



## The Issue:

# CHILD WELFARE SERVICES

### Children's Bureau, Inc. Position:

We believe that all children have the right to safe, loving, and permanent families - regardless of the family structure or culture. Children's Bureau encourages the provision of adequate support and elimination of any barriers for all families who care for children in foster care, adoption, and kinship care placements.

## We support the following Legislative and/or Policy Initiatives:

- Ensure that quality, professional services are being delivered by all those involved with children in need - including public and private child welfare agencies; foster, kinship, and adoptive parents; child advocates; and the court system.
- Allow fair and consistent access to all persons wishing to provide foster care or a permanent home for a child based on their parenting ability and on the best interests of the child.
- Prohibit any legislation or public policy that would discriminate against families based on cultural characteristics such as ethnicity, race, religion, marital status, gender, income, sexual orientation, age, or physical ability.
- Fully implement kinship care program to address issues such as criminal history checks, defines kinship care, and provides supportive and financial resources.
- Implement the Kinship Navigator program to provide support for relatives who provide services to children.
- Extend Medicaid to age 23 for foster youth still in college or vocational training.
- Implement a plan to provide drivers' education and the possibility of a drivers' license to foster children.
- Make decisions regarding all subsidies or assistance at the time a child is placed in a home.
- Allocate funds for State Adoption Subsidy and establish mechanisms to distribute.
- Offer adequate support, training, and information to all families - including kin - with whom the State place children and who provide permanency for children.
- Implementation of recommendations outlined in the Commission on Disproportionality in Youth Services report to ensure fair and equitable services for all children.
- Broaden public awareness and recruitment efforts to increase the number of adoptive families and reduce the number of children waiting in foster care for a permanent home.
- Increase assistance programs that aid emancipated foster children in accessing higher education and transitional living programs.
- Increase funding, availability, and accessibility of post- permanency services for adoptive families and children and families who have been reunified.

## **Background Information:**

**In a perfect world**, the need for a formal child welfare system wouldn't exist. Every child would grow up safe and healthy, without any risk for being harmed. Unfortunately, far too many children experience the more grim reality of being abused or neglected by their caregivers. The best ending to the story for these children would be for their families to receive necessary supports and services to keep them safe, strong, and healthy. Sadly, however, this isn't always possible. For many children, placements other than their homes must be found to protect their health and well-being. Nearly 408,425 children in the United States were in foster care placements on September 30, 2010<sup>1</sup>.

Recent legislation has significantly improved the policies and practices guiding child welfare. Indiana Department of Child Services has actively been implementing practice reforms to ensure best practices are being utilized when working with a family. Additional caseworkers have been hired to ensure case loads are at the nationally recommended level of 12 active investigations per month and 17 children for ongoing workers<sup>2</sup>. Practice reforms have focused on creating trust-based relationships with families that engage families in service provision and in creating the plan to be implemented to ensure the children's safety<sup>3</sup>.

Unfortunately, both State and National child welfare systems continue to face critical shortages of all types of available placements. Efforts to recruit substitute caregivers have achieved some success; however, the continued number of children entering the system presents an ongoing challenge<sup>4</sup>. Indiana continues to face record numbers of children requiring services. According to the Department of Child Services, there were 13,330 children in the care of the State in August 2011<sup>5</sup>. 68.8 percent of these children are in out of home care and 31.2 percent are in their own home<sup>5</sup>. Of those in out of home care, 52.1 percent were placed in non-relative foster homes; 8.2 percent were placed in residential or group home facilities; 37.9 percent were placed with relatives, or kinship providers; and 1.8 percent other<sup>5</sup>. We must continue to establish safe, permanent homes for all children. This investment needs to include providing proper support and services for

families who generously come forth to care for children in need.

### **Foster care**

Foster care is an integral part of providing permanency for children in need of services. Foster care providers differ in culture, background, and family structure; however, nearly all share the common desire to love, support, and care for children in need. In order to become a foster parent, individuals must undergo a criminal history check and be licensed through a State approved training course. Once licensed, providers are supplied with a daily per diem to assist them in caring for the children in their care. Based on the income of the child's custodial parent, they may receive Federal Title IV-E assistance.

