

A Framework for Child Welfare Reform

Strategic Priorities for Maine: A Call to Action

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Issue

Maine's child protective services are being overwhelmed by maltreatment reports. The state is reckoning with an unprecedented number of tragedies in a short time. Many efforts are focused on improvements to the child protective agency, but this is only part of the picture. The current crisis for Maine's children and families cannot be the responsibility of the state child welfare agency alone.

From June through August 2021, four Maine children died in cases where parents have been charged with abuse or neglect. As of November 2021, there were 2,282 children in state custody, a 25% increase from July 2018.¹ These children lack the safety and stability of a permanent home and family. Improving the state child welfare system will require sustained focus and investments. However, focusing attention and resources only on improving the state agency will not reduce the number of children entering the system.

There is currently no coordinated system for preventing child maltreatment in Maine. Reports assessing the state child welfare agency, including the most recent one conducted by Casey Family Programs and Collaborative Safety LLC, have all identified the need to improve collaboration with community providers that serve the same families. The pandemic has increased the need for concrete and economic supports for families.

All stakeholders need to work together to find ways to stabilize families in our communities and reduce the number of children who experience maltreatment. This will require immediate, coordinated investments and actions by public and private partners in communities across the state.²

Our nation's child welfare system only responds to maltreatment after it occurs, rather than supporting families to safely care for their children. When intervention occurs, it disproportionately involves families living in deep poverty and communities of color. This has long-term implications for youth mental health, connection to education, and other systems involvement. Real reform can occur only if Maine moves away from our reliance on the child protection system and moves toward a framework of child well-being and healthy families.

Priority Actions

The **State** should assume authority and responsibility for leading the development, implementation, and oversight of a comprehensive statewide prevention plan

The **State** and **Philanthropy** should invest in building the infrastructure for cross-system collaboration between public systems and community service providers

The **Legislature** and **State** should work together to build state child welfare leadership and caseworker capacity

Community Leaders, Philanthropy, and the **State** should work together to invest in community-based supports for families

The **Legislature** and the **Child Welfare Ombudsman's office** should provide ongoing oversight of child welfare system improvement recommendations, plans, and implementation

Promising National Strategies

Thriving Families, Safer Children: A National Commitment to Well-Being

The Children's Bureau at HHS' **Administration for Children and Families, Casey Family Programs, the Annie E. Casey Foundation, and Prevent Child Abuse America** are partnering in a nationwide initiative to prove that it is possible to fundamentally rethink how child welfare systems function to prioritize strengthening families and building resiliency, rather than separating families.

Essentials for Childhood (CDC)

Essentials for Childhood proposes strategies communities can consider to promote the types of relationships and environments that help children grow up to be healthy and productive citizens so that they, in turn, can build stronger and safer families and communities for their children.

The Institute for Family

The Institute for Family exists to elevate and accelerate the family well-being movement. We believe this starts with listening to families, trusting their lived expertise, and working with them to inform and inspire a new way forward.

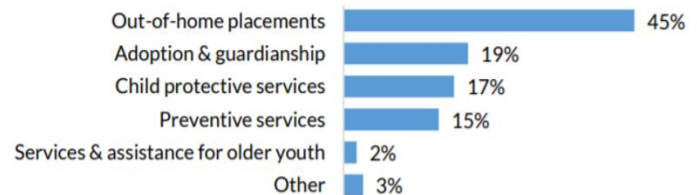
Tennyson Center for Children – Rewiring

Rewiring strategically deploys public and private funds to ultimately yield a system that prevents children and families from having to “get worse” before becoming eligible to receive the help they need. Shifting dollars from high-cost, late-stage interventions to lower-cost, preventative support will save money and will improve outcomes for kids, families, and society.

Available Evidence

Spending

Historically, state and federal spending has been primarily directed toward the downstream, in child protection intervention and foster care.



**State spending in child welfare, 41 states (Child Trends, 2018)*

National child welfare leaders are calling for changes to the ways we invest in child welfare spending. In recent years, the Administration for Children, Youth and Families (ACYF), U.S. Centers for Disease Control and Prevention, Casey Family Programs, the Annie E. Casey Foundation, Prevent Child Abuse America, and other organizations have recommended states direct more resources and attention to primary and secondary prevention efforts that reduce the incidence of child abuse and neglect.

These leaders are emphasizing “the importance of proactively preventing child maltreatment and investing in the capacity of parents to keep their children safe, rather than disproportionately investing in supports and services, such as foster care, after children have already suffered maltreatment.”³

The public funding stream will take time to shift. Communities and philanthropy should focus investments on prevention efforts to meet the need right now.

Disparities

Children who are two or more races or Native American are more likely to be in foster care in Maine. Research has shown several possible causes for racial disparities in the foster care system: disproportionate and varying needs of children and families of color, especially due to higher rates of poverty; racial bias and discrimination; child welfare system factors; and geographic context.⁴

Investments should also focus on addressing the root causes of disparities for families with child welfare involvement.

