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California Senate Budget Subcommittee 3 on Health and Human Services
Senator Susan Talamantes Eggman, Ph.D., Chair
Informational Hearing
March 1, 2022

Issue 4: Connecting Youth to Families and Supporting Foster Youth and Families in Family Based Care

Dear Committee Chair and Members of the Committee:

Thank you for the opportunity to appear before the Senate Health and Human Services Sub 3 hearing on March 1, 2022 to discuss the important topic of how the State can better support young people with families in the community.

California has made large strides in helping keep children with families and avoiding the harmful, damaging effects of unnecessary congregate care and institutional settings. This has especially been true in California since 2014, when Continuum of Care Reform (CCR) began. It’s focus on reducing reliance on institutions, where our children and youth do the worse, and increasing the opportunities for children to stay with relatives and resource families, where our children do the best, has helped the state reduce congregate care by 60% while increasing the numbers of youth who are able to stay with family and in community. As of October, California had approximately 2,500 children in congregate care settings of approximately 60,000 total youth in care.

While it is important to celebrate success, with children and families, we should always be asking what else can we do and how can we support our children better?

Today, I want to focus on five key things the State can do to help support children and families so that youth can stay at home where we know they both want to be and where they will be most likely to succeed.

1. **Work upstream to improve relational health**

   One of the most damaging aspects of placement instability for court involved children is the damage it does to young people’s relationships. It is these relationships that are so central and key to young people thriving, building the social cohesion and social capital they need to promote resiliency and transition successfully to adulthood. So, we need to move upstream to strengthen relationships and prevent placement disruptions from happening in the first place. Stabilization starts well before placement- with ensuring that careful decisions are made to engage youth and families in placement matching and continues with every decision while a youth is in care. One good example of how the public sector can do this: YLC has worked through our Quality Parenting Initiative with Ventura County, who deploys experienced resource families to mentor, coach, and support families and sends out these peer educators when a resource family reports challenges. The State needs to fund services like these – and provide technical assistance to
counties so that it is available throughout California. This program has been successful in preventing placement disruptions through this strengthening of existing family networks and relationships – providing back-up for those families who are stepping up and taking care of our children.

2. **Take advantage of current opportunities**
There are multiple new initiatives on the child welfare side (including CCR, Families First, and CDSS investment to support youth with complex needs) and on the Medicaid side (including eligibility for specialty mental health services without requiring diagnosis and new expanded therapeutic supports for foster youth through MCOs including enhanced case management) that create a window of opportunity to help our youth get what they need. All of these initiatives are focused on delivering high quality supports where youth need them the most - in the community and at home.

How do we leverage these opportunities? The State should fund technical assistance to health systems (including MCOs and county level behavioral health departments) to expand access and develop new therapeutic supports to meet the need. For example, health systems need support family therapy and enhanced care management benefits to expand access to integrated behavioral health supports in pediatric primary care and other places where at risk populations of youth can and want to access them. The State has created the structure to deliver an unprecedented level of support to children to help them stay with families; yet, I am concerned that promise will go unfulfilled without real investment in the practical nuts and bolts of implementation on the county level. Much of what we do to ensure success in these initiatives will rely on the direction and assistance given to healthcare systems – including support in growing and supporting the workforce.

3. **De-silo and help translate between behavioral health and child welfare systems**
The delivery of appropriate supports for court involved youth — that includes foster and juvenile justice involved youth — and getting to our shared goals for those youth — so they are given every possible opportunity and help to stay in the community with their families where we know they have the best chance to thrive — relies heavily on the delivery of seamless and integrated therapeutic services on every level. This includes community based mental health services for children with complex related health needs but also trauma responsive services that work upstream, supporting children who have experienced trauma - and frankly that’s all of us, all of our children in these systems — so they are given tools to thrive and build resiliency and stay at home with families in a positive, healthy way.

