

## Child Welfare: Prevention and Early Intervention Programs

### Position Statement approved by One Voice: August 11, 2006

**Issue/Concern:** There is currently inadequate funding to provide services to families and children at risk of entering the juvenile probation or child welfare system and to maintain adoption of special needs children adopted from the Child Protective Services system.

#### Specific Policy Recommendation(s):

- ★ Fund prevention and early intervention (PEI) services to at least pre-2003 levels, plus cost of living and population growth. Adjust Texas' funding for post-adoption support services to account for caseload growth since 2001, plus projected caseload growth and service providers' cost increases since the last adjustment.

**How does this issue/recommendation related to prevention and early intervention or maximizing federal funds for health and human services?** Investing State funds in specifically identified, targeted, proven prevention and early intervention programs and post-adoption services not only saves funds by preventing more costly interventions, but *maintains the integrity of families*. Post-adoption services are critical to maintaining stable adoptions of children from the CPS system, thus preventing re-entry into the foster care system. The program covers specific services for these traumatized children, including outpatient counseling and residential treatment, support groups, respite care and training for the adoptive parents. Texas' PEI and post-adoption programs are efficient, run by state-contracted community and faith-based providers, and are critical to sustaining adoptive families.

#### Supporting Facts/Research/Resources:

- ★ **PEI:** In 2003, the Legislature cut PEI funding significantly. The 79<sup>th</sup> legislature partially restored the funding and required it to be allocated competitively to proven programs. Proven teen pregnancy prevention programs save \$4.40 to the public treasury for every dollar invested, while one teen pregnancy costs the public treasury a minimum of \$6,000 and over \$12,000 annually in lost economic production. One proven program, Services to At Risk Youth (STAR) still needs \$4.2 million in restoration funds. A separate briefing paper addresses STAR in Harris County. Some Harris STAR statistics: 1) Cost per client: \$806, paid back to the state if it prevents five days of residential treatment, less than two days of a psychiatric hospital stay, eleven days of therapeutic foster care, or five days of juvenile detention; 2) at three month follow-ups, over ninety percent of the children served were home with their families, not truant and not in the juvenile justice system.

- ★ **Post-adoption:** In its budget, the Texas Department of Family & Protective Services (DFPS) funded caseload growth in foster care and adoption subsidies to families, but did not include caseload growth for post-adoption funding. Federal law requires states to increase adoptions of children in CPS care whose parental rights are terminated, and Texas has done very well in implementing this policy. **Annual adoptions of CPS children in Texas increased 49% (from 2,331 to 3,482) between 2001 to 2005**, but annual **funding** to maintain adoptions of these special needs children has actually decreased (from \$4,129,341 to \$3,901,320), a **per capita decrease of 37%**. Funding must reflect this caseload growth as well as the annual cumulative growth, since more children are added each year than reach adulthood. These costs are minor, especially when compared to the costs of mental health care and foster care from failed adoptions.

Laurie Glaze, Chair  
Adoption  
Avondale House  
Bering Omega Community Services  
Care for Elders  
Career and Recovery Resources, Inc.  
Catholic Charities of the Archdiocese of Galveston-Houston  
ChildBuilders  
CHILDREN AT RISK  
Christ the Good Shepherd Catholic Church  
Coalition for Behavioral Health Services  
Collaborative for Children  
Communities In Schools  
DePelchin Children's Center  
Family Services of Greater Houston  
Fort Bend Regional Council on Substance Abuse, Inc.  
Gateway to Care  
Good Neighbor Healthcare Center  
Gulf Coast CHIP Coalition  
Harris County Healthcare Alliance  
Healthcare for the Homeless-Houston  
Houston Area Association for the Education of Young Children  
Houston Food Bank  
IntraCare Hospitals  
Jewish Family Service  
Justice for Children  
Legacy Community Health Services, Inc.  
Memorial Hermann Healthcare System  
Mental Health Association of Greater Houston  
NAMI Metropolitan Houston  
Neighborhood Centers, Inc.  
Northwest Assistance Ministries  
San Jose Clinic  
SEARCH  
South County Community Clinic, DBA The Community Clinic  
Spaulding for Children  
Target Hunger  
Texas Children's Hospital  
The Arc of Greater Houston  
The Center for Success and Independence  
The Arrow Project  
The Network of Behavioral Health Providers  
United Way of Greater Houston  
Wesley Community Center  
YMCA of Greater Houston

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**Legislative Outcome:** In general, funding for prevention and early intervention was increased by \$6.7 million, restoring some, but not all, programs to 2003 levels or better. Primary increases were for competitive programs with documented outcomes. Post adoption funding was not increased, although the increases in the Children's Medicaid budget should benefit these children, since most remain on Medicaid after their adoption.

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