



Child Welfare: Funding for Child and Family Services Authorized Under Title IV-B of the Social Security Act

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Summary

Under Title IV-B of the Social Security Act, the federal government provides funds to states, tribes, and territories for the provision of child welfare-related services to children and their families. These services may be made available to any child, and his or her family, and without regard to whether the child is living in his or her own home, living in foster care, or was previously living in foster care. Title IV-B funds are primarily distributed via two formula grant programs. Under the Stephanie Tubbs Jones Child Welfare Services (CWS) program, states may provide a broad range of services designed to support, preserve, and/or reunite children and their families. States are required to use funding received under the Promoting Safe and Stable Families (PSSF) program for specific categories of child and family services. Combined FY2011 funding for these two programs was \$709 million (\$281 million for CWS and \$428 million for PSSF), which represented close to 94% of the total \$757 million provided for all programs and activities under Title IV-B.

The CWS and PSSF programs have overlapping purposes and are used to fund some of the same services. At the same time, the programs have distinct federal requirements and spending patterns. Many requirements under the CWS program are specific to children in foster care, including ensuring provision of certain protections for *all* children in foster care. Requirements under the PSSF program center on state planning for the delivery of child and family services, more generally, including establishment of goals and regular review of progress toward those goals.

Under the CWS program states must ensure provision of case review and permanency planning for *each* child in foster care, including those children who do not meet the federal eligibility criteria to receive those services under the Title IV-E Foster Care and Permanency program. Spending for “protective services”—including child abuse and neglect investigations; caseworker visits to, and permanency planning for, children in foster care; and other activities—represents the largest share of federal funds expended under the CWS program. Combined, states anticipated spending more than 41% of their federal FY2010 CWS funding on that purpose. At the same time, they expected to spend close to that same share of CWS funding (more than 37%) on the four categories of child and family services for which they are *required* to use their PSSF funding.

States are required to spend no less than 90% of their PSSF child and family services funds on four categories of services. Family support services are considered “upfront” spending in that these dollars are spent to strengthen families so that children’s developmental needs are met and neither abuse nor neglect occurs. The three remaining categories for which states must spend their PSSF funds target some, or all, services on children in foster care and their families: Family preservation services may be used to prevent a child’s placement in foster care, *or* to help children in care reunite with their parents. Time-limited family reunification services and adoption promotion and support services target children in foster care—either to permit their expeditious return home or, when this is not possible, to find them a new adoptive home.

Authorization to fund both the CWS and PSSF programs expires with the end of FY2011. The 112th Congress may consider legislation to reauthorize the funding. This report discusses the CWS and PSSF programs, separately, including their purposes, unique requirements, funding levels, and funding distribution. It also describes several grants and activities that are supported by funds reserved from the overall PSSF appropriation. These include the Court Improvement Program, grants to regional partnerships to improve the outcomes of children affected by their parents’ abuse of methamphetamine or other substances, grants to improve monthly caseworker visits of children in foster care, and funds reserved to HHS for research, evaluation, training, or technical assistance.

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Introduction

The broadest mission of public child welfare agencies is to strengthen all families in ways that ensure children can depend on their parents to keep them safe, give them a stable and permanent home, and, overall, enhance their well-being. Under Title IV-B of the Social Security Act, the federal government provides funds to states, tribes, and territories for the provision of services to children and their families, whether those children are living in their own homes (biological, adoptive, or extended); have been removed from their homes and placed in temporary foster care settings; or have left foster care for any reason.

Title IV-B funds are provided primarily through two formula grant programs. States may use funding provided under the Stephanie Tubbs Jones Child Welfare Services (CWS) program (Title IV-B, Subpart 1 of the Social Security Act) to provide a broad range of services designed to support, preserve, and/or reunite children and their families. They are required to use funding received under the Promoting Safe and Stable Families (PSSF) program, (Title IV-B, Subpart 2 of the Social Security Act) for four categories of services: family support, family preservation, time-limited family reunification, and adoption promotion and support.¹ In FY2011, these two programs received combined federal funding of \$709 million, of which \$281 million was for CWS and \$428 million was for the PSSF program.²

Title IV-B funds—that is, funds provided under the CWS or PSSF programs—are often referred to as “upfront” funding. This means they are dollars available to support activities that *prevent* the need to remove children from their homes as opposed to providing support for them in foster care. This distinction is drawn with the Title IV-E Foster Care and Permanency program in mind. Under that program, states receive federal funds to offset a part of the cost of providing support to children placed in foster care (or those who leave foster care for adoption or guardianship), provided those children meet federal eligibility criteria.³ In recent years, this federal support to states has totaled about \$7 billion annually.⁴

It is true that Title IV-B dollars may be used to provide upfront services, including services to prevent abuse or neglect of children, as well as to prevent their placement in foster care. However, most federal Title IV-B dollars may also be used by states to provide services to children in foster care and those who have left foster care, and to the parents of children living at home or in foster care. Federal law in fact stipulates that some Title IV-B dollars be spent on children in foster care and their families.

¹ Hereinafter, any mention of a section, part, or title of the law is made with reference to the Social Security Act.

² Apart from funding to states, territories, and tribes for the provision of child and family services, the PSSF sum includes funds reserved for (1) grants to state highest courts for the Court Improvement Program; (2) grants to states to improve monthly caseworker visits of children in foster care; (3) grants to regional partnerships to improve outcomes for children affected by their parents’ abuse of methamphetamine or other substances; and (4) HHS-administered research, evaluation, training, and technical assistance related to the PSSF program and its purposes.

³ Federal Title IV-E eligibility criteria vary by each of the program’s components. For more information, see *2008 Green Book*, <http://democrats.waysandmeans.house.gov/media/pdf/111/s11cw.pdf>, pp. 49-51 for foster care eligibility, p. 68 for kinship guardianship, and pp. 75-76 for adoption assistance.

⁴ In recent years, roughly 60% of this Title IV-E funding has been for the foster care component of the program while the remainder has been used for support of children in permanent families, primarily via adoption assistance.

States appear to spend significant portions of their Title IV-B funds to provide services to children in foster care. However, there are some key distinctions between how the funds in Title IV-B may be used in support of children in foster care versus how Title IV-E funds may be used to support those children. First, Title IV-B funding may be used to provide a much broader range of services than are supported under the Title IV-E program. Further, Title IV-B funding may be used to offer these services to *any* child; by contrast, Title IV-E dollars may only be spent on behalf of children with a past or current connection to foster care, and, even then, only when those children meet specific, additional federal eligibility criteria. Finally, Title IV-B funds may be used to provide services to the *families of children*—specifically, their parents and other caregivers. Typically, these individuals may not be served with Title IV-E funds.

Federal Title IV-B Programs and Activities

The primary focus of this report is on the CWS and PSSF programs, under which the large majority of Title IV-B funds are appropriated. Both the CWS and PSSF provide formula grants to states, territories, and tribes for provision of child welfare-related services to children and their families. Those grant programs are discussed in this report. In addition, funds appropriated for the PSSF program support (1) grants to state highest courts under the Court Improvement Program; (2) grants to regional partnerships to improve the outcomes of children affected by their parents' abuse of methamphetamine or other substances; (3) grants to states and territories for monthly caseworker visits of children in foster care; and (4) program-related research, evaluation, training, or technical assistance. Each of those PSSF-funded activities is also discussed in this report.

Title IV-B authorizes several additional programs or activities for which separate funds are authorized or appropriated. These include Family Connection grants, Child Welfare Training, Research and Demonstration projects, the National Random Sample Study of Child Welfare, and the Mentoring Children of Prisoners program. All of these programs or activities are listed in **Table 1**, but they are not discussed further in this report. All of the Title IV-B programs (with the exception of the Mentoring Children of Prisoners program⁵) are administered by the Children's Bureau within the Administration on Children Youth and Families (ACYF), Administration for Children and Families (ACF), of the U.S. Department of Health and Human Services (HHS).

Authorization to fund both the CWS and PSSF programs expires with the end of FY2011 and the 112th Congress may consider legislation to reauthorize this funding and to make other changes to the Title IV-B programs. In its FY2012 budget request, the Obama Administration assumes funding reauthorization for the CWS (no specific program changes were sought) and seeks a five-year extension of PSSF funding (with some changes proposed).⁶

⁵ The Mentoring Children of Prisoners program has been administered by the Family and Youth Services Bureau within ACYF, ACF, HHS. It did not receive funding for FY2011. For more information about this program, see CRS Report RL34306, *Vulnerable Youth: Federal Mentoring Programs and Issues*, by Adrienne L. Fernandes-Alcantara.

⁶ The Administration has not proposed legislative language but seeks to work with Congress to reauthorize the PSSF. See CRS Report RL34121, *Child Welfare: Recent and Proposed Federal Funding*, by Emilie Stoltzfus.

Table I. Programs and Activities Authorized Under Title IV-B of the Social Security Act

Total FY2011 funding provided for Title IV-B programs and activities = \$757 million

Program (Section)	Program Purpose as Authorized in the Law	FY2011 Funding	Funding Authorization
SUBPART 1			
Stephanie Tubbs Jones Child Welfare Services Program (CWS) (Secs. 420-425, 428)	Formula grants to states, territories, and tribes for child welfare-related services to children and their families.	\$281 million	Expires with the last day of FY2011.
Child Welfare Training, Research and Demonstration (Sec. 426)	Competitive grants to public agencies, nonprofits, or universities for child welfare-related research or demonstrations and for workforce training.	\$27 million	Permanent: "such sums as Congress determines."
Family Connection Grants (Sec. 427)	Competitive grants to eligible public or nonprofit entities to support kinship navigator programs, special family finding efforts, family group decision-making meetings, and/or residential family treatment programs.	\$15 million	\$15 million appropriated annually through FY2013 (via P.L. 110-351).
National Random Sample Study of Child Welfare (a.k.a., the National Survey of Child and Adolescent Well-Being) (Sec. 429)	Competitive grant to support a nationally representative, longitudinal study of children at risk of, or exposed to, child abuse or neglect (including their caregivers).	\$6 million	Expires with the last day of FY2011.
SUBPART 2			
Promoting Safe and Stable Families (PSSF)		\$428 million (all purposes)	
PSSF—Child and Family Services (Secs. 430-437)	Formula grants to states, territories, and tribes for four categories of services: family preservation, family support, time-limited family reunification, and adoption promotion and support.	\$341 million	Expires with the last day of FY2011.
PSSF—Targeted Purpose: Improve Caseworker Visits ^a (Sec. 436(b)(4))	Formula grants to states and territories to support quality, monthly caseworker visits with children in foster care.	\$20 million	PSSF funding set-aside expires with the last day of FY2011.
PSSF—Targeted Purpose: Improve Outcomes of Children Affected by Parental Abuse of "Meth" or Other Substances (Secs. 436(b)(5) and 437(f))	Competitive grants to regional partnerships to improve services available to children in substance-abusing families to increase children's well-being and improve their permanency outcomes.	\$20 million	PSSF funding set-aside expires with the last day of FY2011.
PSSF—Court Improvement Program (CIP) (Sec. 436(b)(2); Sec. 437(b)(2) and (Sec. 438)	Formula grants to state highest courts to improve 1) handling of child welfare proceedings, 2) data collection and analysis to achieve better and more timely outcomes for children, and 3) training related to child welfare proceedings.	\$32 million	PSSF funding set-aside permanently authorized. ^b
PSSF—Research, Evaluation, Training and Technical Assistance (Sec. 436(b)(1); Sec 437(b)(1) and Sec. 435)	Funds reserved to HHS for support of program-related evaluation, training, research, and technical assistance.	\$8 million	PSSF funding set-aside permanently authorized.
Mentoring Children of Prisoners (Sec. 439)	Competitive grants to community-based, public, or private entities to provide mentoring services.	\$0	Expires with the last day of FY2011.

Source: Table prepared by the Congressional Research Service (CRS).

a. See also related provisions in Subpart 1 at Section 422(b)(17) and Section 424(e)(1) and (2).

- b. Funding for the CIP is permanently set aside from the PSSF program (Sections 436(b)(2) and 437(b)(2)). However, the provisions that entitle state highest courts to these funds (Section 438(c)(1)(A) and (c)(2(a)) expire with FY2011, as does the stipulation that some of these funds are for CIP data or training grants (Section 438(e)).

This report begins by outlining the federal-state framework with regard to child welfare, discussing the activities public child welfare agencies are expected to perform, and discussing the children and families who may be served under the Title IV-B child and family services funds provided via the CWS and PSSF programs. The report follows this with separate descriptions of those formula grant programs and additional activities supported with PSSF funds.

Federal-State Framework

Under the U.S. Constitution, states are believed to have the primary obligation to ensure the welfare—sometimes referred to as the “well-being”—of children and their families. At the same time, the federal government has demonstrated longstanding interest in working with states to strengthen their child welfare services and supports. Further, through the provision of funding to states, the federal government is able to require certain standards for those services and supports.

Federal child welfare funding is largely distributed to state-level child welfare agencies and most federal child welfare program requirements apply to those same agencies.⁷ At the state level, the child welfare “system” consists of workers at state and county child welfare agencies who work with private-agency child welfare workers, state and local judges, attorneys, prosecutors, law enforcement personnel, and workers at a wide variety of public and private social services agencies to carry out their child welfare duties.

What is Expected of Public Child Welfare Agencies?

Children depend on adults—usually their parents—to protect, support, and nurture them in their homes. The broadest mission of public child welfare agencies is to strengthen all families in ways that ensure children can depend on their parents to protect their safety, ensure they have a stable and permanent home, and enhance their well-being. More specifically, public child welfare agencies are expected to identify families where children are at risk of abuse or neglect and to provide services to prevent maltreatment. These typically are services provided to children and families while the children remain in their own homes. Public child welfare agencies are also expected to identify children who have been abused and neglected and to provide services and supports necessary to ensure no further maltreatment occurs. Again, these services might be provided while the child remains living in his/her parent’s home or might mean moving the child to foster care.

Foster care is understood—in federal policy and in child welfare practice—to be a *temporary* living situation. Public child welfare agencies must work to establish, or re-establish, permanent and stable living arrangements, as quickly as possible, for any child entering foster care. Whenever provision of services and other assistance can permit children to return safely to their

⁷ Some states provide for local (e.g., county) administration of federal child welfare funds. However, even in these states, federal funds are provided to the state agency, and the state agency is required to supervise the local provision of services to ensure they are provided in a manner consistent with all federal requirements.

parents, they are expected to be reunited with them. However, if returning home is not possible or appropriate, the child welfare agency is charged with both quickly and competently identifying another permanent home for these children—preferably via adoption or guardianship, or through placement with another relative on a less formal basis. Re-establishing or achieving safety and permanence are critical and immediate needs of children who enter foster care. Child welfare agencies act as de facto parents for these children and must also ensure their well-being, including facilitating their access to a stable education and appropriate health care.

When children leave foster care—whether for a permanent home via reunification, adoption, or legal guardianship—child welfare agencies may also be called on to provide services to ensure the ongoing stability and continued safety of the family home. And, finally, for those youth who leave foster care due to their age rather than their placement in a permanent home, child welfare agencies are called on to support and enable their successful transition to adulthood.

Children and Families Who May Be Served Under Title IV-B

There are an estimated 75 million children (individuals under the age of 18) living in the United States. Title IV-B funds may be used to serve any of these children and their families if that service is related to child welfare.⁸ Most children and families who receive child welfare-related services come into contact with a public child welfare agency following an allegation of child abuse or neglect.

Figure 1 shows that as many as 6 million children have been referred to child welfare agencies in a given year and that these agencies conducted investigations or assessments related to allegations of child abuse or neglect involving as many as 3.6 million children. More than a million of these children receive some kind of child welfare service after that investigation or assessment is completed. The large majority of those services are provided in the child’s own home rather than in a foster care setting. CWS funds may be used to support investigations of abuse or neglect and both CWS and PSSF funds may be used to provide other services to strengthen or support families to ensure children can safely remain in their own homes.

Some children must be placed in foster care to ensure their safety. As suggested in **Figure 1**, nationwide, fewer than half of all children in foster care on a given day meet the eligibility criteria to receive Title IV-E assistance. Under the CWS program, federal law requires states to provide *all* children in foster care (including those eligible for Title IV-E assistance and those who are not eligible for Title IV-E assistance) with the same protections related to case planning and regular case review, including permanency planning. Further, it stipulates that state child welfare agencies must provide the services necessary to ensure a child’s safe and expeditious return to his or her family, or, if this is not possible, to work as quickly as possible to find a new safe, appropriate, and permanent home for the child. CWS funds may be used to provide case planning and review services to children in foster care and both CWS and PSSF funds may be used to provide other services to children in foster care and their families (e.g., parenting skills training or substance abuse treatment to promote reunification).⁹

⁸ Child is defined generally, for purposes of Title IV-B and Title IV-E, as under the age of 18 (Section 475(8)). However, there is no age eligibility limit applicable to the Title IV-B programs and states may provide child welfare services to individuals (who are not parents) who are age 18 or older.

⁹ States are permitted to use Title IV-E funds to provide case planning and case review-related services to children in foster care who meet the Title IV-E eligibility criteria. However, they are not permitted to use Title IV-E funds to (continued...)

Finally, although these children are not shown in **Figure 1**, some 275,000 children (or more) leave foster care each year. Some of these children return to their parents, others go to live with relatives, some go to new permanent homes via adoption or legal guardianship and others reach the age of majority and leave care without placement in a family. CWS and PSSF funds may be used to provide post-reunification, adoption, or guardianship services to strengthen or otherwise assist the families children go to live with when they leave foster care. Funds may also be used to assist youth who leave care without a permanent home.¹⁰

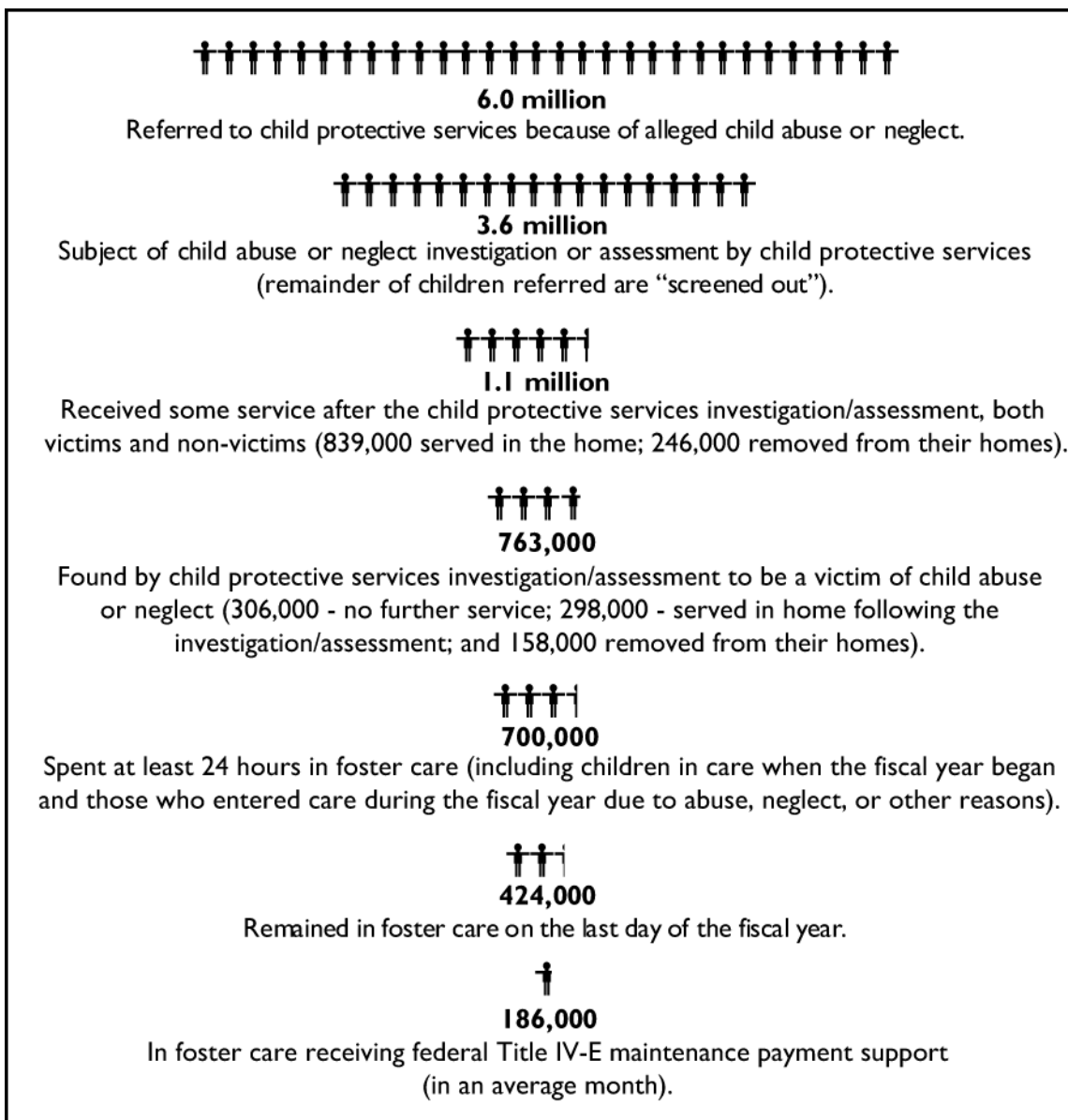
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provide those services to children in foster care who are not Title IV-E eligible. Further, in general, states are not permitted to use Title IV-E funds to provide other *services* to children or their families. This restriction applies to all children who are in foster care, and without regard to their Title IV-E eligibility status.

¹⁰ The Chafee Foster Care Independence Program provides funding to state child welfare agencies that is wholly dedicated to provision of services to youth who are expected to leave care without placement in a permanent family or those who have left care in that manner (and are under the age of 21). For more information, see CRS Report RL34499, *Youth Transitioning from Foster Care: Background and Federal Programs*, by Adrienne L. Fernandes-Alcantara.

Figure 1. Children Brought to the Attention of Public Child Welfare Agencies

Reflects national estimates or counts based on data reported by states for FY2009



Source: Figure prepared by the Congressional Research Service (CRS) based on U.S. Department of Health and Human Services (HHS), *Child Maltreatment 2009* (December 2010); FY2009 data reported by states via the Adoption and Foster Care Analysis Reporting System (AFCARS) as of July 29, 2010; and Title IV-E expenditure claims data as compiled by HHS, Office of Legislative Affairs and Budget, May 2010.

Note: Numbers may not sum to total due to rounding.

The CWS and PSSF programs under Title IV-B have overlapping purposes and may be used to fund some, but not all, of the same services. At the same time, they have distinct program requirements, funding, and funding distribution methods. The following sections of the report describe the two programs separately, including each of their purposes, federal requirements for receipt of funds, state use of funds, federal funding level, and distribution of those funds.

