Inspiring hope, not despondency, in children and families

Testimony to the Senate Committee on Finance hearing

"No Place to Grow Up: How to Safely Reduce Reliance on Foster Care Group Homes"

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My name is Jeremy Kohomban, and I am President and CEO of The Children's Village and our affiliates, Harlem Dowling and Inwood House. We are members of the Child Welfare League of America, Crittenton Foundation and the Alliance for Strong Families and Communities. The Children's Village is also a founding member of the Annie E. Casey Foundation's Provider Exchange, which offers private providers peer consultants to help shift their business models toward home-and community-based services.

Founded in 1851 to serve New York City's children, The Children's Village has been home to some of the earliest examples of residential programs in the nation. By the 1950s, facilities like ours had developed into what are now known as residential treatment centers. Today, our organizations provide a broad continuum of both residential and community-based services to more than 17,000 children and families each year.

I am here to tell you why, in the last decade, The Children's Village has been on a journey to undo our recent history. And why we are certain that, by doing so, we are doing a better job of keeping children safe and families together. I will tell you why we have moved with urgency to shift the mix of services we offer to children and their families. In 1998, nearly all our children were in residential settings. Today, 60 percent of our efforts are in the community and with families, and residential is used sparingly, like an emergency room.

The reason for this shift at The Children's Village is simple. We now know that residential care is not an effective long-term solution for children and families. In fact, it is often exactly the wrong intervention for most children, including teens, as two new reports underscore. One is the HHS report, *A National Look at the Use of Congregate Care in Child Welfare*. The other is the new policy report, released today, by the Casey Foundation, called *Every Kid Needs a Family: Giving Children in the Child Welfare System the Best Chance at Success*.

Today, I will share four crucial lessons The Children's Village has learned that align with findings from these recent reports. Those lessons are that:

1. Children belong in families, not in residential care.
2. States can and should invest in broad, community-based service arrays that provide brief, effective help for children and families facing crisis.
3. Providers can and should change their business models for helping children and families by moving away from residential care and investing in models that wrap our services around children and families in the community. And, crucially,
4. The federal government can serve an important role by acting as a catalyst for change. It can provide incentives and real supports for strong systems of community-based care.

Children belong in families

The Children's Village has its roots in the reform school movement of the 1800s. From 1851, when we first opened our doors, until a decade ago, our primary prescription was to remove and treat children away from families and neighborhoods that were considered "bad," often severely weakening or permanently severing family ties. We followed the best practices at the time. We had the very best of intentions.

But when we looked at our results, we found something profoundly unsettling. While we sought to help, often we did not. Despite our best intentions and desire to help, often we failed.

Our practices, like the practices of child welfare nationwide, managed to do the opposite of what was intended. Instead of helping children, often we unwittingly fed an intergenerational cycle of hopelessness and disconnection that fueled very poor outcomes. One result is children and parents who are despondent and struggling to gain the critical skills they need to support themselves, including the internal skills of resilience and hope. Children and families became system dependent; they never learned how to belong to each other and to act in a family, with the necessary give and take and tolerance for one another's successes and shortcomings.

Beginning in the early 1970s, our good intentions went even further astray as we became a primary pipeline for the dramatic and increasing overrepresentation of African American and children of color in long-term government-supported systems.

As the HHS report notes, today we know better. As it describes, there is now "a consensus across multiple stakeholders that most children and youth … are best served in a family setting."[i] Among the evidence for this: *Data indicate that, in many communities, there is a poor fit between children's needs and available child welfare placements and services.*

Today, not enough kids in the child welfare system live in families. One in every seven kids in state custody—nearly 57,000 children nationwide—are languishing in group placements when many of them could be and should be living in families.[ii] Data indicate that African American

and Hispanic children are more likely to spend the most time in group placements. Adolescents in residential care are more likely to be older, male and children of color; they are likely to have higher rates of socio-economic, behavioral and juvenile delinquency challenges.[iii]

Residential care cannot continue to be a default intervention. We have to stop thinking about the majority of children in foster care as children with chronic and persistent mental illness who need to be separated from society. Forty percent of children in residential placements have no clinical reason for being there. Forty percent! As one researcher noted, it is time for systems to become more rational, driven more by the needs of the child and family than the needs of programs and systems.[iv]

My experience tells me there are better ways to help these children, whether they have a diagnosis or not. Children in child welfare systems may be traumatized. They may have really tough challenges that require skilled attention. But, as the Children's Bureau has said, children with behavioral concerns, trauma symptoms and mental health disorders can heal, recover and become happy, successful adults.[v] Children heal and develop better in the context of belonging and family. Children need a different mix of placements and services than what we are now offering, including more kin and non-relative foster family placements and more supportive home-and community-based services.