To accomplish this, we need children’s behavioral health and child welfare at the same table, speaking the same language, and creating clear methodologies and processes so that children can easily access the services they need. This is going to take some work — even just translating terms and language between the two systems can be a difficult starting point – but we have to get to the point where these systems are doing shared budget planning and finding, for example, the non-federal match for Medicaid reimbursable services so that available general fund dollars for therapeutic services can be appropriately leveraged with federal dollars to expand them. This is the only way we can move forward and take real advantage of the framework the State has
provided. Without shared language, shared methodology in implementation, and shared budgeting, important State improvements are not going to get to the children who need them. We need the State to fund technical assistance and competitive grant programs for counties to develop plans and implement services to realize the promise in BHIN 21-073, which removed the diagnostic criteria to help make specialty children’s mental health services more easily accessible for systems involved youth. We also need the State to make strides in real payment reform so that counties have the fiscal structure they need to maximally leverage Medicaid to be able to appropriately expand these services.

These supports need to include services that youth — especially older youth — want. So, two more quick but vital points here:

4. **Build services that youth want and need**

These services may include Pathways to Wellbeing services, Therapeutic Behavioral Services (TBS), Multi-System Therapy (MST) (i.e., the types of community-based services we know that have been especially successful here in CA for court involved youth.) But it most importantly includes services we may not traditionally think of as mental health services- but that are some of the most critical to overall child wellbeing - extracurricular and enrichment activities such as dance, karate, arts, cultural activities, advocacy and sports participation. In addition to supporting well-being, these activities provide families supervised, enriching child-care for school age children and youth during unstructured, unsupervised afterschool hours and summer and school breaks. Court involved youth frequently do not have access to these programs and yet are youth who need them the most. YLC recently did a survey of resources families in multiple counties in CA. While almost 70% reported that, when they requested it, they received some level of support for educational needs, 60% said they did NOT receive support for children and youth to participate in extracurricular and enrichment activities, 50% did NOT receive support for children to maintain or build social and peer relationships. Relationship building activities – that social cohesion and social capital that is so important to build networks and resiliency – are not ones that can traditionally be funded through existing benefits pathways. The State needs to increase investment in these programs to make them more accessible to children who need them most.

5. **Create more ways for youth and resource families to help improve our systems – including hiring more youth with lived experience into our systems**

We have to listen to youth and the families who parent them and build in real opportunity and ways to do this. Youth know what they need and, based on the increase in technology, there is no excuse for us not to be creating opportunities for them to tell us how we are doing. I can use my phone and find out what people think of all of the restaurants and bars in my neighborhood. The State can fund technology that allows the child welfare system to do the same thing for services and supports for youth based on youths own input and evaluation. Youth with lived experience have real wisdom in how to fix these systems.

Similarly, the most important step we can take to determining what supports resource families need to provide excellent parenting to every youth in foster care, is to ask them and truly listen and respond to their needs. Resource families are the most important intervention for youth in foster care, and as such, must be treated as full, valued partners in our work. Families and youth have
individual, specific needs, and we have the technology to ask all of the “users” of our systems individually what is working, what is challenging, and what they need. YLC’s Quality Parenting Initiative has been working with several counties to utilize text-based surveying of every resource parent about their needs as a mechanism to allow county child welfare agencies to respond both individually and systemically. For example, survey results demonstrated that only 37% of resource parents feel their suggestions were heard and acted upon. Additionally, 50% of resource parents said they remembered a time in the last two years when they needed more support to care for the child. But, only half of those parents said they were satisfied with the support they received from the agency and others when they needed it. We need to find out specifics from every resource parent, and change our practices in response.

Lastly, the State needs to increase its investment in creating programs to incentivize and help child welfare systems to hire more staff with lived experience — and support them in those positions. California has a homegrown model on how to do this through the EMS Corp – started in Alameda County and in the process of being expanded throughout the state. We need programs like that to increase youth with lived experience of our systems to work and lead our systems. This will be key to helping make our systems more equitable and fairer and to help us get to our goals of keeping children with families and in the community.