

Prevention and Meeting the Needs of Children and Families: What is the legal community's role?

FEBRUARY 26, 2021
8:30 A.M. CST



INTRODUCTION
&
WELCOME

Sr. Judge Robin
Sage
Casey Family Programs



*“Don’t save me **from** my family;
save my family **for** me”*

Washington State Foster Youth
to parent advocate, Kimberley Mays

In your role in the child welfare system, what does “prevention” mean to you?

PLEASE ENTER YOUR ANSWERS IN THE CHAT BOX.

The Prevention and Early Intervention division of DFPS

Sasha Rasco
Associate Commissioner





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Prevention & Early Intervention

Vision

- A Texas where all children thrive in their families and communities

Mission

- Create opportunities for children, youth and families to be strong and healthy by funding community-level, evidence-informed programs and systems of support upstream from crisis and intensive interventions





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PEI Historical Context

Stand-alone Program (Apart From CPS)	2014
Office Of Child Safety	2014
Increased State Funding	2015
Expanded Programming	2015
Merged With Texas Home Visiting (MIECHV)	2016
Five-year Strategic Plan Developed	2016
Modest Expansion In Programming	2017
Prevention Task Force Established; Sunset 8/2019	2017





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Statutory Duties

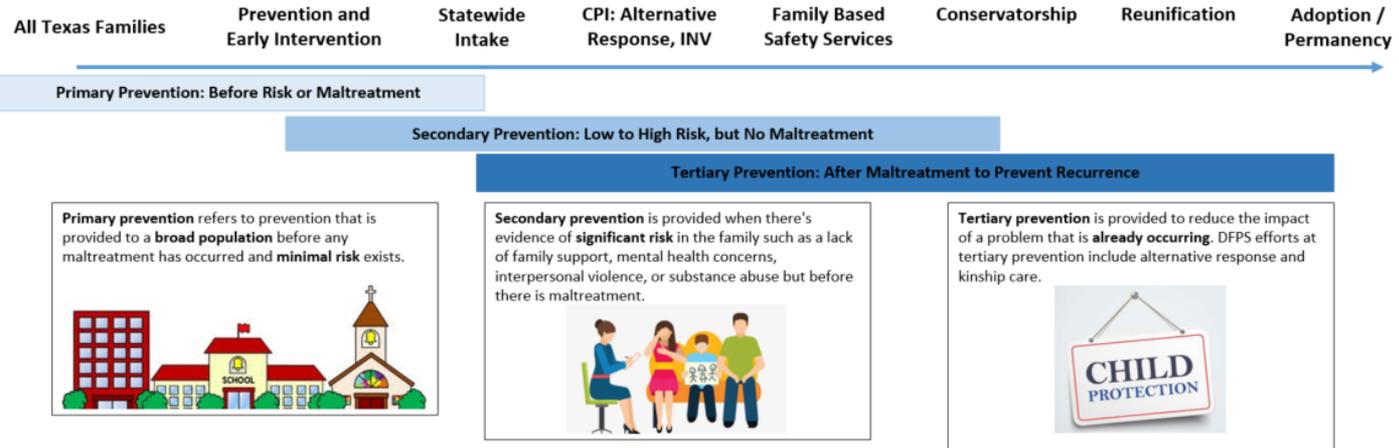
Texas Family Code Sec. 265.002

- Plan, develop, and administer a comprehensive and unified delivery system of prevention and early intervention services to children and their families in at-risk situations
- Improve responsiveness of services for at-risk children and their families by facilitating greater coordination and flexibility in the use of funds by state and local service providers
- Provide greater accountability for prevention and early intervention services in order to demonstrate the impact or public benefit of a program by adopting outcome measures
- Assist communities in the coordination and development of prevention and early intervention services in order to maximize federal, state, and local resources.





Prevention Through a Child Welfare Lens



PREVENTION THROUGH PUBLIC HEALTH APPROACH EXAMPLE: PREVENTING HEART DISEASE

Prevention: eat healthy, exercise, screening programs

Health Screenings



Medication to control risk factors and prevent recurrence



Emergency medical intervention, case manager, case management and rehabilitation





The state supports communities by ensuring they have the right resources.

Communities support families with resources that respond to their needs.

