

# **Child Welfare Policy Agenda:** Protecting Children, Supporting Families and Ending the Cycle of Poverty

Kate Brown, Governor  
Rosa Klein, Human Services Policy Advisor

September 12, 2018



STATE OF OREGON  
Office of the Governor  
**KATE BROWN**

## Vision

*Create a comprehensive child welfare system that protects children, stabilizes families, and breaks the cycle of poverty.*

## Executive Summary

*Across Oregon state government, Governor Brown has called on all agencies and programs to put kids and families first. This realignment is underway and there is more work to be done. Nowhere is the need more evident—and the opportunity greater—than in child welfare.*

*By the time children enter the child welfare system, several other systems have already failed them. It could be that their parents didn't have access to addiction treatment, or that they had witnessed incidents of domestic violence, or that they were sleeping in a car. Raising kids requires supportive parents, families and communities. In the world of child welfare, the saying "we are only as strong as the community that walks beside us" rings true. Strengthening families and taking a two generation approach to child welfare—recognizing the inextricable link between the well-being of parents and the well-being of children—means focusing on the root causes of child maltreatment, such as addiction and mental health disorders, domestic violence, and housing instability.*



*Governor Brown has more than twenty years of experience as an attorney protecting children and families involved in the foster care system. This work has informed her strong commitment to focus on a comprehensive system of child welfare that ends the cycle of poverty and keeps more families safely together.*

*The core components of Governor Brown's strategy are:*

- Promote healing for kids by providing the right placements*
- Elevate child and youth voice in case management and program development*
- Focus on the root causes that drive foster care placements*
- Provide high-quality support for foster parents*
- Ensure caseworkers have the tools and resources to support families and protect children*
- Quick, safe, and complete case management that provides more consistent and targeted support*



## Background

### *Root Causes of the Child Welfare Crisis*

In 2017, 11,077 Oregon children were found to be victims of abuse and neglect. Almost half of these children were younger than six years old, and more than a quarter of them were under the age of three. Oregon's child welfare system is meant to be a last resort for children and families experiencing crisis. In order to improve the lives of children, there has to be a two-pronged approach: one that continues to improve the effectiveness of the child welfare system to keep children safe while also striving to work upstream to reduce the number of kids who come into the system in the first place. Children thrive with stable and nurturing families, and ensuring that family environment should be the ultimate aim of Oregon's child welfare system.

### *Inadequate family support systems*

We know why children end up in the foster care system. Data collected by the Department of Human Services show that parental addiction or behavioral health needs is a top factor. Lack of adequate housing is the second-highest – and growing – factor. Domestic violence is the third most cited factor. Lack of affordable day care and preschool, and the fact that in Oregon, as across the country, lower-income families are not yet seeing the benefit of the economic recovery put additional stress on families already on the edge.

1. Dodge, Joel. "The best way to fix child poverty in the US is to give poor kids free money," Quartz.com. August 19, 2016. Retrieved from <https://qz.com/761008/the-best-way-to-fix-child-poverty-in-the-us-is-to-give-poor-kids-free-money/>

### *Young families too often live in poverty*

Families with children under five are twice as likely to experience poverty, and the disparity is even wider for families of color and those in rural areas.<sup>1</sup> More than 25 percent of Oregon's African-American



**“Nearly 75 percent of Oregon foster care placements involved parental substance use. To make lasting change, we must break the cycle of addiction”**

2. The Poverty Agenda, Oregon Business Council. Fall 2017; Oregon Office of Economic Analysis

3. NIDA, Trends & Statistics. April 24, 2017. Retrieved from <https://www.drugabuse.gov/related-topics/trends-statistics>

4. Choi, N. G., DiNitto, D.M., Marti, C.N. & Choi, B. Y., *Association of Adverse Childhood Experiences with Lifetime Mental and Substance Use Disorders Among Men and Women Aged 50+ Years*, International Psychogeriatrics 29(3), 359-372, doi: 10.1017/S1041610216001800

5. Correia, M. (2013). Substance abuse data in child welfare. *Casey Practice Digest: Substance Use Disorders in Families With Young Children*. Casey Family Programs, Issue 5.

population lives in poverty, compared with 11 percent of non-Hispanic white Oregonians. More than one-third of Latino and American Indian children are living in poverty. Across Oregon, the percent of people below the poverty line ranges from 10 percent in Clackamas County to 25 percent in Malheur County. Most people in poverty live in urban areas, but a higher share of individuals in rural counties are poor.<sup>2</sup>

*Insufficient addiction treatment and behavioral health treatment options*

The chronic disease of substance use disorder (SUD) continues to plague Oregon families from all backgrounds. Nationally, the abuse of tobacco, alcohol, and illicit drugs is estimated to be responsible annually for more than \$740 billion in costs related to crime, lost work productivity, and health care.<sup>3</sup> Not only is this disease costly to our state, but it has significant detrimental impact on children and families.

