In the Best Interest of the Child:
Best Practices for Keeping Families Safely Together

DECEMBER 14, 2018

Briefing of the
Commission on Security and Cooperation in Europe

Washington: 2019
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[II]
ABOUT THE ORGANIZATION FOR SECURITY AND COOPERATION IN EUROPE

The Helsinki process, formally titled the Conference on Security and Cooperation in Europe, traces its origin to the signing of the Helsinki Final Act in Finland on August 1, 1975, by the leaders of 33 European countries, the United States and Canada. As of January 1, 1995, the Helsinki process was renamed the Organization for Security and Cooperation in Europe (OSCE). The membership of the OSCE has expanded to 56 participating States, reflecting the breakup of the Soviet Union, Czechoslovakia, and Yugoslavia.

The OSCE Secretariat is in Vienna, Austria, where weekly meetings of the participating States' permanent representatives are held. In addition, specialized seminars and meetings are convened in various locations. Periodic consultations are held among Senior Officials, Ministers and Heads of State or Government.

Although the OSCE continues to engage in standard setting in the fields of military security, economic and environmental cooperation, and human rights and humanitarian concerns, the Organization is primarily focused on initiatives designed to prevent, manage and resolve conflict within and among the participating States. The Organization deploys numerous missions and field activities located in Southeastern and Eastern Europe, the Caucasus, and Central Asia. The website of the OSCE is: <www.osce.org>.

ABOUT THE COMMISSION ON SECURITY AND COOPERATION IN EUROPE

The Commission on Security and Cooperation in Europe, also known as the Helsinki Commission, is a U.S. Government agency created in 1976 to monitor and encourage compliance by the participating States with their OSCE commitments, with a particular emphasis on human rights.

The Commission consists of nine members from the United States Senate, nine members from the House of Representatives, and one member each from the Departments of State, Defense and Commerce. The positions of Chair and Co-Chair rotate between the Senate and House every two years, when a new Congress convenes. A professional staff assists the Commissioners in their work.

In fulfilling its mandate, the Commission gathers and disseminates relevant information to the U.S. Congress and the public by convening hearings, issuing reports that reflect the views of Members of the Commission and/or its staff, and providing details about the activities of the Helsinki process and developments in OSCE participating States.

The Commission also contributes to the formulation and execution of U.S. policy regarding the OSCE, including through Member and staff participation on U.S. Delegations to OSCE meetings. Members of the Commission have regular contact with parliamentarians, government officials, representatives of non-governmental organizations, and private individuals from participating States. The website of the Commission is: <www.csce.gov>. 

[III]
In the Best Interest of the Child: 
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DECEMBER 14, 2018

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December 14, 2018  

Commission on Security and Cooperation in Europe  
Washington, DC  

The briefing was held at 10:30 a.m. in room G-11, Dirksen Senate Office Building, Washington, DC, Allison Hollabaugh Parker, General Counsel, Commission on Security and Cooperation in Europe, presiding.

Panelists present: Allison Hollabaugh Parker, General Counsel, Commission on Security and Cooperation in Europe; Maridel Sandberg, President and Executive Director, Together for Good; Jessica Foster, Executive Director of Strategic Partnerships, Youth Villages; and Christine Calpin, Managing Director for Public Policy, Casey Family Programs.

Ms. PARKER. Good morning. On behalf of Chairman Roger Wicker and Co-Chairman Chris Smith, I would like to welcome you to this briefing of the Commission on Security and Cooperation in Europe, also known as the Helsinki Commission. My name is Allison Hollabaugh Parker. I'm general counsel at the Commission. We are a bicameral, bipartisan, independent Federal commission devoted to the promotion of human rights, military security, and economic cooperation in the 57 participating States of the Organization of Security and Cooperation in Europe. These states are composed of countries from North America, Europe, and Eurasia.

The OSCE has a few commitments touching on our topic today. Some of those commitments regard parental rights, primarily the right of parents to direct the moral and religious education of their children and to bring the children up in the culture of the parents. This comes from the Vienna Declaration of the OSCE in 1989. OSCE commitments also generally reaffirm the right to protection of private and family life, which will be subject only to such restrictions as are prescribed by law and are consistent with internationally recognized human rights standards.

Some international human rights standards, to which most of the OSCE participating States are subject, arguably allow broad state interventions in families based on the state’s conception of the best interest of the child. For instance, in Sweden and Germany, State education rather than home education by parents is believed to be in the best interest of the child. These states believe it is better to remove a child from its biological
parents, rather than let the child be educated at home. Other participating states, such as Norway, regularly remove children from their homes because the parents, quote, “lack parenting skills.” Norway has an extremely high level of children being removed from their parents, especially immigrant parents living in Norway, even where there has been no evidence of violence or drug abuse in the family.

Between 2008 and 2014, Norway doubled the number of children being put into emergency care. The most common reason for such removals were, quote, “lack of parenting skills.” In 2015, the situation of children being removed from their parents in Norway was so dire that nearly 300 lawyers, psychologists, and social workers wrote a national notice of concern to the government of Norway. They said that a long list of children are exposed to serious failures of understanding and infringement of their rights by the low level of evidence required for removing these children from their homes. Several Norwegian families have received asylum in Poland out of fear that their children would be taken away in Norway. However, Norway’s low threshold for removals was influenced by a case in 2008 where a child should have been removed from his home but was not and was subsequently killed by an unsafe parent in the home.

