

Families First Act

- Title IV of the Social Security Act¹: Congress has authorized a number of programs under Title IV of the Social Security Act to support families in the foster care system; these programs were last authorized in 2018.
- funding to the Title IV-E program for preventive services designed to provide additional support to children and families such as mental health prevention and treatment programs, substance abuse prevention and treatment programs, in-home parent skill-based programs, and kinship navigator programs.
- In 2018, the Family First
 Prevention Services Act (FFPSA)
 updated Title IV-B and IV-E in ways
 that directed the focus of the child
 welfare system towards solutions
 that keep children safely with their
 families.
- This law also created the Title IV-E Prevention Services Clearinghouse with tiers of evidence so that states can use their Title IV-E funds towards proven programs.
- In FY 2022, funding for Title IV-E was \$10.4 billion and \$696 million for Title IV-B.

The Problem

Every year more than 200,000 children enter foster care with more than 390,000 in care per year. Estimates show that between 3 to 7 million adults (ages 18-44) experienced foster care in their youth. Children in foster care are at a higher risk of living in poverty, having a teenage pregnancy, engaging in alcohol and drug use, being arrested, having long term mental and physical health problems, and are less likely to enroll and complete college than the general population. There is clearly a strong need to identify programs and interventions that effectively improve these outcomes. Congress has identified the need for evidence-based programming, but there are several barriers to this happening.

This brief outlines these barriers and makes specific recommendations for Title IV-B and evidence-building.

Overview of Policy Recommendations

In light of the upcoming reauthorization of Title IV and the Families First Act, the following are suggested to improve evidence-use and evidence-building in the foster care space:

- Authorize grants to state child welfare agencies to build data capacity.
- Give additional resources to the Families First Clearinghouse.
- Incentivize and pay for more rigorous evaluation.



¹The original Social Security Act (P.L. 74-271) of 1935 authorized, indefinitely, \$1.5 million in funds, annually for provisions related to Child Welfare Services. These provisions were made part of Title IV-B by the Social Security Amendments of 1967. In 1980, Title IV-E created the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272) and revised the definition of "child welfare services." It also linked Title IV-B, requiring that the new Title IV-E program be administered by the same state agency that administered the Child Welfare Services (Title IV-B).

What the Evidence Says

Research on foster youth programs is promising, but incomplete. For example, we know that parental support classes can reduce child maltreatment, hospital visits for maltreatment injuries, foster care placements. These programs can shorten foster care duration, improve birth family reunification, improve stabilization and decrease chances of reentry into foster care. Further, therapy for youth in foster care improves behavior and academics; mentoring and skills coaching for kids in foster care improves placement stability and permanency and increases college enrollment and one year college persistence².

While we know some programs that work to support foster youth, there remains a lot to be learned about how to ensure they have the best chance at positive outcomes and stable lives.

Data Quality Challenges

While a large portion of funding for foster youth comes from federal sources, it is state child welfare and family service agencies that run programs and contract with nonprofits to serve vulnerable youth. As such, state data systems are crucial for both understanding the impact of programs via research as well as targeting state programming. Unfortunately, many states lack coordinated data systems that would allow agencies and researchers to determine the impact of programs and the needs of foster youth. Further, states often lack capacity to support rigorous evaluation needed to build and use evidence of what works in supporting foster youth.

The lack of coordination amongst states stems from a highly decentralized child welfare system. To receive Title IV-E federal funding, a state's data system only needs to meet minimum federal electronic record standards, thus states manage their own data systems with minimal federal oversight. Consequently, each state's administrative framework for child welfare services varies. Though most states maintain a centralized "state-administered" system, nine states adhere to a "county-administered" system, and two states (Nevada and Wisconsin) have "hybrid" systems partially administered by the state and partially

administered by <u>counties</u>. Moreover, most states employ different operations, differing procedures and assessment tools, different definitions of types of child maltreatment, and different processes for <u>investigation</u>. For instance, states differ in how critical information such as type of abuse, perpetrator relationship to child, types of foster care placements, and case dispositions are <u>recorded</u>. States also outsource select services within foster care and adoption to private agencies, resulting in further inconsistencies in <u>data collection</u>.

Varying and inconsistent state data systems have larger implications for the two primary databases the federal government maintains for child welfare data collection: the National Child Abuse and Neglect Data System (NCANDS), which consists of data on child protective services investigations, and the Adoption and Foster Care Analysis and Reporting System (AFCARS), which provides data on those in or adopted from foster care. These federal databases pull information from the varying state, county, and local data systems, an inefficient process that risks information being siloed or duplicated across segregated agencies.

Tennessee Example

As recently as 2020, it was reported that Tennessee did not have enough foster homes in which to place its children; however, a study of Tennessee's foster homes from 2011-2016 found that about 30% of licensed foster homes had never had a foster care placement and that the average foster home was only occupied about 51% of the time.