Parents and caregivers who suffer with SUD expose their children to adverse childhood experiences, thus increasing the probability that kids will suffer from the same chronic illness, among other health issues.<sup>4</sup> According to data in the Adoption and Foster Care Analysis and Reporting System (AFCARS), caregivers suffering from SUD is frequently reported as a reason for child removal and foster care placements, particularly in combination with child neglect.<sup>5</sup> Nationally, for almost 31



percent of all children placed in foster care in 2012, parental alcohol or drug use was the chief documented reason for removal. In Oregon, the situation is worse. According to recent case reviews, nearly 75 percent of Oregon foster care placements involved parental substance use.<sup>6</sup> To make lasting change in child welfare, we must break the cycle of addiction passed through generations.

*West Coast states are experiencing a housing affordability crisis*

Housing instability is an identified factor for foster care placement in 17 percent of cases, an increase of 40 percent over the past two years. Lack of adequate affordable housing coupled with family evictions without cause are creating untenable housing instability for Oregon's children. One of the biggest drivers of increasing homelessness and housing instability in Oregon is the shortage of affordable rental units in the state, especially for the state's lowest-income residents. This shortage of affordable units has led to a high percentage of renters spending more than 50 percent of their incomes on rent, which is considered "severely housing cost burdened" and results in families having difficulty affording necessities such as food, clothing, transportation, and medical care.<sup>7</sup> Thirty-one percent of all renter household families in Oregon with children under five are spending more than half of their incomes on rent. For families earning less than 30 percent of Area Median Income, a staggering 84 percent of households are severely cost-burdened. This means that these families have little or no cushion for basic necessities, and as a result are just one minor financial emergency away from losing their homes.

6. Preliminary data from the Child Welfare (CW) Capacity Project analysis – part of the CW Research Agenda – shows 71.9 percent of parents were involved with drugs or alcohol at the specific time of removal and 78.8 percent of parents had a drug or alcohol induced mental state which prohibited care of the child. Publication forthcoming.

7. National Low Income Housing Coalition, *The Gap: A Shortage of Affordable Homes*, (National Low Income Housing Coalition, 2018).



## “Domestic violence is a strong determinant of child welfare involvement, contributing to removal in more than 15 percent of Oregon’s foster care cases”

8. Oregon Department of Human Services. (2017). 2017 Child Welfare Data Book. Retrieved from <https://www.oregon.gov/DHS/CHILDREN/CHILD-ABUSE/Documents/2017-Child-Welfare-Data-Book.pdf>

9. Count Her In. (2017, February) Retrieved from <https://womensfoundationoforegon.org/uploads/CountHerInreport.pdf>

10. Oregon Department of Human Services, *2017 Child Welfare Data Book*. Retrieved from <https://www.oregon.gov/DHS/CHILDREN/CHILD-ABUSE/Documents/2017-Child-Welfare-Data-Book.pdf>

*Domestic violence rates in Oregon are higher than the national average* Domestic violence was a factor for a child coming into foster care for 15 percent of the cases in 2017.<sup>8</sup> The year prior, Oregon domestic and sexual violence programs answered 139,580 calls for help, a 3 percent increase from 2015. This included calls about domestic violence, sexual assault, stalking, and other issues. The percent of women in Oregon who have experienced intimate partner violence stands at 37 percent, (or nearly 700,000 individuals) while national rates are 36 percent.<sup>9</sup> Domestic violence is a strong determinant of child welfare involvement, with domestic violence being part of the reason for removal in more than 15 percent of Oregon’s foster care cases in 2017.<sup>10</sup>

*As a result, fixing the child welfare system means reducing the number of kids coming into and staying in the system* Too many Oregon children are coming to the attention of the child welfare system. This has resulted in historically high rates of children being placed in foster care.

*Rates of child abuse and neglect and re-abuse are too high* Almost 12 percent of Oregon children who were victims of abuse during a one-year period were the victims of another abuse within a



year.<sup>11</sup> Nationally, rates of re-abuse are approximately 9 percent. When a child is returned to their home after being removed due to abuse or neglect, the goal is that their parent will have had support to remedy the conditions that resulted in the child's removal. These plans and interventions typically include: treatment for substance use disorder or mental health disorders, support to find safety from a domestic abuser, help to find a stable housing situation, a plan for after release from incarceration, or classes to improve parenting skills.

*A higher out-of-home foster care placement rate than national averages*  
Too many children end up in substitute care and remain for too long. In 2017, there were 4,065 children who entered foster care in Oregon. Currently there are too few programmatic options or resources for the Department of Human Services (DHS) to support families without removing children from their family homes. Many children who end up in foster care could remain safely at home if given the appropriate resources for families to keep them safe.