The United States has also grappled with where the threshold should be for removal of children from their parents. One major consideration in this balancing of interests should be the potentially lifelong suffering and even abuse faced by children who were removed from their own families, and who remain without permanent families in the foster care system. The statistics in the United States, for those who have been removed permanently and not found new permanent families, are sobering. While foster families can offer critical and timely emergency care for children in need, studies show that children who stay in foster care without permanent parents suffer lifelong emotional harms and life skills underdevelopment. The extreme challenges faced by these children put them at a high risk for homelessness, unemployment, human trafficking, and even incarceration. More than 20,000 young people aged out of foster care in the United States in 2016, deprived of the support of their own or adoptive permanent families.

These children in the United States and Europe are perhaps saved from an immediate emergency by government officials seeking to act in their best interest, but then exposed to the lifelong harm of not belonging to a functioning forever-family. What if these youths and their families of origin had been given the support they needed to stay together—such as mental health services, substance use treatment, in-home parenting skill training, and supportive community? Today the commission is hosting a panel of experts on the frontlines of best practices to preserve families safely together.

Our first speaker this morning is Maridel Sandberg. She is the president and executive director of Together for Good. She’s spent the last 36 years advocating for vulnerable children around the globe and protecting social orphans domestically. In her work, she has helped hundreds of families adopt children, and many others foster. She serves as a founding board member of the Christian Alliance for Orphans, and in 2017 launched Together for Good, which grew out of a vision to better love neighbors based on Isaiah 1:17, “Learn to do good, seek justice, correct oppression, bring justice to the fatherless, and plead the widows’ cause.” Maridel is the mother of eight children, three by birth and five adopted, ages 15 through 38. Her greatest job is being called grandma by 16 grandchildren, six of them adopted from the United States, Ethiopia, and Uganda.

Ms. Sandberg.
Ms. Sandberg. Thank you. Together for Good is a network of volunteers in the private sector and professional staff that come alongside parents that are facing crisis and stress, and provide ongoing social support—practical help—so that families are not left alone in their time of crisis and children can be safe until stability is established. We come alongside families in a multitude of ways. We have crisis hosting of children. Approved families are hosting children temporarily while parents have a safe option to clarify their issues. We offer respite care, periodic pre-planned, daytime or overnight care, to alleviate that parental stress. We want to pursue healthy relational development.

We all know that everybody needs an extra friend, and so we offer that once a week, or one time per month, and then also wraparound care for families—both families that are hosting children, but also families that are in those crises. Our best work is done in collaboration with the community at large. Parents are empowered to ask for help. Parents are empowered to not worry about whether they’re going to lose their children to foster care. Parents voluntarily ask for help, and we voluntarily provide that help. We uphold and honor and respect for the God-given role as a parent. And we volunteer to help as they volunteer to ask for help. We believe that becomes the power for change.

Just this week, I met with a woman named Yolanda. I said, let’s meet at McDonald’s and play on the playground with the kids while we do paperwork. And as I sat at McDonald’s Yolanda said to me, I’ve never done this before. And I said, What? She said, I’ve never sat across the table with a mom at McDonald’s having a Coke. And I said, What do you mean? And she said, Well, Maridel, I have a professional who comes in to make sure I take my meds. I have another professional who comes in to make sure my kids are getting to school. And I have mental health visits once a week with my therapist. But I don’t have a friend like this.

That’s where the community needs to make a difference. Early intervention, child abuse prevention. We believe that power of relational support and the fundamental value of family preservation. Children belong with their parents whenever possible, but sometimes that’s not possible. And then we do engage with the foster care system and the children protection workers. But early intervention, giving that opportunity to a family that just needs extra support—who doesn’t need a grandma? Who doesn’t need a friend in their life? We all do. This important work is going to be the change agent because we believe that people don’t know about what’s happening in child welfare.

The outside world wants to help, but they don’t know how. And so how do we provide a large net of engagement to say: Faith community, you have a place at the table here. Be a good neighbor. Love your neighbor. Be a good friend. Be that person at school who notices the child in crisis, and approach that mother and offer support. We have host families that are approved through background check who will temporarily host children, but also be a good friend to those families. It’s going to take a village. And as I said earlier, the village is really large. And we’re all needed to play a part.

Thank you.

Ms. Parker. Thank you, Ms. Sandberg. I appreciate Together for Good’s approach of standing in the gap between families in need and the legal aspects of the foster care system, offering that intermediate space to avoid crisis that would entangle the children in foster care actually occurs.

Speaking next we have Jessica Foster, executive director of strategic partnerships for Youth Villages. She works with their partnering initiatives with a focus on building rela-
tionships and agreements with partners and payers, supporting partners in managing and operationalizing Youth Village programs, driving YVLifeSet growth and other services through partners, and achieving the organization’s Federal policy goals.

Before joining Youth Villages in 2011, Foster was at the Boston Consulting Group, where she supported the strategy and design of multiple site implementation plans for global corporate merger and acquisition projects. She evaluated and recommended improvements to performance management of a large public school district, and developed government advocacy strategies for a large consumer packaged goods company.

Ms. Foster is also an alumna of the Hill. She served here as a legislative aide for Senator Arlen Specter on foster care, adoption, welfare, economic development, public housing, and nonprofit issues. She holds an MBA in marketing from Wharton School and a bachelor’s degree in public policy from Brown University.

Ms. Foster. Thank you. I’m going to stay here because I have some slides. But good morning. Thank you for having me. And thank you Helsinki Commission for inviting me and my colleagues here also speaking today. I’m going to share a little bit about just what is Youth Villages and, more importantly, through the history of Youth Villages’ work with children and families, what are some things that we have learned to share with folks on the Hill, to share with the field about what types of interventions and approaches are effective at keeping children safe and stable in their families and in their communities.