Evidence indicates that children fare best in families. As a recent policy statement by the American Psychological Association noted, "Healthy attachments with a parental figure are necessary for children of all ages and help to reduce problem behaviors and interpersonal difficulties."[vi]

At The Children's Village, we recognize that children need—indeed have a developmental requirement for--family relationships. We have many dedicated volunteers, talented, caring caseworkers, social workers, supervisors, medical staff, therapists and mental health professionals who make a real difference in each child's life every day. But they are not family. I am a strong proponent of residential care, because I understand from experience that responsive residential care plays a very important role in our child welfare system—but only as a time-sensitive safety net for the very small percentage of children who are in acute crisis and at risk of harm to themselves or to others.

In the end, we must recognize that help provided by people in the child welfare system, even when it is effective, is only temporary—it *should* be only temporary. Children need stability, understanding, hope, and, most importantly, they need belonging. None of our systems, despite our best intentions and the steadfast commitment of the amazing people who serve alongside me, can provide belonging. Children need adults who stay connected to them over the long haul, through thick and thin. Not a state agency acting as family. Not a child welfare case worker - a committed adult, a place of unconditional belonging and love.

As we say at The Children's Village, what children need is one willing, stable adult who provides unconditional belonging. We also believe that, if a family or a foster parent cannot provide this unconditional belonging, we must be untiring in creating a family for each individual child.

That means that child-serving agencies, whether they are public agencies or private charities like The Children's Village, must work closely with children's families—their parents, grandparents, extended family, foster parents and prospective adoptive parents—to figure out how best to help and support struggling children and families.

In fact, research shows, and the experience of The Children's Village certainly underscores, that the vast majority of children who must be removed from their homes because of abuse or neglect fare best when living with family—grandparents, relatives or extended family.[vii] Research and our experience also indicates that, in many instances, in-home service models can increase reunification rates—the rates at which children can live successfully with their families after a temporary stay in the child welfare system—and keep children from re-entering foster care.[viii]

Even when children need residential treatment, systems need to focus sharply on ensuring that treatment is targeted and brief. Treatment must be customized to the child's needs. Whenever family is available, treatment must involve family. Research also indicates that the benefits of even the best residential services can plateau[ix]—that after they benefit from intensive, evidence-based interventions, children can lose hard-earned gains because they miss their families and feel abandoned, labeled and forgotten.[x] Basically, the longer they stay, even in the best residential care facility, the more children begin to lose hope and regress to risky and self-harmful behavior.

Research indicates that kin and foster families can be found for children of all ages. Many opponents of reform will tell you that we do not have enough foster families to care for children in their custody, especially teens. I would say to those who don't believe foster families are available: It is not easy, but we can do it. We *are* doing it. In fact, we now know, thanks to research, how to do a much better job of finding kin to care for children. It is time to instill what we know into our child welfare systems, to update practices and significantly enhance our ability to find and support kin who will care for young family members.

We can also do a much better job of recruiting and supporting non-relative foster parents. Let's ask agencies to update their practices to significantly expand their pool of willing and able foster parents. A decade ago, The Children's Village had fewer than fifty foster families. Today, we have almost four hundred, and many of our foster families are selectively recruited, trained and supported to serve teens. Because of the sacrifice and commitment of these foster parents, hundreds of teenagers have experienced a family and are no longer at risk for long-term system dependence.

How does The Children's Village walk this talk? Not by being perfect. We are not. Not by getting everything right. We don't. We do it by working hard every day to find families for

children with even the most challenging histories. Because that's the job of public and private child welfare agencies. Again, it's hard—but it is what our donors expect us to do, it is what we are paid to do, and it is what we believe is right.

Let me tell you about two children in our care. Although he is only 11, Jose has had a difficult life, as have so many children in our care. He had been freed for adoption twice, once by his mother and again when the aunt who had adopted him returned him to the system after a violent incident in her home. In addition, Jose lived for a year with a pre-adoptive family—a relationship that eventually failed. That is a lot of rejection for one child, since termination of parental rights often means a total shutdown in relationships.