11. June 2018 DHS Monthly Child Welfare Report to the Governor

12. Washington DC Child and Family Services Agency, 2017.

13. Oregon Department of Human Services. (2017). *2017 Child Welfare Data Book*. Retrieved from <https://www.oregon.gov/DHS/CHILDREN/CHILD-ABUSE/Documents/2017-Child-Welfare-Data-Book.pdf>

In jurisdictions that focus on prevention strategies, as many as 65 percent of children remain at home while their parents receive support to prevent abuse and neglect and create nurturing home environments. In Oregon, during the 2017 federal fiscal year, a total of 7,622 children were served in their homes, about 40 percent of whom received services beyond a safety assessment and case management.<sup>13</sup> With a greater focus on prevention and federal funding (Title 4E funds) that can be used for parents to undergo treatment for substance use disorder while their children remain in their custody on site, we have hope of significantly reducing the number of children in out-of-home foster care.





14. Oregon Department of Human Services, *2017 Child Welfare Data Book*. Retrieved from <https://www.oregon.gov/DHS/CHILDREN/CHILD-ABUSE/Documents/2017-Child-Welfare-Data-Book.pdf>

15. June 2018 DHS Monthly Child Welfare Report to the Governor

Certain communities of color are impacted by the overuse of removal of children more than others. The Governor has directed the Department of Human Services Child Welfare Division to track data and improve equity related to the current disproportionate rate at which some families of color are separated. For federal fiscal year 2017, the percent of Native American children being placed into foster care was 2.79 times higher than the percent of Native American children in Oregon’s child population, a vestige of policies and practices by the state that contributed to family breakdown over several generations prior to the implementation of the Indian Child Welfare Act. For African-American children, the rate of foster care entry is 1.24 times higher.<sup>14</sup> We must pay attention to the specific needs of African-American and Native families so that children in these communities are able to end the intergenerational cycle of child welfare involvement.

**“Moving from one placement to another hinders a child’s chances for successful outcomes in school attendance, strong relationships with peers and adults, and long-term health and well-being”**

*Oregon lacks an adequate number of appropriate foster homes*

In May of 2018 there were a total of 4,306 open, DHS-certified foster homes. This is an increase from May of 2017, when there were 4,101 open homes.<sup>15</sup> However, Oregon needs additional foster homes for specific groups of children: large sibling groups, teenagers, children from diverse cultures, youth who identify as LGBTQ, and children with



specific health needs. Foster parents who have the training and support to care for these children are in short supply. This is important because moving from one placement to another hinders a child's chances for successful outcomes in school attendance, strong relationships with peers and adults, and long-term health and well-being outcomes. The fewer times a child moves, the better, and having more foster homes available will help assure a proper first-time placement for each child.

Furthermore, the foster families that are available are under stress and express the need for additional resources in the form of respite and child care, support to care for children experiencing crises, and general parenting support. Lacking these, many foster families have opted not to continue to foster children in their homes. A 2017 audit found that the number of new general foster homes (i.e. not relative foster homes) has declined 55 percent in the last year. This, coupled with a consistent number of providers leaving the foster care system has created a decline of general foster homes of 11 percent in the last year.<sup>16</sup>

16. Oregon Secretary of State, Department of Human Services, Child Welfare System Audit. 2018. Retrieved from <https://sos.oregon.gov/audits/Documents/2018-05.pdf>

17. June 2018 DHS Monthly Child Welfare Report to the Governor

18. "Mary Holden Ayala Charged with Theft of Over \$800,000 From Oregon Foster Care Agency Give Us This Day." May 10, 2017. Retrieved from <https://www.justice.gov/usao-or/pr/mary-holden-ayala-charged-theft-over-800000-oregon-foster-care-agency-give-us-day>

19. Jaquiss, Nigel, "Home Sweet Hustle," Willamette Week. October 3, 2016. Retrieved from <https://www.week.com/news/2015/09/16/home-sweet-hustle-3/>

### *Caseloads for child welfare caseworkers are too high*

A 2017 audit found that caseworkers have three to four times the number of children on their caseloads as they should according to national best practices. Oregon should have approximately 1,860 case workers to meet the current needs to serve children and families involved in child welfare. As of May 2018, only 1,509 caseworkers were allocated to serve the growing number of children in Oregon's care.<sup>17</sup>

### *The Governor's call for a Unified Child and Youth Safety Plan*

Shortly after Governor Brown assumed office in February of 2015, serious child abuse and financial fraud allegations were brought against Give Us This Day, a Portland based facility.<sup>18,19</sup> In response to these allegations, Governor Brown commissioned a comprehensive independent review of child safety in substitute care assessment, which



was released in September of 2016.<sup>20</sup> The Public Knowledge Report concluded that more appropriate placements could prevent abuse of youth and children in substitute care, and a coordinated response to abuse of youth in care could get children to safety faster and prevent future abuse. Further, the report recommended that DHS significantly reduce the workload of caseworkers, better recruit and retain foster care providers, adopt data-driven decision-making models, and focus on eliminating disproportionate rates of out-of-home placements in minority populations.