Youth Villages is a national organization in the U.S. And it’s been—I’m not very educated about what happens outside of the United States. It was really interesting to hear about Norway and other countries. And while we have a long way to go in the United States, we have learned a lot and evolved a lot in the child welfare and foster care system in the past several decades. Youth Villages was founded in 1986 with the merger of two residential programs. So there was a program for children who were removed from their home, brought to a residential facility, treated, and then returned to their home.

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Youth Villages can’t serve every child in America that is at risk of entering the foster care system. But we do believe that we have learned from our experience, and through sharing what we have learned we can have an impact on every child that is in the system in the United States. This is just a quick snapshot of where Youth Villages is, the states that we operate in. And as you can see, predominantly the services being provided by Youth Villages, either by us or by other public and private agencies that we train in best practices, is interim family services and older youth services for young people aging out of foster care.

I want to highlight five tenets of evidentiary family restoration. That’s a term we came up with at Youth Villages. And it was really in our effort to crystallize what are
the key elements of effective service provision for keeping children safe and stable at home in their communities. So these are approaches that we would recommend to other organizations or other countries as they’re thinking about how to protect and preserve families.

The first is treating children and families simultaneously. So as I mentioned at the beginning, we started as an organization really treating children separate from their parents in residential programs. But we learned very quickly through collecting data on outcomes that the most effective approach is to be treating children and families simultaneously. So primarily Youth Villages has staff in the field, in families’ homes, sitting on the sofa in the living room with a family or going to McDonald’s with the family—whatever is the most convenient for the family, the time and location that works for them, to resolve whatever issues that they may be having.

The next is requiring measurable, positive long-term outcomes. There are a lot of organizations out there in the United States, and I imagine internationally, that care a lot about the fate of children. They don’t necessarily know if what they’re doing is actually making a difference and making a sustainable difference. We are very committed to tracking the outcomes of kids and families we serve up to 2 years post to when they complete receiving services from us. And we strongly encourage other organizations and government agencies to look at the data post-completion of services to really know if what we’re investing public dollars in is making a difference.

The third is sustaining treatment in the community. A lot of organizations—a lot of service providers require that families come to them, come to their office. Public agencies require that too. We have a strong belief in having workers go out into the field and meet children and families where it is most convenient for them, where they are comfortable, in their community.

The fourth is using highly intensive clinical protocols. Most of the children that are in the child welfare and foster care system or at risk of entering the system have experienced some sort of trauma in their life, instability in their life that’s leading to that involvement. And it’s really critical that the staff that are working with children and families be trained clinically, be clinically informed using evidence-based interventions and driving clinical practice in how they’re serving kids and families.

And then the last one is delivering accountability to the families being served and the funders who are paying for services. Accountability is something we take very seriously. One way, through our service models, that we achieve accountability is that we have one staff that is responsible for the success of the family. So rather than saying, this person’s working on school, this person’s working on housing, this person working on clinical support, we have one person that builds deep trust and engagement with a family. And they are trained to address the range of issues that that child and family is facing and to, as an individual, be responsible for the success of that family. And we believe that that type of program structure and organizational structure drives lasting change and requires much less coordination and time spent sharing information between workers, with one person who’s really dedicated to the success of a child and a family.

How am I doing on time?

Ms. PARKER. Great.

Ms. FOSTER. Okay. This next slide is just a quick snapshot. And I took it to share—the takeaway here isn’t just what has to happen in a home with a family to be successful.
It’s also really how does an organization have to be structured to be capable of achieving results. And so not only do you have to have a good program model in place that is designed to make a difference with kids and families, you have to have a way of monitoring how that program is being implemented, particularly if it’s being implemented in different locations, and also to track the outcomes of what is being achieved through those services.

Not only does Youth Villages have a defined program model of how we work with kids and families, we’re measuring how that program is being implemented on a daily basis. Are workers visiting families? Are they using intervention? How timely are their sessions? And then we’re also tracking the outcome of those services, and so trying to build an infrastructure for good in-home family services in another country, not only looking at what does the program look like, but what are the agencies implementing that program, and how are they structured to maintain quality and to track outcomes over time?

Just to give you a quick sense of some of the challenges of the children that we work with, and these probably translate across country lines, a range of things—from behavioral challenges, to trauma from abandonment, different types of abuse, depression, self-esteem, running away, drug and alcohol abuse, problems with sexual behavior—a range of issues are what come to us when we’re working with children and families. And it is that clinically informed and individualized model where a worker is providing very specific interventions to different children in different families to support them that is critical, because different kids come with different issues that they need to work through.

Okay, I’m going to skip through the next couple slides. And what I really just want to end on is through all of this work that we have provided over the 32 years of Youth Villages’ history, we’ve crystallized a number of key principles that need to be in place for an effective and well-functioning child welfare system. The first, which is really the theme of this panel today, is that leaders are philosophically aligned with the need to keep children and families safely at home in their communities. And that philosophical alignment from the top around what is the goal is essential. Another is that children are systematically assessed when they’re coming into the system or being raised anywhere in the system, and that we’re assessing what’s really going on. What are the underlying drivers and challenges? You can’t solve a problem until you understand what that problem is.

The next that’s very significant in the United States is collaboration among agencies. A lot of these children and families touch different agencies—they’re touching the child welfare system, the juvenile justice system, the education system, the health care system. How do you share data across agencies and make sure that there’s coordination?