Stephanie Tubbs Jones Child Welfare Services Program (CWS)

Title IV-B, Subpart 1 of the Social Security Act (Sections 420-425, 428)

The CWS program provides funds to states, territories, and tribes and is intended to “promote state flexibility” to develop and expand a program of services to children and families that uses community-based agencies and works to

- protect and promote the welfare of all children;
- prevent child abuse and neglect;
- permit children to remain in their own homes, or to return to those homes whenever it is safe and appropriate;
- promote safety, permanency, and well-being for children in foster care or those in adoptive families; and
- provide training, professional development, and support to ensure a well-qualified child welfare workforce.¹¹

The CWS program was first authorized in 1935 as part of the original Social Security Act and has been amended many times since then, including most recently by the Child and Family Services Improvement Act of 2006 (P.L. 109-288), the Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351), and the Patient Protection and Affordable Health Care Act (P.L. 111-148).¹² Funding for this program is authorized on a discretionary basis and that authorization is set to expire with the last day of FY2011. Congress provided \$281 million for the CWS program for FY2011.

States Planned Use of CWS Funds

States are generally permitted to spend CWS funds on any service or activity (and on behalf of any child or family) that is intended to meet the program’s broad purposes. Examples of services or activities that may be supported include investigations of child abuse or neglect, homemaker services, respite care, family or individual counseling, caseworker visits to children whether in their own homes or in foster care, case planning and case review services for children in foster care, pre- and post- adoption support services, and emergency assistance. As discussed further below, states, however, are not permitted to spend CWS money to meet regular education costs or medical care needs of a child or his/her family and the statute limits the amount of CWS funds that may be used for program administration and for foster care maintenance payments, adoption assistance payments, or child care.

Combined, states planned to spend the largest single share (41%) of their FY2010 CWS funds for child protective services. Among other things, those services may include child abuse and neglect

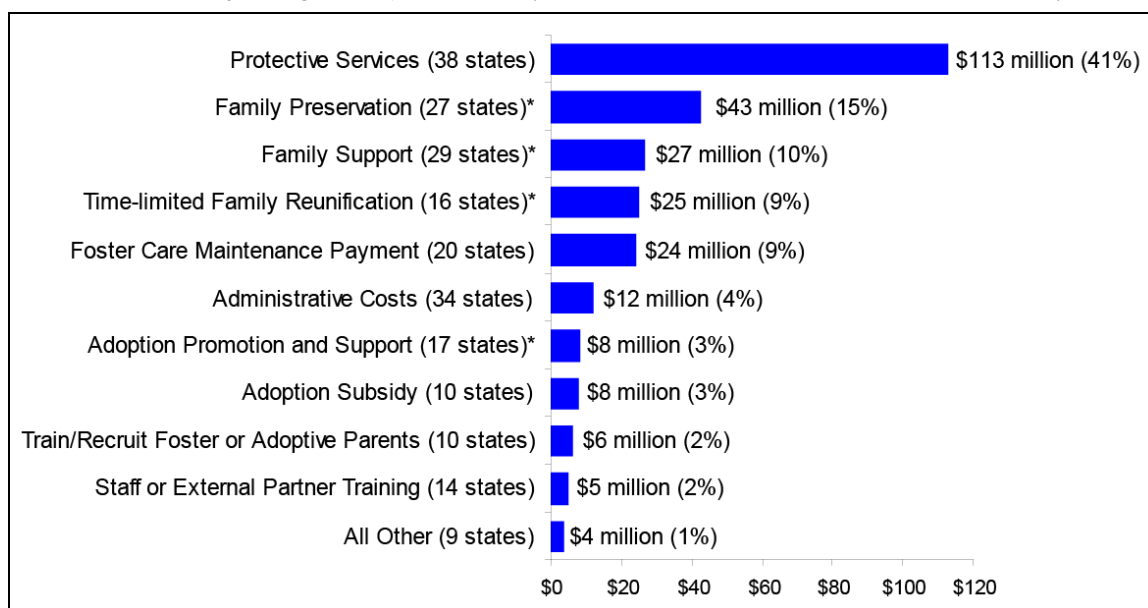
¹¹ These purposes apply to all programs authorized in Title IV-B, Subpart 1 of the Social Security Act, including the separate funding authorized in Sections 426 (Child Welfare Research, Demonstration and Training), 427 (Family Connection Grants), and 429 (National Random Sample Study of Child Welfare).

¹² The amendments made by P.L. 109-288 were more global than those made by P.L. 110-351 and P.L. 111-148.

investigations, and caseworker activities on behalf of families and their children, whether those children are in foster care or living in their own homes. States also planned to spend more than 37% of their FY2010 CWS funds on the four categories of services (family support, family preservation, time-limited family reunification, and adoption promotion and support) for which they are required to spend the majority of funds they received under the PSSF program (the program is described later in this report).

Figure 2 depicts total state planned spending of FY2010 CWS funds by category. The “All Other” category includes spending by a few states on a range of purposes, including guardianship assistance, independent living services, child care related to employment or training of a parent/caretaker, or caseworker training and recruitment.

Figure 2. Planned Use of FY2010 Federal CWS Funds by Kind of Service or Activity
Estimated spending for 52 jurisdictions (50 states, District of Columbia, and Puerto Rico)



Source: Figure prepared by the Congressional Research Service (CRS) based on state planned spending as reported on CFS101, Part II (prepared 2009) and submitted as part of FY2010 funding request.

Notes: An * indicates that spending category is one of the four categories under which states are required to spend 90% of their funds under the separate, PSSF program, which is discussed below. For more information on these data and specific notes on how some state data were interpreted see **Table B-I** in **Appendix B**.

Table 2 below provides descriptions of the purpose and kinds of activities that may be supported in selected service categories. These descriptions are meant to be illustrative rather than exclusive. They are based largely on guidance provided to states regarding reporting their planned child and family services spending, including spending under the CWS program.¹³

¹³ See ACYF-CB-PI-09-06 at http://www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2009/pi0906.htm.

Table 2. Description of Purpose and Activities by Selected Service Category

Protective Services. These services are intended to prevent or remedy the abuse, neglect, or exploitation of children. They may include investigations of child abuse and neglect; caseworker activities on behalf of children and their families (both those in foster care and those at home); counseling; arranging for alternative living arrangements; and emergency assistance.

Family Preservation (or Crisis Intervention) Services. These are services offered to prevent removal of a child from the home (whether biological, adoptive, or extended) or to permit a child to return to a family from which he/she was removed. They may include homemaker services, respite care, parenting skills training and knowledge development, day care, case management, post-adoption support services, family or individual counseling, any service identified by states as necessary to permit reunification, and post-reunification services.

Family Support (or Prevention and Support) Services. These are community-based services that may be provided to any child or family and are intended to promote the safety and well-being of children and the stability of their families, increase parents' competence and confidence in parenting, and enhance child development. They may include parenting skills training; early developmental screening of children and assistance in obtaining services to meet any identified needs; counseling or home visiting; parent support groups and other center-based activities (e.g., informal drop-in centers for families/parents); mentoring, tutoring, and health education for youth; and respite care for parents and other caregivers.

Time-Limited Family Reunification Services. These are services designed to permit expeditious reunification of a child with his/her family and may only be offered where a child has been in foster care for less than 17 months.¹⁴ They include individual, group, and family counseling; substance abuse treatment (including inpatient, outpatient, or residential); mental health services; assistance to address domestic violence; temporary or crisis child care; and transportation to and from any of these services or activities.

Foster Care Maintenance Payments. These are regular "room and board" payments made to foster parents, group homes, or other institutions that provide daily care, support, and living space for children in foster care. A state's expenditure of CWS funds for this purpose may not exceed its FY2005 expenditures for foster care maintenance payments under the CWS program.

Adoption Promotion and Support Services. These services are available to encourage adoptions out of foster care when that is in the child's best interest. Services may include activities to expedite the adoption process, and activities to support prospective adoptive families and adoptive families.

Adoption Subsidies. These are regular payments made to adoptive parents on behalf of their adoptive children (typically these are children adopted out of foster care). They may be used by those parents in any manner they choose. A state's expenditure of CWS funds for this purpose may not exceed its FY2005 expenditures for adoption subsidies under the CWS program.

Source: Table prepared by the Congressional Research Service (CRS).

Note: Descriptions provided are intended to be illustrative rather than exclusive. For a table giving more detailed descriptions, as well as target populations, for these and additional service categories, see **Appendix A**.

¹⁴ Seventeen months is a *maximum* time frame; for some children the time frame may be as short as 15 months. Section 431(7) stipulates that these services may be made "during the 15-month period that begins on the date a child is considered to have entered foster care pursuant to Section 475(5)(F)." Under Section 475(5)(F) a child is considered to have entered foster care on the earlier of (1) the date of the first judicial finding that the child has been subjected to child abuse or neglect; or (2) 60 days after the child is removed from his/her home.

Limitations on the Use of CWS Funds

In policy guidance, HHS has stipulated that CWS funds may not be spent to pay education costs or to meet medical expenses.¹⁵ The statute also includes specific limitations on the use of CWS funds for child care, monthly assistance for children in foster care settings or adoptive homes, and program administration.

Foster Care Maintenance and Adoption Assistance Payments, Child Care

Current law prohibits states from spending *any* federal CWS funds for foster care maintenance payments, adoption assistance payments, or child care *unless* the state can show that it spent some of its federal CWS dollars for those purposes in FY2005.¹⁶ If a state can show this, then it may continue to spend CWS money for those purposes, but only in an annual amount no greater than what it spent under the program for those purposes in FY2005.¹⁷

Further, states are not permitted to count state or any other non-federal dollars used to provide foster care maintenance payments for the purpose of providing non-federal matching funds under the CWS program *unless* the state can show that it did this in FY2005. If the state can show this, then it is permitted to count non-federal state spending for foster care maintenance payments as matching dollars (under the CWS program) in an annual amount no more than it counted that spending for this purpose in FY2005.¹⁸

Program Administration

States are prohibited from spending more than 10% of their CWS funds (both federal dollars and the non-federal dollars used to match those dollars) for CWS program administration.¹⁹ For purposes of the CWS program, administration costs do not include the cost of salaries for caseworkers providing services (e.g., case planning or case review-related services for children in foster care). They also do not include the cost of salaries of case managers for direct supervision of caseworkers providing those services, or travel expenses related to provision of services by caseworkers or program oversight. (By contrast, under the Title IV-E program time spent by a

¹⁵ This guidance was first issued in 1982 and is now included in the *Child Welfare Policy Manual*, Section 7.4, Questions 4 and 5. The guidance cites the definition of child welfare services included in Section 425 of the Social Security Act to justify this prohibition. That definition was removed from the statute in 2006 by P.L. 109-288 (Child and Family Services Improvement Act). However, that law incorporated much of the prior law definition in a new “purposes” section and this guidance is presumed to continue to represent HHS policy on the matter.

¹⁶ This requirement was made effective, beginning with FY2008, by the Child and Family Services Improvement Act of 2006 (P.L. 109-288). However, states have faced some restriction on the amount of federal CWS funds they could spend for foster care maintenance payments (as well as adoption assistance payments and child care related to work or training purposes) for roughly three decades (i.e., beginning with FY1980).

¹⁷ Prior to FY2008, the limit on spending related to child care was specifically restricted to child care spending that was necessary because of a parent’s work or employment-related training. That qualification was removed from statute in changes made in 2006 by P.L. 109-288. However, because child care that is offered outside the context of work or employment training may be defined as a family support service, or a family preservation service, there may be no real practical effect to this change (i.e., restriction may still essentially apply only to work or training-related child care).

¹⁸ This requirement was added in 2006 by P.L. 109-288, which made it effective with FY2008.

¹⁹ As initially required by P.L. 109-288, states must assure they will meet this requirement as part of their CWS plan (Section 422(b)(14)). Additionally, HHS is prohibited from making payments under the CWS program to states that exceed the 10% cap (Section 424(e)).

child welfare worker to do case planning or case review for an eligible child in foster care, and supervision of that work, would be considered an administrative cost.)²⁰

CWS State Plan Requirements

Federal law stipulates a series of plan requirements that states must meet in order to receive CWS funds. These requirements deal with protections and services to children in foster care; protections for other children served; program development and description; and agency administration of the CWS plan, including its coordination with other programs.

Protections and Services for Children in Foster Care

As part of its CWS plan, each state is required to assure HHS that it has a statewide information system that enables the state to “readily” determine the status, demographic characteristics, location, and goals of every child who is in foster care (or who was in foster care in the past 12 months). A state must also assure under its CWS plan that each child in foster care has a case plan that is regularly reviewed, outlines the child’s permanency goals, and provides other protections for children in foster care. In addition, the state must assure that it has a service program designed to either reunite children in foster care with their parents, or, when this is not safe or appropriate, to find them new permanent homes or living arrangements.²¹

Each state is further required under the CWS plan (1) to have standards related to the frequency and quality of caseworker visits of children in foster care; (2) to ensure “diligent recruitment” of potential foster and adoptive homes that reflect the ethnic and racial diversity of the children in the state needing foster family homes; (3) to work with the state agency that administers the Medicaid program to develop (in consultation with other experts and stakeholders) a specific health oversight plan for children in foster care; and, (4) with regard to children under state care or supervision, to have specific procedures in place to ensure continuity of program operation and services in the event of a disaster.²²

²⁰ Administrative costs for purposes of the CWS program are defined in the law at Section 422(c)(1). Administrative (including training) costs for purposes of the Title IV-E program include all eligible program costs that are not assistance payments made on behalf of children and, in most instances, they may only be claimed if the cost is incurred for a Title IV-E eligible child. Federal reimbursement for Title IV-E administrative costs is authorized at Section 474(a)(3) and the kinds of costs that are reimbursable are further described in regulation at 45 CFR 1356.60(c).

²¹ Section 422(b)(8)(A)(i)(ii) and (iii). These requirements ensure that children who are in foster care and who do not meet the Title IV-E eligibility criteria receive the same case plan and case review (including permanency planning) services provided to children in foster care who *are* Title IV-E eligible. The bulk of these child protection requirements were added to the statute in 1980 by the Adoption Assistance and Child Welfare Act (P.L. 96-272). At the time, compliance (that is, extending these protections to children not eligible for Title IV-E foster care assistance) was considered voluntary. States that didn’t meet the requirement could still access CWS funds, although those that met the requirement were potentially able to access greater funding under the program. In 1994, however, Congress made extension of these protections to all children in foster care a part of the CWS state plan (P.L. 103-432). Thus, they became mandatory for any state seeking to receive *any amount* of CWS funding.

²² Section 422(b)(7), (15), (16), and (17).

Services or Protections for Other Children

The CWS plan must also incorporate specific descriptions or reports concerning other child populations. Most broadly, each state must assure in its CWS plan that it has a service program in place to help children who are at risk of placement in foster care to remain safely in their own homes.²³ For children who are abandoned at or shortly after birth, the state must have judicial and administrative procedures in place to provide these infants with legal representation (to enable expeditious decisions on their permanent placement). Finally, with regard to children who are adopted from other countries, the state must describe any activities undertaken on behalf of these children, including provision of adoption or post-adoption services. Further, it must collect and report certain data to HHS, including numbers of such children who enter state custody following disruption or dissolution of the adoption.²⁴

Program Development, Description, and Staff Training Plan

In their CWS plans, states must describe their efforts to provide child welfare services on a statewide basis, to expand and strengthen the range of services available, and to develop and implement services that improve child outcomes. The services provided to children must utilize the facilities and experience of voluntary (private) agencies as authorized by the state. Further, the state must also describe its staff development and training program for child welfare workers and it must provide reports or other information to HHS, as requested.²⁵

A state must also demonstrate “meaningful and ongoing collaboration” with state courts in the development of its CWS plan, as well as in the development of other child welfare-related plans.²⁶ Additionally, a state must describe in its CWS plan the specific measures it undertakes to remain in compliance with the Indian Child Welfare Act, and these measures must be developed after consulting with Indian tribal organizations.²⁷

Agency Administration and Coordination with Other Programs

CWS state plan requirements stipulate that the program must be administered by the same state agency that administers the state’s Social Services Block Grant (SSBG). Finally, delivery of services under the CWS plan must be coordinated with those provided for children via SSBG, the Temporary Assistance for Needy Families (TANF) block grant, the PSSF program, the Title IV-E Foster Care and Permanency program, and any other state programs that have purposes related to promoting the welfare of children and their families.²⁸

²³ Section 422(b)(8)(A)(iv).

²⁴ Section 422(b)(8)(B), (11), and (12).

²⁵ Section 422(b)(3) through (6).

²⁶ As part of its CWS plan, a state must also demonstrate meaningful and ongoing collaboration with state courts in the development of its PSSF state plan, Title IV-E state plan, and any Program Improvement Plan (PIP) in the state.

²⁷ Section 422(b) (9) and (13).

²⁸ Section 422(b)(1) and (2). Section 106 of the Child Abuse Prevention and Treatment Act (CAPTA) authorizes grants to states to improve their child protective services. It requires states, to the “maximum extent practicable,” to coordinate those services with the state plans required under Title IV-B. There is no comparably specific reference in Title IV-B.

CWS Program Funding, Authorization and Distribution

Federal funding for the CWS program has been flat or in decline for most of the past 15 years. The program is authorized to receive discretionary appropriations of \$325 million each fiscal year, through FY2011.²⁹ For FY2011, it received an appropriation of \$281 million (P.L. 112-10).

The current CWS funding authorization level was initially set for FY1990, but Congress has never appropriated the full \$325 million authorized. Instead, funding for the CWS program peaked in FY1994 at \$295 million but has drifted down to the current \$281 million since then. Because these funding amounts are not adjusted for inflation, the actual decline in purchasing power to states is greater than the nominal dollars suggest. However, this decline in funding for the CWS program generally coincides with the period in which separate federal support for child welfare-related child and family services became available under what is now called the PSSF program. As described later in this report, that program currently provides funding to all states for some, but not all, of the purposes for which CWS funds may be used. (For the history of Title IV-B funding to states for child and family services, in both nominal and inflation-adjusted dollars, see **Appendix C.**)

Distribution of Funds

Under the CWS funding formula, each state (the 50 states and the District of Columbia) and territory (American Samoa, Guam, Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands) receives a base allotment of \$70,000. The remaining CWS funds are allocated based on a formula that takes into account both the number of individuals in a state under the age of 21 and the state's average per capita income. The formula is intended to ensure that states with lower relative per capita income receive greater federal support per individual under age 21. HHS allocates funds to tribes out of a state's initial allotment from this formula. The amount of a state's initial allotment that is directed to a particular tribe is based on the tribe's (or tribes') share of the population in the given state that is under the age of 21.

In FY2010, states and territories received \$276 million in CWS funding, and the remaining \$6 million was distributed to tribes or tribal organizations in 30 states. The median annual funding provided to each of the 50 states and the District of Columbia per individual under age 21 (excluding tribes) was \$3.21; the amount of funding to state governments per individual under age 21 (excluding tribes) ranged from a low of \$1.43 in Alaska to a high of \$3.79 in both Mississippi and West Virginia. When all funds distributed within a state (either to the state or a tribal government) were counted, the median annual funding per individual under 21 (including those in tribal populations) was \$3.31 and ranged from a low of \$2.33 in Connecticut to a high of \$3.82 in Mississippi.³⁰ (For federal allotments under this program, by state, including funding per individual under age 21 and per poor child under age 18, see **Table B-2** in **Appendix B.**)

²⁹ The Child and Family Services Improvement Act of 2006 (P.L. 109-288) ended the permanent funding authorization for the CWS program, which had been in place since the program's 1935 inception. The 2006 law provided that the program's annual funding authorization ends with FY2011 (i.e., as of September 30, 2011).

³⁰ CRS calculations based on final FY2010 CWS allotments to states and territories, received from HHS, ACF, OLAB, December 2010; final FY2010 CWS allotments to tribes as provided in ACYF-CB-PI-04, issued April 2011 (including estimates of the tribal under-age-21 population); and the state under-age-21 population, as provided by the American Community Survey (for 2009).

Matching Requirement

To receive its full CWS allotment, a state must comply with rules related to the use of program funds and must provide \$1 in non-federal program funding for every \$3 in federal program funds it receives (i.e., 75% federal financial participation rate). States failing to meet established state-specific targets for improving the frequency of caseworker visits with children in foster care are subject to reduced federal financial participation in the CWS program. For FY2010, 11 jurisdictions (10 states and Puerto Rico) saw their federal financial participation rate in this program lowered from 75% to 74%, 72%, or 70%, commensurate with the degree to which they failed to meet their established targets. (This provision for reduced federal financial participation is discussed in greater detail later in this report under the heading “Grants to Improve Monthly Case Worker Visits of Children in Foster Care.”)

Tribal Receipt of CWS Funding

Tribes and tribal organizations that wish to receive CWS funding must submit a plan to HHS for approval and may receive funds directly from the federal government. The law gives HHS the authority to provide CWS funds to tribes “in such manner and in such amounts” as HHS “determines to be appropriate.” However, it stipulates that amounts provided to tribes must be considered as a part of the allotment made to the state in which the tribe or tribal organization is located.³¹ As noted above, HHS provides funds to tribes based on the tribe’s share of a state’s under-age-21 population. Further, these funds are weighted by HHS in a manner that ensures greater resources to tribes per tribal person under the age of 21.

For FY2010, 157 tribes or tribal organizations, located in 30 states, received just over \$6 million in CWS tribal funding. These tribes and tribal organizations counted roughly 572,500 individuals under the age of 21 in their populations. More than 91% of those under-21 individuals lived in 11 states: Oklahoma (213,200), Arizona (81,700), New Mexico (53,400), Alaska (45,600), South Dakota (32,400), Montana (26,400), Michigan (19,100), Wisconsin (17,200), Washington (13,700), North Dakota (11,300), and Minnesota (10,200). Accordingly, a little more than 91% of the CWS funding for tribes was distributed among some 118 tribes or tribal organizations in those 11 states.

The median tribal CWS grant was \$13,333, and the grant amounts ranged from a low of \$1,300 (to the Jena Band of Choctaw Indians in Louisiana) to a high of \$921,410 (to the Navajo Nation for services involving its under-21 population in Arizona, New Mexico, and Utah).

The median annual funding provided to a tribe or tribal organization per each individual under age 21 was \$10.50, and ranged from a low of \$7.68 (to a single tribe in Massachusetts) to a high of \$11.52 (to each of seven tribes in Montana).³²

³¹ Section 428.

³² For FY2010 CWS allotments by tribe or tribal organization, go to Attachment A of HHS, ACF, ACYF-CB-PI-11-04, issued March 23, 2011, available at http://www.acf.hhs.gov/programs/cb/laws_policies/policy/pi1104.htm.

Promoting Safe and Stable Families Program

Title IV-B, Subpart 2, Sections 430-437

The Promoting Safe and Stable Families (PSSF) program provides funds to states, territories, and tribes to enable them to develop, establish, expand, or operate a coordinated set of community-based family support services, family preservation services, time-limited family reunification services, and adoption promotion and support services. The objectives of these coordinated service programs are to

- prevent maltreatment among at-risk families through provision of support services;
- assure children’s safety within the home and preserve intact families in which children have been maltreated;
- address problems of families whose children have been placed in foster care—in a timely manner—so reunification can occur; and
- support adoptive families by providing support services necessary for them to make a lifetime commitment to children.