Prevention Framework Foundation

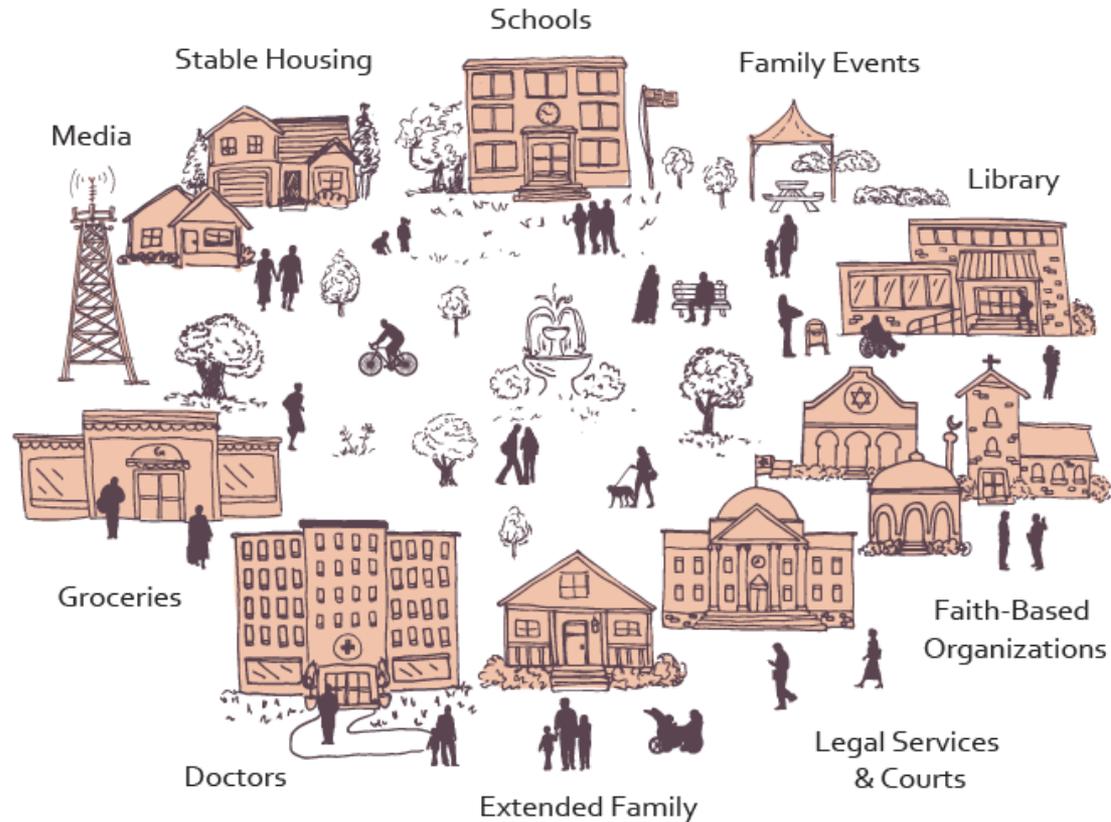


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Support activities that all families can access and that contribute to the social well-being of the entire community