The fourth is community-based providers. Youth Village is a provider. We contract with public agencies to implement services. But they’re held accountable for high quality and they’re also selecting contracts based on quality, as opposed to just whoever has the lowest-cost proposal. The fifth is that public dollars are used wisely. The sixth is that services are clinically informed and effective.

The seventh is that systems are in place to reunite children and families as quickly as possible. I know Christine is going to be talking about the Family First Prevention Services Act which has a very strong program on trying to focus on preventing kids from entering care. It’s also very important to think about how you bring children back into the community if they have been brought into custody.
And then the last is the importance of supporting young people who emancipate or age out of a system in the United States. About 20,000 young people annually exit the foster care system having never achieved a permanent family placement. And so it is a responsibility of us as a country to help those young people successfully transition to adulthood, since we failed them in providing them a safe family in their childhood.

Ms. PARKER. Thank you, Ms. Foster. I so appreciate Youth Villages’ focus on treating the whole family and serving the children within the family to have sustainable change. We all want to see children reunited with their families, but unless there are programs to help the families change complicated dynamics that are preventing the child from thriving it might be a revolving door back into the foster care system.

Up next we have Christine Calpin. She is the managing director of public policy at Casey Family Programs, where she heads the foundation’s efforts to inform and education Federal policymakers about the need for comprehensive child welfare finance reform. She also leads the efforts to improve the child welfare public policy in states across the United States. Calpin has been working in public policy for 10 years. Most recently she worked as an independent consultant on child welfare, child care, and family support programs for states and tribes. Prior to that, she worked for 2 years in the Administration for Children and Families at the U.S. Department of Health and Human Services.

She first served as an associate director of the Child Care Bureau, and then as an associate commissioner for the Children’s Bureau, where she oversaw a $7.2 billion budget and 130 employees responsible for all child abuse prevention, foster care, and adoption programs delivered by state, local and tribal authorities.

Calpin is an alumna of the Hill as well. She has served here as a congressional staffer—the lead one—for the Income Security and Family Support Subcommittee of the House Ways and Means Committee. She worked with Members of Congress there and with others on passing legislation affecting programs including child welfare, child care, and the Temporary Assistance for Needy Families, also known as TANF, programs.

Ms. Calpin.

Ms. CALPIN. Thank you very much. Good morning. My name is Christine Calpin and I’m the managing director of public policy at Casey Family Programs. And I’m pleased to be here with my colleagues and welcome the opportunity today to introduce you to Casey Family Programs and describe our vision for supporting children and families across the United States. Founded in 1966 with headquarters in Seattle, Washington, Casey Family Programs is the nation’s largest operating foundation focused on safely reducing the need for foster care and building communities of hope for children and families across America. We work directly with child welfare agencies in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and directly with 16 American Indian tribal nations to influence long-lasting improvements to the safety and success of children, families and communities where they live.

We also work hand-in-hand with birth parents, with foster parents, and with an alumni of foster care, as we strongly believe their voice and their stories must be included to inform policy and practice change. This work, as well as the growing body of research on child development, brain science, and the significant impact of adverse childhood experiences has made clear that long-term foster care is not good for children and families. We need a robust system of supports and services, and a full continuum of care and for all of our communities and individuals to work together.
Unfortunately, for the past several decades the Federal child welfare funding that we’ve provided has not supported these efforts. For every $7 available for children in foster care, only $1 was available to invest in services that prevented the need for foster care. Because of the national dialog, though, and all of the wonderful efforts that have been done to date, Congress debated and enacted a bipartisan and historic policy change regarding how Federal funding can be used by States and tribes for foster care and child protection. Known as the Family First Prevention Services Act, or what I’ll call Family First, the president signed this into law in February 2018.

Family First represents a fundamental shift in how the Federal Government partners with states and tribes in their efforts to support children and their families. Key facets of this law include unlimited entitlement funding for states and tribes to support prevention services for those at-risk children, their families, their parents, their kin, caregivers, in evidence-based programs that address a number of the challenges we’ve discussed today—substance abuse prevention and treatment, mental health services, and in-home parent skills training. The law also significantly increases the oversight and ensures that the placement of children in group care settings is both appropriate and necessary.

Why? Because we know that children do best in family-like settings. Children who are raised in congregant care are almost two and a half times more likely to become delinquent than their peers in foster care. They have poorer educational outcomes and test scores. They’re less likely to graduate from high school. And they are at greater risk of further physical abuse when they’re placed in group homes. Fortunately, we’ve seen a shift in placements resulting in a reduction in congregant care. But we must continue to do more.

Family First also provides for increased opportunities and supports for relatives who are the caregivers of their own family members. The research on kinship foster care tell us that children who cannot remain with their birth parents are more likely to have stable and safe childhoods when raised by relatives. But frequently, relative caregivers have told us that the supports they most often need include respite care, treatment, financial support, and mental health services for them, for their individual family members, and for others to really help them cope. Because of Family First, Federal funding can now support states in their efforts to allow children to safely remain with their families and with their family members, while at the same time continuing to support foster care placements when children absolutely need this.

Family First makes it clear that our national child and family wellbeing response systems will not operate as though it’s fully possible to help children without addressing the wellbeing of families in their communities. We’ve always known that it’s vitally important that we intervene as early as possible. And Family First, through this funding, will give states and tribes the ability to target existing Federal resources in these important ways. It’s a monumental shift toward transforming the way we support families, but we know there’s more work that needs to be done. And we’re looking forward to the ongoing dialog and opportunities to discuss these challenges ahead.

So thank you very much and we look forward to any questions.