This program was established in 1993 (P.L. 103-66) to provide support to states for the provision of family preservation and family support services. Congress renamed these grants to states as the Promoting Safe and Stable Families program in 1997 (P.L. 105-89) and at the same time required states to use these funds additionally to support time-limited family reunification and adoption promotion and support services. The program’s funding authorization was again extended, and other program changes were made by the Promoting Safe and Stable Families Amendments of 2001 (P.L. 107-133) and, most recently, by the Child and Family Services Improvement Act of 2006 (P.L. 109-288).³³

Funding authorized for the PSSF program is set to expire on September 30, 2011. For FY2011, the PSSF program received a total appropriation of \$428 million (P.L. 112-10). About 81% of this PSSF funding was provided to states, territories, and tribes for support of four specific categories of child welfare-related child and family services. This part of the PSSF program is described immediately below. The remaining FY2011 PSSF funds were reserved, as stipulated in statute, for the following activities: grants to state highest courts under the Court Improvement Program; grants to improve outcomes of children affected by parental abuse of methamphetamine or other substances; grants for monthly caseworker visits; and support for research, evaluation, training and technical assistance. Use of PSSF funds for these additional purposes is described at the end of this report.

Use of PSSF Funds for Child and Family Services

States are required to spend no less than 90% of the federal PSSF child and family services funding they receive on four specified categories of services: community-based family support,

³³ For more information on this program’s legislative history, see CRS Report RL33354, *The Promoting Safe and Stable Families Program: Reauthorization in the 109th Congress*, by Emilie Stoltzfus.

family preservation, time-limited reunification, and adoption promotion and support.³⁴ Further, the statute stipulates that states must spend “significant portions” of program funding on each of those four specified categories of child and family services. HHS has interpreted this language (in guidance) as requiring states to spend approximately 20% on each service category unless a state successfully seeks an exemption.³⁵

The PSSF program is available for states to spend on a somewhat more limited set of child welfare purposes than is true of the CWS program. Further, its state plan requirements, discussed below, are considerably less focused on children in foster care than are the requirements included in the CWS plan. At the same time, three of the four categories of child and families services for which states must spend the majority of their federal PSSF funds target services, in whole or in part, on children in, or formerly in, foster care and the families of those children.³⁶

For FY2007 (the most recent year for which *final* expenditure data are available), states reported spending \$357 million in federal PSSF funds. Of that sum, they reported combined spending of about 6% for other service-related costs and program administration. The remaining 94% of those funds were expended for the four categories of child and family services stipulated in the law. The percentage and amount of spending by each of the service categories is shown in **Figure 3**. For a description of the activities that may be funded under each of the service categories, see the Description of Purposes and Activities by Selected Service category in **Table 2**.

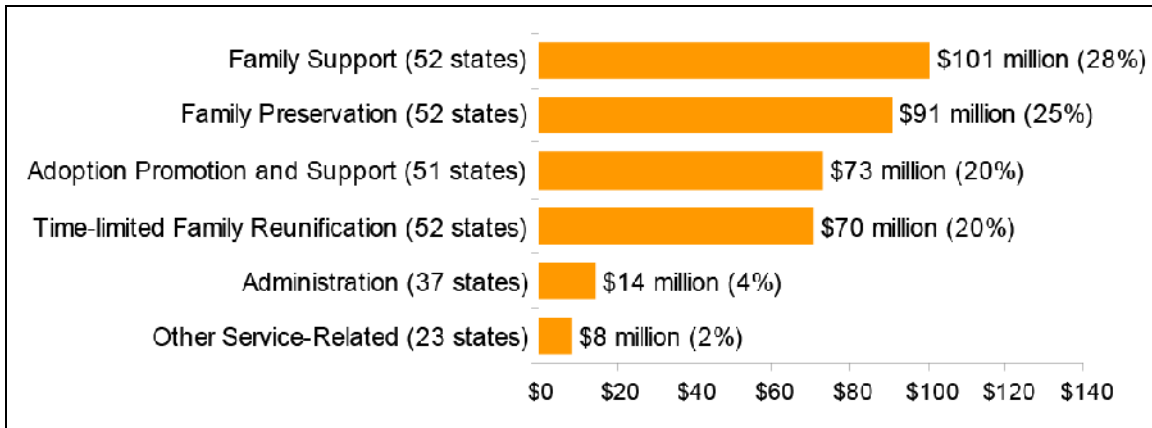
³⁴ See Section 434(d) and Section 433(a)(4). The latter provides that a state may not spend more than 10% of program funds for administrative costs, and, further, that all remaining program funds must be used to provide the specified child and family services. In regulation, however, HHS has defined administrative costs to *exclude* certain “program costs” that are incurred while developing and implementing the state’s plan to provide child and family services. For example, the planning provision of child and family services, which is a requirement of the PSSF plan, is considered a “service”-related activity rather than an administrative cost. See 45 C.F.R. 1357.32(h)(3).

³⁵ Section 432(a)(4). For recent guidance on this matter see HHS, ACF, ACYF-CB-PI-11-06 (issued April 28, 2011), which provides that a state must provide a written rationale if any of the four spending categories “does not approximate 20 percent.” See http://www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2011/pi1106.htm.

³⁶ Each of the services categories are defined in Section 431.

Figure 3. State Use of Federal FY2007 PSSF Child and Family Services Funds by Kind of Service or Activity

Total spending: \$357 million; 52 jurisdictions (50 states, District of Columbia, and Puerto Rico)



Source: Figure prepared by the Congressional Research Service (CRS) based on state actual expenditures of FY2007 federal PSSF funding as reported in CFS-101, Part III (reported 2009; forms sent to Congress by HHS, July 2010).

Note: For more information on these data and specific notes on how some state data were interpreted and represented, see **Table D-3** in **Appendix D**.

The combined shares of actual spending of FY2007 PSSF funds are roughly comparable to how states, in aggregate, planned (as of mid- to late 2009) to spend federal PSSF funds they were to receive in FY2010. At the same time, because PSSF funding for child and family services to states (including the District of Columbia and Puerto Rico) was somewhat lower in FY2010—\$336 million in FY2010 as compared to \$357 million in FY2007—the dollar amounts are lower in each service category. The family support and family preservation service categories were again expected to receive the largest shares of PSSF funding. At the same time, those categories of services were expected to absorb more of the effect of the reduced funding for FY2010 than either the adoption promotion and support category or the time-limited family reunification category.

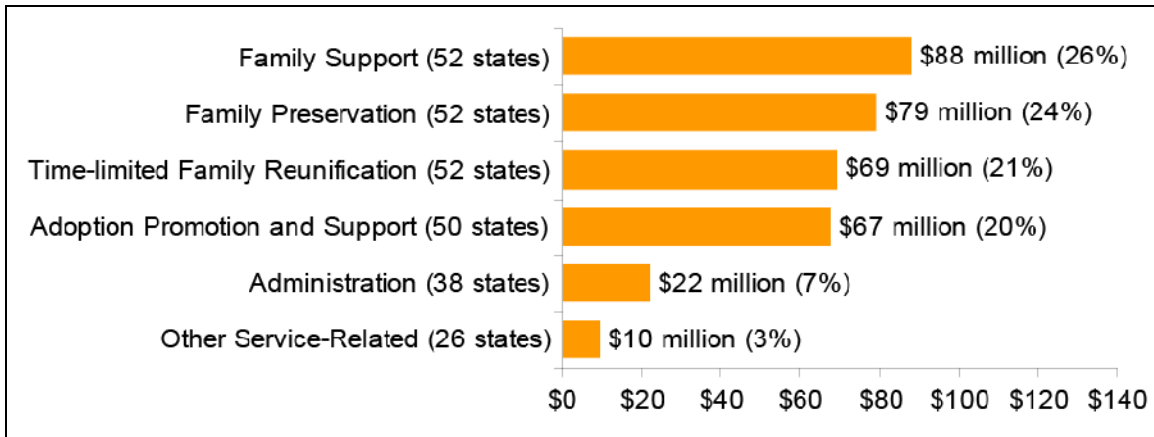
States expected to use 13% fewer FY2010 PSSF dollars for services under each of the family support and family preservation categories than they provided for those services out of federal FY2007 PSSF funds. Funding provided under the PSSF program for adoption promotion and support was expected to decline by about 8% and funding for time-limited family reunification services was expected to remain virtually unchanged.

For FY2010, states also reported that they planned to spend greater sums of PSSF funds on program administration. However, it is not clear whether this simply represents more states reserving the right to spend up to 10% of program funding on this purpose (as it permitted under the statute) or whether states will actually spend greater amounts of their FY2010 PSSF funds for program administration (see **Figure 4**, below).

(For final spending of federal PSSF funds for FY2007 and planned spending of federal PSSF funds for FY2010, by state and service category, see **Table D-3** and **Table D-4** in **Appendix D**.)

Figure 4. Planned Spending of FY2010 Federal PSSF Child and Family Services Funds by Kind of Service or Activity

Total federal funds expected: \$336 million; 52 jurisdictions (50 states, District of Columbia, and Puerto Rico)



Source: Figure prepared by the Congressional Research Service (CRS) based on state planned spending of federal PSSF funding as reported by each state in its CFS-101, Part I (prepared 2009).

Notes: For state-specific information, including notes regarding how data were interpreted for certain states, see **Table D-2** in **Appendix D**.

PSSF State Plan Requirements

As is true with the CWS program, federal law stipulates a series of plan requirements under the PSSF program. States are required to assure that the safety of children will be their “paramount concern” in administering and conducting services under the PSSF program.³⁷ Apart from this broad child-protection related assurance, the PSSF state plan requirements focus in large part on how states are to plan for child and family services, including establishing goals and measuring progress toward those goals, coordinating services, and reporting on services provided. Additional PSSF state plan requirements stipulate fiscal and program administration-related rules.

Planning for Child and Family Services and Reporting on Services and Spending

The statute requires each state to establish a five-year plan for services provided under the PSSF plan. This five-year plan must include goals to be achieved via provision of these services and the measures that will be used to assess progress toward these goals. In the interim years, states must annually provide an assessment of their progress toward the goals—making any necessary adjustments. At the end of the five-year period, they must develop a final report assessing what the plan achieved. Further, as part of that final report—and after consulting with appropriate public and nonprofit private agencies and community-based organizations—states are to develop a new set of goals (for a new five-year plan).³⁸

Each state is required by statute to provide to HHS its five-year plan, annual updates of the plan, and a final progress review of the five-year plan.³⁹ As part of this reporting, states are also

³⁷ Section 432(a)(9).

³⁸ Section 432(a)(2) and (5).

³⁹ The final review of progress on the five-year plan must be made available to the public as well. Section (continued...)

required in the law to provide to HHS on an annual basis a description of child and family services (by service category) that will be provided under the PSSF program, including the geographic areas and populations to be served. In addition, they must provide to HHS annual data showing planned expenditures for child and family services by the child welfare agency; the funds they actually spent under the Title IV-B programs (CWS and PSSF); and who was served.⁴⁰ Each state must also provide in its PSSF state plan that it will participate in any evaluations that HHS may require and that it will furnish such reports, containing such information, as HHS may require.

HHS implemented the initial planning and reporting provisions under this part of the law via regulations issued in November 1996. Those regulations established requirements related to the five-year Child and Family Services Plan (CFSP) and the Annual Progress and Services Review (APSR).⁴¹ In implementing this provision, HHS sought to encourage states to plan across programs and to reduce the number of required, discrete child welfare-related plan submissions. Accordingly, the five-year CFSP and its annual update (the APSR) are to incorporate required information and assurances for states seeking funds under the PSSF program, the CWS program (discussed earlier in this report), and several other child welfare programs.⁴² The final regulations have in some aspects been superseded by changes in the law, not all of which have been reflected in changes to the regulation. However, HHS annually issues guidance to states (via a “program instruction”) on complying with the planning and reporting requirements.⁴³

Coordination and Administration

To the extent feasible and appropriate, states must provide for coordination of PSSF-funded services with services or benefits provided under any other federal (or federally assisted) program that serves the same populations. Additionally, the PSSF program must be administered by the same state agency that administers the CWS program.⁴⁴

Majority of Funds to Be Spent for Services and Other Fiscal Requirements

Each state must assure in its PSSF state plan that no more than 10% of program funds (federal and non-federal) will be spent for program administration and, as noted above, that “significant portions” of the remaining funds will be spent on community-based family support services,

(...continued)

432(a)(2)(C)(ii).

⁴⁰ Separately, the statute, as amended by P.L. 109-288, requires HHS to compile these state reports on annual planned and final spending, including information about those served, and to send those compiled reports to the House Committee on Ways and Means and the Senate Committee on Finance.

⁴¹ Final regulations at 45 C.F.R. 1357.10, 1357.15, and 1357.16. See *Federal Register*, November 18, 1996, p. 58655; and amendments at *Federal Register*, November 23, 2001, p. 58677.

⁴² The additional child welfare programs for which plan requirements or assurances must be incorporated are Child Abuse Prevention and Treatment Act (CAPTA) State Grants under Section 106 of CAPTA; the Chafee Foster Care Independence Program (CFCIP) (Section 477); and Chafee Education and Training Vouchers (Section 477(i)).

⁴³ The most recent request for a new five-year plan was issued in June 2009 (requesting plans covering FY2010-FY2014), available at http://www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2009/pi0906.htm, and the most recent guidance on an annual update to the plan was issued April 28, 2011, and is available at http://www.acf.hhs.gov/programs/cb/laws_policies/policy/pi/2011/pi1106.htm.

⁴⁴ Section 432(a)(1) and (3).

family preservation services, time-limited family reunification services, and adoption promotion and support services.⁴⁵ There is not a statutory definition of administrative costs for the PSSF program. However, as implemented by HHS (via regulation) administrative costs *do not include* planning for services, delivery of services, consultation, training, quality assurance measures, data collection, evaluation, and supervision.⁴⁶

Finally, a state must include in its PSSF plan assurances that funds provided under the program will not be used to supplant federal or non-federal funds for services that existed prior to establishment of the program (i.e., those that existed in state fiscal year 1992) and states are required to document compliance with this rule.⁴⁷ Finally, each state is required to provide for any methods of program administration found necessary by HHS to allow proper and efficient administration of the plan.

PSSF Funding Authorization and Appropriation

Total PSSF program funding was authorized at \$545 million annually for FY2007-FY2010 and was increased to \$565 million for FY2011 (by P.L. 111-242). Of the FY2011 authorization, \$365 million is authorized on a mandatory basis (capped entitlement to states) and \$200 million is discretionary. Both mandatory and discretionary PSSF funding authorization expires with FY2011.

From FY1994—the first year the program was funded—through FY2001, federal law provided for regular increases in the mandatory funding authorized. Accordingly, total PSSF program funding rose from \$60 million in FY1994 to roughly \$404 million in FY2003. Amendments made by the Promoting Safe and Stable Families Amendments of 2001 (P.L. 107-133) authorized additional *discretionary* funding for the PSSF program but maintained the program’s previous level of mandatory funding. Subsequently, as part of the Deficit Reduction Act of 2005 (P.L. 109-171), Congress increased the mandatory funding authorized for the program (by \$40 million annually) and the program received funding of \$434 million in each of FY2006 and FY2007. Cuts to the amount of discretionary funding provided for the PSSF program, however, reduced its annual funding level to roughly \$408 million for each of FY2008-FY2010. Most recently, for FY2011, Congress again raised the mandatory funding authorized for the program (P.L. 111-242) and PSSF funding rose to \$428 million. (All numbers cited are nominal dollars, which means they are not adjusted for inflation.)

The two most recent increases in mandatory funding provided to the PSSF program have been accompanied by legislation that directed these new funds to specific purposes other than PSSF formula grants to states for provision of child and family services. The \$40 million increase provided initially in FY2006 was directed to support specific “targeted purposes” (discussed below) and the \$20 million in additional mandatory funding authorized for FY2011 was reserved for the Court Improvement Program. (**Table D-1** in **Appendix D** shows the complete funding history of the PSSF program, including funding by purpose.)

⁴⁵ Section 432(b)(4),(6) and (7); and Section 434(d).

⁴⁶ 45 CFR 1357.32(h).

⁴⁷ 45 CFR 1357.32(f) specifies that for purposes of meeting this non-supplant requirement, the applicable “base” year is state fiscal year 1992.

Reservation of Funds for Additional Purposes

Set-asides from the PSSF appropriation for purposes other than state or territorial support of child and family services have been a part of the program from its creation. The program enacted in 1993 (renamed PSSF in 1997) required reservation of funds for (1) the Court Improvement Program (CIP); (2) tribal child and family services; and (3) program-related evaluation, research, and technical assistance. Funding reservations for those purposes are now in effect for any year in which Congress appropriates PSSF funds. In addition, the Child and Family Services Improvement Act (P.L. 109-288), required—for a limited time period (FY2007-FY2011)—that a combined total of \$40 million in PSSF funds be set aside for two additional “targeted” purposes: supporting monthly caseworker visits of children in foster care and addressing child welfare concerns raised by parent or caretaker abuse of methamphetamine or other substances.⁴⁸ (**Table D-2** in **Appendix D** shows requirements for reservations of funds that are included in the statute. Use of these reserved PSSF funds is discussed in greater detail at the end of this report.)

PSSF Funding in FY2011 by General Purpose

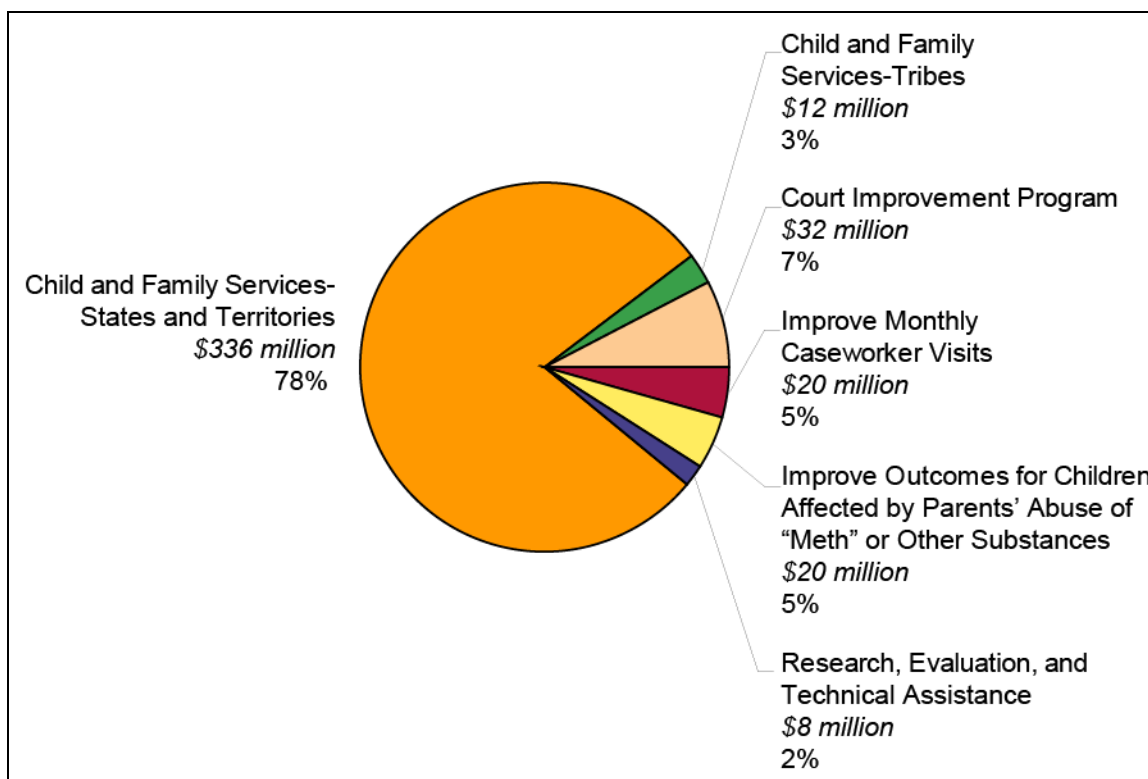
Of the \$428 million in federal PSSF funding provided for FY2011, 81% (\$348 million) is to be distributed, by formula, to states, territories, or tribes for the provision of services to children and families. The remaining funds are for distribution as follows: more than 7% (\$32 million) for the Court Improvement Program; a little less than 5% (\$20 million) for formula grants to states to improve monthly caseworker visits; a little less than 5% (\$20 million) for competitive grants to regional partnerships to improve outcomes for children affected by parental or caretaker abuse of methamphetamine or other substances; and less than 2% for program-related research, evaluation, and technical assistance activities.

Figure 5, below, shows total federal funding for PSSF by purpose for FY2011.

⁴⁸ In addition, P.L. 109-288 provided (as part of freestanding language that did not amend the Social Security Act) that \$40 million in FY2006 PSSF funds (made available in late FY2006) would remain available for expenditure through FY2009, but only for expenditures related to improving frequency and content of monthly caseworker visits.

Figure 5. FY2011 Funding for the PSSF Program by Purpose

Total FY2011 program funding = \$428 million



Source: Figure prepared by the Congressional Research Service (CRS). Funding by purpose is based on statutory language (included in Sections 436 and 437) specifying reservation of certain amounts for given purposes.

Allocation of PSSF Child and Family Services Funds

After reservation of funds for other purposes—including \$11.6 million for tribal child and family services—there were \$336.4 million in FY2011 PSSF funds available for formula grants to states and territories for the provision of child and family services. As in every other year, HHS must annually allocate those PSSF funds as follows: each state (plus the District of Columbia) is entitled to an allotment of those funds based on its relative share of children receiving benefits under the Supplemental Nutrition Assistance Program (SNAP); each territory (American Samoa, Guam, Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands) is entitled to an allotment based on the formula that is used under the CWS program (described above). To receive their full allotment amounts, states must provide \$1 in program funding for every \$3 in federal funds provided and they may not spend more than 10% of total program funds (federal and non-federal) for program administration.

For FY2010, the median amount of federal PSSF funding provided to each of the 50 states and the District of Columbia per individual under age 21 in that state (excluding tribal individuals under age 21) was \$3.68 and ranged from a low of \$1.73 in Utah to a high of \$6.49 in Missouri. When all funds distributed within a state (either to state or tribal governments) were counted, the

median annual funding per individual under age 21 (including those in tribal populations) was \$3.85 and ranged from a low of \$1.75 in Utah to a high of \$8.45 in Oklahoma.⁴⁹ (Table D-5 in Appendix D shows federal allotments under this program, by state, including funding by individual under 21 and by poor child under age 18.)