Often, the child welfare system is forced to either place multiple children in one foster home or in a more costly institutional setting because of a shortage in available placements. To ensure that enough qualified foster homes are available, we must understand and eliminate barriers that exist for providers. One barrier could be the availability of Foster & Kinship Care Training and Licensing courses, which vary based on region. In smaller, rural regions, classes are often cancelled due to lack of interest. By contrast, waiting lists may exist in larger, urban areas if there aren't enough courses available for those interested in enrolling. The costs associated with becoming licensed could also challenge some potential foster parents. If a qualified family is unable to afford the costs, such as a criminal history check for every member, financial aid should be readily available so they aren't hindered by an inability to pay.

Once foster parents are licensed, consistent, ongoing support and services are essential to retain them as caregivers. The National Foster Parent Association estimates that 60 percent of foster parents quit within the first year<sup>4</sup>. Most cite a lack of support from case managers and overwhelming stress as the cause<sup>4</sup>. Without adequate support, a foster care provider may feel burned out or abandoned. With services like continued training, support groups, mentorship, and respite, the ongoing needs of foster families would be more adequately met. Retaining quality foster care providers is in the best interest of children, as frequent moves or

disruptions can be upsetting and harmful to children<sup>4</sup>. In addition, providing adequate support for current foster parents is much more cost-efficient than constantly recruiting and training replacements<sup>4</sup>.

### **Kinship Care**

Kinship care has been successful in establishing permanency for many children. Studies have consistently demonstrated that foster children placed with relatives have greater stability and better outcomes overall<sup>6</sup>. They are also more likely to maintain relationships with parents and siblings while in the care of relatives. Kinship care can be formal (meaning the arrangement was made by the child welfare system) or informal (arranged privately within a family). Kinship care is becoming increasingly more common. In Indiana alone, there are 54,998 grandparents serving as kinship care providers for children<sup>6</sup>.

When emergency placements occur, relatives often haven't received prior notice or training to prepare them for the special needs of the child. Many relatives will later enroll in training and become licensed foster parents once a child has been placed in their home. Without this license, kinship providers are ineligible for the per diem that licensed foster parents receive to help care for children. For older relatives on fixed incomes, this lack of assistance could limit their ability to properly provide for children in their care.

Many kinship providers report difficulty accessing or navigating necessary services - especially if the placement was made informally. Some challenges they face (especially grandparents or other seniors) are with finding adequate housing, daycare, healthcare coverage, mental health services, or legal assistance<sup>6</sup>. Even in formal arrangements, these services can be difficult to understand. Every kinship provider should be informed of options and resources immediately when a child is placed in their home. Case managers need to assist all kinship providers with accessing necessary services. In order to properly meet the needs of children, professionals have a responsibility to meet the needs of kin caregivers, as well.

### **Reunification**

Reunification with birth parents is the best permanency option for most children. In 2009, 62.6 percent of children in out of home care in Indiana were reunified with their birth parents<sup>7</sup>. There are several components to a reunification program that increase the ability of children to return home and decrease the likelihood that the child welfare system will need to intervene in the future. Families need to be part of the decision making process throughout the duration of the case<sup>8</sup>.

If a kinship care placement is not available at the time of a child's removal, all efforts need to be made to keep the child in their own community and school to keep the child connected<sup>8</sup>. Birth parents need to have competent legal representation throughout the court process to ensure families can take an active role in proceedings<sup>8</sup>. Families need to have consistent visits and all family members need to receive intensive services to overcome obstacles that led to the removal of the child from the home<sup>8</sup>. Lastly, if reunification is possible support services in the form of aftercare need to be provided to ensure the family is supported and successful<sup>8</sup>.

### **Adoption**

The courts may determine that despite reasonable attempts, family reunification isn't possible for a child in out-of-home care. Once this occurs, parental rights are terminated and the child is eligible for adoption. During FY 2010, 52,340 children were adopted from foster care in the U.S.<sup>1</sup>. In SFY 2009, Indiana finalized 1574 adoptions<sup>7</sup>. While permanent families were found for these children, recruitment efforts need to be increased further. Far too many children are still waiting and hoping for a permanent family. On September 30, 2010, 107,011 foster children in the U.S. were free for adoption and waiting for an adoptive home and on average had been waiting 37 months for a permanent family<sup>1</sup>. In Indiana, 1,855 foster children were free for adoption in SFY 2009, but weren't placed and continued to wait<sup>7</sup>.