Ms. PARKER. Thank you, Ms. Calpin. Thank you for Casey Family Programs’ work and Youth Villages’ work; it was a huge lift to write and to get the Family First Prevention Services Act through Congress. We are eagerly awaiting its full implementation. And that would be my first question: How are we doing at implementation? It passed in February. It’s been almost a year.
Ms. CALPIN. Yes, thank you for the question. It has been almost a year. A couple of pieces I would point out that I had in my testimony is when we talk about Family First being such a monumental shift, the legislation did envision a timeline for supporting states in really thinking about the new investments. The prevention services that were identified in the law first become available to states and to tribes on October 1 of 2019. So we’ve been aggressively engaged with them and with the administration in terms of getting the guidance and direction that’s necessary out to states to really think about how this can be a tool in thinking about a new vision and system for supporting children and families.

The administration has put a lot of really important direction and guidance out. We do, however, continue to encourage a lot of community stakeholders and a lot of other partners to really become involved in working with their states and helping to envision and think about where this could go and what could happen. So a lot of exciting direction. A lot of exciting opportunity. There still remain challenges ahead. And we’re certainly looking for stakeholders and others to become engaged in helping to really educate on all these new opportunities.

Ms. PARKER. You mentioned in your comments that congregant care put children at a doubled risk for physical abuse and other forms of abuse and a doubled risk of being delinquent, risk of very low educational attainment. Congregant care is a smaller form of an orphanage. We moved away from the orphanage model to congregant care. It still operates parallel in some cases with foster care in the United States, which is family based. We’re talking about failures of the foster care system and trying to keep children out of foster care system. Would it also be wise to fix the foster care system, or is that something that has a fundamental flaw that can't fully be fixed?

Ms. CALPIN. So I’m happy to start, and then would welcome my other colleagues. Absolutely. I mean, the importance of maintaining the safety and protection of children is fundamental. And a child protection system that does that in terms of allowing for appropriate foster care placements when absolutely necessary is one that we should support. And we should continue to strive and expect the best quality, the best care, and the most appropriate settings for these children. The improvements in foster care, to that end, do need to focus more on the upfront opportunities we have to do a much better job of identifying family members and community members who can care for our children at risk of foster care.

The placement instabilities and the movement of these children out of your schools and out of their communities just continues to exacerbate trauma. So there’s a lot that needs to be done to improve foster care. A piece of that, though, also needs to be a much better understanding and direction toward really understanding what it means for a child’s safety to be at risk, and so what it means for a child to need foster care. And all of that would help us get to a better place of serving children in foster care.

Ms. FOSTER. And I’ll just add to that—Youth Villages provide a full continuum of care in a number of states, from prevention work in families and also residential programs that do provide care to children 24/7, when they are removed from their families. And I would echo Christine in saying that there will always be a need for a foster care system. There will always be children who are serious risk of harm, and the state needs to come in and provide immediate emergency support to them. And so we very much agree that there’s room for improvement in supporting bio families, supporting kin families, preventing entry, making entry into care as short as possible.
But there is absolutely an opportunity, and the Family First Act addressed this as well, in elevating the quality of those residential programs, ensuring that high-quality clinical services are being provided while children are placed in those settings, that those settings are utilized only when that’s really what is necessary for the child’s physical, mental, and behavioral health, and that when that type of setting isn’t necessary for those purposes, children are returned to a family-based setting. So we certainly believe that this whole continuum is necessary.

There may very well need to be shifts in sort of where kids are and how long they’re staying in various placements. And the Federal legislation took a significant stab at shifting how that looks across the country. But that elevating what is best practice in every single setting and trying to bring up the quality of care nationally in all these different types of settings and arrangements will lead to a big improvement in the system.

Ms. PARKER. How receptive have the states been thus far to the Family First Prevention Services Act? Because each state has—under our Constitution, states generally have the lead on childcare issues. The Federal Government backs them up. This is the Federal Government taking a huge step into what’s traditionally been a state area. Are the states open to this? Are the social welfare societies within the state, are they excited about it, or is it going to be an education process?

Ms. CALPIN. It’s both. There is a considerable excitement about this. We’ve spent decades in this country with leaders discussing that the biggest shortcoming that we had in partnering with states in the protection of children was at the Federal level only starting that partnership once they removed a child from their family, and not really recognizing all of their efforts in keeping children in their communities and supporting efforts to keep them with their families. That said, doing that requires a robust package of services. Every child in every family who comes to the attention of child welfare needs a different response. It shouldn’t be a one-size-fits-all approach.

Family First will be an incredible tool for these states. It will fund evidence-based mental health services. It will fund evidence-based substance abuse intervention, as well as evidence-based in-home parent skills training. But some of the families who will come to the attention of child welfare will need other services. So the excitement right now is in trying to figure out how best to leverage what Family First will do but build that into the system of what we know really helps all the families at the state level. So that requires a lot of challenges. It requires a lot of framework and planning. States are very much engaged in this. But at the same time, Family First took a very important and direct approach to making a policy statement about the values in this country and the importance of children being with families.

And the changes to the group policies and the types of placements—as Jessica’s talked about in terms of requiring high-level oversight, high-level treatment services—basically say that if you place these children in settings that aren’t high quality and aren’t appropriate, you will do that at state cost. That created sort of a challenge, because the states who may not be as far along as others in having children in family life settings and who still have a lot of children in these congregant care placements are wondering financially what this means. And so seeing the value of prevention in a context of the ongoing investment they have right now in group homecare has limited some of the engagement in some state levels.