Tribal Receipt of PSSF Funding

Funding for tribal child and family services is reserved from the overall PSSF appropriation before allocation of those funds to states and territories for child and family services. The statute provides that 3% of most mandatory PSSF funding be reserved for tribal grants in addition to 3% of any discretionary funds provided for the program.⁵⁰ For FY2010, the tribal set-aside was \$11.0 million. (This amount rose to \$11.6 million for FY2011 because of the increase in mandatory funding authorized for the PSSF program.) Tribes, tribal organizations, or tribal consortia that seek PSSF funding must submit a plan to HHS for approval. In general, they must meet the same state plan requirements under the PSSF program that states are required to meet. However, a tribal entity may be exempted from the requirements that (1) no less than 90% of the funds be spent on provision of services, and (2) that “significant” portions of funding will be devoted to each of the four named service categories if, “taking into account the resources, needs, and other circumstances of the Indian tribe or tribal consortium,” HHS considers these requirements inappropriate.⁵¹

HHS is required to make an allotment to each tribe or tribal consortium based on that tribal entity’s relative share of children among all tribal entities with an approved PSSF plan.⁵² However, HHS may not approve a plan of a tribal entity if, based on this distribution formula, the PSSF funds available to the tribal entity would be less than \$10,000.⁵³

For FY2010, HHS awarded PSSF funds to 121 tribal entities in 24 states.⁵⁴ The median funding to a tribal entity under the PSSF program was \$38,111. Tribal entities received just under \$20 for each individual under age 21 in their population. The largest single tribal grant, \$1.7 million, was made to the Navajo Nation, which has an under-age-21 population of some 85,500 (in three states: Arizona, New Mexico, and Utah). Two tribal entities received the minimum \$10,000 grant; both entities had tribal under-age-21 populations of between 450 and 500.⁵⁵

⁴⁹ CRS calculations based on final PSSF allotments to states and territories for FY2010 as received from HHS, ACF, OLAB in December 2010 and final FY2010 PSSF allotments to tribes as provided in HHS, ACF, ACYF-CB-PI-04, issued April 4, 2011 (including tribal under-age-21 population estimates); and state under-age-21 population estimates for 2009 as provided by the American Community Survey.

⁵⁰ The 3% is applied to the mandatory funding total after reserving \$40 million of those funds for targeted purposes, but before any other set-asides are applied.

⁵¹ Section 432(b)(2)(A).

⁵² For purposes of distributing tribal PSSF funds, HHS has interpreted “children” to mean individuals under the age of 21. This allows it to use the same tribal population data for the PSSF program as is used in the CWS program.

⁵³ Section 432(b)(2)(B).

⁵⁴ Two of those tribal entities received grants in one state, but they also had small tribal under-age-21 populations in an additional two states that were counted as part of the allocation process and could be served with those funds.

⁵⁵ CRS calculations based on information provided in HHS, ACF, ACYF-CB-PI-04, issued April 4, 2011, PSSF allotment amount by tribal and tribal under-age-21 population estimates.

Other Programs or Activities for Which PSSF Funds Must Be Reserved

Support for child and family services provided, or funded, by states, tribes, and territories is the primary purpose for which PSSF funds are appropriated and spent. However, federal law also requires that certain PSSF funds be reserved and used for additional programs or activities. These include grants to state highest courts under the Court Improvement Program; grants for two targeted purposes (to improve outcomes for children affected by their parents' abuse of methamphetamine or other substances and to support monthly caseworker visits of children in foster care); and research, evaluation, and technical assistance related to programs and purposes supported by the PSSF program. Each of these programs or activities is described below.

Court Improvement Program (CIP)

The Court Improvement Program (CIP, Section 438 of the Social Security Act) entitles eligible state highest courts to receive grants for three separate purposes:⁵⁶

- Grants to assess and improve handling of child abuse and neglect cases, referred to as “basic” grants;
- Grants to train judges and legal personnel and attorneys in handling of child welfare cases, referred to as “training” grants; and
- Grants to improve the timeliness of court decisions regarding the safety, permanence, and well-being of children (through collection and analysis of relevant data), referred to as data grants.

Eligibility for CIP Grants

To be eligible for any CIP grant, a highest court must be located in a state (or other jurisdiction) that operates a Title IV-E Foster Care and Permanency program and it must have a rule in effect requiring courts in that state (or jurisdiction) to ensure that foster parents, pre-adoptive parents, and relative caregivers of a child in foster care are notified of any proceedings to be held with respect to the child.⁵⁷ The highest courts in each of the 50 states, the District of Columbia, and Puerto Rico currently participate in the CIP.⁵⁸

⁵⁶ For legislative history and related programs, see CRS Report RL33350, *Child Welfare: The Court Improvement Program*, by Emilie Stoltzfus.

⁵⁷ Section 438(b)(1) as amended by the Safe and Timely Interstate Placement Act of 2006 (P.L. 109-239).

⁵⁸ Before FY2010, tribes were not eligible to directly operate a Title IV-E program and tribal highest courts do not now participate in the CIP. However, the definition provided for “state” in Section 431(4) includes tribes and tribal organizations. Therefore, any tribe or tribal organization that receives approval to operate a Title IV-E plan should be eligible to participate in CIP. The Administration has called for a tribal court improvement program as part of its PSSF reauthorization proposal but does not stipulate if it would limit this to tribes with an approved Title IV-E plan. See HHS, ACF, *Justifications of Estimates for Appropriations Committees*, p. 366

Application Requirements

States must meet separate application requirements for each kind of CIP grant. Most states apply for and receive funds under all three CIP grants. However, in recent years a small number of states have occasionally applied for fewer than all three of the grants.⁵⁹

In an application for any of the three CIP grant programs, eligible state highest courts must demonstrate “meaningful and ongoing collaboration” between the courts, the state child welfare agency,⁶⁰ and Indian tribes (where applicable). Additionally, they must supply any additional information or assurances that HHS might require.

Further, in any application for a CIP data grant, a state highest court must include a description of how it and the child welfare agencies (on the local and state levels) jointly plan for the collection and sharing of all relevant data and information. Separately, in an application for a CIP training grant, a state highest court must demonstrate that at least part of the grant will be used for cross-training initiatives jointly planned and carried out with the state child welfare agency (or an agency under contract with the state agency).

Formula and Entitlement

Each state highest court with an approved CIP application is entitled to receive a minimum grant of \$85,000 and a portion of any of the remaining set-aside funds that is equal to the share of individuals under 21 years of age in its state (compared to all states with an approved application for the grant). This same formula applies to each of the three CIP grants. Thus, if a state highest court successfully applies for all three grants, it receives three minimum allotments of \$85,000 (a total of \$255,000) and a share of the remaining funds for each CIP grant based on the size of its state’s population under 21 years of age. State highest courts must provide \$1 in program funding for every \$3 in federal funding provided under the CIP. (**Table E-2** in **Appendix E** shows funding by kind of CIP grant and by state highest courts for FY2009 and FY2010).

Federal Funding for CIP

The 1993 legislation (P.L. 103-66) that created what is now known as the PSSF program required that, beginning with FY1995, some of that larger program’s annual funding be reserved to provide grants for state highest courts to assess their handling of child welfare proceedings.⁶¹ This funding set-aside represented the total funding for the sole CIP grant (“basic” grant) authorized for each of FY1995-FY2005.

⁵⁹ According to HHS, South Carolina’s highest court did not apply for a basic grant for each of FY2008 through FY2011; Massachusetts did not apply for a data grant in FY2008, but had done so in each succeeding fiscal year; Maryland did not apply for a data grant in FY2010, but has done so for FY2011; Wisconsin did not apply for a data grant in either of FY2010 or FY2011; and Hawaii did not apply for a data grant in FY2011.

⁶⁰ Alternatively, the collaboration may be required with “any other agency under contract with the state child welfare agency to administer child welfare programs authorized under the Social Security Act.”

⁶¹ The original Court Improvement Program authorization was provided as an independent piece of law within the Omnibus Budget Reconciliation Act of 1993 (P.L. 103-66). The Promoting Safe and Stable Families Amendments of 2001 (P.L. 107-133) moved that independent program authorization into the Social Security Act (by creating a new Section 438).

With the Deficit Reduction Act of 2005 (DRA, P.L. 109-171), however, Congress authorized two additional CIP grants related to training and data collection. It also appropriated additional funding (\$20 million for each of FY2006-FY2010) for those new CIP grants. So for each of FY2006 through FY2010, the overall CIP program (three grants) received funding that was reserved from the PSSF program *plus* the additional funds provided in the DRA. FY2010 is the last year for which funding for CIP was provided under the DRA.

Most recently, the Continuing Appropriations Act, FY2011 (P.L. 111-242) increased total mandatory funding authorized for the PSSF program by \$20 million and further provided that all of that increase be added to the existing Court Improvement Program set-aside. This returned all CIP funding to the PSSF program. As of FY2011, the CIP set-aside from the PSSF program is \$30 million (out of mandatory PSSF funding authorized) and 3.3% of any discretionary appropriations provided for the PSSF. (**Table E-1** in **Appendix E** shows total funds authorized to be set aside for the CIP under the PSSF, as well as all federal funds appropriated for the program, regardless of source, from FY1995, the first year of program funding, through FY2011.)

Targeted Purposes Funded with PSSF Dollars

The Child and Family Services Improvement Act of 2008 (P.L. 109-288) authorized two new set-asides of PSSF program funds for the following “targeted purposes:”

- Improving monthly caseworker visits with children in foster care; and
- Improving the well-being and other outcomes of children in, or at risk of entering, foster care due to abuse of methamphetamine or other substances by their parents or caretakers.

Funding to improve monthly caseworker visits has been provided, via formula grant, to states and territories. Funding to improve outcomes for children affected by parental substance abuse was provided via competitive grants to “regional partnerships” (described below). Combined funding totaled \$40 million (out of mandatory funds) for each of FY2006-FY2011. Those funds were divided, in statute, as shown in **Table 3**.

Table 3. Mandatory PSSF Funding for Targeted Purposes

Funding is currently reserved for these purposes through FY2011

Fiscal Year	Grants to Improve Monthly Caseworker Visits with Children in Foster Care	Grants to Improve Outcomes of Children Affected by Parental Abuse of Methamphetamine or Other Substances
2006	\$40 million	\$0
2007	\$0	\$40 million
2008	\$5 million	\$35 million
2009	\$10 million	\$30 million
2010	\$20 million	\$20 million
2011	\$20 million	\$20 million

Source: Table prepared by the Congressional Research Service (CRS).

Grants to Regional Partnerships to Improve Outcomes for Children Affected by Parental Substance Abuse

In a nationally representative study, caseworkers investigating allegations of abuse or neglect noted active drug abuse by 37% of the primary caregivers from whom children were removed to out-of-home care and active alcohol abuse among 29% of the primary caregivers from whom children were removed.⁶² The percentage of children who *remain* in care due to issues related to substance abuse is believed to be even larger because, among other reasons, accessing and successfully completing treatment services is often time consuming and children may not be able to safely return to their homes until treatment is successfully completed.⁶³ After holding a hearing that focused on the particular strains on child welfare agencies brought about by parental abuse of methamphetamine, the Senate Finance Committee reported legislation titled the Improving Outcomes for Children Affected by Meth Act of 2006.⁶⁴ Grants proposed in that legislation ultimately became one of the targeted purposes for which PSSF funding was provided by the Child and Family Services Improvement Act (P.L. 109-288).

As enacted, the 2006 law reserved \$145 million in mandatory PSSF funds across five years (FY2007-FY2011) to support competitive grants to “regional partnerships” for services and activities designed to improve the safety, permanency, and well-being of children who are in an out-of-home placement or are at risk of such placement because of a parent’s or caretaker’s abuse of methamphetamine or another substance. All of this funding is a set aside from mandatory funding provided for the PSSF program.

Funding Awarded to 53 Regional Partnerships Operating in 29 States

HHS awarded this funding to 53 regional partnerships operating in 29 states (including six tribal areas). Those states are Alaska, Arizona, California, Colorado, Florida, Georgia, Idaho, Illinois, Iowa, Kansas, Kentucky, Massachusetts, Minnesota, Missouri, Montana, Nebraska, Nevada, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, Rhode Island, Tennessee, Texas, Vermont, Washington, and Wisconsin. Most grantees did not plan a statewide program but instead identified a county, counties, or a region that they intended to serve. A slight majority of the counties served by the grantees (54%) are rural.⁶⁵ (**Table F-1 in Appendix F** lists the grantees by state, project type, and funding level.)

As required by the statute, each of these regional partnerships was established by a collaborative agreement between two or more public or private entities. The vast majority (96%) of the regional partnerships included more than the minimum of two partners. Public child welfare agencies

⁶² U.S. Department of Health and Human Services (HHS), National Survey of Child and Adolescent Well-Being, CPS Sample Component, Wave 1 [fielded 1999-2000] Data Analysis, April 2005, pp. 4-9 – 4-10.

⁶³ U.S. Department of Health and Human Services (HHS), *Targeted Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Methamphetamine or Other Substance Abuse: First Annual Report to Congress*, sent to Congress May 2010, pp. 1-2. (Hereafter cited as HHS, *Targeted Grants: First Annual Report*, May 2010.)

⁶⁴ See S.Rept. 109-269 to accompany S. 3525, which notes that the Senate Finance Committee held hearings related to child welfare in the spring of 2006, including one entitled “The Social and Economic Effects of the Methamphetamine Epidemic on America’s Child Welfare System,” April 25, 2006.

⁶⁵ HHS, *Targeted Grants: First Annual Report*, May 2010. With one exception, all of the states listed are identified by the location of the lead agency. The grantee operating in New Mexico is not headquartered in that state.

(state, county, or tribal) were involved in each of the partnerships⁶⁶ and, together with some private child welfare service providers, served as the designated lead agency in close to half (45%) of the regional partnerships. Public (state, county, or tribal) substance abuse prevention and treatment agencies, together with private substance abuse treatment providers, headed 23% of the regional partnerships and, additionally, were members of a majority of the partnerships. Other partnership members who participated in nearly half, or more, of the 53 partnerships included courts or judges (involved as members or as lead agencies in 59% of the partnerships) and mental health services providers (involved as members or as lead agencies in 49% of the partnerships). Agencies or service providers participating in roughly a third or fewer partnerships include public state and county mental health agencies, public or private providers of education, housing assistance, employment services or other child and family services; local law enforcement agencies or other criminal justice entities; and university-based program evaluators, among others.⁶⁷

Activities Funded

Grantees focused on a range of strategies to improve outcomes for children (and their families) who are affected by parental abuse of methamphetamine and other substances. Among these were enhancements to or creation of court-based drug treatment programs; increasing timely access to treatment services, including residential treatment and home-based services; strengthening and expanding available services to families with substance abuse concerns or establishing new continuums of care for these families; and improving service integration and knowledge skills and collaboration across practice areas. (See examples of key activities in **Table 4**, below.)

Populations Served

Nearly all of the grantees included a response to methamphetamine abuse in their planned activities but very few limited their focus *solely* to addressing effects of methamphetamine abuse. Instead, many responded to substance abuse needs broadly, including both drug and alcohol abuse.⁶⁸

The majority of regional partnerships (73%) targeted their services and activities on children and families who remained together in their own homes, as well as children who had been removed to foster care (and their families); 21% focused *exclusively* on children who remained living in their own homes (and their families); and 6% focused exclusively on children in out-of-home care (and their families).⁶⁹

⁶⁶ The statute required that a state or tribal child welfare agency be involved in each partnership. HHS interpreted the law to permit county agencies to meet the requirement for state agency involvement.

⁶⁷ HHS, *Targeted Grants: First Annual Report*, May 2010.

⁶⁸ In making the awards, the law required HHS to give additional weight to applications from regional partnerships showing the negative effect of methamphetamine abuse and addiction on the child welfare system in the partnership region.

⁶⁹ HHS, *Targeted Grants: First Annual Report*, May 2010.

Table 4. Key Program Activities of Regional Partnerships, Selected Examples
Compiled by HHS

Systems Collaboration and Improvements	<p>89% are emphasizing cross-systems training on child welfare and substance abuse issues</p> <p>59% are implementing cross-system information sharing and data collection improvements</p> <p>40% are developing new and/or expanding existing Family Treatment Drug Courts</p>
Substance Abuse Treatment Linkages and Services	<p>77% are providing coordinated case management or integrated case planning</p> <p>74% are engaged in specific strategies to increase access to treatment</p> <p>72% are focused on improved substance abuse screening and assessment</p> <p>62% are providing mental health/psychiatric services</p> <p>55% are providing wraparound and in-home screening and assessment</p> <p>51% are implementing specialized engagement and outreach</p> <p>51% are focused on providing intensive outpatient services</p> <p>36% are concentrating on residential treatment</p>
Services for Children and Youth	<p>68% are providing developmental screenings, assessments, and services</p> <p>57% are focused on early intervention and prevention activities</p> <p>55% are providing children’s mental health services and counseling</p> <p>40% are providing additional therapeutic services and interventions (e.g., trauma-focused cognitive behavioral therapy, therapeutic child care)</p>
Support Services for Parents and Families	<p>87% are ensuring families receive other essential clinical and community ancillary services (e.g., housing assistance, child care, transportation)</p> <p>83% are providing parenting skills training and education</p> <p>59% are implementing a specific family strengthening program or curriculum</p> <p>57% are providing family counseling</p> <p>77% are providing enhanced continuing care and recovery support</p> <p>38% are using drug testing to help monitor treatment plan compliance</p>
Expanded Capacity to Provide Treatment and Services to Families	<p>62% are expanding the array of services provided to parents, children, and families</p> <p>60% are focused on increasing the number of child welfare clients served</p> <p>28% are improving services for culturally diverse families</p>

Source: HHS, ACF, ACYF, Children’s Bureau, “Targeted Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Methamphetamine or Other Substance Abuse: First Annual Report to Congress” (sent to Congress May 2010), p. v.

Amount of Funding to Grantees

Funding to these regional partnerships was awarded under four program options based on statutory requirements for the amount and duration of funding.⁷⁰ Most grantees planned to receive federal funds over five years (44 grantees), with the initial federal funds provided under this grant in September 2007 and final federal funds expected in September 2011. The majority of these

⁷⁰ P.L. 109-288 provided the minimum and maximum duration of these grants (no less than two years nor more than five years) and their size (no less than \$500,000 nor more than \$1 million annually).

five-year grantees planned to receive a fixed federal award of \$500,000 for each of those five years (\$2.500 million to each of 35 grantees), while nine of the five-year grantees received a declining amount in each year of the grant, with federal funding beginning at \$1 million and declining to \$500,000 over five years (total award of \$3.742 million to each of these grantees).

A total of nine grantees elected to receive funds over three years (final funds were expected in September 2009).⁷¹ These grantees received a total of \$1.500 million (six grantees) or \$1.675 million (three grantees), depending on the program option they selected in their application.

Finally, and again as stipulated in statute, each regional partnership was required to provide no less than 15% in non-federal matching funds in the first and second year of the award; 20% in any third or fourth year; and 25% in the fourth or fifth year.

Measuring Outcomes and Reporting

Grantees are required to submit semi-annual reports to HHS on their activities and program performance.⁷² Based on these reports, HHS in turn is required to annually report to Congress on the services and activities provided with grant funds; program performance indicators (which the statute required HHS, in consultation with other relevant entities, to develop);⁷³ and progress made in achieving the goals of the grant program. The first annual report on the grant program was made available in May 2010 and covers the implementation of the program and its first six months of operation.⁷⁴

⁷¹ CRS assumes this is the time frame of the final funding based on description of these program options provided by HHS.

⁷² The statute requires grantees to make these reports at least annually but HHS requires them semi-annually.

⁷³ After consulting with other relevant groups, and with help of a technical assistance contractor, HHS developed a set of data outcomes specific to this grant program. Each of the 53 grantees is required to report on one or more of 23 program indicators related to child and youth outcomes and service access; adult outcomes and service access; family or relationship outcomes; and regional partnership collaboration and service capacity.

⁷⁴ The report is available online at http://www.acf.hhs.gov/programs/cb/pubs/targeted_grants/targeted_grants.pdf.

Grants to Improve Monthly Case Worker Visits of Children in Foster Care

Federal reviews of state performance in providing child welfare services have demonstrated that frequent and adequate caseworker visits were associated with timely achievement of permanence for children in care, as well as more positive outcomes related to ensuring children's safety and meeting the educational, physical, and mental health needs of children.⁷⁵

The Child and Family Services Improvement Act of 2006 (P.L. 109-288) committed \$95 million in mandatory PSSF funding to strengthen and improve the frequency of caseworker visits of children in foster care. Each state and territory was allotted annual funds for this purpose through FY2011. States were directed to place "primary emphasis on activities designed to improve caseworker retention, recruitment, training, and ability to access the benefits of technology."⁷⁶ The 2006 law also required states to develop standards related to the frequency and quality of caseworker visits with children in foster care. Each state was further required to report to HHS on the percentage of children in its foster care caseload who were visited on a monthly basis (and the percentage of those visits that occurred where the child lives). Finally, the law required each state, in consultation with HHS, to outline specific steps (including target percentages to be reached) to ensure that no later than the first day of FY2012 at least 90% of the children in foster care receive a monthly visit from their caseworker, and that most of these visits occur where the child lives. States that fail to meet these target percentages are subject to reduced federal financial participation in the CWS program.⁷⁷ (For allotment amounts by state, see **Table G-1** in **Appendix G**.)

Children Visited Monthly

For FY2007—the first year for which these data were reported—only one state was able to report that more than 90% of the children in its foster care caseload had been visited on a monthly basis. Most states (31, or 60%) reported that less than half of the children in their foster care caseloads had been visited on at least a monthly basis. Data reported by states for FY2009 (the most recent available) show that nearly every state has improved the percentage of children visited on a monthly basis, but that most states still have not met the 90% standard. For FY2009, five states were able to report that 90% or more of the children in their foster care caseloads were visited on a monthly basis and only 15 reported that less than half of the children in their care were visited on a monthly basis.⁷⁸ Across these years, most states did report that the majority of the monthly visits that occurred took place where the child lived.

⁷⁵ HHS, ACF,ACYF, Children's Bureau, "Report to Congress on Monthly Caseworker Visits with Children in Foster Care," received January 2011. (Hereinafter, "HHS Report on Monthly Caseworker Visits.") See also, National Conference of State Legislators, *Child Welfare Caseworker Visits with Children and Parents*, September 2006, <http://www.ncsl.org/Portals/1/documents/cyf/caseworkervisits.pdf>.

⁷⁶ Section 436(a)(4)(B).

⁷⁷ Although the funding for this grant program is provided as a set-aside of PSSF funds and its basic purpose is explained in the PSSF statute, the requirements related to development of standards for frequency and quality of caseworker visits, reporting related data, as well as penalties for failure to make the required level of change were included as amendments to the CWS program.

⁷⁸ The law stipulates that a state is subject to reduced federal financial participation in the CWS program if it fails to meet established monthly caseworker visit targets. Eleven jurisdictions failed to meet their target percentages in FY2009 (although most of these showed improvement between FY2008 and FY2009). These jurisdictions were (continued...)

Table 5. Frequency of Caseworker Visits with Children in Foster Care

Data as reported by states.

Percentage of Children in Foster Care Who Received a Caseworker Visit on at Least a Monthly Basis	FY2007	FY2008	FY2009
less than 25%	15 states	8 states	4 states
25% but less than 50%	16 states	21 states	11 states
50% but less than 75%	16 states	16 states	19 states
75% but less than 90%	4 states	4 states	13 states
90% or more	1 state	3 states	5 states

Source: Table prepared by the Congressional Research Service (CRS) based on data included in HHS, ACF, ACYF, Children’s Bureau, “Report to Congress on Monthly Caseworker Visits with Children in Foster Care,” (received January 2011) for FY2007 and FY2009 and, as included in online Child Welfare Outcomes database, for FY2009.

Notes: For state-by-state data on frequency of caseworker visits, see **Table G-2** in **Appendix G**.