Overwhelmingly, infants and young toddlers are the most attractive to adoptive parents. Meanwhile, special needs children, youth ages 8+, and sibling groups continue to linger in foster care waiting and hoping to be adopted. Too often, potential parents fear these children may have 'problems' that would prohibit them

from transitioning smoothly into a new family. For this reason, public involvement shouldn't end when an adoption is finalized; rather, families should receive ongoing assistance. Both the child and new family need consistent access to pre- and post- adoption services to ensure lifelong success and stability. The reality is that maltreated children can flourish and obtain their optimum potential with adequate support and assistance.

Several administrative changes were made in the amount of adoption subsidy and the children who are eligible to receive subsidies, as of January 2009. Adequate adoption subsidies must remain available for all hard to place adoptive children and continued assistance for families currently receiving subsidies to ensure ongoing financial and supportive assistance. Both the child and new family need consistent access to pre and post adoption services to ensure lifelong success and stability.

On September 14, 2009, the U.S. Department of Health and Human Services awarded adoption incentive payments to states that increased the number of children adopted from foster care in fiscal year 2008 over the baseline numbers established through the Fostering Connections to Success and Increasing Adoptions Act of 2008. In 2010, Indiana received \$837,494 of these incentive payments<sup>9</sup>

Public outreach is only the first step in recruiting more available homes. Some families cannot bear the very costly and time-consuming process of adoption. It can be an insurmountable barrier for many, eliminating the potential for their offering permanency to a child. Many states offer adoption assistance to alleviate the financial burden and increase the number of families who adopt. Such assistance may include legal assistance, financial incentives, Medicaid for children, and post-adoption subsidies<sup>10</sup>. Nationally, 88 percent of families who adopted foster children receive some kind of post-adoption subsidy<sup>10</sup>. Indiana has improved the percentage of families of receiving subsidy from 52 percent to 77.8 percent<sup>11</sup>. One recent survey found that 81 percent of adoptive parents' decision to adopt hinged on the availability of subsidies; 58 percent said they couldn't have adopted without them<sup>10</sup>. Indiana must offer greater assistance to eliminate barriers and allow more families to open their homes to children in need.

Studies have shown that adoption provides children with stability, positive self-image, family support, and continuity<sup>10</sup>. By contrast, foster youth who reach adulthood without being adopted are more likely to drop out of school, be unemployed, impoverished, rely on public assistance, and become parents at younger ages<sup>10</sup>. The fiscal impact of a foster child lingering in the system is staggering. On average, the cost to provide foster care to one child for 7 years is roughly \$86,100<sup>12</sup>. By contrast, the cost of an adoption with 8 years of subsidies is \$65,100 per child. The total difference nationally, applied to the 51,000 children adopted in FY 2004, would generate over \$1.5 billion in savings<sup>12</sup>.

Allowing a foster child to become an adult without the love and support of a permanent family is a heartbreaking disservice. Despite an obvious shortage of available adoptive homes, a number of States have passed legislation banning individuals from adopting based on cultural characteristics such as marital status, religion, race, sexual orientation, or income. A ban based on marital status would be especially alarming - in the U.S., one-third of all adoptions from foster care in 2006 were by unmarried couples or single adults<sup>1</sup>. If the law had allowed only married couples to adopt, more than 15,700 children would have been denied permanent families<sup>1</sup>. Shay Bilchik, Past Executive Director of Child Welfare League of America, opposes any cultural ban, stating:

*"We cannot afford to systemically exclude any group of caring and loving people from an already limited pool of prospective parents. Laws and policies that ban [prospective foster or adoptive placements] deprive children of willing and able parents."<sup>13</sup>*

In all placement decisions, agencies should be careful to select only those families that would serve the best interests of the child. Families should be evaluated on strengths, parenting skills, safety, and their ability to provide for a child's needs - not their culture or household structure. Every effort should be made to find appropriate, loving families for all vulnerable children.

With regards to cultural bans, policies must remain consistent for both foster care and adoption to ensure continuity for children. Children often remain in the care of foster

parents for several years and form secure attachments to them. Nearly 53 percent of all U.S. adoptions from foster care were by the child's existing foster parent(s)<sup>1</sup>. To allow an individual to foster a child but then to subsequently ban them from adopting would be detrimental to the children placed in their care. In addition, this double standard would no doubt anger many and deter them from becoming foster parents for children in need. For these reasons, policies guiding foster care, kinship care, and adoption must be systematically equal and must avoid bans of any cultural groups.