And so I think the excitement around this needs to really focus on that this is really the chance to put our dollars where our values are, and not to think about the goal being
child welfare operating as it currently does. Family First was about trying to say business as usual is not what we believe works for children and families. And, as you can imagine, not everyone is as receptive to that as you might like. But I think everyone is really trying to learn and understand where the opportunities are and how best to really take steps forward in this space.

Ms. PARKER. So just to talk practicalities, how much time are we talking about for care for each family? Someone might say, oh, it’s much easier to take the child from the family and put them in care than it is to fix a broken family system—whether it be the parents or the extended family. In the experience of Youth Villages and Together for Good, how long do these families need to have a high level of concentrated care?

Ms. FOSTER. Well, I would say that in our experience you can more economically serve children in families when you prevent them from entering care in the first place, in terms of how much taxpayer dollars are going into providing support. So if we are able to intervene before a child is removed from their home, and work with the whole family, anywhere from 3 to 6 months, or so, of intensive work in that family’s home can lead to a much more stable situation. Once a child is removed from the home, first of all, typically the placements that they’re in cost more on a daily basis than they do if you’re working with that family.

And often they get caught up in the system for years. And then if you want to return them to their biological family—which is the goal for most children who are in the foster care system, it is eventually to return to their biological family—the amount of time that family needs support to stabilize from that return is more time than if you had just provided services on the front end before bringing them into the system. So to Christine’s point, if we are able to get better, as a country, at identifying these young people who are imminent risk of coming into care, and intervening before they come into care, it will lead to better outcomes, but it will also be a more economical approach to services and intervention.

Ms. SANDBERG. And I think that’s where Together for Good, while we’re a brand-new organization and trying to think outside the box in terms of what is best for children, that time is everything in the context of a parent feeling empowered to do well. When the gun of foster care is to their head at all times, it just changes the game in terms of their ability to change—no one changes based on a gun being put to their head. You better fix this or else. And so in our work, the goal of building trust and trusting relationships has been phenomenal.

We’ve had women who have been in drug and alcohol treatment. Why would children need to go to foster care just because mom needs treatment? And so she voluntarily asks for help. And we provide that hosting experience while she’s in treatment. And during that time, the parent-child relationship is committed and growing, and the services around professional supervision of that case and our case management when we’re working with the drug treatment and our staff to come alongside that family, over time trust is built and the family feels empowered to move forward.

Once we’ve served kids who are—Child Protection is no longer involved, and the case is closed, we’re dealing with the same sorts of trauma. And it takes longer. But in short, what’s the beautiful thing that we’re doing is really if a child doesn’t have to go to foster care and can be hosted by a private individual, that brings a cost savings to society as well, right?
Ms. CALPIN. Yes. Yes, if I can just add, too. I think one of the lesser-known facts about our foster care system is that the most likely outcome for a child who enters foster care is to be reunified with their parents. And the reunifications tend to happen within about 11 months. Some happen within 2 months. These children are the families that we’re trying to understand most about the opportunities in Family First, because if you’re bringing a child into care for such a short window of time, after which you’re reunifying, did you really need to even remove that child from their family?

I think the answer’s also a lot more complicated, because I think there’s also this perception in our foster care system that children come into foster care for reasons of physical abuse, sexual abuse, et cetera, which they do. But the data actually tell us that the largest percentage of children who are removed are removed for reasons that are categorized as neglect. And that spans the continuum of housing stability to truancy at schools. Those are much different responses that can be very quickly addressed. If we’re talking about lack of housing, again, in a world where housing is not so scarce for our families, stabilizing housing is a much different response than addressing abuse challenges for a child.

And so some of this also relates to the ability of understanding how long a family needs to be formally involved and what is the child protection system whose responsibilities should be mitigating risk and safety for that child, versus the importance of making sure that every family and child is connected in their community. You know, we’ve talked a lot about the number of children who in this country, unfortunately, take their own lives every day. And what we absolutely do not want is for children to be safely reunified with their families at home, but in communities where that level of despair also becomes such an issue.

And so it’s such a longer answer than just the notion of a program, because it specifically beings to think about how we as a country work with our space to design child protection programs that serve children as long as necessary, but then make sure—as you said—when you have, quote, “closed” a case, you haven’t done that without making sure there’s a connection, or a community partner, or someone there who can continue to assist that family, because as we all know—we’ve talked about the moms in McDonald’s, et cetera, we all look for those supports. We all look for those people who can help us. And that’s something that a child protection system can’t create, but that a community can, right? And that’s just going to be so important to our long-term success.

Ms. PARKER. So, Ms. Sandberg, how does Together for Good get connected with parents and families that may need extra community support? And how do they help build community for those families?

Ms. SANDBERG. Yes. So, in Minnesota, 70 percent of the time when a call is made to child protection it’s screened out, which means then there’s opportunity for a child to fall through the cracks, or a family. And so we have connections with either public health nurses and school social workers who are sometimes the very first to notice a child that’s near or a family that’s going through a temporary crisis. But it is just that homelessness crisis. And then identify from there those referrals that come to us.

So then we do the intake process, and them match them with an approved family that would host the child temporarily and/or build those community relationships for that family, becoming more of an advocate/cheerleader for a family in the hybrid role, if you will, of opportunity. What we found most exciting is that the community at large truly
does want to help and serve in ways that aren’t necessarily about the foster care system itself. But they see the needs and then are—given the opportunities, they want to help.

We recruit people just through local churches. So we have teams built out by accountability. Each church has its own coordinator of care as well as the staff that oversees our cases. So we have about—again, we’re I think about 40 churches in the Minnesota area that are willing to help with families in crisis. And each church has its own coordinator. We monitor and train those people. So we provide that professional oversight to a mobilization of the community at large, connecting them with resources and skill sets.

