

LOUISIANA  
**Platform**  
for **Children**  
REPORT





## **What is Public Policy and What is its Connection to the Budget?**

The Governor, the Legislature and the Board of Elementary and Secondary Education have the joint responsibility of setting public policy for the children of Louisiana. Public policy for children includes courses of action, regulatory measures, laws, and funding priorities to address their needs.

Ideally, public policy will be a principled guide to address the needs of children and ensure they mature into productive citizens. It should identify a need and direct resources to meet the need in a way that will assure the desired outcome. Good public policy will provide for investments in evidence-based programs that have been shown, through studies, to provide desired results and deliver a real return on investment.

The executive budget is the primary public policy document for the state. Laws and resolutions that identify needs and responses will not be effective if funding is not provided.

As elected officials, the children of Louisiana are your constituents. The future of Louisiana requires elected officials to make children their top priority to guarantee a vibrant Louisiana in the future.

*The term, Evidence-Based Practice (EBP), originated in the medical community in the 1990s. An EBP is the current best practice that has been subjected to strong scientific research and interpreted using a very narrow set of methodological criteria. Since the 1990s, the EBP concept has been adopted in many other fields, including child and family services.*



# LOUISIANA'S CHILDREN

## Child Welfare System

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Child abuse and neglect is the front end of a very complex service delivery system. In the profession, the continuum of care and intervention is referred to as child welfare.

### The Cost Of Child Abuse And Neglect

It is estimated that 1 in 4 children in the United States experience some form of child maltreatment, whether it be sexual assault, neglect, physical abuse or emotional abuse. Child maltreatment is a major public health problem and the burden of childhood maltreatment is substantial. Each year in the United States, more than \$25 billion dollars is spent on child welfare services. The Center for Disease Control (CDC) released a study which found the total estimated lifetime financial costs associated with just one year of confirmed cases of child maltreatment is approximately \$124 billion. The lifetime cost for each victim of child maltreatment was \$210,012, which is comparable to other costly medical health conditions.

Estimates are that a stroke results in a lifetime cost per person of \$159,846, and Type 2 Diabetes between \$181,000 and \$253,000 per person. The U.S. is estimated to spend \$103 billion a year on all aspects of child maltreatment, with more than \$70 billion annually being spent on indirect costs such as special education, juvenile delinquency, mental and medical health care, the adult criminal justice system, and lost productivity. Linda Degutis, director of the CDC's National Center for Injury Prevention and Control, stated that, "Federal, state and local public health agencies, as well as policymakers, must advance the awareness of the lifetime economic impact of child maltreatment and take immediate action with the same momentum and intensity dedicated to other high profile public health problems -- in order to save lives, protect the public's health, and save money."

Family and environmental factors can make a child more vulnerable to social/emotional and behavioral problems. Neighborhood characteristics and living in poverty are included among risk factors that impact child

development. Research shows that family risk factors, such as substance abuse, mental health conditions and exposure to domestic violence can negatively impact a parent's ability to adequately support their child's development.

### Child Welfare

The term "child welfare" encompasses child protection investigations, in-home services to families with a valid case of abuse/neglect, out-of-home placement (foster care) and adoption. The continuum of the service provision model is reinforced with state statutes in the Louisiana Children's Code that provides for legal guidance and protections. Further mandates and guidance are present in federal legislation and regulations. Children placed out-of-home and in foster care are wards of the state; in essence, the state is the child's legal parent.

Child abuse and neglect and child maltreatment cross all socio-economic and racial lines. During fiscal year 2015, there were 8,515 validated cases in Louisiana. Child maltreatment exists in a complex web of family interactions. Research suggests that there is co-morbidity with issues related to domestic violence, substance abuse, and medical/behavioral health issues. Louisiana's

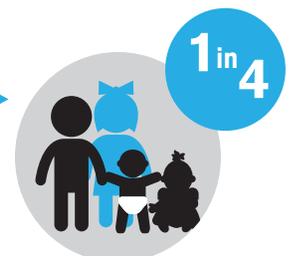


**Total estimated lifetime financial costs associated with just one year of child maltreatment is \$124 billion.**

CDC

**1 in 4 children** in the US **experience** some form of **maltreatment.**

CDC



Department of Children and Family Services (DCFS) investigates reports of abuse that occur within the family.

Not every child in a valid case of abuse and/or neglect is removed from their home. The best practices models suggest that children should be allowed to safely remain in their home with social service interventions and supports engaged to mitigate the issues that initially brought the family to the attention of the DCFS. The family services model develops interventions for the whole family unit. During this time, family members are continuously monitored to assure that the child(ren) can safely remain in the home. If they cannot be safe in their home, the state will petition the court for temporary custody at which time the child(ren) are placed in foster care.