20. Public Knowledge. Oregon Department of Human Services, Child Safety in Substitute Care Independent Review, Deliverable 3.4, Final Assessment & Review Report. September 13, 2016. Retrieved from <https://www.oregon.gov/DHS/DHSNEWS/CWIndependentReview/Child%20Safety%20Substitute%20Care%20Independent%20Review%20Final%20Report.pdf>

21. Oregon Department of Human Services, Unified Child and Youth Safety Implementation Plan for Oregon. 2016. Retrieved from <https://www.oregon.gov/DHS/ABOUTDHS/Child-Safety-Plan/Documents/UCYSIP-2-28-17.pdf>

22. Ibid.

23. DHS, Child Safety Plan. 2016.

In response to these findings and recommendations, the Governor directed DHS to develop the Unified Child and Youth Safety Plan.<sup>21</sup> The plan, released in February of 2017, acknowledged that for over a decade, DHS had received many reports and reviews that pointed to the inadequacies and safety failures in the child welfare system. In many cases, the agency did take some action. However, many recommendations were not implemented or agency leadership failed to sustain the change efforts.

The Unified Child and Youth Safety Plan is a comprehensive approach to remedying the systemic problems in child welfare. To ensure that real change happens and that safety concerns are addressed, DHS managers have created a dedicated project management team assigned to implement these systemic improvements.

The Unified Child and Youth Safety Plan consists of ten priority projects which focus on remedying the systemic problems outlined in the Public Knowledge Report.<sup>22</sup> The implementation of these projects are overseen by a steering team composed of community members and participants from all parts of the child welfare system: foster families, youth who have aged out of care, agencies in the community advocating for foster youth, health care providers, schools, and child welfare caseworkers and managers.<sup>23</sup>



## Recent Accomplishments

*Since entering office in 2015, Governor Brown has significantly supported and invested in child welfare. Some of the most noteworthy examples include:*

### Increased oversight at DHS

In light of the recommendations from the Public Knowledge report highlighting years of inaction at DHS, the need for more appropriate placements for foster youth, and a more responsive system for abuse of youth while in foster care, the Governor appointed Fariborz Pakseresht, a talented, proven leader, as Director of the Department of Human Services. She directed him to rebuild the agency, based on his proven successes at the Oregon Youth Authority (OYA) where he created a culture based upon the principles of Positive Human Development.

In September of 2017, Director Pakseresht hired Marilyn Jones as Director of the Child Welfare program. Jones is an experienced foster parent and adoptive parent of two children from the foster care system. She was the District Manager in Baker City, Oregon for many years before being appointed to lead the Child Welfare program. Jones is a proven leader with more than 20 years of experience in hiring, training, and coaching case workers.

### Increased accountability in Child Welfare

Under the direction of Governor Brown, Director Pakseresht, and Director Jones, the agency has begun to implement the Unified Child Safety Plan, tracking key measures of progress toward the child welfare's system reform. A key element of the plan is the centralization



of the Child Abuse Hotline, so that all of Oregon is served by one system with 24/7 access and cases get triaged consistently. The Governor has also mandated a monthly progress report from Child Welfare, with updates to dashboard of key child welfare indicators, and progress on implementation of data-driven changes to practices of screening, triaging, and responding to reports of abuse and neglect.

### Increased focus on foster families

To ensure that children and their families are at the center of all of the agency's work, the Governor has signed into law the Foster Children's Bill of Rights, the bill creating the Foster Care Ombudsman, and the Foster Sibling Bill of Rights. She also established the Governor's Child Foster Care Advisory Commission, and convened the Legal Representation in Childhood Dependency (LRCD) Task Force – to address how to ensure Oregon's children, parents, and DHS have full, continuous and consistent legal representation in the child welfare system.

### More resources for foster parents

Since taking office in 2015, Governor Brown has consistently advocated for additional resources for the child welfare agency. The agency has been chronically understaffed and with high caseworker turnover for a decade or more. In 2015, the Governor advocated for more funding for the Office of Child Welfare field services, creating 114 new positions. The 2015 budget also added \$1.6 million to support runaway and homeless youth programs, \$250,000 for a youth shelter and assessment project in Lane County, and an \$800,000 investment into two pilot projects focused on enhanced supports for foster parents.<sup>24</sup>

24. Oregon Department of Human Services, 2015 Legislative End of Session Report. 2015. Retrieved from <https://www.oregon.gov/DHS/ABOUTDHS/LegislativeInformation/DHS%20Legislative%20Session%20Report-2015.pdf>



## Child Welfare Agenda: RECENT ACCOMPLISHMENTS

In 2017:

- The Governor advocated for a budget that allowed more staff at DHS Child Welfare field services, creating 78 new positions, and 50 Consultant Educator Trainor (CET) positions to be non-case carrying workers who provide consultation to staff regarding difficult or unusual case situations.
- Payments to foster parents were increased by an average of 14 percent, and behavioral rehabilitation service provider payments were increased by an average of 21 percent, implementing all eight recommendations of the BRS Comprehensive Review Committee.
- Added \$3 million for caseworker professional development and supervisor training.

In 2018:

- Added \$15 million in increased funding for child welfare staff. The department is currently in the process of hiring those 186 additional caseworkers and support staff.
- Advocated to increase funding by \$750,000 for foster parent supports: \$487,500 of this will be used to provide two models of respite care/support to foster families; \$150,000 will be used to develop a mentoring program for new foster parents; and \$112,500 will be used to help foster parents with immediate needs when a child comes into care.
- Added a child care stipend of \$375 a month for foster parents who work outside the home, which went into effect May 1, 2018.