Content of Caseworker Visits As of 2006

Even before the 2006 enactment of a federal requirement for monthly caseworker visits of children in foster care, most states had policies in place that were consistent with this standard; however, less than half were able to produce reports showing how frequently children were actually visited. In further reviewing state standards for the content of caseworker visits that were in place prior to the 2006 enactment of federal requirements for such standards, HHS noted that all states require that the majority of caseworker visits occur in the home of the child and that the majority of states required that any child who is verbal have an opportunity to speak with a caseworker privately during a visit. States also encouraged caseworkers to make impromptu visits to children in care, particularly those in new placement settings and to increase the frequency of visits based on specific needs of a child and family.⁷⁹

Further, in describing the content of caseworker visits, the large majority of states mentioned ensuring a child’s safety and well-being and discussing issues pertinent to case planning and achieving permanency goals. HHS also notes that the majority of states mentioned addressing the child’s educational needs as well as his or her physical, emotional, and behavioral health. Finally,

(...continued)

required to provide a greater portion of non-federal funds to receive their full FY2010 allotment of CWS funds. As stipulated in the law these penalties reduced federal financial participation for the CWS program from the regular 75% to the following percentages—74% for the six states that failed to meet their target percentage by less than 10 percentage points (Arizona, Connecticut, Minnesota, Mississippi, Oregon, and Rhode Island); 72% for the two states that failed to meet their target percentage by between 10 and 20 percentage points (Arkansas and Massachusetts); and 70% for the three jurisdictions that failed to meet their target percentage by 20 percentage points or more (Maryland, Puerto Rico, and Vermont)

⁷⁹ HHS Report on Monthly Caseworker Visits.

some states required that additional content areas be addressed with youth who are emancipating from care, including transition plans, and permanent connections to adults.⁸⁰

Efforts to Improve Frequency and Content of Caseworker Visits

When states provided the initial data on the frequency of caseworker visits to children in foster care, the “overwhelming majority” of states raised concerns about documentation of those visits. As a result, states have worked to improve practice in this area. For most states, this meant making changes to their child welfare information management systems to aid collection of these data. Some states reported establishing remote and wireless connectivity to these information systems and/or purchasing laptops to allow caseworkers to input data while in the field. Others expanded data fields to allow workers to more accurately describe their visits with children in foster care. Additionally, many states provided training to staff on proper data entry related to caseworker visits.⁸¹

As part of working to align state policy with the new federal requirements, states also established working groups to review challenges and address barriers to adequate visits. Among the strategies employed by certain states were retention incentives for caseworkers; training on visitation policies and State Automated Child Welfare Information System (SACWIS) enhancements for easier data collection and more accurate data reporting (Kansas); permitting caseworkers to establish alternative work schedules and to use overtime to meet the caseworker visit requirements (District of Columbia and West Virginia); developing a chart that specified required frequency of contact and who was responsible for that contact (Delaware and Georgia); enhanced supervisory training and supports (Mississippi); and implementing a one family/one worker policy to improve continuity of service and foster trust and engagement between caseworker and family.⁸²

Research, Evaluation, and Technical Assistance Funding

HHS is required to annually reserve some PSSF funds to support evaluation of service programs funded through PSSF, and any other program designed to achieve the same purposes as the program. Further, to the extent funds are available for this purpose, HHS is specifically required to provide technical assistance to help states and Indian tribes or tribal consortia to (1) better identify and serve at-risk families in ways that improve outcomes for those families; and (2) ensure that the individual needs of adoptive families are met and that fewer adoption placements are ended (for example, because of a disruption in the plan to finalize the adoption or a dissolution of an already-finalized adoption).⁸³

The total annual set-aside authorized for this purpose is \$6 million in mandatory PSSF funds plus 3.3% of any discretionary funds appropriated for the program. In recent years, the research set-aside has totaled about \$8 million annually.

⁸⁰ Ibid.

⁸¹ Ibid.

⁸² Ibid.

⁸³ For each of FY2007 through FY2011, Congress further directed HHS to use a part of this set-aside to fund research, evaluation, and technical assistance specific to the targeted purposes for which PSSF funding is provided.

Use of Funds

In recent years, this funding has been used primarily to support the Children's Bureau training and technical assistance network. The network consists of 13 resource centers; five quality improvement centers; five regional policy implementation centers; and seven information, training, and technical assistance centers. Most of these are funded solely by the Children's Bureau, although some operate with interagency support. The work of individual members of the network varies by topic and/or purpose and by the scope of work defined in their contract or cooperative agreement.⁸⁴

Entities or projects that receive a portion of their funding from this PSSF set-aside include five of the national resource centers (the National Resource Center on Organizational Improvement; the National Resource Center on Legal and Judicial Issues; the National Resource Center on Permanency and Family Connections; the National Resource Center on Youth Development; and the National Resource Center on Substance Abuse and Child Welfare) and one information clearinghouse (the Child Welfare Information Gateway). In addition, the funds have supported evaluation and coordination of work done by the regional implementation centers. Further, and separate from this training and technical assistance network, the PSSF research set-aside has been used to fund some discretionary grant projects, including demonstration grants supporting and evaluating collaborations between and TANF and child welfare agencies to improve child welfare outcomes.⁸⁵

Report to Congress

HHS is required to report to Congress every two years on the effectiveness of the PSSF programs. The report is to discuss any technical assistance provided and, with regard to program evaluations, include funding level, status of any ongoing evaluations, and findings to date. As of the end of May 2011, the most recent report had been submitted to Congress in March 2008 (and covered activities funded in FY2005 and FY2006).

⁸⁴ For an overview of this network and to read about their specific work, see *Children's Bureau Training and Technical Assistance Network* (2010), and links to each of the supported entities and projects at <http://www.acf.hhs.gov/programs/cb/tta/>.

⁸⁵ CRS communication with HHS, Office of Assistant Secretary of Legislation.

Appendix A. Services or Activities that May Be Supported Under Title IV-B

Table A-1. Description of Selected Categories of Services Used for Reporting Expenditures Under Title IV-B

CWS funds may be spent in any of the categories shown in the table. Categories specific to the PSSF programs are indicated with an * after their names. Not all categories are discrete, thus states may vary in what category they choose to report a given service provided.

Category	Aim	Target Population(s)	Kinds of Services or Activities
<p>PREVENTION AND SUPPORT SERVICES* (Family Support)^a</p>	<p>Promote the safety and well-being of children and families.</p> <p>Increase the strength and stability of families (including adoptive, foster, and extended families).</p> <p>Increase parents' competence and confidence in their parenting abilities.</p> <p>Afford children a safe, stable, and supportive family environment.</p> <p>Enhance child development.</p>	<p>Any family with children.</p>	<p>Community-based services that include</p> <ul style="list-style-type: none"> • respite care for parents and other caregivers; • early developmental screening of children to assess the needs of these children and assistance in obtaining specific services to meet their needs; • mentoring, tutoring, and health education for youth; • a range of center-based activities (informal interactions in drop-in centers, parent support groups); • services designed to increase parenting skills; and • counseling and home visiting.
<p>PROTECTIVE SERVICES</p>	<p>Prevent or remedy the abuse, neglect, or exploitation of children.</p>	<p>Families for whom an investigation of child abuse or neglect is found necessary.</p> <p>Children in foster care and their families.</p>	<p>Services include</p> <ul style="list-style-type: none"> • investigation and emergency medical services; • emergency shelter; • legal action; • developing case plans; • counseling; • assessment/evaluation of family circumstances; • arranging alternative living arrangements; • preparing for foster care placement, if needed; and • case management and referral to service providers.

Category	Aim	Target Population(s)	Kinds of Services or Activities
<p>CRISIS INTERVENTION* (Family Preservation)^b</p>	<p>Prevent the unnecessary removal of children from their families.</p> <p>Help children in foster care—as appropriate—to be reunited with families from which they have been removed or to be placed for adoption or legal guardianship.</p>	<p>Biological, extended, and adoptive families with children who are at risk of being placed in foster care.</p> <p>Children in foster care and their families.</p>	<p>Pre-placement prevention includes</p> <ul style="list-style-type: none"> • intensive family preservation services; • post-adoptive support services; • case management; • counseling; • day care; • respite services; • homemaker services; • services designed to increase parenting skills with respect to family budgeting, coping with stress, and health and nutrition. <p>Reunification services include</p> <ul style="list-style-type: none"> • day care; • homemaker or caretaker services; • family or individual counseling for parent(s) and child; • follow-up care for families to whom a child has been returned after placement; and • other reunification services the state identifies as necessary.
<p>TIME-LIMITED FAMILY REUNIFICATION SERVICES*</p>	<p>Permit timely reunification of children removed from their homes.</p>	<p>Children in foster care for no more than 17 months^c and their parents or primary caregivers.</p>	<p>Services include</p> <ul style="list-style-type: none"> • individual, group, and family counseling; • inpatient, residential, or outpatient substance abuse treatment services; • mental health services; • assistance to address domestic violence; • temporary child care and therapeutic services for families, including crisis nurseries; and • transportation to or from any of these services and activities.

Category	Aim	Target Population(s)	Kinds of Services or Activities
ADOPTION PROMOTION AND SUPPORT*	Encourage more adoptions out of the foster care system, when such adoptions promote the best interests of children.	Children in foster care; prospective adoptive parents; adoptive parents and their adopted children.	<p>Services include</p> <ul style="list-style-type: none"> • pre- and post-adoptive services; • activities to expedite the adoption process; and • activities to support adoptive families.
FOSTER CARE MAINTENANCE PAYMENTS (States are restricted in the amount of CWS funds they may use for this purpose.)	Provide income for support of children and youth in foster care.	Children in foster care.	<p>Payments to cover cost of the following items, including the cost of providing them</p> <ul style="list-style-type: none"> • food, clothing, shelter, and daily supervision; • school supplies; • a child's personal incidentals; • liability insurance with respect to a child; • reasonable travel to allow the child to remain in school where he or she was enrolled at time of placement; and • reasonable travel to allow visits to the child's home. <p>For children in group or institutional placement settings, "reasonable costs of administration of the institution or group home" is also included.</p>
ADOPTION SUBSIDY PAYMENTS (States are restricted in the amount of CWS funds they may use for this purpose.)	Enable adoptions for children who have special needs. ^d	Children who have special needs (primarily, children who are adopted from foster care).	<p>One-time payment to adoptive parents to cover non-recurring costs of finalizing an adoption.</p> <p>Recurring payments to adoptive parents to assist in the support of children with special needs.</p>
FOSTER or ADOPTIVE PARENTS TRAINING and RECRUITMENT ^e	Increase number and quality of foster and adoptive homes available.	Prospective foster and adoptive parents and individuals who are already foster or adoptive parents.	Cost of activities related to recruiting potential foster or adoptive parents and costs of providing short-term training to increase ability of foster or adoptive parents to provide assistance and support to foster and adoptive children.
STAFF and EXTERNAL PARTNER TRAINING	Increase ability of staff and external partners to provide assistance to children and families.	Public agency staff and other individuals working with the public agency.	Cost of short- and long-term training to increase the ability of staff, and external partner to provide assistance and support to children and families.

Category	Aim	Target Population(s)	Kinds of Services or Activities
OTHER SERVICE-RELATED ACTIVITIES*	Improved planning, coordination, and delivery of services to children and families.	Not applicable.	Activities include <ul style="list-style-type: none"> • planning; • services coordination; • preparation for or follow-up to service delivery (e.g., recording progress notes); and • other activities supporting delivery of services under the program (but excluding direct services or administration).
ADMINISTRATIVE COSTS* ^f	Administer program	Not applicable	Under both CWS and PSSF, includes procurement, payroll processing, personnel functions, management, maintenance and operation of space and property, data processing and computer services, accounting, budgeting, and auditing. Under CWS, also includes travel expenses, <i>except that it excludes</i> travel expenses related to provision of services by caseworkers or the oversight of CWS funded programs. Further, the reference to “personnel functions” <i>excludes</i> costs related to provision of services by caseworkers or the oversight of programs funded under the CWS. ^f Under PSSF, also includes indirect costs allocable in accordance with the agency’s approved cost allocation plan. ^f

Source: Table prepared by the Congressional Research Service (CRS) based on U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF), ACYF-CB-PI-11-06, issued April 28, 2011, Attachment B, CFS-101, Part II: “Annual Estimated Expenditure Summary of Child and Family Services Instructions.” These appear largely identical to instructions issued in June 2009, which was the guidance available to states when they filled out planned expenditures discussed in the report.

Note: Other categories described in the guidance but not described in this table are Guardianship Assistance Payments, Independent Living Services, and Education and Training Vouchers.

- a. Although not explicitly stated in the guidance, states are also permitted to spend “family support” funds “to strengthen parental relationships and promote healthy marriages.” See Section 431(2), which provides a statutory definition of “family support services “ for purposes of the PSSF program.
- b. “Family preservation services” are defined in statute for purposes of the PSSF program (Section 431(1)). The statutory definition does not divide services by pre-placement and reunification, but this is the way in which they are presented in guidance to states. In addition to those given in the guidance, and shown in the table above, the statutory definition includes “child development” as one of the topics related to parenting skills training (Section 431(1)(E)). Finally, although this is not shown in the guidance (or in the table above), the statute permits states to spend funds under this category for “infant safe haven programs to provide a way for a parent to safely relinquish a newborn infant at a safe haven designated pursuant to a State law” (Section 431(1)(F)).
- c. Seventeen months is a *maximum* time frame; for some children the time frame may be as short as 15 months. Section 431(7) stipulates that these services may be made “during the 15-month period that begins on the date a child is considered to have entered foster care pursuant to Section 475(5)(F).” Under Section 475(5)(F) of the law, a child is considered to have entered foster care on the earlier of (1) the date of the first judicial finding that the child has been subjected to child abuse or neglect; or (2) 60 days after the child is removed from his/her home.

- d. “Special needs” in the context of children adopted with public child welfare agency involvement generally means that a state has determined that the child is unlikely to be successfully placed for adoption without provision of adoption subsidy (and medical assistance) and that the child has a factor or condition (e.g., child is older, part of a large sibling group, or has a mental or emotional disability) that makes this the case. States are permitted to define these special needs factors or conditions. See Section 474(3)(c).
- e. Although shown as one category in this table, states are asked to report separately on funds used for training and recruitment of foster parents and funds used for training and recruitment of adoptive parents.
- f. For the statutory definition of CWS administrative costs, see Section 422(c)(1). For the regulatory definition of PSSF administrative costs, see 45 C.F.R. 1357.32(h).

Appendix B. Stephanie Tubbs Jones Child Welfare Services (CWS) Funding: Planned Use of Funds and Allotments

Table B-1. Planned Use of Federal CWS Funding for FY2010 by State and Service Category

Dollars shown in thousands. An empty cell indicates the state reported \$0 dollars spent for the category or that it left that cell blank on the reporting form.

	TOTAL	Protective Services	Family Support	Family Preservation	Time-Limited Reunification	Adoption Promotion and Support	Adoption Subsidy	Foster Care Maintenance Payment	Foster or Adoptive Parent Recruitment and Training	Staff or External Partner Training	Administrative Costs	All Other
Alabama	\$4,829	\$1,766					\$1,400	\$1,201	\$35	\$40	\$387	
Alaska	\$294		\$29	\$235	\$29							
Arizona	\$5,944	\$5,349									\$594	
Arkansas	\$3,154	\$788	\$719	\$473	\$479	\$378				\$317		
California	\$32,523	\$20,343		\$12,180								
Colorado ^a	\$3,650							\$3,500		\$150		
Connecticut	\$2,419	\$48		\$121	\$121	\$48		\$1,984			\$97	
Delaware	\$802	\$564	\$184								\$54	
Dist. of Col.	\$327	\$109	\$109	\$109								
Florida	\$15,348	\$4,365			\$8,926	\$1,654					\$403	
Georgia	\$9,797	\$3,483	\$1,729	\$2,468	\$549			\$1,486		\$82		
Hawaii	\$1,157		\$1,157									
Idaho	\$1,749		\$1,430					\$318				
Illinois	\$11,109			\$11,109								
Indiana	\$6,331	\$3,595							\$835	\$13	\$634	
Iowa ^b	\$2,461	\$192	\$491	\$128	\$207	\$11	\$162	\$1,092	\$15	\$52	\$39	\$72
Kansas	\$2,783		\$423	\$1,825			\$535					
Kentucky	\$4,297	\$2,815						\$1,052			\$430	

	TOTAL	Protective Services	Family Support	Family Preservation	Time-Limited Reunification	Adoption Promotion and Support	Adoption Subsidy	Foster Care Maintenance Payment	Foster or Adoptive Parent Recruitment and Training	Staff or External Partner Training	Administrative Costs	All Other
Louisiana	\$4,727	\$2,067	\$886					\$1,301			\$473	
Maine	\$1,176	\$212	\$50			\$296			\$200	\$100	\$118	\$200
Maryland	\$4,303	\$1,549			\$2,754							
Massachusetts	\$4,182	\$3,772									\$410	
Michigan	\$9,117	\$35	\$2,607	\$1,326		\$2,831		\$2,169			\$149	
Minnesota	\$4,301	\$2,454	\$318	\$850				\$256			\$423	
Mississippi	\$3,522	\$1,372					\$422	\$424	\$141	\$809	\$352	
Missouri	\$5,660	\$0	\$3,113	\$2,094							\$453	
Montana	\$713	\$713										
Nebraska	\$1,752	\$197	\$197					\$1,183			\$175	
Nevada	\$2,399		\$540	\$540	\$540	\$540					\$240	
New Hampshire	\$1,076	\$20	\$100	\$45	\$95	\$125		\$425				\$266
New Jersey	\$5,772	\$2,373	\$2,373				\$449				\$577	
New Mexico	\$1,664	\$439	\$91	\$295	\$8	\$129		\$455	\$42	\$20	\$166	\$19
New York	\$14,344	\$13,344	\$1,000									
North Carolina	\$8,878	\$1,343			\$3,509	\$214	\$1,590		\$399	\$1,094	\$682	\$47
North Dakota	\$570			\$218							\$57	\$295
Ohio ^c	\$10,678	\$6,035					\$10	\$225	\$3,340		\$1,068	
Oklahoma	\$1,762	\$359				\$487	\$400	\$340			\$176	
Oregon	\$3,335	\$1,000		\$1,001					\$1,001		\$333	
Pennsylvania	\$10,495		\$356	\$293		\$568	\$2,773	\$5,456			\$1,050	
Puerto Rico	\$4,931		\$2,465	\$740	\$740	\$247					\$493	\$247
Rhode Island	\$954		\$247	\$242		\$405					\$15	\$45

	TOTAL	Protective Services	Family Support	Family Preservation	Time-Limited Reunification	Adoption Promotion and Support	Adoption Subsidy	Foster Care Maintenance Payment	Foster or Adoptive Parent Recruitment and Training	Staff or External Partner Training	Administrative Costs	All Other
South Carolina	\$4,604	\$588	\$206	\$588	\$1,177	\$89		\$951		\$251	\$460	\$294
South Dakota ^d	\$569	\$123				\$126	\$203	\$61			\$51	
Tennessee	\$5,920		\$2,712	\$2,616							\$592	
Texas	\$25,294	\$18,596	\$806	\$122	\$3,231					\$386	\$0	\$2,154
Utah	\$3,495	\$981	\$208	\$18	\$1,876	\$62				\$350		
Vermont	\$590	\$590										
Virginia	\$6,412	\$5,771									\$641	
Washington	\$5,468	\$2,734	\$1,641	\$1,094								
West Virginia	\$1,823	\$1,640									\$182	
Wisconsin ^e	\$4,920	\$1,150	\$736	\$1,769	\$1,036						\$229	
Wyoming	\$467			\$25				\$270	\$100	\$25	\$47	
TOTAL	\$274,847	\$112,876	\$26,923	\$42,522	\$25,277	\$8,210	\$7,945	\$24,150	\$6,109	\$4,952	\$12,251	\$3,638

Source: Table prepared by the Congressional Research Service (CRS) based on state data included on CFS-101, Part II (prepared by states 2009; gathered and sent to Congress by HHS, July 2010) .

Note: Data are as reported by states. However, some were difficult to read or contained apparent inconsistencies. CRS attempted to reconcile the state's overall expected spending of FY2010 dollars, given on CFS-101, Part I with the state's total estimated spending shown on Part II of that form. Further, it sought to reconcile the sum of a state's estimated spending by category with its total reported estimated spending for the program. The table notes below indicate some assumptions made in state where this proved especially difficult. However, data in additional states were difficult to read and the numbers (as translated by CRS) should be understood as approximate.

- a. Colorado requested \$4.019 million in FY2010 funding for the CWS program on its CFS-101, Part I. However, data included in Part II of that form, and as included in the table above, only indicated how the state intended to spend \$3.650 million. (The state did indicate "unk" under the spending category for "guardianship payments" on Part II of its CFS-101 form.) Further, the "total" estimated spending under CWS was listed as "\$150,000." CRS assumed this to be an error. For the table above, it excluded that "total" and instead summed the larger subtotals the state reported.
- b. Iowa requested \$2.955 million in FY2010 funding for the CWS program on its CFS-101, Part I. However, data included in Part II of that form indicated how the state intended to spend "246,125" in funds. This was interpreted by CRS as a number reported in the tens. (Thus, total funds allocated by spending category would be \$2.461 million, as shown in the table above.) However, all the other columns of data reported by Iowa, and as shown in Part II of the form, appear to report information in thousands.

- c. Ohio indicates on its CFS-101, Part II that estimated spending included in the “Protective Services” column includes funding the state intends to spend for family support services.
- d. In Part I of its CFS-101 form, South Dakota requested about \$604,000 in FY2010 funding for the CWS program, of which it indicated roughly 10% would be spent on program administration. However, data included in Part II of that form reported total estimated spending of \$564,000, indicated how the state intended to spend only \$513,000, and did not show any funds in the administrative costs. CRS assumed 10% in administrative costs (\$51,000), which then brought the state’s total estimated federal spending under the program to \$564,000.
- e. Wisconsin requested \$4.923 million in FY2010 funding for the CWS program on its CFS-101, Part I; this is also the total estimated amount of spending it reported for this program in the total column in Part II of the form. The number shown above is slightly less (\$3,000), however, because this was the sum of estimated spending reported by category (and as read by CRS). As with many other states, some of these data were blurry and difficult to read, however, and this could explain the slight difference.