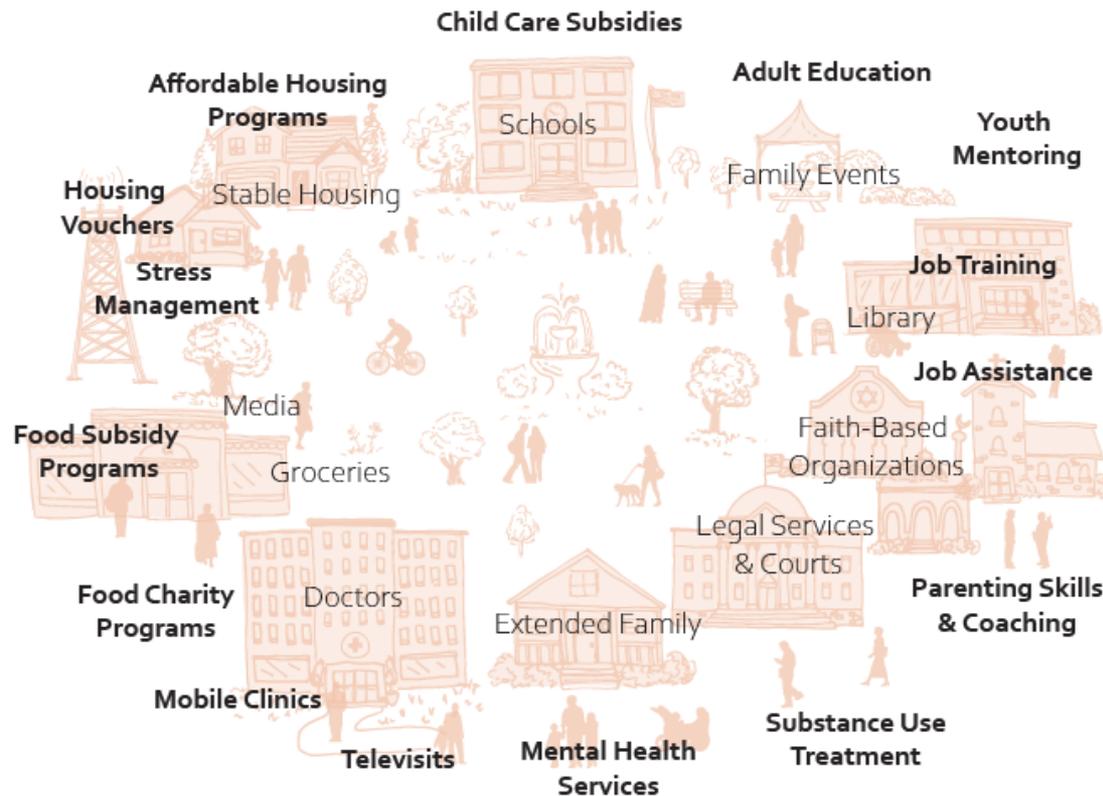


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Support solutions in the community that help families overcome tough obstacles



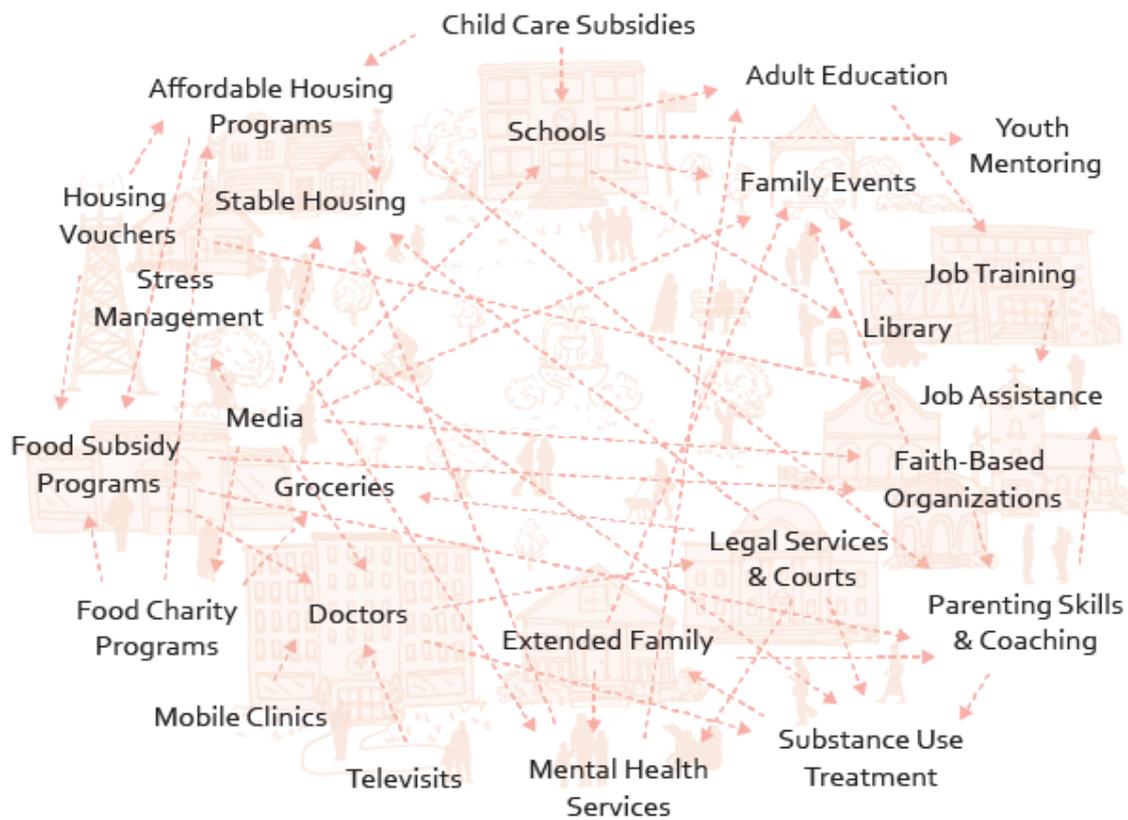


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Support activities that connect community resources to each other