## **Better justice and legal support**

Governor Brown secured \$6.9 million to enhance legal representation for DHS caseworkers, ensuring full, continuous, and consistent representation in each DHS child welfare case from petition to permanency. This was a significant first step to fund the recommendations made in July 2016 by the 18-member Task Force on Legal Representation in Childhood Dependency (SB 222 Task Force). The Legislative Assembly asked and the Governor convened the Task Force “to recommend models for legal representation in juvenile court proceedings that will improve outcomes for children and parents served by the child welfare system, to ensure that parties in juvenile court cases are prepared to proceed and to enable courts to resolve juvenile court proceedings as quickly and efficiently as possible.”<sup>25</sup>

## **Data-informed decision-making, evidence-based prevention and treatment practices**

Governor Brown has actively supported Director Pakseresht in following her directive to change the culture of the Child Welfare program, as well as the broader DHS culture. The new culture should embrace safety, empowerment, accountability, positive development, engagement and community connection. Implementing this culture shift in conjunction with using research to identify evidence-based improvements to both foster parent and caseworker recruitment and retention will lead to improving outcomes for children and families.

25. Oregon Task Force on Dependency Representation. *Report July 2016*. July, 2016 [https://www.oregon.gov/gov/policy/Documents/LRCD/Oregon\\_Dependency\\_Representation\\_TaskForce\\_Final\\_Report\\_072516.pdf](https://www.oregon.gov/gov/policy/Documents/LRCD/Oregon_Dependency_Representation_TaskForce_Final_Report_072516.pdf)

This fall, the Governor directed the creation of a Family First Prevention Services Act “Tiger Team” to focus on cross-agency initiatives that can be used to prevent child maltreatment and keep children safely at home. This group will focus on identifying evidence-based practices that can be used for any child who comes to the attention of child welfare, regardless of income level.



Director Pakseresht has instituted a new Office of Reporting, Research, Analytics, and Implementation (ORRAI) under the leadership of Dr. Paul Bellatty. DHS Child Welfare will use the data analysis from reporting and research to inform decision making and improve outcomes for children and families.

### **Instituted a multi-disciplinary, statewide focus on child welfare**

The Governor convened a multi-system workgroup on Children and Youth with Specialized Needs in winter 2018 to make recommendations to address the problems of children being placed in hotels or out of state, experiencing multiple disruptions in foster homes and other placements, or boarding in emergency departments for extended periods of time. These recommendations will form the Governor's budget asks and legislative concepts for the 2019-21 biennium.

The Governor convened a Children's Cabinet over the last year to bring forward a comprehensive plan for vulnerable families, with a special focus on children ages zero to five. This comprehensive approach will be critical for prevention of abuse, as children 0-4 are most at risk of abuse by their caregivers.





## The Governor's Strategy:

*The Governor envisions a comprehensive child welfare system that protects children and promotes families of origin. This vision can be achieved by focusing on the root causes of family instability and early interventions for young families at risk—with overall less lifetime total costs than today's system.*

**ONE:** *Promote healing for kids by providing the right placements*

**TWO:** *Elevate child and youth voice in case management and program development*

**THREE:** *Focus on the root causes that drive foster care placements*

**FOUR:** *Provide high-quality support for foster parents*

**FIVE:** *Ensure caseworkers have the tools and resources to support families and protect children*

**SIX:** *Quick, safe, and complete case management that provides more consistent and targeted support*



## **ONE:** Promote healing for kids by providing the right placements

*When possible, children should remain safely at home with their parents. It has been shown that this can be done in a safe and cost effective way through intensive services aimed at helping families learn the skills and access the resources needed to care for their children.*

When, in some circumstances, a child or youth must be removed from their family of origin for a period of time, we must ensure that the care they receive is safe, developmentally appropriate, child-and-family-centered, and trauma-informed. To become a place of healing, Oregon's child welfare system must address the needs of the most at-risk youth.

**Strengthen therapeutic foster care** to support children and youth in need of a more intensive level of time-limited substitute care within their community. Develop a system of professional foster care networks that are coupled with in-home services and supports. This involves specialized recruitment of skilled, culturally-appropriate foster parents, paid training for foster providers, and the ability to maintain youth in the therapeutic foster home until a child is either safely reunified with their family, or a stable, permanent placement is identified.

**Develop in-home services** to ensure children are able to remain safely with their families when possible and to help stabilize foster homes when needed. Using a trauma-informed perspective with Oregon's families, in-home supports at an adequate level of intensity can support a child who is at risk of being placed out of their homes. This should include several face-to-face sessions with families each week focused on the root causes of the issues they are struggling with and 24/7 "in person" crisis response.