### **Transitional Living**

While permanency options such as adoption and kinship care are preferred, some children who are reaching the age of 18 do not have that option. 5 percent of children leaving care in 2009 in Indiana were emancipated out of the child welfare system and are supporting themselves as an adult<sup>7</sup>. It is imperative that these children receive independent living skills and transitional living programs to ensure that they can make the transition to adulthood successfully. Many times youth who age out of the system face negative outcomes, such as poverty, homelessness, and involvement with the Department of Corrections. By providing additional supportive services to pursue higher education, stable employment, affordable housing, etc. these youth can become self-sufficient and successful Hoosiers.

### **CBI Program Impact and Participation:**

In addition to following National and State laws regarding adoption and foster care, CBI adheres to the standards of both the Child Welfare League of America and the Council on Accreditation to guide all programs and policies. Children's Bureau's programs include adoption, foster care and kinship care programs.

In 2010, CBI placed 270 children in permanent adoptive homes through funding provided by State contracts and generous private donors. Another 174 youth were served through CBI's *Aftercare & Independent Living* program. 641 individuals participated in the *Foster, Adoption, and Kinship Training* program. 83 children were served through the *Therapeutic Foster Care Program*.

### **For More Information Contact:**

#### **Children's Bureau, Inc.**

1575 Dr Martin Luther King Jr. St, Indianapolis, IN 46202, (317)264-2700

<http://www.childrensbureau.org/corp/adv/index.php>

<sup>1</sup> US Department of Health and Human Services-Administration for Children and Families. (2011). *The AFCARS report: Preliminary FY 2010 estimates*. Retrieved from, [http://www.acf.hhs.gov/programs/cb/stats\\_research/afcars/tar/report18.htm](http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report18.htm)

<sup>2</sup> Indiana Commission on Abused and Neglected Children and Their Families. (2004). *Putting children first*.

<sup>3</sup> Indiana Department of Child Services. (No Date). *Indiana practice model*. Retrieved from, [http://www.in.gov/dcs/files/A\\_New\\_Practice\\_Model\\_4\\_web.pdf](http://www.in.gov/dcs/files/A_New_Practice_Model_4_web.pdf)

<sup>4</sup> Stout, L. (2002). *Supporting & Retaining Foster & Adoptive Parents*. Permanency Planning Today.

<sup>5</sup> Indiana Department of Child Services. (2011). *DCS practice indicator report August 2011*. Retrieved from, [http://www.in.gov/dcs/files/CHINS\\_Placements\\_-\\_2011-08.pdf](http://www.in.gov/dcs/files/CHINS_Placements_-_2011-08.pdf)

<sup>6</sup> AARP Foundation. (2011). *Indiana: A state fact sheet for grandparents and other relatives raising children*. Retrieved from, <http://www.aarp.org/content/dam/aarp/relationships/friends-family/grandfacts/grandfacts-indiana.pdf>

- 
- <sup>7</sup> Indiana Department of Child Services. (2010). *Indiana demographic trends report 2009*. Retrieved from, <http://www.in.gov/dcs/files/DraftDemographicsTrendingReportSFY2009.pdf>
- <sup>8</sup> Dougherty, S. (2004). *Promising practices in reunification*.
- <sup>9</sup> North American Council on Adoptable Children. (2011). *Adoption incentive payments announced*. Retrieved from, <http://www.nacac.org/adoptalk/adoptionincentives.html>
- <sup>10</sup> Children's Rights. (2006). *Ending the foster care life sentence: The critical need for adoption subsidies*.
- <sup>11</sup> Administration for Children & Families. (2011). *Receiving state or federal subsidy October 1, 2009 to September 30, 2010*. Retrieved from, [http://www.acf.hhs.gov/programs/cb/stats\\_research/afcars/statistics/subsidy\\_tbl5\\_2010.pdf](http://www.acf.hhs.gov/programs/cb/stats_research/afcars/statistics/subsidy_tbl5_2010.pdf)
- <sup>12</sup> Child Welfare Information Gateway. (2006). *Government costs for adoption vs. foster care*.
- <sup>13</sup> Michael, J. (2006). Defining Family. *Children's Voice*, (15). Child Welfare League of America.