**Table B-2. FY2010 Funding Under the CWS Program,
by State and per Certain Individuals**

Total funding to state, tribes, and territories = \$281,744, 000

STATE	Allotment Amounts (dollars in thousands)			Funding per Individual under Age 21		Funding per Poor Child (States and Tribes) ^a
	States Only	Tribes Only ^b	States and Tribes ^c	States Only ^d	States and Tribes ^e	
Alabama	\$4,716	\$6	\$4,722	\$3.55	\$3.55	\$17.18
Alaska	\$242	\$459	\$702	\$1.42	\$3.25	\$30.35
Arizona	\$5,997	\$858	\$6,855	\$3.15	\$3.45	\$17.22
Arkansas	\$3,070	\$0	\$3,070	\$3.70	\$3.70	\$16.23
California	\$32,880	\$33	\$32,913	\$2.98	\$2.98	\$17.82
Colorado	\$4,136	\$0	\$4,136	\$2.88	\$2.88	\$19.65
Connecticut	\$2,254	\$0	\$2,254	\$2.33	\$2.33	\$23.27
Delaware	\$809	\$0	\$809	\$3.30	\$3.30	\$24.15
District of Columbia	\$351	\$0	\$351	\$2.39	\$2.39	\$10.60
Florida	\$15,160	\$0	\$15,160	\$3.18	\$3.18	\$17.80
Georgia	\$9,777	\$0	\$9,777	\$3.25	\$3.25	\$17.20
Hawaii	\$1,152	\$0	\$1,152	\$3.39	\$3.39	\$29.36
Idaho	\$1,727	\$31	\$1,758	\$3.55	\$3.60	\$23.44
Illinois	\$11,232	\$0	\$11,232	\$3.00	\$3.00	\$18.99
Indiana	\$6,253	\$2	\$6,255	\$3.33	\$3.33	\$20.11
Iowa	\$2,921	\$0	\$2,921	\$3.41	\$3.41	\$26.69
Kansas	\$2,760	\$11	\$2,771	\$3.31	\$3.32	\$22.83
Kentucky	\$4,212	\$0	\$4,212	\$3.54	\$3.54	\$16.49
Louisiana	\$4,711	\$13	\$4,724	\$3.56	\$3.57	\$17.62
Maine	\$1,145	\$17	\$1,162	\$3.54	\$3.57	\$25.71
Maryland	\$4,396	\$0	\$4,396	\$2.76	\$2.76	\$28.54
Massachusetts	\$4,423	\$3	\$4,426	\$2.54	\$2.55	\$23.84
Michigan	\$8,910	\$184	\$9,094	\$3.21	\$3.25	\$17.49
Minnesota	\$4,326	\$91	\$4,417	\$2.92	\$2.97	\$25.39
Mississippi	\$3,416	\$45	\$3,461	\$3.79	\$3.82	\$14.88
Missouri	\$5,564	\$11	\$5,575	\$3.30	\$3.31	\$19.16
Montana	\$693	\$304	\$997	\$2.93	\$3.79	\$21.48
Nebraska	\$1,731	\$45	\$1,776	\$3.25	\$3.31	\$26.77
Nevada	\$2,425	\$2	\$2,427	\$3.13	\$3.14	\$20.61
New Hampshire	\$1,078	\$0	\$1,078	\$3.08	\$3.08	\$35.23
New Jersey	\$6,049	\$0	\$6,049	\$2.55	\$2.55	\$22.18
New Mexico	\$1,601	\$598	\$2,199	\$2.95	\$3.68	\$17.17
New York	\$14,764	\$0	\$14,764	\$2.80	\$2.80	\$17.00
North Carolina	\$8,877	\$49	\$8,926	\$3.31	\$3.32	\$17.68
North Dakota	\$550	\$129	\$678	\$3.23	\$3.74	\$37.38
Ohio	\$10,529	\$0	\$10,529	\$3.29	\$3.29	\$18.02

STATE	Allotment Amounts (dollars in thousands)			Funding per Individual under Age 21		Funding per Poor Child (States and Tribes) ^a
	States Only	Tribes Only ^b	States and Tribes ^c	States Only ^d	States and Tribes ^e	
Oklahoma	\$1,496	\$2,284	\$3,779	\$1.73	\$3.50	\$18.84
Oregon	\$3,301	\$84	\$3,385	\$3.24	\$3.30	\$20.60
Pennsylvania	\$10,428	\$0	\$10,428	\$3.12	\$3.12	\$22.35
Rhode Island	\$943	\$10	\$953	\$3.36	\$3.38	\$25.25
South Carolina	\$4,523	\$11	\$4,534	\$3.53	\$3.53	\$17.48
South Dakota	\$501	\$357	\$858	\$2.44	\$3.61	\$24.18
Tennessee	\$5,855	\$0	\$5,855	\$3.36	\$3.36	\$16.74
Texas	\$25,427	\$19	\$25,446	\$3.19	\$3.19	\$15.32
Utah	\$3,528	\$52	\$3,580	\$3.53	\$3.56	\$34.10
Vermont	\$580	\$0	\$580	\$3.66	\$3.66	\$35.19
Virginia	\$6,490	\$0	\$6,490	\$2.95	\$2.95	\$25.65
Washington	\$5,354	\$120	\$5,474	\$2.94	\$2.98	\$21.82
West Virginia	\$1,748	\$0	\$1,748	\$3.79	\$3.79	\$19.73
Wisconsin	\$4,882	\$167	\$5,049	\$3.14	\$3.22	\$23.55
Wyoming	\$476	\$63	\$539	\$3.16	\$3.44	\$33.73
TOTAL	\$270,371	\$6,059	\$276,429			
MEDIAN				\$3.21	\$3.31	\$20.61
AVERAGE				\$3.12	\$3.27	\$20.16
American Samoa	\$178					
Guam	\$305					
Northern Marianas	\$149					
Puerto Rico	\$4,467					
Virgin Islands	\$216					
Territories subtotal	\$5,315					

Source: Table prepared by the Congressional Research Service (CRS). Final allotment amounts by state and territory as provided by HHS, ACF, ACYF, OLAB to CRS in December 2010. Funding to tribes (by state) is as indicated in HHS, ACF, ACYF-CB-PI-11-04, issued March 23, 2011.

- a. Number equals funding to state and tribal entity in the state divided by number of poor children (those under the age of 18) in the state, based on CRS analysis of 2009 American Community Survey data.
- b. Funding amount represents all funding distributed to a tribal entity and tied to the tribal entity's population in that state. If a tribe had an under-age-21 population living in more than one state, then funds to that tribe, as shown in this table, would be divided among those states based on that population size in each state. A \$0 indicates there was no tribal population in the state for which CWS funds were provided. For grant amounts by individual tribal entity, see HHS, ACF, ACYF-CB-PI-11-04, issued March 23, 2011.
- c. Represents all funds distributed in the state (based on under-age-21 population in the state) whether the funds were allocated to a state government or to a tribal government or entity.
- d. Numbers in this column represent funding to the state only, divided by the under-age 21-population in the state (based on U.S. Census Bureau, Population Estimates Program, Table T8 – 2009) minus the under-age-21 tribal population in that state (based on HHS, ACF, ACYF-CB-PI-11-04).
- e. Numbers in this column represent funding to state and tribal entities in the state divided by total under-age-21 population in the state (based on U.S. Census Bureau, Population Estimates Program, Table T8 – 2009).

Appendix C. Title IV-B Funding to States, Tribes, and Territories for Child and Family Services

Table C-1. Title IV-B Funding for Services in Nominal Dollars, FY1990-FY2011

Dollars in millions; NA = Not Authorized

Fiscal Year	Stephanie Tubbs Jones Child Welfare Services (Subpart 1) <i>all funds^a</i>	Promoting Safe and Stable Families (Subpart 2) <i>service funds only^b</i>	TOTAL
1990	\$253	NA	\$253
1991	\$274	NA	\$274
1992	\$274	NA	\$274
1993	\$295	NA	\$295
1994	\$295	\$58	\$353
1995	\$292	\$139	\$431
1996	\$277	\$209	\$486
1997	\$292	\$224	\$516
1998	\$292	\$239	\$531
1999	\$292	\$259	\$551
2000	\$292	\$279	\$571
2001	\$292	\$289	\$581
2002	\$292	\$354	\$646
2003	\$290	\$382	\$672
2004	\$289	\$382	\$671
2005	\$290	\$381	\$671
2006	\$287	\$372	\$659
2007	\$287	\$372	\$659
2008	\$282	\$348	\$630
2009	\$282	\$348	\$630
2010	\$282	\$348	\$630
2011	\$281	\$348	\$629

Source: Table prepared by the Congressional Research Service (CRS).

- a. Funding shown for the Stephanie Tubbs Jones Child Welfare Services Program includes the program's full appropriation amount that is distributed to a single public child welfare agency in each eligible state, territory, or tribe.
- b. Funding shown for the Promoting Safe and Stable Families Program *includes only the funds appropriated under that program that were distributed to states, territories, or tribes for support of one or more of the four service categories that are the primary purpose of the program.* This excludes funding appropriated under this program and reserved for (1) state highest courts via the Court Improvement Program; (2) HHS to support Research, Evaluation, Training and Technical Assistance; (3) grants to regional partnerships to improve the outcomes of children affected by parental substance abuse; and (4) grants to states and territories for monthly caseworker visits.

Table C-2. Title IV-B Funding for Services in Constant (FY2010) Dollars

Dollars in millions; NA = Not Authorized

Fiscal Year	Stephanie Tubbs Jones Child Welfare Services (Subpart 1) <i>all funds^a</i>	Promoting Safe and Stable Families (Subpart 2) <i>service funds only^b</i>	TOTAL
1990	\$427	NA	\$427
1991	\$440	NA	\$440
1992	\$428	NA	\$428
1993	\$446	NA	\$446
1994	\$435	\$86	\$521
1995	\$419	\$200	\$619
1996	\$387	\$292	\$679
1997	\$397	\$305	\$702
1998	\$391	\$320	\$711
1999	\$383	\$340	\$724
2000	\$372	\$355	\$727
2001	\$360	\$356	\$716
2002	\$355	\$431	\$785
2003	\$344	\$453	\$798
2004	\$336	\$443	\$779
2005	\$325	\$428	\$753
2006	\$311	\$403	\$714
2007	\$304	\$394	\$698
2008	\$286	\$353	\$638
2009	\$286	\$354	\$640
2010	\$282	\$348	\$630
2011	\$277	\$343	\$619

Source: Table prepared by the Congressional Research Service (CRS). Dollars were adjusted for inflation using the CPI-U for FY1990-FY2010. The FY2011 sum is calculated using the Congressional Budget Office (CBO) assumption of 1.6% annual inflation.

- a. Inflation-adjusted funding amount shown for the Stephanie Tubbs Jones Child Welfare Services Program includes the program's full appropriation amount that is distributed to a single public child welfare agency in each eligible state, territory, or tribe.
- b. Inflation-adjusted funding shown for the Promoting Safe and Stable Families Program *includes only the funds appropriated under that program that were distributed to a single public child welfare agency in each eligible state, territory, or tribal entity for support of one or more of the four service categories that are the primary purpose of the program.* This excludes funding appropriated under the PSSF program and reserved for (1) state highest courts via the Court Improvement Program; (2) HHS to support Research, Evaluation, Training and Technical Assistance; (3) grants to regional partnerships to improve the outcomes of children affected by parental substance abuse; and (4) grants to states and territories for monthly caseworker visits.

Appendix D. Promoting Safe and Stable Families Program (PSSF): Funding History, Funding Reservations, Use of Funds, and Allotments

Table D-1. Funding for the Promoting Safe and Stable Families Program

Nominal dollars in millions; NA = Not Authorized

Fiscal Year	TOTAL Approp.	Appropriation by Kind of Authority ^a		Funding Provided by Entity and Purpose ^b					
				State Highest Courts ^c	HHS	Regional Partnerships	States and Territories	Indian Tribes	States and Territories
		Mandatory	Discretionary	Court Improvement	Research & Evaluation	"Meth" Grants	Caseworker Visits	Child and Family Services	
1994	\$60.0	\$60.0	NA	NA	\$2.0	NA	NA	\$0.6	\$57.4
1995	150.0	150.0	NA	\$5.0	6.0	NA	NA	1.5	137.5
1996	225.0	225.0	NA	10.0	6.0	NA	NA	2.3	206.8
1997	240.0	240.0	NA	10.0	6.0	NA	NA	2.4	221.6
1998	255.0	255.0	NA	10.0	6.0	NA	NA	2.6	236.5
1999	275.0	275.0	NA	10.0	6.0	NA	NA	2.8	256.3
2000	295.0	295.0	NA	10.0	6.0	NA	NA	3.0	276.1
2001	305.0	305.0	NA	10.0	6.0	NA	NA	3.1	286.0
2002	375.0	305.0	70.0	12.3	8.3	NA	NA	4.4	349.9
2003	404.4	305.0	99.4	13.3	9.3	NA	NA	5.0	376.8
2004	404.4	305.0	99.4	13.3	9.3	NA	NA	5.0	376.8
2005	403.6	305.0	98.6	13.3	9.3	NA	NA	5.0	376.1
2006	434.0	345.0	89.0	12.9	8.9	NA	\$40.0	4.8	367.3
2007	434.1	345.0	89.1	12.9	8.9	\$40.0	0.0	11.8	372.2
2008	408.3	345.0	63.3	12.1	8.1	35.0	5.0	11.0	337.1
2009	408.3	345.0	63.3	12.1	8.1	30.0	10.0	11.0	337.1
2010	408.3	345.0	63.3	12.1	8.1	20.0	20.0	11.0	337.1
2011	428.2	365.0	63.2	32.1	8.1	20.0	20.0	11.6	336.4

Source: Table prepared by the Congressional Research Service (CRS).

- a. The amount of funding provided under mandatory authority is the same as the mandatory authorization provided in statute for each of the given years. Annual discretionary funding authority of \$200 million has been included in the act for every year beginning with FY2002. Mandatory and discretionary funding authority expire with FY2011.
- b. The amount of funding provided for each purpose was calculated by CRS based on total appropriation made in a given fiscal year and the statutory language regarding reservation of funds for that fiscal year.
- c. Funding shown in this column reflects *only* those dollars reserved for the Court Improvement Program (CIP) out of the PSSF program. For each of FY2006-FY2010, the Deficit Reduction Act of 2005 (P.L. 109-171) appropriated an additional \$20 million for CIP. See **Table E-1**, in **Appendix E**, for total CIP funding in each year.

Table D-2. PSSF Annual Funding Authorization and Distribution, FY2011

All sums rounded to nearest million; columns may not sum to final total because of rounding

Entity Receiving Funds	Purpose (Permanent set-aside authority or expiration)	Mandatory Funds Authorized	Discretionary Funds Authorized	Total Funds Authorized (for FY2011)	Total Funds Appropriated (FY2011)
HHS	Program-related training, technical assistance, and evaluation (permanent)	\$6 million	3.3% of any discretionary funds provided	\$13 million	\$8 million
State highest courts	Court Improvement Program (CIP) (permanent)	\$30 million	3.3% of any discretionary funds provided	\$37 million	\$32 million
States and territories	Grants to improve monthly caseworker visits (FY2011)	\$20 million	No discretionary funds reserved	\$20 million	\$20 million
Regional Partnerships	Grants to improve the well-being of children in, or at risk of entering, foster care because of parent /caretaker methamphetamine abuse or abuse of another substance (FY2011)	\$20 million	No discretionary funds reserved	\$20 million	\$20 million
Tribal entities	Child and family services (permanent)	3.0% of all mandatory funds except those for regional partnerships and monthly caseworker visits. ^a	3.0% of any discretionary funds provided	\$16 million	\$12 million
States and territories	Child and family services	Remaining funds	Remaining funds	\$460 million	\$336 million
TOTAL	All purposes	\$365 million	\$200 million	\$565 million	\$428 million

Source: Table prepared by Congressional Research Service (CRS) based on statutory requirements for reservation of PSSF funds included in Sections 436 and 437 of the Social Security Act and funding provided for FY2011 by P.L. 112-10.

- a. The statute provides that the 3% set-aside of mandatory funds for tribes must happen after the reservation of funds for targeted purposes but before all other PSSF reservations of mandatory funds. For FY2011, the amount of mandatory PSSF funding to be reserved for tribes is \$9.75 million. That amount is \$600,000 above the amount of mandatory PSSF funds HHS was required to reserve for tribes in FY2010. The increase in the tribal set-aside is due to the \$20 million increase provided for the overall program authorization (all of which is reserved for the Court Improvement Program).

Table D-3. State Use of Federal PSSF Child and Family Services Funding for FY2007 by Service Category

Dollars shown in thousands. An empty cell indicates the state reported \$0 dollars spent for the category or that it left that cell blank on the reporting form.

STATE	TOTAL	Family Support		Family Preservation		Time-Limited Family Reunification		Adoption Promotion and Support		Other Service-Related		Administrative Costs	
Alabama ^a	\$7,549	\$2,645	35%	\$2,216	29%	\$2,114	28%	\$575	8%				
Alaska	\$801	\$174	22%	\$249	31%	\$160	20%	\$170	21%			\$48	6%
Arizona	\$8,472	\$1,974	23%	\$2,371	28%	\$1,700	20%	\$1,260	15%	\$606	7%	\$561	7%
Arkansas ^b	\$5,029	\$1,487	30%	\$2,023	40%	\$787	16%	\$230	5%			\$503	10%
California	\$37,397	\$11,765	31%	\$9,131	24%	\$6,875	18%	\$8,234	22%	\$1,392	4%		
Colorado	\$2,696	\$631	23%	\$631	23%	\$631	23%	\$631	23%	\$39	1%	\$132	5%
Connecticut	\$2,561	\$640	25%	\$512	20%	\$640	25%	\$538	21%	\$154	6%	\$77	3%
Delaware	\$854	\$171	20%	\$171	20%	\$171	20%	\$311	36%	\$23	3%	\$6	1%
District of Columbia	\$1,141	\$342	30%	\$228	20%	\$228	20%	\$228	20%			\$114	10%
Florida	\$16,058	\$4,093	25%	\$3,928	24%	\$3,383	21%	\$4,271	27%			\$384	2%
Georgia	\$12,895	\$2,587	20%	\$2,724	21%	\$3,715	29%	\$2,965	23%	\$793	6%	\$112	1%
Hawaii	\$1,211	\$298	25%	\$333	28%	\$333	27%	\$247	20%				
Idaho	\$1,337	\$330	25%	\$330	25%	\$330	25%	\$330	25%	\$1	0%	\$15	1%
Illinois	\$15,736	\$3,147	20%	\$5,508	35%	\$3,147	20%	\$3,934	25%				
Indiana	\$7,276	\$1,530	21%	\$3,370	46%	\$359	5%	\$460	6%	\$778	11%	\$778	11%
Iowa	\$2,525	\$780	31%	\$2	0%	\$528	21%	\$602	24%	\$452	18%	\$161	6%
Kansas	\$2,395	\$479	20%	\$679	28%	\$759	32%	\$479	20%				
Kentucky ^c	\$6,999	\$1,400	20%	\$1,610	23%	\$1,513	22%	\$2,476	35%				
Louisiana	\$10,492	\$2,336	22%	\$2,336	22%	\$2,336	22%	\$2,336	22%			\$1,149	11%
Maine	\$1,507	\$227	15%	\$262	17%	\$444	29%	\$433	29%	\$84	6%	\$57	4%
Maryland	\$3,973	\$795	20%	\$795	20%	\$795	20%	\$795	20%	\$397	10%	\$397	10%
Massachusetts	\$5,048	\$1,867	37%	\$951	19%	\$425	8%	\$835	17%	\$969	19%		
Michigan	\$13,122	\$5,189	40%	\$4,382	33%	\$1,539	12%	\$1,177	9%			\$835	6%

STATE	TOTAL	Family Support		Family Preservation		Time-Limited Family Reunification		Adoption Promotion and Support		Other Service-Related		Administrative Costs	
Minnesota	\$3,514	\$748	21%	\$748	21%	\$1,390	40%	\$398	11%	\$58	2%	\$171	5%
Mississippi ^d	\$5,232	\$1,453	28%	\$1,453	28%	\$1,163	22%	\$1,163	22%				
Missouri	\$9,504	\$5,417	57%	\$3,516	37%	\$570	6%	\$0	0%				
Montana	\$1,056	\$233	22%	\$233	22%	\$233	22%	\$325	31%			\$30	3%
Nebraska	\$1,649	\$412	25%	\$412	25%	\$330	20%	\$330	20%			\$165	10%
Nevada	\$1,760	\$396	23%	\$396	23%	\$396	23%	\$396	23%			\$176	10%
New Hampshire	\$690	\$141	21%	\$141	21%	\$141	21%	\$141	21%	\$90	13%	\$34	5%
New Jersey	\$5,405	\$1,653	31%	\$1,177	22%	\$1,134	21%	\$1,442	27%				
New Mexico	\$3,511	\$702	20%	\$702	20%	\$702	20%	\$702	20%	\$351	10%	\$351	10%
New York	\$20,525	\$6,565	32%	\$5,574	27%	\$4,105	20%	\$4,281	21%				
North Carolina ^e	\$10,465	\$2,997	29%	\$2,038	19%	\$1,995	19%	\$2,403	23%	\$157	2%	\$875	8%
North Dakota	\$578	\$161	28%	\$221	38%	\$143	25%	\$37	6%			\$16	3%
Ohio	\$13,684	\$2,252	16%	\$4,347	32%	\$2,571	19%	\$3,323	24%			\$1,190	9%
Oklahoma	\$5,731	\$1,059	18%	\$983	17%	\$1,636	29%	\$1,225	21%	\$254	4%	\$573	10%
Oregon ^f	\$6,379	\$1,796	28%	\$1,349	21%	\$1,371	21%	\$1,330	21%			\$532	8%
Pennsylvania	\$12,865	\$5,823	45%	\$1,548	12%	\$1,903	15%	\$2,208	17%	\$457	4%	\$926	7%
Puerto Rico	\$6,927	\$1,385	20%	\$1,385	20%	\$1,385	20%	\$1,385	20%	\$693	10%	\$693	10%
Rhode Island	\$1,149	\$240	21%	\$300	26%	\$348	30%	\$261	23%				0%
South Carolina	\$7,306	\$1,502	21%	\$1,780	24%	\$1,568	21%	\$1,689	23%	\$91	1%	\$676	9%
South Dakota	\$851	\$216	25%	\$238	28%	\$219	26%	\$178	21%				
Tennessee	\$10,505	\$3,398	32%	\$2,295	22%	\$2,220	21%	\$2,592	25%				
Texas	\$37,546	\$11,451	30%	\$8,424	22%	\$7,511	20%	\$8,677	23%			\$1,483	4%
Utah	\$1,919	\$349	18%	\$739	39%	\$215	11%	\$597	31%	\$18	1%		
Vermont	\$502	\$97	19%	\$165	33%	\$97	19%	\$97	19%	\$45	9%		
Virginia	\$6,363	\$2,017	32%	\$1,591	25%	\$1,273	20%	\$1,273	20%			\$210	3%

STATE	TOTAL	Family Support		Family Preservation		Time-Limited Family Reunification		Adoption Promotion and Support		Other Service-Related		Administrative Costs	
Washington	\$5,884	\$1,177	20%	\$1,765	30%	\$1,177	20%	\$1,177	20%			\$588	10%
West Virginia	\$3,177	\$744	23%	\$1,086	34%	\$651	20%	\$660	21%			\$36	1%
Wisconsin	\$5,185	\$1,234	24%	\$1,231	24%	\$1,069	21%	\$1,037	20%	\$355	7%	\$259	5%
Wyoming	\$426	\$166	39%	\$143	34%	\$47	11%	\$47	11%			\$23	5%
TOTAL	\$357,361	\$100,675	28%	\$90,726	25%	\$70,475	20%	\$72,892	20%	\$8,257	2%	\$14,336	4%

Source: Table prepared by the Congressional Research Service (CRS) based on state final spending of FY2007 funds, as included on CFS-101, Part III (prepared by states 2009; gathered by HHS and submitted to Congress July 2010).

Notes: Total spending is based on the sum of a state's reported spending by category. The table notes below indicate notes provided by states as well as some assumptions made by CRS with regard to data from certain states.