Challenges

Prevention

There is currently no coordinated system for preventing child maltreatment in Maine. Responsibilities for strategic planning and prevention activities are spread across several state and community entities. The Federal Child Abuse Prevention and Treatment Act⁵ funds Community-Based Child Abuse Prevention (CBCAP) programs in every state, with the purpose of reducing the likelihood of child abuse and neglect.⁶ State agencies are the CBCAP lead agency in 44 states; Maine is just one of 5 states where CBCAP funds are awarded directly to a nonprofit outside of state government.⁷

Cross System Collaboration

Reports from the Office of Program Evaluation and Government Accountability in 2018, OCFS Child Welfare Forums in 2020, and Casey Family Programs in 2021 have all identified the need for the state child welfare agency to improve collaboration with community providers and other state agencies that serve the same families. Research on multi-system coordination has found “the expectation that collaboration can occur without a supporting infrastructure is one of the most frequent reasons why it fails.”⁸ Infrastructure is needed to support child welfare staff to collaborate effectively with community providers and other state agencies.

State Agency Capacity

The Office of Child and Family Services Director is responsible for administering Child Welfare, Children’s Behavioral Health, Youth Transition, Violence Prevention services, Childcare Licensing, and community-based contracts including Community Services Block Grants.⁹ There is just one Associate Director of Child Welfare position to lead the statewide administration of all programs in the child welfare division. On the front lines, OCFS has added over 50 caseworker positions; a workload analysis in December 2020 showed the need for 42.5 additional caseworkers to meet demand.¹⁰ Staff turnover has impact on the completion and quality of tasks.¹¹

Supportive Services

Many families are burdened with economic stressors, mental health needs, and substance use disorders, and need reliable access to supportive services for prevention and reunification. Almost half (47%) of Maine families assessed by child protective services in 2020 were single parent households experiencing economic stressors.¹² Over three quarters (76%) of all substantiations of child maltreatment in 2020 were neglect or emotional abuse, often related to parental mental health and substance use disorders.¹² There are roughly 9,000 children being raised by kin with no parent present, and an estimated 5,224 grandparents responsible for raising their grandchildren.¹³ A 2020 survey of incarcerated youth found 65% had a history of child welfare investigation.¹⁴

Equity

The state’s highest per capita rates of maltreatment in 2020 were in rural counties that have less access to supportive and treatment services,⁴ including lower patient capacity for medically assisted treatment for opioid use disorders¹⁵ and no Recovery Community Centers.¹⁶ Consistent with national trends, children and families of color continue to be disproportionately represented in Maine’s foster care system.⁴

Oversight

There are several entities that play key roles in providing recommendations for improving the child welfare system, including the Child Welfare Ombudsman, the Child Death and Serious Injury Review Panel, and the Maine Child Welfare Advisory Panel. These entities all make formal recommendations in public reports, but are not required to coordinate and have no authority over the outcomes of these recommendations.

Opportunities for Action

Preventing future child deaths starts with reducing the prevalence of child abuse and neglect. This will require robust public health strategies and investments to stabilize families and decrease the need for emergency child protective intervention. Research indicates that prevention efforts are more likely to decrease incidence of child abuse and neglect when they are part of a coordinated, systemic approach.²

Prioritize Prevention

Maine's prevention system should be restructured so the State assumes authority and responsibility for leading the development, implementation, and oversight of a comprehensive statewide prevention plan.

- **The Children's Cabinet** should facilitate work across state departments to develop a comprehensive plan that outlines Maine's theory of change for preventing child abuse and neglect. This plan should include a logic model, strategies, investments, and outcome measures, and a focus on racial and geographic equity. **The State and Legislature** should work together to build staff capacity within the Children's Cabinet to support these efforts.
- **The State and Legislature** should work together to reinstate DHHS as the lead agency for CBCAP funds, and DHHS should align these resources with the statewide prevention plan.
- **The State** should partner with **Community Organizations** to provide prevention and early intervention services. This should include development of a transparent, data-based funding process for allocation of all child maltreatment prevention funds and a coordinated referral system to community providers with outcomes tracking.
- **Philanthropy** should work with **Community Organizations** to address family support gaps that exist between prevention and intervention services by establishing flexible funds to community providers and direct financial assistance that can be accessed to stabilize families.

Improve Cross-System Collaboration

Maine should renew investments in strategies that provide the infrastructure for child welfare caseworkers, schools, healthcare, law enforcement, mental health, and community service providers to work together to keep children safe.

- **Philanthropy** should support the **State** and **Community Organizations** to adopt a framework and build supporting infrastructure for collaborative work. This process should include the development of a logic model, strategies, positions, and measures of success that build on learning from past and current Maine initiatives (e.g., Communities for Children and Youth, Local Case Resolution Committees, Community Partnerships for Protecting Children, and Regional Community Care Teams).
- The **State, Schools, and Community Organizations** should hold regular interdisciplinary team meetings to support families facing challenges and ensure connection to needed resources of support to divert children from out-of-home placements when possible and support timely reunification.

Build State Agency Capacity

State leaders and policy makers should expand leadership positions within OCFS and continue to prioritize caseworkers to ensure the demands of child welfare operations and systems improvements are met.