**Develop Regional Assessment Programs to provide integrated evaluations and care planning for children and their families.** This would be a new model, with a priority to assist the children in a region who are inappropriately placed (temporary lodging, out of state placements, Emergency Department boarding, county detention or OYA custody) through evaluation, assessment, and stabilization. On an ongoing basis, the programs will be the go-to source when children are “stuck” in an inappropriate placement. Regional Assessment Programs may be co-located with short-term stabilization beds to support children when an appropriate placement is not immediately available. Any placements at a regional assessment program must be short-term, and meet the requirements for Qualified Residential Treatment Programs under the Family First Prevention Services Act.

**Stabilize capacity across the continuum of care.** While the overarching goal for child welfare is to keep children in their homes with necessary supports and services, there is recognition that there will still be youth who need time-limited care in medical, mental health and behavioral health treatment settings. To serve these children and families, additional capacity is necessary, especially in rural areas. Currently, there are not adequate resources so that children who require partial hospitalization, short-term psychiatric residential treatment services, and subacute programs are able to access those settings at the right time, and at their level of need. Availability of respite care for caregivers is critical, and a high priority for expanded capacity is for short-term residential care for children with co-occurring behavioral health and intellectual developmental disabilities. While these programs will specialize in supporting youth with co-occurring needs, they should be integrated with existing programs.



## “Placement of children in out-of-family foster care must be a last resort”

Reserve out-of-family foster placement for those most at risk. Placement of children in out-of-family foster care must be a last resort. Based on long-term health and social outcomes for children in foster care, we know that the most developmentally appropriate place for a child to grow up is with their parents. Oregon must improve the consistency with which we intervene in a child welfare case to ensure that only the children most at risk are removed from the care of their parents. Through DHS’s Office of Reporting Research Analytics and Implementation, screeners and caseworkers will use data to assist them in determining which children must be removed to be kept safe.

**Implement mandatory Youth Support Crisis Plans to prevent displacement.** When a crisis occurs for a youth in foster care, all parties (Child Welfare, mental health and Intellectual and Developmental Disabilities caseworkers, foster parents, adult supporters, Coordinated Care Organization case managers, and the youth) must come together to review a plan that has been created before a child moves into a home or when they first come into care. The goal of this plan will be to pre-address and solve problems that arise between foster parents and youth and keep the child in the home. Too often, a temporary crisis can result in severed relationships for young people in care, instead of relationships that have been strengthened by resolution of differences, and the developmentally appropriate learning



that comes from resolving difficult conflict. The more times a child experiences changes in placement in foster care, the less likely they are to have positive health and social outcomes. Studies have shown children in foster care experience placement instability unrelated to their baseline problems, and this instability has a significant impact on their behavioral well-being.<sup>26</sup> These plans should include improved data-informed placement decision making by caseworkers.

## **TWO:** Elevate child and youth voice in case management and program development

*Oregon's child welfare workers prioritize keeping children safely at home, or finding children permanent loving families, but some youth do remain in foster care until they age out. For these youth, we must focus on meeting their developmental needs so that they have the best chance of success in adult life.*

DHS has begun to analyze the factors that lead to children remaining in foster care for more than two years, and the health, social, educational, and other life outcomes that they experience. The strategies below will address the highest priorities for youth aging out of foster care and ensure child and youth needs are considered when delivering services.

**Fully fund Independent Living Program (ILP) services:** All foster youth aging out of care need support to become independent, and benefit from ILP services. Foster youth who age out of behavioral residential treatment and group homes are at high risk of homelessness, substance use, crime, and gang activity due to lack of skill-building on how to live independently. ILP services must be made available to youth who are highest risk, including those who enter adulthood in a congregate care setting.

26. Rubin, D., O'Reilly, A., Luan, X., Localio, A.R. "The Impact of Placement Stability on Behavioral Well-Being for Children in Foster Care," Pediatrics. February 2007. 119(2): 336–344.



**Double the number of Court Appointed Special Advocates (CASAs):** CASAs make an enormous difference in the lives of children. A child with a CASA spends less time in foster care, receives more appropriate services, and is more likely to have increased self-esteem and stronger academic outcomes.<sup>27</sup> Currently only half of Oregon children involved in child welfare are assigned a CASA, and there is little information regarding the diversity of CASA volunteers. Increased outreach for recruitment and a special focus on recruitment of diverse CASAs will improve outcomes for all children in Oregon’s Child Welfare System.

**Increase healthy relationship skills and sexual awareness through education:** Foster youth report a lack of appropriate levels of sex education, resulting in STDs, unexpected pregnancies, abusive relationships, and vulnerability to sexual exploitation and trafficking.

**Dedicated dental and mental health support:** Foster youth ages 18-21 report a serious lack of access to dental and mental health resources. While we know that children on the Oregon Health Plan in general have access issues for these specialties, foster youth in particular have multiple other barriers to health services that must be overcome. Child Welfare must partner with the Oregon Health Authority to prioritize mental health and dental services for the population of foster youth, including by amending Coordinated Care Organization contracts and offering incentives for enabling quick access to services.