- a. Alabama reported that it included some Administrative Costs spending in its Adoption Promotion and Support Services category.
- b. Arkansas reported that it included some spending for Other service-related activities in its Administrative Costs category.
- c. Kentucky reported that it included some spending for Other service-related activities in its Administrative Costs category.
- d. Mississippi reported spending a total of \$581,350 more than the state categorized. The total shown here is the total of Mississippi's categorized spending.
- e. The sum of North Carolina's categorized spending exceeded what it reported as its total spending by \$551,777. Total spending shown here is the sum of the state's categorized spending.
- f. The sum of Oregon's categorized spending exceeded what it reported as its total spending by \$532,000. Total spending shown here is the sum of the state's categorized spending.

Table D-4. Planned Use of Federal PSSF Child and Family Services Funding for FY2010 by State and Service Category

Dollars shown in thousands. An empty cell indicates the state reported \$0 dollars spent for the category or that it left that cell blank on the reporting form.

STATE	Total	Family Support		Family Preservation		Time-Limited Family Reunification		Adoption Promotion and Support		Other Service-Related		Administrative Costs	
Alabama ^a	\$7,108	\$2,132	30%	\$1,777	25%	\$1,777	25%	\$1,422	20%				
Alaska	\$693	\$139	20%	\$208	30%	\$139	20%	\$139	20%			\$69	10%
Arizona	\$7,683	\$1,537	20%	\$1,537	20%	\$1,537	20%	\$1,537	20%	\$768	10%	\$768	10%
Arkansas	\$4,644	\$1,811	39%	\$1,254	27%	\$1,022	22%	\$93	2%			\$464	10%
California	\$33,895	\$10,169	30%	\$6,779	20%	\$6,779	20%	\$6,779	20%			\$3,390	10%
Colorado	\$3,310	\$780	24%	\$780	24%	\$780	24%	\$780	24%	\$127	4%	\$62	2%
Connecticut	\$2,141	\$500	23%	\$480	22%	\$505	24%	\$485	23%	\$171	8%		
Delaware	\$858	\$228	27%	\$182	21%	\$184	21%	\$200	23%	\$49	6%	\$15	2%
District of Columbia	\$1,082	\$433	40%	\$216	20%	\$216	20%	\$216	20%				
Florida	\$14,481	\$3,254	22%	\$3,705	26%	\$3,351	23%	\$3,466	24%	\$100	1%	\$604	4%
Georgia	\$12,447	\$3,361	27%	\$2,489	20%	\$2,614	21%	\$2,489	20%	\$871	7%	\$622	5%
Hawaii	\$966	\$243	25%	\$193	20%	\$337	35%	\$193	20%				
Idaho	\$1,217	\$245	20%	\$451	37%	\$267	22%	\$244	20%			\$11	1%
Illinois ^b	\$15,191	\$3,342	22%	\$4,861	32%	\$3,494	23%	\$3,494	23%				
Indiana	\$7,101	\$1,420	20%	\$2,485	35%	\$355	5%	\$1,420	20%	\$710	10%	\$710	10%
Iowa	\$2,650	\$731	28%	\$50	2%	\$530	20%	\$530	20%	\$544	21%	\$265	10%
Kansas	\$2,245	\$449	20%	\$898	40%	\$449	20%	\$449	20%				
Kentucky	\$6,398	\$1,312	21%	\$1,312	21%	\$1,312	21%	\$1,567	24%	\$256	4%	\$640	10%
Louisiana ^b	\$8,522	\$1,917	22%	\$1,917	23%	\$1,917	22%	\$1,917	22%			\$852	10%
Maine	\$1,527	\$389	25%	\$329	22%	\$305	20%	\$311	20%	\$44	3%	\$150	10%
Maryland	\$3,737	\$747	20%	\$747	20%	\$747	20%	\$747	20%	\$374	10%	\$374	10%
Massachusetts	\$4,737	\$2,134	45%	\$747	16%	\$723	15%	\$444	9%	\$689	15%		

STATE	Total	Family Support		Family Preservation		Time-Limited Family Reunification		Adoption Promotion and Support		Other Service-Related		Administrative Costs	
Michigan ^b	\$13,174	\$3,952	30%	\$2,635	20%	\$2,635	20%	\$2,635	20%			\$1,317	10%
Minnesota	\$3,379	\$980	29%	\$980	29%	\$980	29%			\$100	3%	\$338	10%
Mississippi	\$5,322	\$1,331	25%	\$1,331	25%	\$1,064	20%	\$1,064	20%			\$532	10%
Missouri	\$10,544	\$5,694	54%	\$4,112	39%	\$738	7%						
Montana	\$925	\$208	23%	\$208	23%	\$208	23%	\$208	23%			\$92	10%
Nebraska	\$1,545	\$386	25%	\$386	25%	\$309	20%	\$309	20%			\$154	10%
Nevada	\$1,533	\$345	22%	\$345	22%	\$345	22%	\$345	22%			\$153	10%
New Hampshire	\$625	\$125	20%	\$125	20%	\$125	20%	\$125	20%	\$112	18%	\$12	2%
New Jersey	\$5,107	\$1,428	28%	\$1,055	21%	\$1,036	20%	\$1,588	31%				
New Mexico	\$3,267	\$653	20%	\$653	20%	\$653	20%	\$653	20%	\$327	10%	\$327	10%
New York	\$19,086	\$6,297	33%	\$4,771	25%	\$3,817	20%	\$4,200	22%				
North Carolina	\$10,970	\$2,194	20%	\$2,194	20%	\$2,194	20%	\$2,194	20%	\$1,097	10%	\$1,097	10%
North Dakota	\$517	\$144	28%	\$198	38%	\$128	25%	\$33	6%			\$14	3%
Ohio	\$12,679	\$2,952	23%	\$3,105	24%	\$2,717	21%	\$2,636	21%			\$1,268	10%
Oklahoma	\$5,242	\$1,020	19%	\$993	19%	\$1,535	29%	\$1,173	22%			\$525	10%
Oregon ^c	\$4,733	\$1,065	22%	\$1,065	22%	\$1,065	22%	\$1,065	22%			\$473	10%
Pennsylvania ^d	\$12,328	\$2,466	20%	\$2,466	20%	\$2,466	20%	\$2,466	20%	\$1,233	10%	\$1,233	10%
Puerto Rico	\$6,251	\$1,250	20%	\$1,250	20%	\$1,250	20%	\$1,250	20%	\$625	10%	\$625	10%
Rhode Island	\$934	\$195	21%	\$196	21%	\$348	37%	\$195	21%				
South Carolina	\$6,529	\$1,319	20%	\$1,319	20%	\$1,319	20%	\$1,319	20%	\$600	9%	\$653	10%
South Dakota ^{be}	\$756	\$151	20%	\$151	20%	\$212	28%	\$197	26%			\$45	6%
Tennessee	\$9,951	\$2,985	30%	\$2,985	30%	\$1,990	20%	\$1,990	20%				
Texas	\$35,971	\$8,938	25%	\$8,000	22%	\$8,009	22%	\$8,023	22%			\$3,001	8%
Utah	\$1,771	\$383	22%	\$626	35%	\$319	18%	\$420	24%	\$24	1%		
Vermont	\$481	\$96	20%	\$144	30%	\$96	20%	\$96	20%	\$48	10%		

STATE	Total	Family Support		Family Preservation		Time-Limited Family Reunification		Adoption Promotion and Support		Other Service-Related		Administrative Costs	
Virginia	\$6,110	\$1,466	24%	\$1,479	24%	\$1,222	20%	\$1,528	25%	\$31	1%	\$385	6%
Washington ^e	\$5,614	\$1,191	21%	\$1,444	26%	\$1,191	21%	\$1,191	21%			\$596	11%
West Virginia ^e	\$2,760	\$595	22%	\$595	22%	\$595	22%	\$595	22%	\$297	11%	\$85	3%
Wisconsin	\$4,925	\$1,105	22%	\$1,105	22%	\$1,105	22%	\$985	20%	\$380	8%	\$246	5%
Wyoming	\$307	\$61	20%	\$61	20%	\$61	20%	\$61	20%	\$31	10%	\$31	10%
Total	\$335,971	\$88,250	26%	\$79,377	24%	\$69,073	21%	\$67,467	20%	\$9,608	3%	\$22,200	7%

Source: Table prepared by the Congressional Research Service (CRS) based on state planned spending of FY2010 federal PSSF funds as reported by states on CFS-101, Part I (prepared 2009, gathered by HHS and submitted to Congress, July 2010).

- a. Alabama reported that it included some Administrative Costs in the amount shown for Adoption Promotion and Support.
- b. There were some differences in the state's estimated spending of PSSF money by category as provided in CFS-101, Part I versus CFS-101, Part II. Data in this table reflect numbers provided on CFS-101, Part I.
- c. The total spending and spending for administrative costs is as reported by Oregon on its CFS-101, Part I. Oregon also reported identical spending amounts for each of the four categories. However, the sum of the amounts shown in the form (\$1.349 million in each category) exceeded the total funding Oregon expected to spend. Numbers shown in italics were calculated by CRS to be equal shares of total expected funding after spending for administrative costs.
- d. As received by CRS, Pennsylvania's CFS-101, Part I reporting form was unreadable. Data provided regarding planned PSSF spending for FY2010 are shown as reported on CFS-101, Part II.
- e. The state included in its total spending money allocated under the PSSF monthly caseworker grants. CRS subtracted this planned spending from total shown here.

Table D-5. FY2010 Funding under the PSSF Program for Four Categories of Child and Family Services by State and per Certain Individuals

STATE	Allotment Amounts (dollars in thousands)			Funding per individual under Age 21		Funding per Poor Child (States and Tribes) ^a
	States Only	Tribes Only ^b	States and Tribes ^c	States Only ^d	States and Tribes ^e	
Alabama	\$7,154	\$0	\$7,154	\$5.38	\$5.38	\$26.02
Alaska	\$668	\$911	\$1,579	\$3.92	\$7.32	\$28.88
Arizona	\$7,932	\$2,346	\$10,278	\$4.16	\$5.17	\$19.93
Arkansas	\$4,500	\$0	\$4,500	\$5.42	\$5.42	\$23.79
California	\$33,751	\$64	\$33,816	\$3.06	\$3.06	\$18.28
Colorado	\$3,284	\$0	\$3,284	\$2.29	\$2.29	\$15.60
Connecticut	\$2,108	\$0	\$2,108	\$2.18	\$2.18	\$21.76
Delaware	\$889	\$0	\$889	\$3.63	\$3.63	\$26.53
District of Columbia	\$919	\$0	\$919	\$6.26	\$6.26	\$27.73
Florida	\$14,599	\$0	\$14,599	\$3.06	\$3.06	\$17.14
Georgia	\$12,477	\$0	\$12,477	\$4.15	\$4.15	\$21.95
Hawaii	\$948	\$0	\$948	\$2.79	\$2.79	\$24.17
Idaho	\$1,219	\$57	\$1,276	\$2.51	\$2.61	\$16.25
Illinois	\$15,221	\$0	\$15,221	\$4.06	\$4.06	\$25.74
Indiana	\$7,214	\$0	\$7,214	\$3.85	\$3.85	\$23.19
Iowa	\$2,722	\$0	\$2,722	\$3.18	\$3.18	\$24.87
Kansas	\$2,178	\$23	\$2,201	\$2.61	\$2.64	\$17.94
Kentucky	\$6,371	\$0	\$6,371	\$5.35	\$5.35	\$24.94
Louisiana	\$7,968	\$22	\$7,990	\$6.03	\$6.04	\$29.73
Maine	\$1,574	\$24	\$1,598	\$4.87	\$4.91	\$34.84
Maryland	\$3,808	\$0	\$3,808	\$2.39	\$2.39	\$24.72
Massachusetts	\$4,929	\$0	\$4,929	\$2.84	\$2.84	\$26.56
Michigan	\$13,268	\$374	\$13,642	\$4.78	\$4.88	\$25.52
Minnesota	\$3,454	\$203	\$3,657	\$2.33	\$2.46	\$19.85
Mississippi	\$5,352	\$79	\$5,431	\$5.94	\$6.00	\$23.01
Missouri	\$10,941	\$0	\$10,941	\$6.49	\$6.49	\$37.60
Montana	\$892	\$527	\$1,420	\$3.77	\$5.39	\$19.24
Nebraska	\$1,516	\$62	\$1,578	\$2.85	\$2.94	\$22.85
Nevada	\$1,571	\$0	\$1,571	\$2.03	\$2.03	\$13.33
New Hampshire	\$638	\$0	\$638	\$1.82	\$1.82	\$20.85
New Jersey	\$5,118	\$0	\$5,118	\$2.15	\$2.15	\$18.77
New Mexico	\$3,165	\$404	\$3,569	\$5.82	\$5.98	\$24.71
New York	\$18,856	\$0	\$18,856	\$3.57	\$3.57	\$21.71
North Carolina	\$11,138	\$96	\$11,234	\$4.15	\$4.18	\$22.06
North Dakota	\$525	\$255	\$780	\$3.08	\$4.30	\$28.92
Ohio	\$12,783	\$0	\$12,783	\$3.99	\$3.99	\$21.88
Oklahoma	\$5,082	\$4,037	\$9,119	\$5.87	\$8.45	\$25.33

STATE	Allotment Amounts (dollars in thousands)			Funding per individual under Age 21		Funding per Poor Child (States and Tribes) ^a
	States Only	Tribes Only ^b	States and Tribes ^c	States Only ^d	States and Tribes ^e	
Oregon	\$4,668	\$159	\$4,826	\$4.58	\$4.70	\$28.40
Pennsylvania	\$12,349	\$0	\$12,349	\$3.70	\$3.70	\$26.46
Rhode Island	\$927	\$20	\$947	\$3.30	\$3.36	\$24.56
South Carolina	\$6,577	\$20	\$6,597	\$5.13	\$5.14	\$25.35
South Dakota	\$755	\$618	\$1,373	\$3.68	\$5.78	\$21.27
Tennessee	\$9,816	\$0	\$9,816	\$5.63	\$5.63	\$28.06
Texas	\$35,724	\$25	\$35,749	\$4.48	\$4.49	\$21.50
Utah	\$1,730	\$25	\$1,756	\$1.73	\$1.75	\$16.48
Vermont	\$497	\$0	\$497	\$3.13	\$3.13	\$30.10
Virginia	\$6,155	\$0	\$6,155	\$2.80	\$2.80	\$24.32
Washington	\$5,880	\$241	\$6,121	\$3.23	\$3.34	\$23.44
West Virginia	\$2,705	\$0	\$2,705	\$5.87	\$5.87	\$30.53
Wisconsin	\$5,076	\$341	\$5,416	\$3.27	\$3.45	\$23.67
Wyoming	\$285	\$117	\$402	\$1.89	\$2.57	\$17.86
TOTAL	\$329,876	\$11,049	\$340,926			
AVERAGE				\$3.82	\$4.10	\$23.69
MEDIAN				\$3.68	\$3.85	\$23.79
Territories						
American Samoa	\$219					
Guam	\$395					
Northern Mariana	\$179					
Puerto Rico	\$6,143					
Virgin Islands	\$271					
Territory subtotal	\$7,207					

Source: Table prepared by the Congressional Research Service (CRS). Final allotment amounts by state and territory as provided by HHS, ACF, ACYF, OLAB to CRS in December 2010. Funding to tribe (by state) is as indicated in HHS, ACF, ACYF-CB-PI-11-04, issued March 23, 2011.

- Numbers in this column equal funding to state and tribal entities in the state divided by number of poor children (under the age of 18 in the state; based on CRS analysis of 2009 American Community Survey data).
- Represents all funding distributed to a tribal entity and tied to the tribal entity's population in that state. If a tribe had an under-age-21 population living in more than one state, then funds to that tribe, as shown in this table, would be divided among those states based on that population size in each state. A \$0 entry indicates there was no tribal population in the state for which PSSF funds were provided. For grant amounts by individual tribal entity see HHS, ACF, ACYF-CB-PI-11-04, issued March 23, 2011.
- Represents all funds distributed in the state (based on under-age-21 population in the state) whether the funds were allocated to a state government or to a tribal government or entity.
- Numbers in this column equal funding to the state agency only divided by under-age-21 population in the state (based on U.S. Census Bureau, Population Estimates Program, Table T8 – 2009) *minus* the under-age-21 tribal population in that state (based on HHS, ACF, ACYF-CB-PI-11-04).
- Numbers in this column equal funding to state agency and tribal entity in state divided by total under-age 21-population in the state (based on U.S. Census Bureau, Population Estimates Program, Table T8 – 2009).

Appendix E. Court Improvement Program (CIP): Funding History and Funding by Grant Type and State

Table E-1. Funding Authority and Appropriations for the Court Improvement Program, FY1995-FY2011

Nominal Dollars; NA = Not Authorized or Appropriated

Fiscal Year	CIP Funds Authorized as Set-Aside from PSSF	Funds Appropriated for CIP		
		PSSF Set-Aside	Deficit Reduction Act of 2005 funds	TOTAL
1995	\$5 million	\$5 million	NA	\$5 million
1996	\$10 million	\$10 million	NA	\$10 million
1997	\$10 million	\$10 million	NA	\$10 million
1998	\$10 million	\$10 million	NA	\$10 million
1999	\$10 million	\$10 million	NA	\$10 million
2000	\$10 million	\$10 million	NA	\$10 million
2001	\$10 million	\$10 million	NA	\$10 million
2002	\$16.6 million	\$12.3 million	NA	\$12.3 million
2003	\$16.6 million	\$13.3 million	NA	\$13.3 million
2004	\$16.6 million	\$13.3 million	NA	\$13.3 million
2005	\$16.6 million	\$13.3 million	NA	\$13.3 million
2006	\$16.6 million	\$12.9 million	\$ 20 million	\$32.9 million
2007	\$16.6 million	\$12.1 million	\$ 20 million	\$32.1 million
2008	\$16.6 million	\$12.1 million	\$ 20 million	\$32.1 million
2009	\$16.6 million	\$12.1 million	\$ 20 million	\$32.1 million
2010	\$16.6 million	\$12.1 million	\$ 20 million	\$32.1 million
2011	\$36.6 million	\$32.1 million	NA	\$32.1 million

Source: Table prepared by the Congressional Research Service (CRS).

Table E-2. Funding by CIP Grant Type and State, FY2009

A blank cell indicates the state did not apply for the grant.

STATE	Basic	Data	Training	TOTAL
Alabama	\$202,936	\$168,658	\$168,933	\$540,527
Alaska	\$103,894	\$98,402	\$98,446	\$300,742
Arizona	\$256,626	\$206,743	\$207,143	\$670,512
Arkansas	\$157,983	\$136,770	\$136,940	\$431,693
California	\$1,073,323	\$786,069	\$788,370	\$2,647,762
Colorado	\$208,508	\$172,611	\$172,898	\$554,017
Connecticut	\$171,719	\$146,514	\$146,716	\$464,949
Delaware	\$106,828	\$100,484	\$100,535	\$307,847
District of Columbia	\$98,000	\$94,221	\$94,251	\$286,472
Florida	\$507,555	\$384,739	\$385,723	\$1,278,017
Georgia	\$346,323	\$270,370	\$270,978	\$887,671
Hawaii	\$114,926	\$106,228	\$106,298	\$327,452
Idaho	\$127,067	\$114,840	\$114,938	\$356,845
Illinois	\$422,163	\$324,167	\$324,952	\$1,071,282
Indiana	\$251,130	\$202,845	\$203,231	\$657,206
Iowa	\$161,064	\$138,956	\$139,134	\$439,154
Kansas	\$158,577	\$137,192	\$137,363	\$433,132
Kentucky	\$189,359	\$159,027	\$159,270	\$507,656
Louisiana	\$199,500	\$166,221	\$166,487	\$532,208
Maine	\$114,598	\$105,995	\$106,064	\$326,657
Maryland	\$228,045	\$186,469	\$186,802	\$601,316
Massachusetts	\$238,829	\$194,119	\$194,477	\$627,425
Michigan	\$342,878	\$267,926	\$268,527	\$879,331
Minnesota	\$217,664	\$179,106	\$179,415	\$576,185
Mississippi	\$165,785	\$142,305	\$142,493	\$450,583
Missouri	\$234,060	\$190,736	\$191,083	\$615,879
Montana	\$108,148	\$101,420	\$101,474	\$311,042
Nebraska	\$132,139	\$118,438	\$118,548	\$369,125
Nevada	\$151,442	\$132,130	\$132,285	\$415,857
New Hampshire	\$116,606	\$107,419	\$107,493	\$331,518
New Jersey	\$299,899	\$237,439	\$237,939	\$775,277
New Mexico	\$137,726	\$122,401	\$122,524	\$382,651
New York	\$558,452	\$420,843	\$421,946	\$1,401,241
North Carolina	\$316,895	\$249,495	\$250,035	\$816,425
North Dakota	\$101,003	\$96,351	\$96,389	\$293,743
Ohio	\$373,843	\$289,891	\$290,563	\$954,297
Oklahoma	\$179,324	\$151,908	\$152,128	\$483,360
Oregon	\$174,929	\$148,791	\$149,001	\$472,721
Pennsylvania	\$384,146	\$297,199	\$297,896	\$979,241
Puerto Rico	\$190,436	\$159,791	\$160,036	\$510,263

STATE	Basic	Data	Training	TOTAL
Rhode Island	\$110,743	\$103,261	\$85,000	\$299,004
South Carolina		\$164,512	\$164,773	\$329,285
South Dakota	\$105,837	\$99,781	\$99,830	\$305,448
Tennessee	\$237,709	\$193,324	\$193,680	\$624,713
Texas	\$770,313	\$571,127	\$572,723	\$1,914,163
Utah	\$169,352	\$144,836	\$145,032	\$459,220
Vermont	\$99,349	\$95,179	\$95,212	\$289,740
Virginia	\$277,668	\$221,669	\$222,118	\$721,455
Washington	\$244,949	\$198,459	\$198,832	\$642,240
West Virginia	\$126,026	\$114,101	\$114,197	\$354,324
Wisconsin	\$224,792	\$184,161	\$184,487	\$593,440
Wyoming	\$98,197	\$94,361	\$94,392	\$286,950
TOTAL	\$12,089,263	\$10,000,000	\$10,000,000	\$32,089,263

Source: Table prepared by the Congressional Research Service (CRS) based on final allotment amounts, by grant type and state, received from HHS, ACF, Children's Bureau in May 2011.

Table E-3. Funding by CIP Grant Type and State, FY2010

A blank cell indicates the state did not apply for the grant.