By the time he was sent to The Children's Village, Jose's family connections were almost entirely severed. We immediately focused on identifying as many family members as we could. We connected him with more than 10 relatives and family friends, including his birth mother and his siblings. He hadn't seen or heard from them in five years. We found a pre-adoptive family willing to build a support team for Jose, help him develop a relationship with his birth family and work toward being adopted.

Then there is Sammy. Sammy's history would give you pause. At age 16, he was placed at The Children's Village because of a history of sexually aggressive behavior that included assaulting his sister, three cousins and a family friend. Sammy also experienced auditory hallucinations and suicidal thoughts. Because he abused his sister, and because of abuse he suffered at the hands of his mother, we needed to find family who could do the hard work of recovery alongside Sammy.

Sammy's paternal grandfather was up to the task. While Sammy was at The Children's Village, his grandfather and he participated in family therapy. They worked in an ongoing Multifamily Group that provided psycho-education.

Then, there was a wrinkle. Sammy's father was in prison and was scheduled to be released to live with Sammy's grandfather at about the same time Sammy would be released from The Children's Village. The family believed Sammy's father, who did not know about Sammy's offenses, could harm Sammy. Sammy and his Children's Village social worker had phone sessions with Sammy's father to disclose information about Sammy's actions, help the father process what had happened, and share evidence that Sammy was growing healthier.

At The Children's Village, Sammy was weaned off his psychotropic medications; he engaged in TV production and other positive activities. Upon his release, he went to live with his grandfather and father and continued to participate in family therapy. It has been a year since he was discharged, and Sammy has not engaged in any delinquent acts nor has he been sexually aggressive or abusive.

These are just two examples of the children that child welfare systems take on every day. While the responsibility we shoulder is immense and our efforts don't always succeed, our success with children like Jose and Sammy bolster my certainty that we can do better by children by meeting

their needs, whenever possible, in family settings. If a brief residential stay is necessary, children can improve when family members are closely involved in the child's treatment. In the absence of available family, as in Jose's case, it is incumbent on us to be untiring in our efforts to identify family and/or create a family for each child.

State action is needed

Beyond changing how agencies handle care for children in their custody, what else can be done to ensure that children grow up in families, not in residential care?

This change will require state and local action. To improve how they fare in the long run, children and families must be treated as individuals. That means communities need to know how to assess local needs and develop or install effective programs and interventions to meet those needs. Communities must work across agency silos, with public and private providers like The Children's Village, to build broad, effective service arrays that fit local needs and change as needs change.

Crucially, communities must have sufficient funds, and sufficient public will, to provide needed services. In a national sample, more than one quarter of child welfare directors across the nation reported they had inadequate access to children's substance abuse services; more than a quarter did not have access to needed mental health services for children. Services for parents were insufficient as well, with 37 percent of child welfare directors reporting too little access to adult mental health services and 24 percent noting too little access to substance abuse services for parents.[xi] We also know that the supports offered to kin, foster and adoptive families, both personal and financial, remain woefully inadequate.

There is another important benefit of reducing inappropriate use of residential care. It frees up dollars that, when managed strategically and with a long-term commitment to re-investing in families, can be invested in effective preventive and supportive services to meet the child and family needs in the community. It would be irresponsible to cut residential care without a systematic and long-term plan for investing in community services.

We are not faced with easy decisions, but I can say with confidence that family and community-based services, in addition to costing less, are most effective for a child. Also, inappropriate long-term residential placement is often personally destructive for children.

What does a broad service array look like? At Children's Village, we now provide a variety of programs that help the city and state of New York meet child and family needs while children live at home. In addition to our committed and effective residential staff who work with teens in acute crisis, our greatest source of pride is our large number of foster families who provide temporary care to some of the oldest teens in the child welfare system. The needs of these foster families, of the kids they parent and of children and parents in the community are met by neighborhood-based programs as varied as classes, support groups, crisis response, food pantries and workshops.

We also offer, in different locations, supportive housing, evidence-based preventive family therapies, family court assistance, community activities, mentoring, even free classes in the humanities. In short, we strive to wrap ourselves around our children and families. We want to be there for them during crises and walk alongside them to celebrate their successes.

Notice that when I mention what states and localities can do to update child welfare practices and policies I reference *effective* programs. I agree with the Children's Bureau, which has made the case that we should scale down and stop funding programs that don't work.[xii] Often, the ability to do that—to shift to more effective approaches—resides within local and state child welfare agencies.