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PEI Scope and Funding





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PEI By the Numbers

- ✓ **\$107 million**
- ✓ **(5% of DFPS Total)**

**Budget in
FY2021**



- ✓ **Over 160
Contracts**

**Number of
Contracts**



- ✓ **Over 67,000
Families Served**

**Number of
Youth & Families
Served in FY2019**





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OUTCOMES Youth & Family

94% of Children
Served Remain
Safe 3 Years After
Service

**Safe
Families**



99% of Youth
Served Not
Referred to Juvenile
Probation

**Supported
Youth**



Almost 90% Families
Showed Increase in
at Least 1 Protective
Factor

**Protective
Homes**





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Examples of PEI Programs and Efforts



Target Number of Youth/Families
Served Annually, FY21

21,419

Average Number of Youth/Families
Served Per Month, FY20

6,227

Counties Served

254

Annual Budget
for Community Contracts

\$24,176,531

Total Number of Community
Grantees/Subgrantees

28 Grantees 26 Subgrantees

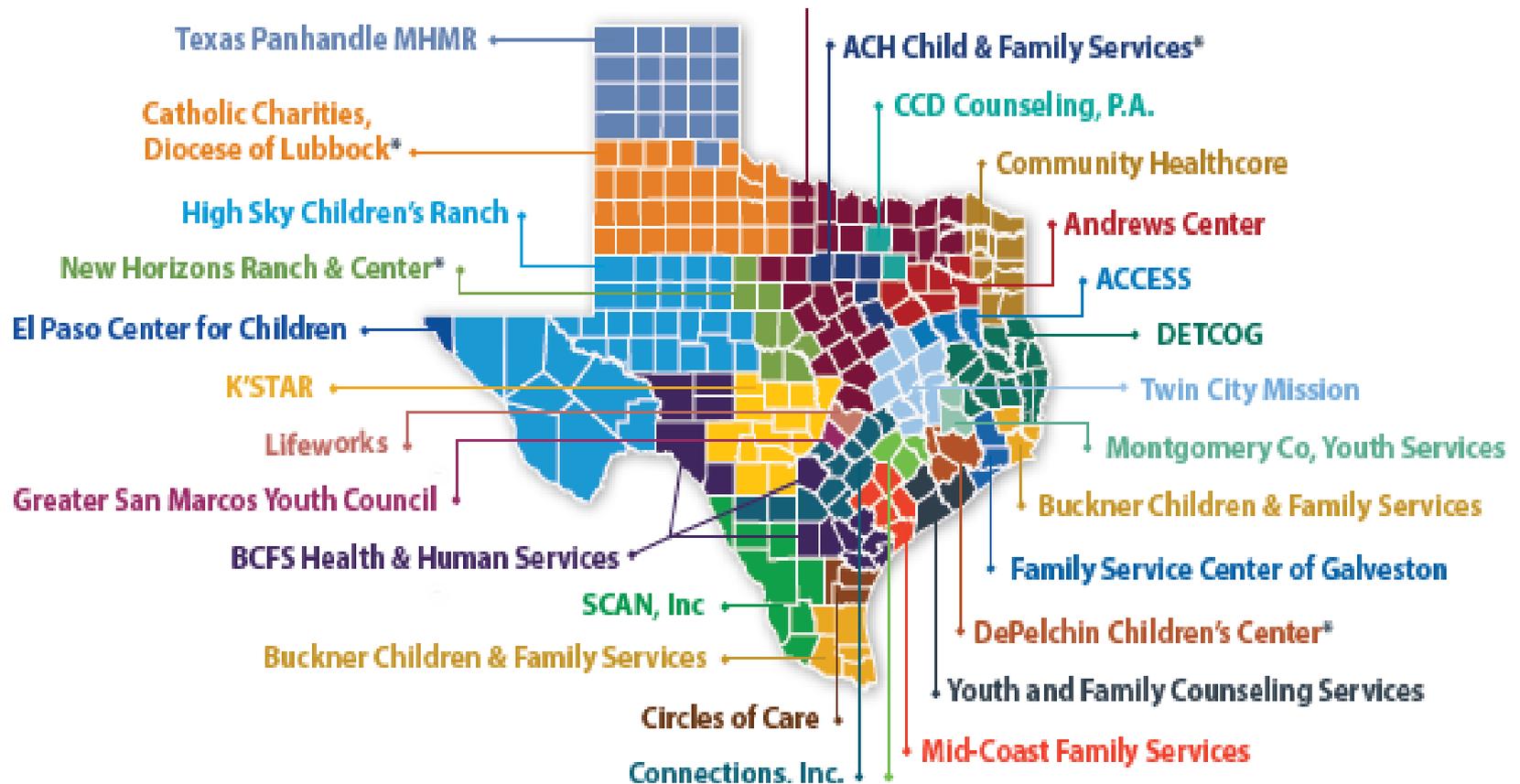
Average Grantee Budget

\$863,448

Family and Youth Success (FAYS)