Ms. Parker. So then you professionally screen the volunteer families that come to you?

Ms. Sandberg. Yes, ma’am. We have a full background check, home study experience, as well as references and training, especially on the issues of trauma-informed care and the opportunities to have best practice in that. It’s really important we know.

Ms. Parker. And how long do the families that are referred to you for assistance—how long do they stay connected with the communities that you help build for them?

Ms. Sandberg. Now—I mean, it’s over years. I mean, people build relationships that don’t really go away. That’s been the beautiful thing. But primarily the child is in care with us an average of about 50 days. So parents—[inaudible ]—that. But, again, during that time it’s continued parent-child visits, parent-child communication every day. There’s not a system separation time. And so parents are empowered to then put the oxygen mask on first, while their child’s safely being cared for, and over time that relationship builds so there’s an extra adult in their life. Simple things like, what do I do if I run out of formula in the middle of the night, I have someone to call, right? When I call you, you’re here for that.

So mobilizing people who care has been a really powerful experience. There are 10 families that are hosting children, but there are 45 families wrapping around those families, bringing support to the host family, bringing support to that family in crisis. I mean, one of the cries in Minnesota has been that foster parents feel unsupported in terms of extra resources and extra wraparound care, that respite becomes such a critical piece. And so while we grow this organization, we’ve had the opportunity to intersect in meaningful ways in that way as well to help support foster parents.

Ms. Parker. So you’re offering not only families to take the children in temporarily, but then families to give respite to the families that have taken the children in temporarily.

Ms. Sandberg. Absolutely. Yes.

Ms. Parker. And do you have enough families coming forward to do this? They’re doing it for free, yes?

Ms. Sandberg. Yes. People volunteer to help. There’s no money exchanged. Which is another highlight for parents, because they truly can understand, you’re not getting paid to take care of my child. And so that becomes just an opportunity for growth and expansion. People want to help. And then we provide that extra resource of support. Someone else is buying the diapers. Someone else is bringing you a meal. You don’t feel so weighted down by the experience of inviting another person into your home. There’s some phenomenal families out there who truly just want to help if given the opportunity,
knowing then that they’re actually building a wall, a hedge, a protection, if you will, around the family.

Ms. PARKER. And now is it different from the foster care system in the sense of the relationship between the child and their biological family during the period in which the child is in care?

Ms. SANDBERG. Yes, it’s really no different than me asking you to watch my child for 2 weeks while we’re away. So we’re trying to do every-day conversations, meeting up for playdates. We try as best possible in the school systems to keep the kid in the same school, so those relationships are still in place. In the State of Minnesota this is allowed, because we have a statute that allows for power of attorney, so that I have the opportunity to give you power of attorney even for a temporary period of time, which then gives them the freedom—that host family—the freedom to act as parent if necessary, but then also engage mom in meaningful ways in terms of asking her questions about how she parents and what she thinks is best for her child.

So that relationship is very critical. And the importance—the difference becomes when you and I meet and have a conversation, and I’m going to tell you about my child and—he’s allergic to peanut butter and make sure he uses his nookie at bedtime—it’s a whole different experience than a stranger taking my child away from me, and the fear that stranger is not caring for my child the way I want. That becomes a powerful source of then hope, which then creates opportunity to say: I’m going to wake up tomorrow morning and I’m going to go look for that housing that seems impossible. So it’s been a powerful thing, the story of hope doing this.

Ms. PARKER. Ms. Calpin, in the U.S. foster care system, what is—if the child goes into official foster care, how does that affect the parent-child relationship?

Ms. CALPIN. Well—and I was as she was speaking about this in terms of how it’s different from foster care—we’ve talked with birth parents about their experiences with the system, and what they found was challenging I characterize as in the child protection system we view our birth parents as a risk versus a strength. And what that unfortunately does is really create a huge barrier for that child and that parent to continue to develop, because I think every child expects their parent to care for them and to protect them. And so children can’t understand when they’re taken away from their parents why their parents let it happen, right? And so developmentally what it impacts in terms of a relationship is so hard.

And, again, as we’ve always said, for child protection reasons there will be a number of children for whom that removal is necessary. But the families and the children that Together for Good are serving are those children where the risk of safety for that child is not one that warrants removal. And so that allows a child protection system to really work in a way that it can really think through: Is it best for the child to remain with this parent? Is there truly a safety issue? And work with those children where we very strongly and very surely have safety concerns, because we’ve not created unnecessary trauma and unnecessary removals of other children that could be served in a different way.

And I think that’s what we’ve tried so much to talk about—foster care is traumatic. And a lot of these children have already suffered trauma. And we’re just continuing to exacerbate that.
And recognizing that we're going to eventually reunify and create even more challenges has just allowed us to view that as a system we can't continue to operate in this way.

Ms. Sandberg. And I would highly agree. I mean, there is an absolute necessary place for child protection to do its work. And our hope is that if we go upstream far enough, we catch it before it ever gets to that place. And at the end of the day, numbers are everything in this game. You can’t have too many children coming in that direction, because we're already overloaded. Our families—foster families are overloaded themselves, and social workers are extremely stressed. So we're trying to bear some of that burden upstream in terms of prevention.

Ms. Calpin. Well, and I'll just—I think this is what we talk about—is every family, every child deserves a unique approach, right? And how do we best determine what that approach should be? And in a system where we're able to really think and respond at different levels and different tiers, based on engaging with them earlier, I think that's exciting. And you know, child protection in a system driven by courts and lawyers and judges. It’s intended to be one that really looks at a system differently than what you’re doing in terms of trying to engage with families in a supportive way. And the goal is to try to think about how we move our system to better work in both ways.