27. University of Houston and Child Advocates, Inc., Making a Difference in the Lives of Abused and Neglected Children: Research on the Effectiveness of a Court Appointed Special Advocate Program. [http://www.casaforchildren.org/site/c.mtJSJ7MPisE/b.5332511/k.7D2A/Evidence\\_of\\_Effectiveness.htm](http://www.casaforchildren.org/site/c.mtJSJ7MPisE/b.5332511/k.7D2A/Evidence_of_Effectiveness.htm)



## THREE: Focus on the root causes that drive foster care placements

*In order to create opportunities for all children to thrive we need to invest in Oregon's families by investing in housing, access to behavioral health treatment and recovery, quality childcare and early education, and pathways to better jobs for parents.*

**Housing:** In Oregon in 2017, 17 percent of children entering foster care had inadequate housing cited as a reason for removal, an increase of 2 percent from 2016, or 100 more children.<sup>28</sup> On September 5, 2018 Governor Brown released a comprehensive agenda titled *Housing Policy Agenda: Housing Stability for Children, Veterans, and the Chronically Homeless and Increased Housing Supply for Urban and Rural Communities* which details her strategies for ending child homelessness and increasing overall housing affordability, including for survivors of domestic violence.<sup>29</sup>

**Behavioral health treatment and recovery:** We must break the cycle of addiction passed through generations using a two-generation approach. Multi-generational treatment is essential in the fight against Substance Use Disorders and Oregon must support culturally-sensitive, family-based treatment in order to best serve our struggling families. This means comprehensive wrap around services, not simply providing child care while caregivers attend treatment. Rather, our communities need to provide treatment informed by the developmental stages of human life and a commitment to diversity and equity.

Parent mentors have successfully found sobriety and regained custody of their children. They help other parents who are new to child welfare navigate the system, achieve sobriety, and reunite with their children. Expanding this model across the state will reduce how long families are separated and support more parents entering recovery.

28. Oregon Department of Human Services. (2017). 2017 Child Welfare Data Book. Retrieved from <https://www.oregon.gov/DHS/CHILDREN/CHILD-ABUSE/Documents/2017-Child-Welfare-Data-Book.pdf>

29. Housing Policy Agenda. (2018, August 30). Retrieved from <https://www.oregon.gov/gov/policy/Documents/Housing%20Agenda%20FINAL.pdf>



**Help parents get a better job to support their families:** Lifting families out of poverty through opportunities to earn a living wage will go a long way toward protecting children from maltreatment. Pathways to earned income, coupled with high quality preschool and childcare, give families the best chance at success. This effort to close the skills gap and ensure that parents have the training and education necessary for a family wage job is the work of the Governor’s Future Ready Oregon initiative.

**Ensure quality early childhood education for at-risk children:** The state will build upon existing preschool services to expand high-quality preschool in the next biennium to an additional 10,000 children from low-income families or who have developmental delays and disabilities, with a goal of serving all 40,000 children in this group by 2025.

**Improve preventive services:** The two main sources of Federal Funds (Title IV-E and Title IV-B of the Social Security Act) that come to Oregon for Child Welfare have historically been restricted to use after a child enters foster care. Starting in October of 2018 as part of the Families First Prevention Services Act, Oregon will be allowed to use some of these funds to safely keep children with their parents and mitigate the safety concerns that brought them to the attention of child welfare case workers.

**Meaningful in-home prevention work and case management:** Parents often need comprehensive case management in order to access and manage the services necessary to address the root causes of child welfare involvement. Further, often with the right planning and safety measures, children can remain in their homes while their parents build the skills they need to parent independently. Comprehensive wrap around case management and in-home services will remain a priority as part of the effort to promote family stability and prevent unnecessary removal.





## **FOUR:** Provide high-quality supports for foster parents

*We must train and support the foster families that we currently have, and recruit well-equipped foster parents to fill the current gap.*

**Implement a statewide strategic plan to increase foster care capacity:** This includes using data analytics and tracking to target the recruitment of foster care placements for every district in the state. The strategy will include targeted recruitment of specific types of placements (general foster parents, therapeutic foster beds, and culturally-appropriate placements), including foster parents with experience in diverse and over-represented communities, especially LGBTQ, Latinx, Native American, and African-American children.

**Increase support for the specialized certification, recruitment, and retention of kith and kin placements:** Removal from a child's home of origin is a traumatic experience. This trauma can be mitigated by placing the child in the home of a safe relative (kin) or known and trusted adult (kith). The certification barriers that kin and kith placements face are unique, and the support they require is specialized. As part of the greater effort to improve foster care, the needs of kin and kith placements will be specially considered.

**Retain foster parents through respite care, child care reimbursement and fully reimbursing foster parents for the cost of caring for a foster child:** We must build a robust support system to retain general foster parents and reduce placement instability. This should include a foster care payment that fully covers the cost of caring for a foster child, increased child care reimbursement for foster parents who work out of the home, options for respite care providers and encouraging foster families to use respite care, and ongoing training and support to foster parents so they can continue to meet the challenges of fostering.