## Foster Care

During fiscal year 2015, there were 8,191 children in the state's custody. Foster care was never envisioned to be a permanent living arrangement for a child. Ideally, the family of origin should receive services designed to improve the conditions of the home to eventually allow the child(ren) to safely return home. The two most common out-of-home placements for children are kinship placements and foster care placements. Kinship placement refers to grandparents, aunts and uncles, and other relatives who serve as parents for children whose own parents are unable to care for them. Sometimes, the arrangement is an informal, private arrangement between the parents and relative caregivers and in some situations, legal custody may be involved. Other foster care placements can be with a private state-trained caregiver, called a foster parent, or in a group home. During the child's time in care, the court provides periodic oversight in accordance with state and federal directives. The custodial agency, working on behalf of the state, manages the case in all elements of the child's well-being, i.e. health, safety, education, permanency, and independent living.

If the child(ren) cannot safely return home, the DCFS will develop a more permanent plan for the child. For some, the parental rights of some children are terminated; thereby, freeing the child for adoption. DCFS then works toward finding a permanent home. Historically, more than fifty percent of the foster care children who are adopted were adopted by their foster parents. During fiscal year 2015, there were 1,054 children available for



▶ In fiscal year 2015, there were **8191 children in the state's custody** during the course of the year.  
LA DCFS

adoption and 578 children were successfully placed in finalized adoptions. For many of these children, the state continues to offer support through an adoption subsidy that helps preserve the placement and has support services in place to mitigate pre-existing needs of a special needs child.

There are some foster children who do not achieve return-home or adoption status. For these youth, they will age out of foster care. Before the child reaches the age of majority (18), the youth should receive critical services to help to prepare them for adulthood. For many in this population, they may not be academically ready to leave care upon their 18th birthday. Youth who are in the child welfare system are often behind academically and will need continued support to enable them to achieve their high school diploma and supported housing.

## Court Appointed Special Advocates (CASA)

CASA is a program which trains and supervises community volunteers who are appointed by a judge to advocate for the best interest of children in the foster care system. The Louisiana Children's Code Article 424 provides that the purpose of CASA is to advocate for timely placement of children in permanent, safe and stable homes. Independent research shows that children with a CASA volunteer spend significantly less time in foster care, which represents a sizable savings of state and federal dollars. There are seventeen (17) CASA programs in Louisiana serving children in fifty-three (53) parishes. Each CASA program is a non-profit organization that meets national standards and is recognized by National CASA for Children. In 2014, there were 1,643 community volunteers assigned and working for the best interest of over 3,400 foster children. CASA is an effective community-based program which benefits the child, the Court and the community-at-large.

## State and Federal Child Welfare Laws

Child welfare operates under state statutes and federal

legislation which has modeled the language of the Louisiana Children’s Code. The most significant federal instruments are:

- Child Abuse and Prevention Treatment Act (CAPTA)
- Title IV-E of the Social Security Act
- Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272)
- Multiethnic Placement Act (MEPA) (P.L. 103-382)
- Promoting Safe and Stable Families (Title IV-B, Subpart 2, of the Social Security Act)
- Foster Care Independence Act (P.L. 106-169)
- Fostering Connections to Success and Increasing Adoptions Act (P.L. 110-351)

## Workforce Issues

In a Louisiana Legislative Auditor’s performance audit report, concerns were noted about decreased staff, higher caseloads, staff turnover, and the lack of available services during the last five years. These concerns reflect on the Department’s ability to conduct investigations in accordance with policies and other regulatory requirements. Regardless of a child welfare system’s administrative structure, a qualified, skilled, dedicated, and culturally competent workforce is critical to effectively deliver child welfare services that result in positive outcomes for children and families. This workforce faces critical life and death decisions daily, all while working in a fast-paced, stressful work environment. The long-term impact of child welfare decisions demands a skilled child welfare workforce with working knowledge of child, youth, and adult development, role and impact of trauma, parenting and family dynamics, and evidence-based interventions.

## Youth Aging Out-of-Foster Care

Since 2013, the Department no longer provides support to youth aging-out-of-foster-care once they reach the age of 18. The programmatic shift places young adults at risk for homelessness and possible incarceration. During the 2015 Legislative Session, HCR 168 and HR 171 were authored by representatives who expressed concern about the negative trajectory these youth have without needed supports in place which would allow them to at least finish high school. The work of advocates on this issue will be part of a report submitted to the legislature

in 2016.

## Policy Recommendations – Child Welfare

- Integrate systems that currently operate parallel to one another – mental health, substance abuse, domestic abuse, homelessness and health care. These systems must be enhanced to effectively develop a service continuum focused on safety for children.
- Recruit, train and retain a skilled and culturally competent child welfare workforce to ensure child welfare cases are managed professionally, in the child’s best interest, with reasonable caseloads, according to nationally established standards to allow child welfare workers to provide competent and effective services.
- Restore funding for a program for youth aging-out-of foster care (at age 18).
- Employ evidence-based practices and focus services on favorable outcomes for at-risk youth and their families.
- Provide sufficient funding for foster care and adoption services to ensure quality in the necessary services for these at-risk children, youth and families.
- Continue state support for the local Court Appointed Special Advocate (CASA) programs that support and speak for children in the foster care system
- Provide parenting programs as a key priority for preventing child abuse and neglect.