Ms. Parker. Ms. Foster, you mentioned in your presentation that Youth Villages does a high level of evaluation for what is working and what’s not working with the families in which you engage. How are you being connected with your families, first of all? Is it from a call to child protection services? Is it through schools? Is it in similar ways as to how Together for Good is connected with families? And then what are some of the overall statistics that you’re seeing, and how has it changed your approach?

Ms. Foster. Youth Villages finds out or is connected with children primarily through child welfare agencies—a child welfare agency is receiving a call about a child being at-risk. And that agency typically does an initial investigation into the case and decides if it warrants a higher level of intervention. And then states contract with—or, counties—contract with Youth Villages, just like other community-based service providers. And if a child needs a high level of support and intervention that is beyond the kind of basic visitation that that public agency provides, they will contract with Youth Villages to provide services.

So that’s typically how we’re working. But a child that is in the foster care system, we also provide services through mental health Medicaid system. We provide services to older youth aging out of care, and some of those other cases. Like, with older youth, they may self-refer into our services. So there's some variety. But what I just described is typically how we're finding out about a child. And in terms of—you mentioned how we track outcomes and how that’s impacted the work.

Ms. Parker. And what are some of your outcomes?

Ms. Foster. So pretty early into Youth Villages’ history, we started collecting outcome data on, as I mentioned, at completion of services, as well as 6, 12, and 24 months post-completion of services delivered through us—where are the children? Are they at home with their family? Where are they living? Have they come back into care, whether it’s through us or the child welfare system sent them to some other placement? How stable are they? What has been their involvement, if any, with the criminal justice system? Some states have integrated child welfare and juvenile justice systems. Some
states have separated. So it looks differently in different parts of the United States. And how are they doing in school?

And so we—as well as a lot of additional data—we capture that data on all the children and families that we’re working with. And that gives us feedback on how are the services going? And when we initially made the transition from being dominantly a residential provider to being primarily in-home services providers, it’s because we found out that when we provide these intensive in-home services, that data looks a lot better. Kids are much more likely to be safely stable at home with their families 2 years after we worked with them than if we provided residential and then that was it, and they got reunited with their family without any sort of additional support.

We also work with third party research organizations, for instance MDRC, that will look at not just the data of how children served by us are faring, but how they’re doing compared to a comparison group. So what the Family First Act requires in terms of prevention services is that services that receive Federal reimbursement have proven that they are effective compared to what else that child might get. And typically that requires a third-party research organization to be collecting that data, because we have the data on the kids we serve. We don’t have the data on the kids we don’t serve. The public agency has that data.

So one other thing that I think is important to take away related to Family First Act and in general is that the public system, the child protective system, has a huge, robust amount of data on what services are being provided to kids, how those kids are doing, how they’re doing today, how they’re doing 2 years later. And there is a huge opportunity now to harness the power of that data for us to really know what is working and to compare different interventions to each other and how are kids doing 1, 2, 3 years down the line. And we have a lot of data as a country. We don’t always use that data to capture those insights of what’s really working. So we try to do it as best we can as an agency, and also work with our public agency partners to capture a fuller picture of the data about what works.

Ms. Parker. Well, this has been a tremendously encouraging conversation as we work through different models of how best to care for children, what is in their best interest. And what I’m hearing from the panelists is that if they can be kept with the family, that is the best interest. And we have some new best practices that we’ve developed here to make that possible when the families are safe for the children.

Are there any closing remarks that any of the panelists would like to make?

Ms. Foster. I’ll just mention—and I think this has been a theme today—but families really are the solution. I think, you know, in the United States back—people have been talking about orphanages and also talking about Norway and some other countries. And it’s very easy to pass judgment on other families as an outsider. And it’s very easy to pass judgment on other families when you are a government entity or a private service provider. But almost all parents love their children and want to do well by their children. And if they are given the resources, and the skills, and the training to raise children safely, that is what they want to do.

And so finding a way to empower those families to do what they want to do anyway—and most kids want to be with their biological families. They don’t want to be taken away. They don’t want to be taken away, even if they’re experiencing abuse. And so how do we
equip these families to do what they want to do anyway, instead of passing judgment on what’s happening and immediately traumatizing kids and parents by removing them.

Ms. CALPIN. I would second that. And when we talk with youth in care, overwhelming when you ask them what you can do to help them, they would always say: You can help my mom. You know, you could have helped my mom. You could have served her differently.

That’s why we’re all so excited about what Congress and the administration did with Family First, and why this really is a sea change for states and for communities in how they’ve served children and families. And working and really educating yourself on this opportunity and becoming involved in sort of supporting child welfare in this new direction is going to be so critical with that.

Ms. SANDBERG. And I would echo as well that families are everything. We are created to need each other and created to be in relationship with each other. And my call would be to the public at large and the communities around the country to say, what is your part? Because this isn’t just a government solution. This isn’t a programmatic solution. It’s a good neighbor—like, how are we going to love our neighbors and come alongside them? This isn’t just for—families everywhere in crisis, not just the poor. And maybe this would do us all some good, to learn to love our neighbors better.

Ms. PARKER. Thank you all so much for joining us today with your incredibly well-informed insights. This briefing will be posted on the Helsinki Commission website in video form, and there’ll be a transcript up as well. Thank you so much for joining us today. [Applause.]

[Whereupon, at 11:34 a.m., the briefing ended.]
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