One potential explanation for this failure to properly diagnose the problem is the segregation of agencies and resulting lack of interagency collaboration. Finally, being highly decentralized, local data may vary in definitions of child maltreatment and in processes for investigation and recording, creating high rates of inconsistencies in data submissions that leave the quality and reliability of federal data largely unknown.



This inconsistent and unreliable data, inhibits research on critical policy questions such as why neglect—alleged in more than 70 percent of all child protective services investigations and accounting for the majority of cases in which children are placed in foster care—occurs. For instance, beginning in the 1990s, limited data and anecdotal evidence has suggested that parents' substance abuse of drugs and alcohol majorly contributes to their inability to care for children,

thereby prompting children's entry into foster care. However, further research on parental substance use in child protective services and foster care cases is hindered by the fact that national data is too unreliable. Within the states consistently reporting the variable, there is significant variability in the rates of parental substance abuse in child maltreatment cases ranging from 3.4 percent to 66.1 percent. Inconsistency in data reporting—particularly subjectivity about when to document a parent's alleged substance use as a risk factor—and lack of data validation

may be two data quality problems that explain this extreme variability across states.

Data Access

In addition to being often unreliable and inconsistent, child welfare system data is also frequently insufficient. Due to privacy laws in certain states and concerns with confidentiality of child maltreatment records, researchers, government agencies, and private service providers often have to overcome extensive, timeconsuming obstacles to access data or are simply

prohibited from accessing it at all. Moreover, variables necessary to understanding child maltreatment family risk factors, parenting, and even basic socio-demographic information—are frequently missing from administrative datasets. Finally, ethical barriers to using certain data elements concerning privacy, security, and bias persist; however, agencies recognize these concerns and strive for greater transparency and intentionality in the model building process to avoid violating privacy rights, misinterpreting data, or incorporating biases



Recommendations for Improving the Families First Act

The federal Families First Act of 2018 built strong support for making prevention programs for foster youth evidence-based and more impactful. As of summer 2022, 20 states are using existing evidence-based programs, while 30 states decided to build new evidence. States are now required to use at least 50% of their expenditures on evidence-based prevention and kinship programs, but approval of new programs has been slow. The criteria for evidence in Families First is quite high—perhaps the highest of these types of clearinghouses—but the system of review is not given enough capacity to support the needs of the states (e.g. in the first year the Children's Bureau had to waive this requirement). In particular, there is a need for more evidence-based kinship care programs—currently there are only 4 approved programs.

In light of the upcoming reauthorization of Title IV and the Families First Act, the following are suggested to improve evidence-use and evidence-building in the foster care space:

1. Authorize grants to state child welfare agencies to build data capacity so that the agency can support the data needs of the children in care, the requirements of the Families First Act, and evidence-building.

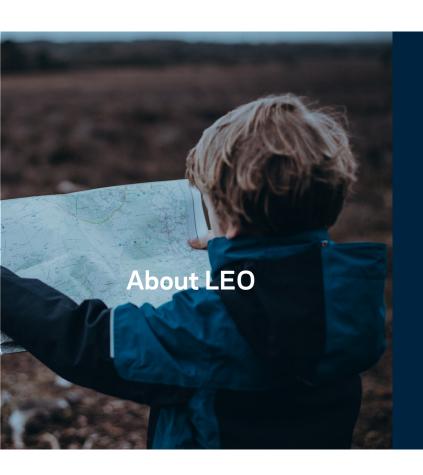
There is precedent for this type of grant program. The State Longitudinal Data Systems Grants Programs began almost 20 years ago supporting state education agencies in building out the successful design, development, implementation, and expansion of K12 and P-20W (early learning through the workforce) longitudinal data systems. These systems are intended to enhance the ability of states to efficiently and accurately manage, analyze, and use education data, including individual student records. The SLDS program is currently being funded at \$34 million per year and a similar program for workforce data systems, the Workforce Data Quality Initiative (WDQI) is funded at \$6 million per year.



2. Give additional resources to the Families First Clearinghouse to support further build out of the clearinghouse and thus further build up of evidence-building and evidence-use to benefit foster youth. The Clearinghouse process needs to be sped up in the short term to allow states to meaningfully implement the law as intended to reap the full benefits of evidence.

A slow start to the review process for the FFA Clearinghouse caused concern amongst states who feared that the review timeline would delay their ability to implement prevention programs they believed to be backed by strong evidence. This prompted a June 6, 2019 guidance from the Children's Bureau of the U.S. Department of Health and Human Services that for a transitional period, a state could claim transitional payments for services not yet officially approved by the Clearinghouse until the Clearinghouse reviewed and rated the program.⁴ As of June 2022, over two and a half years since the Clearinghouse's launch in October 2019, the Clearinghouse has reviewed 109 programs and services. Just over half of these (57) have been rated as promising, supported, or well-supported.⁵

3. Incentivize and pay for more rigorous evaluation. Building evidence takes time and resources, but given the shortage of evidence-based programs, there needs to be incentives to pay for the research effort necessary to determine causal impact. This is particularly needed in the area of kinship programs. Of the programs reviewed by the Clearinghouse so far, only 4 have been kinship ones.



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