SAFETY NET IMPROVEMENTS THAT CAN HELP KEEP FAMILIES TOGETHER

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There is a common narrative about the families who are involved with child welfare systems—one that portrays parents as abusive and unfit (or unwilling) to care for their children. But reality is more nuanced than that. Families living in poverty are far more likely than other families to experience crises such as the sudden loss of a job or housing instability, and these crises, coupled with increased surveillance, can often lead to involvement with child welfare and other intervening systems. The truth is, nearly half of the families who have children removed from their homes cannot meet their basic needs and require additional supports in order to provide for their children.[1]

These facts apply especially to the parents of young children. The birth of a child is one of the leading triggers of poverty in the United States,[2] and since young children have unique costs—such as diapers, formula, and childcare—poor families often struggle to make ends meet.

Research continues to confirm what we already know: children do best when they are raised by their families and in their communities, as long as these environments are safe.[3] The trauma children experience when they are removed from their parents unnecessarily can have significant and lifelong effects, which can be particularly damaging for young children.[4]

Current safety net programs—including income support, childcare assistance, and nutrition assistance—are essential for low-income families, but if they were modified to be more family centered, responsive, and flexible, we could prevent unnecessary system involvement and make it easier for families to care for their children safely at home. Three key strategies could improve existing programs so that they better meet the needs of young children and families.

MORE FLEXIBLE FUNDING SOURCES TO SUPPORT FAMILIES FACING MULTIPLE BARRIERS

Most safety net funding is narrowly focused on providing a specific service, such as food, rent, or utility assistance. These programs are crucial, but the limited focus of each results in gaps across the safety net that can leave families vulnerable.

For example, one of the most common reasons that families become involved with child welfare is that caregivers are often forced to leave children at home—without

adequate supervision—so that they can go to work or appointments. If families had cash resources to provide for unexpected costs such as backup childcare, parents of young children could juggle multiple demands and attend work, school, or appointments while still keeping their children safe.

Funding sources that provide benefits to families through tax programs and direct cash transfers help meet this need. That is why the earned income tax credit (EITC) and the child tax credit (CTC), which together lifted 9.8 million people out of poverty in 2015 and made 22 million others less poor, are so crucial for so many low- and moderate-income families.[5] Child allowances, which provide cash benefits to families with young children, would provide even greater flexibility—and have the potential to significantly reduce poverty.[6]

Research has demonstrated the wide-ranging benefits of the EITC and the CTC across the life-span.[7] Children in families receiving tax credits have improved educational outcomes and are more likely to attend college.[8] As adults, they are also expected to earn more.[9] Research has also shown that infants born to mothers receiving the largest EITC increases in the 1990s had the greatest improvements in critical birth outcomes such as low-weight and premature births.[10] Globally, cash transfers have also been shown to positively impact education, nutrition, and food security, and should be considered another viable strategy to help families build social capital and improve their lives.[11]

The recent tax reform debate was a missed opportunity to expand tax programs like the EITC to the families that need it most and to make a modest but real improvement in the lives of low-income working families. While any further large-scale reforms of tax law are unlikely in the near term, there may be opportunities to push for improvements to the EITC and CTC as part of potential welfare reform, and in doing so, to strengthen the safety net for millions of low- and moderate-income working families.

COORDINATED APPROACHES TO MEET THE NEEDS OF YOUNG CHILDREN AND FAMILIES

Most poor children live in families where adults work,[12] many in jobs with low wages, long or inadequate hours, and unpredictable and often inflexible schedules.

For families with low wages, the safety net provides critical support in times of need. Unfortunately, benefit programs often provide supports to families in an inadequate and fragmented way.

For families who are navigating multiple benefit programs, overlapping, duplicative, or contradicting eligibility requirements can make it difficult to access the supports they need. For instance, Temporary Assistance for Needy Families (TANF) work requirements are often not aligned with the Workforce Innovation and Opportunity Act (WIOA).[13] That can make it difficult for families who rely on TANF to participate in WIOA work or training opportunities, since they do not always "count" toward TANF work requirements.

Although TANF was designed to serve as a buffer for poor families, it often does not address the needs of families facing the greatest barriers to economic self-sufficiency. Families involved in multiple systems, including child welfare, can have mandated program requirements that conflict with TANF work requirements. Such cases highlight the need for targeted policy solutions that address families' needs in a more intentional, holistic manner.