Private providers need to change their business models

State and local agencies also need to better collaborate with private providers to make the changes that are needed. I am often in meetings in which public child welfare systems complain about private providers. They say they can't get the services they need. Or they don't feel they are receiving quality services. This is difficult work that we do together. There are no easy answers, but the only path to an effective solution requires that we work together. My response to state and local agencies is straightforward. Hold us accountable. And invite us into the room when you are making decisions. If you expect us to be innovative, we will be innovative or we will be forced to close our doors.

In fact, the time has come for private providers to make a change in how we do business, and more providers than you might think are rising to this challenge. Just as public agencies must change, so must private agencies. Our business models must move away from mostly residential care and toward community-and family-based care that is targeted, effective and short-term—including, of course, short-term effective residential care as needed for emergency interventions.

You may hear complaints from private providers in your district. They may say this kind of change is hard. Or that the needs of children and families cannot be met using these new models of care. But the evidence is not on their side. And we know that this kind of evolution is challenging to the tradition of "rescuing" children from their families and communities.

For many years, Children's Village was a reform school on a leafy green residential campus. It looks lovely—like a safe place for kids. And it is a safe place for youth to live temporarily to stabilize and be treated.

But leafy green trees do not make a whole child. Belonging and family does. And please remember: Generally speaking, children do not benefit from being miles away from their families. Even when their families are poor or struggling with problems such as addiction. If you help the parents, you help the children—and build a working family. It is time that private providers look beyond our campuses and our in-patient medical models and find effective ways to meet the needs of children while they live with their families or foster families.

If providers complain, it is because the task before us is immensely challenging. It is: I live it every day. But change is required, for the sake of our children. Because we know that in community after community, taxpayers are paying a lot of money to house children away from their families, when significantly better results are possible through well designed, appropriately funded, performance-focused community-and family-based care. Local, state and federal systems need to invest in those services. By doing so, we will also improve the outlook for the economically isolated and often segregated communities where most of our children reside.

A federal role

The federal government can play a crucial role in moving the nation's child welfare system away from residential care and toward children living in families. Washington can be the catalyst for change by creating incentives and providing real supports for strong systems of community-based care.

How can this be done? Through fiscal mechanisms that incentivize placement of children with families rather than in institutions, and through mechanisms that concurrently invest in supports that allow us to wrap ourselves around the child and family to ensure safety and stability for families. Once implemented, these fiscal incentives should be coupled with limits on residential care for most children.

We believe that, with the right levels of investment in a family driven system, 90 percent of the children in residential care today can be safely cared for in family. To do this means changing the perverse incentives of the current funding methodology. When residential providers get paid by the day for each child, those of us who are successful are penalized financially. Each time we move children toward stability and independence by returning them expeditiously to their families or foster/adoptive families, we lose money. This simply has to change in order to do better by children. A financial model that incentivizes safe and expeditious discharge from residential care, with adequate funding to provide the effective community-based support children need, will begin to move us in the right direction.

The federal government can also promote high-quality, cost-effective services that meet children's needs for permanent, loving families and enhance children's well-being. That includes effective prevention services to address needs early. Evidence-based services that support children and families at home. Services to support kin and non-relative foster parents who step up to the plate to care for children. And, for the small number of children who need it, intensive, targeted, evidence-based residential services that involve children's families or create a family as part of their recovery.

None of this will be easy. It is already too late for many in the generation of children languishing in residential care. Their childhoods are lost. But, if we begin now, we can make sure that future generations of children will grow up knowing the love and unconditional belonging of family. That is what it will take to break the intergenerational cycle and system dependence we have experienced for the last four decades.

Conclusion

Let me end by sharing one last lesson that The Children's Village has learned. And that is to become educationally proficient, economically productive and socially responsible, children and families cannot be isolated, labeled or vilified. Rather, they must be given hope. They must be encouraged to grow within themselves a sense of belonging—the kind of belonging one can only gain through our connections with family, no matter how imperfect our families may be.

Recently I was at a conference that included a young man—a very extraordinary young man—who had beaten the odds. He had aged out of foster care and gone on to college, as only the smallest number of former foster kids do. He had two important messages about residential care. One was simple. He said, "Group homes lead to broken souls." The other message, I hope, will rally you to action. He said, "We *can* fix this."

Systems are no substitute for family. The children we serve today deserve our urgent action.

Endnotes

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