**Create a foster parent resource center:** To promote positive and beneficial interactions among foster parents, caregivers, and foster youth, provide a resource center for foster parents that includes foster friendly classes, trainings, and resources regarding raising youth with various religions, lifestyles, and suggestions for bonding activities in easily accessible formats like posters, packets, and websites. A recommendation of the Oregon Foster Youth Connection (OYFC), which empowers current and former foster youth to share their voices and be heard in key decisions affecting children and youth in foster care, this will encourage positive interactions and relationships that will nurture positive mental health.

**Expand the KEEP program:** KEEP is an evidence-based support and skill enhancement program for foster parents developed by the Oregon Social Learning Center (OSLC). The KEEP program has been implemented in numerous states and counties and has been evaluated to show positive results on decreasing placement disruptions rates and child behavioral and emotional problems. DHS will contract with OSLC to develop foster parent training and support systems and improve foster parent retention. A pilot of KEEP will initially be launched to provide foster parent support in five Oregon counties, which will be both urban and rural, and will serve diverse populations from different cultures before a statewide expansion.

## **FIVE:** Ensure caseworkers have the tools and resources to support families and protect children

*The social workers who are called to serve children and families in Oregon's child welfare program are committed to improving lives. They must have time to spend with each individual on their caseload, and be equipped with the tools they need to support them.*



**Complete recruitment of caseworkers and case aides:** Hiring is already underway for 186 new positions and will be complete in January 2019. The Child Welfare program has created an innovative new role of “case aides” who do everything from finishing paperwork to putting a car seat in the car so families have more time with their highly-trained caseworkers. The current recruitment efforts, coupled with the new retention efforts, should allow child welfare branches to more consistently serve families with the same caseworker.

**Adopt data-informed decision making at every level:** The Office of Reporting, Research, Analytics and Implementation (ORRAI) was created in the winter of 2017. This group is currently in the process of developing tools to assist screening caseworkers to identify the cases most likely to need urgent attention with a visit from a child protection worker. This will help to prioritize staff resources to assist the most at-risk children. In addition, tools are being developed to assess risk of maltreatment for children returning home.

**“Regular visitation is a key tool in helping a child heal and a parent learn how to parent”**

**Prioritizing parent-child contact:** In addition to the formal support and treatment that children in foster care may need, they also need to, whenever possible, remain connected to their family and maintain their attachments. Regular visitation is a key tool in helping a child heal and a parent learn how to parent. Oregon must expand its visitation supports and services to allow children frequent and meaningful visitation in the most normal settings possible.



Ensure that parents and children have the lawyers they need to navigate the child welfare system: The child welfare system and the court process that supports it are complex and difficult to navigate. Parents and children deserve to have lawyers with time and resources to help them understand the process, make thoughtful decisions, and advocate for court orders that they believe support the interest of their family. Currently, every parent and child in Oregon may receive an attorney, but in 31 counties, those attorneys are strapped with high caseloads and demanding court dockets due to the Office of Public Defense contract structure and funding mechanisms. Five counties, however, have rolled out a national best-practice contract caseload model that emphasizes time with clients and provides additional resources to help parents and children better access services. Based on the recommendations of the 2016 Governor’s Task Force on Dependency Representation, this model should be rolled out statewide.

## **SIX:** Quick, safe, and complete case management that provides more consistent and targeted support

*A youth-centered, safety-first culture within DHS is necessary to ensure swift, safe, and comprehensive response to reports of child abuse and neglect, especially substitute care placement decisions.*

Launch a single child abuse hotline statewide with 24/7 access by the end of the second quarter of 2019. In early 2018, the hotline facility was identified and announced. This spring, the centralized hotline management team was hired. Screening rules and procedures are being analyzed in cooperation with Casey Family Programs and Action Center for Child Protection, with the goal of having the rules and training curriculum ready for delivery in fall 2018. In December 2018, staff will begin transitioning to the new hotline.



**Implement a smarter system for responding to calls to the child welfare hotline.** Although social services have historically relied heavily on professional discretion, risk and safety tools are being developed for Oregon’s child welfare system based on predictive analytics. The tools will assist workers who receive first calls about allegations of child abuse and neglect on how to respond. The tools generated from analyzing Oregon’s data can be combined with professional discretion to make more informed decisions. The decisions should be more objective, minimize bias, focus resources, and improve system efficiency.

**Other elements of the Unified Child Safety Plan** that will be implemented are efforts to engage more meaningfully with community partners, improved practices for supervisors and caseworkers so that their work is streamlined and consistent, better information sharing across the agency, and better attention to how the agency supports foster families—both in the way that foster homes are inspected, and in the training and resources that foster families receive.

By approaching system change from both prevention and treatment perspectives, this set of strategies will reduce the number of children who are neglected or abused, which will in turn safely reduce the number of children in foster care. By interrupting the intergenerational cycle of child neglect and abuse, Oregon will experience better outcomes in young adulthood for the children who do experience maltreatment and will ensure that future generations of Oregon children have the best possible chance at success in life.