STATE	Basic	Data	Training	TOTAL
Alabama	\$202,775	\$174,265	\$168,492	\$545,532
Alaska	\$103,662	\$99,144	\$98,546	\$301,352
Arizona	\$260,111	\$217,721	\$209,776	\$687,608
Arkansas	\$158,032	\$140,353	\$137,098	\$435,483
California	\$1,071,920	\$833,016	\$778,551	\$2,683,487
Colorado	\$209,761	\$179,560	\$175,002	\$564,323
Connecticut	\$170,918	\$150,120	\$145,654	\$466,692
Delaware	\$106,838	\$101,551	\$100,388	\$308,777
District of Columbia	\$97,886	\$94,767	\$94,208	\$286,861
Florida	\$503,929	\$402,519	\$384,013	\$1,290,461
Georgia	\$348,032	\$284,360	\$273,928	\$906,320
Hawaii	\$114,929	\$107,684	\$106,322	\$328,935
Idaho	\$127,453	\$117,177	\$115,678	\$360,308
Illinois	\$421,347	\$339,927	\$320,206	\$1,081,480
Indiana	\$250,618	\$210,527	\$202,749	\$663,894
Iowa	\$161,050	\$142,641	\$138,766	\$442,457
Kansas	\$158,758	\$140,903	\$137,408	\$437,069
Kentucky	\$189,518	\$164,217	\$159,730	\$513,465
Louisiana	\$201,915	\$173,613	\$168,046	\$543,574
Maine	\$114,102	\$107,057	\$105,411	\$326,570
Maryland	\$226,494		\$185,123	\$411,617
Massachusetts	\$239,382	\$202,011	\$194,128	\$635,521
Michigan	\$337,638	\$276,482	\$260,463	\$874,583

STATE	Basic	Data	Training	TOTAL
Minnesota	\$216,820	\$184,910	\$178,500	\$580,230
Mississippi	\$165,681	\$146,151	\$141,808	\$453,640
Missouri	\$233,507	\$197,557	\$190,809	\$621,873
Montana	\$108,190	\$102,577	\$101,517	\$312,284
Nebraska	\$132,098	\$120,697	\$118,677	\$371,472
Nevada	\$152,162	\$135,904	\$133,577	\$421,643
New Hampshire	\$116,083	\$108,558	\$106,955	\$331,596
New Jersey	\$298,253	\$246,631	\$234,168	\$779,052
New Mexico	\$137,747	\$124,979	\$122,479	\$385,205
New York	\$558,471	\$443,858	\$416,267	\$1,418,596
North Carolina	\$319,821	\$262,978	\$253,900	\$836,699
North Dakota	\$100,915	\$97,062	\$96,388	\$294,365
Ohio	\$371,621	\$302,238	\$285,924	\$959,783
Oklahoma	\$179,613	\$156,710	\$152,771	\$489,094
Oregon	\$175,183	\$153,352	\$149,471	\$478,006
Pennsylvania	\$381,496	\$309,723	\$294,579	\$985,798
Puerto Rico	\$188,540	\$163,476	\$156,227	\$508,243
Rhode Island	\$110,323	\$104,193	\$102,673	\$317,189
South Carolina		\$170,483	\$165,558	\$336,041
South Dakota	\$105,900	\$100,841	\$99,904	\$306,645
Tennessee	\$238,028	\$200,985	\$194,520	\$633,533
Texas	\$779,031	\$611,026	\$585,113	\$1,975,170
Utah	\$172,190	\$151,083	\$148,092	\$471,365
Vermont	\$99,138	\$95,716	\$94,964	\$289,818
Virginia	\$277,612	\$230,986	\$222,945	\$731,543
Washington	\$245,396	\$206,569	\$200,201	\$652,166
West Virginia	\$125,802	\$115,925	\$113,938	\$355,665
Wisconsin	\$224,094		\$183,571	\$407,665
Wyoming	\$98,480	\$95,217	\$94,818	\$288,515
TOTAL	\$12,089,263	\$10,000,000	\$10,000,000	\$32,089,263

Source: Table prepared by the Congressional Research Service (CRS) based on final allotment amounts, by grant type and state, received from HHS, ACF, Children's Bureau in May 2011.

Appendix F. Grants to Improve the Outcomes of Children Affected by Parental Abuse of Methamphetamine or Other Substances: Grantees by State, Project Focus, and Funding

Table F-1. Grantees by State, Grant Focus, Duration of Grant and Federal Funding

Lead Agency of the Regional Partnership <i>Location of Lead Agency Office in State</i>	Project Title <i>(as given by grantee)</i>	Grant Focus <i>(as assigned by HHS)</i>	Expected Duration of Grant	Total Expected Federal Funding
ALASKA				
Cook Inlet Tribal Council, Inc.—Anchorage	Alaska Native Family Preservation Unit	Tribal	5 years	\$2.500 million
ARIZONA				
State of Arizona—Phoenix	Arizona Families F. I. R.S.T., Parent to Parent Recovery Program	Treatment focused	5 years	\$3.742 million
CALIFORNIA				
County of Butte, Department of Employment and Social Services—Oroville	Northern California Regional Partnership for Safe and Stable Families	System-wide collaboration	3 years	\$1.500 million
Center Point, Inc.—San Rafael	“Family Link”—Residential and Outpatient Treatment	Child focused	5 years	\$2.500 million
County of San Diego, Health and Human Services Agency, Child Welfare Services—San Diego	Family Integrated Treatment (FIT) Program	Treatment focused	5 years	\$2.500 million
County of Santa Clara, Social Services Agency—San Jose	Santa Clara County Zero to Three Dependency Drug Treatment Court Project	Child focused	5 years	\$3.742 million
County of Santa Cruz Health Services Agency, Alcohol and Drug Program—Santa Cruz	Treatment Alliance for Safe Children (TASC)	Drug court	5 years	\$2.500 million
County of Mendocino, Health and Human Services Agency—Ukiah	Mendocino County Dependency Drug Court	Drug court	5 years	\$2.500 million
County of Sacramento, Department of Health and Human Services—Sacramento	Early Intervention Family Drug Court	Drug court	5 years	\$2.500 million
SHIELDS for Families, Inc.—Los Angeles	Tamar Village Family Centered Residential Treatment Program	Treatment focused	5 years	\$3.742 million
WestCare California, Inc.—Fresno	SMART-2 Model of Care Partnership	Child focused	5 years	\$2.500 million
COLORADO				
Connect Care, Inc.—Colorado Springs	Fourth Judicial District Family Reunification Project	Drug court	5 years	\$2.5 million
Denver Department of Human Services—Denver	Denver Entire Family Focused Comprehensive Treatment	System-wide collaboration	3 years	\$1.675 million

Lead Agency of the Regional Partnership <i>Location of Lead Agency Office in State</i>	Project Title <i>(as given by grantee)</i>	Grant Focus <i>(as assigned by HHS)</i>	Expected Duration of Grant	Total Expected Federal Funding
Island Grove Regional Treatment Center, Inc.—Greeley	Northeastern Colorado Child Welfare Project	Treatment focused	3 years	\$1.675 million
FLORIDA				
Hillsborough County Board Of Commissioners—Tampa	Children’s Reunification Services Collaborative	Array of services	5 years	\$2.500 million
GEORGIA				
Juvenile Justice Fund—Atlanta	Fulton County Family Drug Court Expansion Project Ready, Set, Go	Treatment focused	5 years	\$2.5 million
Supreme Court of Georgia—Atlanta	Family Treatment Systems Collaborative	Drug court	3 years	\$1.500 million
IDAHO				
Idaho Department of Health and Welfare—Boise	Improving Positive Outcomes for Children Through Family Drug Court	Drug court	5 years	\$3.742 million
ILLINOIS				
Children’s Research Triangle—Chicago	Moving Families Forward: A Regional Partnership to Enhance Safety and Stability in the Lives of Children	System-wide Collaboration	5 years	\$3.742 million
IOWA				
Judicial Branch, State of Iowa—Des Moines	Parents and Children Together: A Family Drug Court Initiative (PACT)	Drug court	5 years	\$2.500 million
Upper Des Moines Opportunity, Inc.—Okoboji	Parent Partners of NW Iowa	System-wide collaboration	5 years	\$2.500 million
KANSAS				
Kansas Department Of Social and Rehabilitation Services—Topeka	Kansas Serves Substance Affected Families	Array of services	5 years	\$2.500 million
KENTUCKY				
Kentucky Department for Community Based Services—Martin County	Kentucky Sobriety Treatment and Recovery Teams (K-Start)	Array of services	5 years	\$2.500 million
Kentucky River Community Care, Inc.—Jackson	Families in Safe Houses Network (FISHN)	System-wide collaboration	5 years	\$3.742 million
MASSACHUSETTS				
Massachusetts Department of Public Health—Boston	Family Recovery Project	Array of Services	5 years	\$2.500 million
MINNESOTA				
White Earth Band of Chippewa—White Earth	White Earth Reservation Child Well Being Project	Tribal	5 years	\$2.5 million
MISSOURI				
Kids Hope United, Hudelson Region—St. Louis	Circle of Hope: Keeping Children Safe & Families Together	System-wide collaboration	5 years	\$3.742 million
St. Patrick Center—St. Louis	Project Protect	Array of services	5 year	\$2.500 million

Lead Agency of the Regional Partnership <i>Location of Lead Agency Office in State</i>	Project Title <i>(as given by grantee)</i>	Grant Focus <i>(as assigned by HHS)</i>	Expected Duration of Grant	Total Expected Federal Funding
MONTANA				
Apsaalooke Nation Housing Authority—Crow Agency	Crow Nation Methamphetamine and Substance Abuse Early Intervention and Prevention Project	Tribal	5 year	\$2.500 million
The Family Tree Center, Billings Exchange Clubs' CAP Center—Billings	Second Chance Home and Sober Supported Living	Array of services	5 years	\$2.500 million
NEBRASKA				
Omaha Nation Community Response Team—Walthill	"Sacred Child" Program	Tribal	3 years	\$1.500 million
NEVADA				
State of Nevada—Las Vegas	To develop a regional partnership that provides interagency collaboration and services	Treatment focused	5 years	\$3.742 million
NEW MEXICO				
Clarity Counseling P.C.—Dolores, Colorado ^a	Recovering Together in San Juan County: Cross-Discipline Collaboration and a Specialized Outpatient Treatment Program	Array of services	5 years	\$2.500 million
NEW YORK				
University of Rochester—Rochester	Fostering Recovery: Supporting Young Children Exposed to Substance Abuse and Their Families	Child focused	3 years	\$1.500 million
Westchester County—White Plains	Protecting Westchester Families/Integrating Systems of Care	Child focused	5 years	\$2.500 million
NORTH CAROLINA				
North Carolina Department of Health and Human Services—Raleigh	Robeson County Bridges for Families Program	Drug court	5 years	\$2.500 million
OHIO				
Butler County Children's Services—Hamilton	Child Abuse and Neglect Substance Abuse Focus and Expansion (CANSAFE): Butler County's Approach to Improving the 4 R's	Array of services	5 years	\$2.500 million
County of Lucas—Toledo	Pre-Removal Family Drug Court:	Drug court	3 years	\$1.500 million
OKLAHOMA				
Choctaw Nation of Oklahoma—Durant	Choctaw Project SOAR (Serving Out At Risk)	Tribal	5 years	\$2.500 million
Oklahoma Department of Mental Health and Substance Abuse Services—Oklahoma City	Oklahoma Partnership Initiative (OPI)	Child focused	5 years	\$2.500 million
OREGON				
Klamath Tribes—Chiloquin	Klamath Tribes: Methamphetamine and Substance Abuse Eradication Project	Tribal	5 years	\$2.500 million

Lead Agency of the Regional Partnership <i>Location of Lead Agency Office in State</i>	Project Title <i>(as given by grantee)</i>	Grant Focus <i>(as assigned by HHS)</i>	Expected Duration of Grant	Total Expected Federal Funding
Multnomah County—Portland	Family Involvement Team	Drug court	5 years	\$3.742 million
Northeast Oregon Collaborative/Baker County—Baker City	Funding a collaborative of Child Welfare and substance abuse treatment providers	System-wide collaboration	5 years	\$2.500 million
OnTrack Inc.—Medford	(Collaboration to reduce foster care placement secondary to parental substance abuse) ^b	Treatment focused	5 years	\$2.500 million
RHODE ISLAND				
Children’s Friend and Service—Providence	Project Connect Statewide	Treatment focused	5 years	\$2.500 million
TENNESSEE				
Child and Family Tennessee—Knoxville	New beginnings for Women and Children	Child focused	5 years	\$3.742 million
Tennessee Department of Mental Health and Developmental Disabilities—Nashville	Building Strong Families In Rural Tennessee	Array of services	5 years	\$2.500 million
TEXAS				
Aliviane, Inc.—El Paso	Project Aware	Array of services	5 years	\$2.500 million
Houston Council on Alcoholism and Drug Abuse—Houston	SAFE4Kids	Child focused	5 years	\$2.500 million
Travis County—Austin	Parenting in Recovery Project	System-wide collaboration	5 years	\$2.500 million
VERMONT				
Lund Family Center—Burlington	A Regional Interagency Screening, Assessment, and Treatment Collaboration	Array of services	5 years	\$2.500 million
WASHINGTON				
Pierce County Alliance—Tacoma	Regional partnership to effect systems change for the purpose of increasing the reunification of children with parents recovering from substance dependency and to reduce the number of children returned to child welfare	Treatment focused	3 years	\$1.675 million
WISCONSIN				
Wisconsin Department of Health and Family Services—Madison	Western Wisconsin Collaborative for Children’s Safety and Permanency	System-wide collaboration	5 years	\$2.500 million

Source: Table prepared by Congressional Research Service (CRS) based on Appendix B in HHS, ACF, ACYF, Children’s Bureau, “Targeted Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Methamphetamine or Other Substance Abuse: First Annual Report to Congress” (sent to Congress May 2010).

- a. This lead agency is officially located in Dolores, CO. However, its regional partnership program is operating and serving families in New Mexico.
- b. This grantee does not give a project title. This description is based on the grantee’s project abstract.

Appendix G. Monthly Caseworker Visits: Allotments by State and Percentage of Children Visited on a Monthly Basis

Table G-1. Allotments for Monthly Caseworker Visits with Children in Foster Care, FY2006-FY2011

No FY2007 funds were provided for this purpose. States were permitted to spend FY2006 funds during that year.

State	FY2006	FY2008	FY2009	FY2010	FY2011
Alabama	\$840,806	\$105,385	\$211,030	\$424,784	\$424,165
Alaska	\$91,458	\$10,646	\$20,574	\$39,650	\$37,997
Arizona	\$939,577	\$116,805	\$228,112	\$471,024	\$494,916
Arkansas	\$552,829	\$68,614	\$137,873	\$267,241	\$254,976
California	\$4,306,545	\$508,439	\$1,006,364	\$2,004,176	\$2,005,524
Colorado	\$380,276	\$49,871	\$98,287	\$195,003	\$197,918
Connecticut	\$295,772	\$33,463	\$63,575	\$125,199	\$123,725
Delaware	\$89,393	\$12,456	\$25,471	\$52,797	\$55,194
District of Columbia	\$129,235	\$15,482	\$28,839	\$54,554	\$51,091
Florida	\$1,745,727	\$218,437	\$429,932	\$866,876	\$952,123
Georgia	\$1,374,242	\$182,296	\$369,550	\$740,873	\$758,248
Hawaii	\$156,974	\$15,257	\$28,694	\$56,319	\$57,152
Idaho	\$146,098	\$18,717	\$36,142	\$72,388	\$78,193
Illinois	\$1,707,839	\$222,601	\$451,032	\$903,845	\$880,090
Indiana	\$842,071	\$105,369	\$210,832	\$428,370	\$424,621
Iowa	\$267,284	\$37,372	\$78,673	\$161,607	\$164,238
Kansas	\$267,406	\$33,284	\$66,668	\$129,351	\$126,667
Kentucky	\$786,785	\$95,225	\$189,951	\$378,317	\$378,518
Louisiana	\$1,199,691	\$136,018	\$253,023	\$473,137	\$456,580
Maine	\$166,113	\$21,753	\$45,343	\$93,486	\$93,570
Maryland	\$432,768	\$54,689	\$110,960	\$226,106	\$238,840
Massachusetts	\$547,303	\$70,359	\$140,657	\$292,688	\$303,622
Michigan	\$1,512,784	\$189,646	\$391,136	\$787,884	\$765,946
Minnesota	\$405,513	\$48,726	\$100,326	\$205,106	\$204,446
Mississippi	\$665,160	\$80,052	\$158,018	\$317,802	\$311,008
Missouri	\$978,380	\$142,385	\$313,046	\$649,675	\$584,918
Montana	\$119,161	\$14,405	\$27,450	\$52,996	\$51,208

State	FY2006	FY2008	FY2009	FY2010	FY2011
Nebraska	\$179,526	\$23,409	\$45,864	\$90,017	\$86,822
Nevada	\$199,971	\$23,360	\$45,508	\$93,279	\$105,562
New Hampshire	\$77,609	\$9,388	\$18,543	\$37,885	\$39,249
New Jersey	\$601,557	\$75,577	\$151,637	\$303,901	\$294,864
New Mexico	\$375,608	\$49,389	\$96,992	\$187,968	\$185,438
New York	\$2,307,345	\$281,120	\$566,657	\$1,119,705	\$1,119,944
North Carolina	\$1,194,760	\$160,950	\$325,715	\$661,379	\$674,399
North Dakota	\$68,385	\$7,615	\$15,347	\$31,163	\$30,743
Ohio	\$1,474,225	\$189,676	\$376,453	\$759,063	\$768,537
Oklahoma	\$641,887	\$77,447	\$155,739	\$301,751	\$286,725
Oregon	\$626,990	\$72,322	\$140,527	\$277,171	\$280,022
Pennsylvania	\$1,399,207	\$183,376	\$366,009	\$733,297	\$719,059
Rhode Island	\$142,498	\$14,701	\$27,734	\$55,037	\$55,553
South Carolina	\$809,185	\$98,405	\$193,853	\$390,558	\$394,729
South Dakota	\$95,326	\$11,449	\$22,459	\$44,841	\$45,166
Tennessee	\$1,137,165	\$147,293	\$295,464	\$582,901	\$576,014
Texas	\$3,987,472	\$532,717	\$1,067,996	\$2,121,342	\$2,094,943
Utah	\$210,202	\$27,367	\$52,596	\$102,744	\$108,544
Vermont	\$58,092	\$6,934	\$14,273	\$29,484	\$31,447
Virginia	\$688,603	\$90,492	\$181,418	\$365,505	\$365,424
Washington	\$629,604	\$84,442	\$171,715	\$349,144	\$372,769
West Virginia	\$364,134	\$42,366	\$81,472	\$160,647	\$156,532
Wisconsin	\$596,290	\$71,426	\$146,234	\$301,408	\$315,812
Wyoming	\$46,135	\$5,142	\$9,121	\$16,931	\$16,195
50 States + DC	\$38,858,966	\$4,894,115	\$9,790,884	\$19,588,375	\$19,599,986
American Samoa	\$86,317	\$2,224	\$4,473	\$8,920	\$8,828
Guam	\$105,698	\$4,865	\$9,785	\$19,514	\$19,313
Northern Mariana Islands	\$81,960	\$1,630	\$3,278	\$6,538	\$6,471
Puerto Rico	\$774,972	\$94,156	\$185,526	\$364,579	\$353,453
Virgin Islands	\$92,087	\$3,010	\$6,054	\$12,074	\$11,949
Territories	\$1,141,034	\$105,885	\$209,116	\$411,625	\$400,014
TOTAL	\$40,000,000	\$5,000,000	\$10,000,000	\$20,000,000	\$20,000,000

Source: Table prepared by the Congressional Research Service (CRS), based on data received from HHS, ACF, OLAB (various times) for FY2006-FY2010 and as included in HHS, ACF, ACYF-CB-11-06 for FY2011.

Note: HHS, ACF, OLAB indicated that the allotment amounts shown for Connecticut for FY2008 and FY2009 were not ultimately issued to the state. It was not able to indicate why, or whether this was also true for other years and for other states.

Reporting Frequency of Caseworker Visits with Children in Foster Care

P.L. 109-288 (2006) required states to collect and report data on the number of children in foster care who were visited on at least a monthly basis. In implementing this requirement, HHS required states to report on the percentage of all children who had spent at least one month in foster care during the fiscal year—including children who were placed out of state and children who were in runaway status, but *excluding* any individual older than age 18.

States were further required to establish annual target percentages for each of FY2008 through FY2011 to ensure that no later than October 1, 2011, every child in foster care is visited no less frequently than once a month (and that the majority of the visits occur where the child lives).

Table G-1 shows the actual percentage of children who were visited on a monthly basis for FY2007 through FY2009, as reported by states, as well as the percentage of children the state intends to ensure are visited no less frequently than once a month for FY2010 (i.e., the “target percentage”). All states have a 90% target percentage for FY2011.

Table G-2. Percentage of Children in Foster Care Who Were Visited on a Monthly Basis, by State, FY2007-FY2009, and Target Percentage Established for FY2010

All states have a target percentage of 90% for FY2011

State	Actual % Visited At Least Monthly			Target FY2010
	FY2007	FY2008	FY2009	
Alabama	59%	46%	58%	80%
Alaska	3%	5%	19%	50%
Arizona	40%	45%	47%	55%
Arkansas	32%	48%	53%	80%
California	57%	63%	67%	75%
Colorado	59%	69%	72%	66%
Connecticut	72%	73%	73%	84%
Delaware	43%	63%	64%	75%
District of Columbia	67%	77%	83%	83%
Florida	85%	90%	92%	85%
Georgia	51%	58%	86%	85%
Hawaii	53%	37%	62%	75%
Idaho	51%	57%	76%	70%
Illinois	7%	9%	41%	70%
Indiana	23%	70%	85%	85%
Iowa	32%	42%	53%	70%
Kansas	43%	66%	89%	80%
Kentucky	33%	38%	52%	70%
Louisiana	55%	61%	80%	82%
Maine	49%	73%	87%	80%
Maryland	74%	45%	49%	85%
Massachusetts	39%	43%	45%	75%

State	Actual % Visited At Least Monthly			Target FY2010
	FY2007	FY2008	FY2009	
Michigan	14%	27%	43%	70%
Minnesota	36%	40%	47%	75%
Mississippi	65%	74%	77%	84%
Missouri	56%	48%	76%	76%
Montana	2%	35%	51%	60%
Nebraska	27%	40%	44%	60%
Nevada	19%	40%	52%	65%
New Hampshire	28%	45%	76%	75%
New Jersey	20%	30%	54%	69%
New Mexico	60%	79%	85%	82%
New York	12%	21%	47%	75%
North Carolina	39%	30%	67%	77%
North Dakota	2%	13%	46%	65%
Ohio	18%	34%	67%	80%
Oklahoma	46%	73%	65%	80%
Oregon	43%	40%	44%	60%
Pennsylvania	77%	81%	92%	80%
Puerto Rico	56%	50%	18%	80%
Rhode Island	23%	28%	38%	65%
South Carolina	82%	85%	90%	87%
South Dakota	36%	70%	86%	67%
Tennessee	89%	90%	91%	90%
Texas	54%	61%	77%	80%
Utah	94%	95%	96%	90%
Vermont	11%	20%	19%	65%
Virginia	14%	19%	59%	24%
Washington	9%	13%	18%	50%
West Virginia	10%	22%	54%	60%
Wisconsin	27%	29%	58%	75%
Wyoming	71%	71%	71%	90%
National State Average	42%	50%	62%	73%
National State Median	42%	46%	63%	75%

Source: Table prepared by the Congressional Research Service (CRS). FY2009 actual % of children visited is based on reporting included in Child Welfare Outcomes online database. Data for all other columns is from HHS, ACF,ACYF, Children’s Bureau, “Report to Congress on Monthly Caseworker Visits with Children in Foster Care (January 2011).”

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