures for continuity of care if the youth experienced a placement move.
- That the transition plan for youth leaving the foster care system at age 18 or older includes a plan for continuity of care.

If passed, this bill would create a baseline and foundation for the type of behavioral health care infrastructure that all young people and caregivers across the country need to be able to provide meaningful care and support in the community. Providing this foundation still allows for state flexibility and innovation in the exact components of their service array, but ensures that all youth and families have access to what is needed to stay in the community.

c. Modernize and Enhance the Chafee Program So that It Provides Transition Aged Youth the Support, Care, and Launching Pad to Adulthood All Young People Deserve

The Chafee Program has come a long way and provided excellent services for young people in the last 25 years. This important program deserves an update that reflects all that we have

learned in the last 25 years about adolescent development, data, changes in the economy, and the voices of young people being served. Unfortunately, despite tremendous need, fewer than

one-quarter of eligible young people receive Chafee services in a given year, and less than half of eligible youth will ever receive a Chafee service during the entire time they are eligible. In addition, Chafee's menu of services does not reflect the areas older youth say they need help with most: mental health, housing, education, employment, transportation, mentoring, and more. The program also doesn't prioritize family connections. Young people deserve a program that prepares them to succeed in a rapidly changing world

We join the Journey to Success Campaign and ask that you to take the following actions to update the Chafee Program and improve the futures of young people leaving foster care:

- **Increase the investment in young people.** Help state agencies improve their programming and reach by increasing the investment in the Chafee program by at least \$100 million per year.
- **Expand eligibility.** Provide access to and continuity of supportive services to youth during their transitional years to young adulthood by making young people who were in foster care at age 13 or older eligible for Chafee services until age 26.
- **Update the array of Chafee services and create outcome benchmarks.**
 - Require that the Children's Bureau – in collaboration with youth and young adults who have experienced foster care and other key stakeholders – to develop and recommend a set of core Chafee services and expectations/benchmarks to achieve through service delivery.
 - Require agencies to establish ongoing mechanisms for youth and young adults with foster care experience to share input and guidance to the agency on decisions about the quality and availability of programs and services.
 - Amend 42 U.S.C.A. 677 (b)(2) & (3) to require that states document that they have sought feedback from young people in and who have experienced foster care on how they plan to use funds under this section and how this feedback has been incorporated into the state's plan.
 - Require that services and resources funded by Chafee are provided, to the maximum extent possible, by community-based organizations, which can include peer-to-peer models.
- **Increase the number of youth aware of and engaged in Chafee services.**
 - Amend 42 U.S.C.A. 675a(b) to require that youth be notified about available Chafee services in an age-appropriate way and this notification be provided at least at every case review, through caseworkers and during court hearings, starting at age 14.

- Add a new subsection in 42 U.S.C.A. 677 that requires that state child welfare agencies develop an outreach plan to help agencies reach and engage eligible foster youth. This plan should be developed with input and guidance from youth

and young adults who have experienced foster care and other community-based stakeholders who can share best practices in reaching and engaging youth. These outreach plans must include a focus on reaching key populations of eligible youth including youth with disabilities, youth and young adults who are expectant or parenting, those experiencing homelessness and others. Outreach and engagement plans should include performance measures and be evaluated and improved periodically.

Thank you for the opportunity to submit this testimony for consideration. The Youth Law Center is ready and able to work with you to develop and advance solutions that will provide support for youth and families in the community.

Sincerely,

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