- The **Legislature** and **State** should work together to build state child welfare leadership capacity within DHHS by establishing:
 - A new Director of Child Welfare position that reports to the DHHS Commissioner
 - An Associate Director of Special Projects that works alongside the Associate Director of Child Welfare to implement and oversee systems reform initiatives
 - An additional Regional Associate Director to expand supervision and training capacity for district administrators, supervisors, and caseworkers
- The **State** and **Legislature** should work together to provide adequate and sustained revenue to ensure child welfare workers receive sufficient training, supervision, and support for manageable caseloads.
- The **State** and **Employees Union** should work together to develop staffing formulas that ensure the capacity to respond to vacancies, training time, referral rates, and workload.
- The **State** should train all staff to recognize and address racial disparities in child welfare, and reinvest in strategies that employ people who have lived experience with child welfare.

Invest in Supportive Services

Maine should invest in concrete and economic supports for families as an important means of reducing and preventing child maltreatment.

- **Community Leaders, Philanthropy, and State Leaders** should work together to invest in community-based universal support for families, i.e., Family Resource Centers and Recovery Resource Centers.
- The **State** should set and maintain adequate reimbursement rates for mental health and substance use disorder treatment services.
- The **State** should partner with **Maine Housing** to increase development of family-sized affordable housing and increase production of supportive housing for families.
- The **State** should improve the Parents as Scholars program to increase the number of parents who can successfully participate and complete their education as a pathway to economic security.
- **Healthcare Organizations** should work with the **State** to expand buprenorphine availability in rural communities for caregivers who have Opioid Use Disorders, and develop enhanced primary care initiatives to build protective factors in families, e.g., Healthy Steps.
- The **State** should follow all recommendations released in the report for the Supporting Grandparents Raising Grandchildren (SGRG) Act and provide consistent, ongoing funding for Kinship support.
- The **Legislature** and **State** should support the transition of foster youth into adulthood by expanding the voluntary care agreements to age 23.

Ensure Effective Oversight

Entities that play key roles in providing recommendations for improving the child welfare system should continue to build capacity to do this effectively, and the Legislature should provide ongoing oversight of the outcomes of all formal recommendations.

- The State should bolster the capacity of the **Child Welfare Ombudsman's** office by increasing statutory authority and communication with the Legislature, adding additional staff, and increasing access to information.
- The **Legislature** should provide ongoing, coordinated oversight of child welfare system improvement recommendations, plans, and implementation through the work of the Government Oversight Committee (GOC), the Office of Program Evaluation and Government Accountability (OPEGA), and the Joint Standing Committee on Health and Human Services.

Conclusion

Maine has an obligation and an opportunity right now to engage in a transformation of the child welfare system. Reforms cannot be limited to the state child welfare agency. Our state can prevent future tragedies by building a child well-being and family strengthening system that reduces the strain on the child protective system.

The system responsible for protecting and promoting the welfare of children includes many stakeholders: families, community service providers, schools, healthcare, philanthropy, and local and state leaders. All stakeholders must work together to envision and invest in a continuum of care that focuses on the whole child and strengthens families across every community in Maine.

The recommendations in this policy brief were developed by the Maine Child Welfare Action Network, a group of organizations and individuals who are deeply committed to the safety and well-being of all children, youth, and families in Maine.

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References

1. Department of Health and Human Services, Office of Child and Family Services, [Child Welfare Data Dashboard](#)
2. U.S. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, 2016 [Preventing Child Abuse and Neglect: A Technical Package for Policy, Norm, and Programmatic Activities](#)
3. U.S. Department of Health and Human Services, Administration for Children & Families, Children's Bureau, [Improving Child Welfare Through Primary Prevention](#), Children's Bureau Express January 2019
4. Maine Children's Alliance, [Maine KIDS COUNT Data Book 2021](#)
5. https://caseyfamilypro-wpengine.netdna-ssl.com/media/CAPTA-Paper_web.pdf
6. U.S. Department of Health and Human Services, Administration for Children, Youth and Families, [Community Based Grants for the Prevention of Child Abuse and Neglect Program Instruction](#), March 12, 2020
7. FRIENDS National Center for Community Based Child Abuse Prevention, [CBCAP](#), Retrieved July 2021
8. Stanford Social Innovation Review. [Collective Impact](#). Winter 2011
9. Maine Department of Health and Human Services, Office of Child and Family Services, [Organizational Chart 6/17/2021](#), Retrieved July 2021
10. Maine Department of Health and Human Services, Office of Child and Family Services, [Child Welfare Caseload and Workload Analysis 2021](#)
11. Casey Family Programs, [Casey Child Welfare Review 2021](#)
12. Maine Department of Health and Human Services, Office of Child and Family Services, [Child Welfare Report 2020](#)
13. Grandfamilies.org, GrandFacts. [Maine Fact Sheet for Grandfamilies](#). Retrieved December 2021
14. [Maine Juvenile Justice System Assessment](#). February 2020
15. U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration. [Buprenorphine Practitioner Locator](#). Retrieved October 2021
16. [Maine Recovery Hub](#), 2021. Retrieved November 2021