Donaldson Adoption Institute Comments on The Family First Prevention Services Act (FFPSA)  
June 15, 2016

The Donaldson Adoption Institute (DAI) respectfully submits the below comments on The Family First Prevention Services Act (HR5456) that would better align federal child welfare funding with the critical goals of supporting family stability and preventing unnecessary foster care and institutional placements. DAI appreciates the bipartisan and bicameral leadership, commitment and efforts that yielded legislation dedicated to improving safety, permanency, and well-being outcomes for children in vulnerable families, as well as the House Committee on Ways and Means’ prompt consideration of the bill.

Since 1996, DAI has worked to improve the lives of children and families across our country through research, education and advocacy that have led to better laws, policies, practices and perceptions. We investigate the issues of greatest concern to first/birth parents, adopted persons, adoptive/foster families, the people who love them, and the professionals that serve them. We then determine best practices and offer policy recommendations working with a broad array of partners in educational efforts and advocacy campaigns.

Research and experience have highlighted the complexities of family instability and the benefits of prevention as the best strategy to solve that challenge. For those reasons, DAI supports the bill’s use of federal dollars “to invest in funding prevention and family services to help keep children safe and supported at home, [and] to ensure that children in foster care are placed in the least restrictive, most family-like and appropriate settings.” Keeping families together, whenever safely possible, is a critical public policy goal and in the best interests of children.

In general, DAI encourages Congress, however, to dedicate resources to prevent instability before children are at “imminent risk” of removal from their families and entering foster care. A recent article in Future of Children “conclude[s] that CPS [Child Protective Services] has limited ability to influence child health [including physical, social-emotional, behavioral, cognitive, and mental health and development], because it primarily intervenes only after harm has occurred and because a combination of resource constraints and a relatively narrow mandate means that CPS focuses on only a small proportion of children and families.”

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Primary and secondary prevention approaches, directed to the general public and populations with risk factors associated with child maltreatment, such as parent education and support programs focused on teen parents, or those in substance abuse treatment programs, and resource centers that provide information and referral services to families in need, on the other hand, identify and address risk before child protective services’ involvement. Prevention programs can circumvent the negative impacts of instability on children and entail less intensive and less costly services than interventions to address crisis situations. They also can be tailored to address the most common reasons that children enter care at different stages -- neglect and parental substance abuse for children from birth to age five and child behavior problems for teens.²

To help advance goals of strengthening family stability and enhancing child safety, permanency, and well-being, DAI supports the bill in general and the following specific provisions, while also offering some recommendations:¹

• Expanding Title IVE funding for prevention services to avoid unnecessary foster care placements. We are appreciative of the specific inclusion of adoptions and guardianships at risk of disruption or dissolution, and kinship caregiver navigator and support services. DAI is concerned, though, that eligible children (“child who is a candidate for foster care’ means, a child who is identified in a prevention plan … as being at imminent risk of entering foster care”) and prevention services (“mental health and substance abuse prevention and treatment services” and “In-home parent skill-based programs”) as defined, are neither early nor comprehensive enough to enable vulnerable families to maintain stability. DAI suggests deleting “imminent” and expanding services to include those such as childcare, after-school care, and other resources that could mitigate the risk of neglect. Moreover, offering states the option of using, instead of mandating, Title IVE funding for prevention likely will result in less than full participation, as it has with guardianship assistance,

• Reauthorizing Adoption and Guardianship Incentives and Promoting Safe and Stable Families (PSSF). We recommend, however, increasing authorized funding for PSSF, as opposed to the bill’s flat funding of $345 million. DAI strongly supports converting PSSF to mandatory funding and increasing appropriations to $1 billion, as the Family Stability & Kinship Care Act (S1964) had provided. Because PSSF funds four distinct and critical child welfare services, and within those primary, secondary and tertiary prevention services (the last, in cases where

¹ We limit our input to DAI’s areas of focus and expertise, which concern adoption, guardianship, and kinship permanency options for children who cannot safely remain with their biological families.

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maltreatment has already occurred), that preclude entry or reduce the length of time children and youth spend in foster care, it could result in reduced Title IVE foster care, adoption and prevention costs. Increased funding also would allow Congress to strengthen PSSF adoption promotion and support, which already funds two separate services in one funding category. It is critical to increase adoption support because post-adoptive families present different needs than biological families -- in addition to trauma of past abuse and neglect there are issues of loss, grief, attachment and identity. Moreover, studies on child welfare adoptive families indicate that providing services early in placement is linked to more positive outcomes and evaluations of post-adoption services (PAS) conclude that being able to receive services for as long as they are needed, rather than for a time-limited period, is linked with more positive outcomes. Yet, as recent DAI research found: 13 states offer minimal PAS (no special services for adoptive families other than subsidy); 19 offer moderate PAS (some mid-level services developed, such as training or support groups); and just 17 offer substantial PAS (several services developed, including some type of specialized counseling program). Adoption promotion is equally important for its role in recruiting qualified adoptive parents. For all of these reasons, to fully leverage PSSF’s potential for impact (even with the addition of Title IVE prevention funding), investment in PSSF should be increased,

• Expediting interstate placements by facilitating the development of an electronic interstate case-processing system for the exchange of data and documents to facilitate foster, guardianship, and adoptive placements,
• Investing in evidence-based (when available), promising, supported, or well-supported practice programs,
• Requiring GAO to report on states’ de-link savings’ reinvestment, including on post-adoption services, and
• Reducing unnecessary institutional placements.

Thank you for the opportunity to submit comments on The Family First Prevention Services Act. We look forward to providing more detailed input during the legislative process. Please feel free to contact us with any questions or for additional information.

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ii DAI assessed 49 states’ level of PAS provision based on state survey responses.
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