The services needed to support family reunification and to help adults engage in meaningful work can often be the same. Allowing child welfare case plan activities to fulfill TANF work participation requirements, or suspending work participation requirements until the child welfare case plan is completed, are examples of more coordinated approaches to promoting family stability. Additionally, allowing participation in mental health, substance abuse, or domestic violence services to count as work hours for parents is another way policy can both support economic self-sufficiency and keep families together. Allowing for these services to meet work requirements acknowledges their importance to improving overall family well-being—including the ability to find and maintain work.

As it stands, conservative lawmakers are preparing plans to restructure the U.S. welfare system, including putting new limits on eligibility for antipoverty programs such as the Supplemental Nutrition Assistance Program (SNAP). While details of the planned overhaul (and potential timing) are not clear, several policy proposals have already been introduced that would impose new work requirements on some welfare programs. Most recently, the Centers for Medicare and Medicaid Services

issued a letter to state Medicaid directors providing new guidance for Section 1115 waiver proposals that would impose work requirements as a condition of eligibility for Medicaid, presenting the case for how these policies promote the objectives of the Medicaid program.[14] Proposals to place new limits on eligibility and impose additional work requirements are concerning and would weaken the already threadbare safety net. Rather, any proposed reforms should focus on strengthening these vital programs and ensuring that they are more responsive to the needs of low-income families and families living in poverty.

Meeting the needs of families in more coordinated ways includes how families access benefits. Data sharing across programs—along with other information technology enhancements—would help families get the most out of safety net programs. Many states now use document imaging systems to save and file household verifications, and provide call centers for clients to call in and report changes to their status or benefits needs. These strategies can simplify the eligibility determination process and allow states to create a single process for determining eligibility across a number of programs.

Several states participating in the Work Support Strategies demonstration project have implemented these strategies to better integrate various procedures for major safety net programs including Medicaid, SNAP, and childcare subsidies.[15] These states are improving coordination on intake, verification, and periodic redetermination of eligibility to create a more cohesive and easier-to-navigate set of work supports.[16] *For families facing multiple barriers, common access to the multiple supports for which they are eligible without additional obstacles is important in meeting the needs of young children and preventing deeper system involvement.*

PROGRAMS THAT CONVENIENTLY SERVE FAMILIES WITH YOUNG CHILDREN

Providing services and supports in the places where families already spend time—such as childcare centers, libraries, schools, and pediatricians' offices—makes it more likely that families will receive the essential services that they need and prevent the need for more significant interventions—including child welfare involvement.

Nearly all young children are seen regularly from birth into the early years in pediatric

primary care settings. In fact, 88 percent of children enrolled in Medicaid receive pediatric well care in the first six months of life, making early childhood a critical window of opportunity to implement universal prevention strategies in the pediatric setting.[17] The pediatrics office offers an unparalleled opportunity for implementing universal approaches to screening, prevention, and early intervention for infants and toddlers. A number of evidence-based interventions, including Project DULCE (Developmental Understanding and Legal Collaboration for Everyone) from the Center for the Study of Social Policy, leverage the pediatric primary care office effectively to improve health outcomes for children.

Project DULCE provides parents of infants with support in addressing stress, building resiliency, and developing a nurturing relationship with their young child, while simultaneously linking families to legal and other community resources—all during the course of standard well-child visits.[18] DULCE increases access to concrete supports to proactively address social, economic, and other factors that can have long-term consequences for health and development. An evaluation of Project DULCE has shown that the intervention contributes to improvements in preventive health care delivery and accelerated access to concrete supports, such as nutrition or utility assistance, among low-income families. Participating clinical sites report early successes, including increased patient retention and on-time immunizations, decreased no-show rates, early identification of housing and nutrition needs, routine screening for maternal depression and interpersonal violence, and a "warm handoff" to community resources and supports that can address any identified needs.

Meeting the needs of families in places where they are comfortable and with professionals that they know increases the odds that they will be successful in meeting their child's health needs and connected to other needed concrete supports. Both of these factors are important in ensuring that children can remain safely with their parents. This and other strategies highlighted in this brief could improve existing programs by incorporating more family-centered, responsive, and flexible strategies to ensure that federally funded efforts better meet the needs of young children and their parents and caregivers. Safety net programs that are flexible enough to meet the needs of families, are well coordinated, and are offered in environments that are comfortable and convenient are critical to ensuring that families stay intact and children can thrive at home.

ENDNOTES

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