Coaching, Counseling, and group-based
learning for youth and parents





Family and Youth Success Program (FAYS)

Target Number of Youth/Families
Served Annually, FY21

8,768

Average Number of Youth/Families
Served Per Month, FY20

2,653

Counties Served

54

Annual Budget
for Community Contracts

\$23,793,506

Total Number of
Community Grantees/Subgrantees

27 Grantees 23 Subgrantees

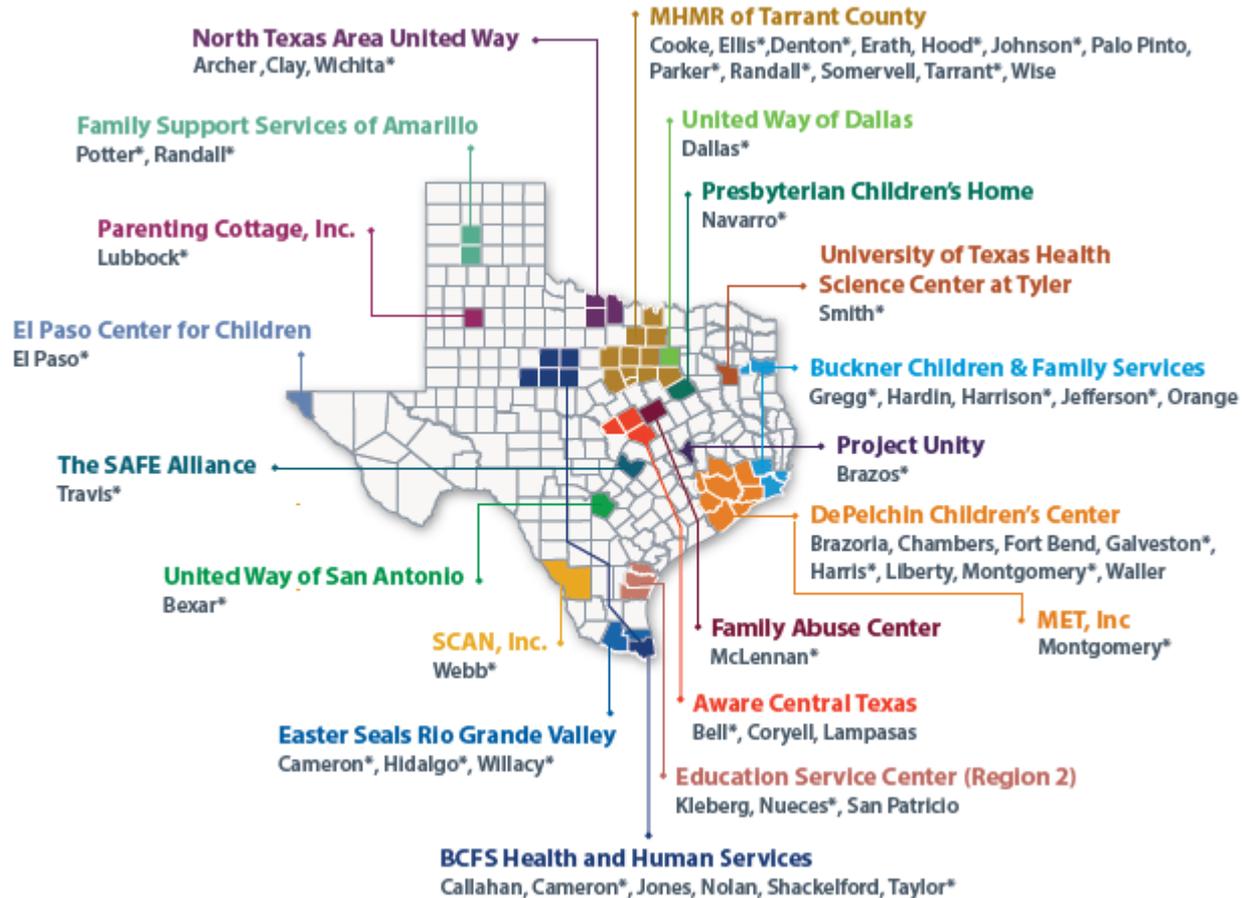
Average Grantee Budget

\$881,241

Healthy Outcomes through Prevention & Early Support (HOPES)

Community driven initiatives and
supports for families with children 0-5





Healthy Outcomes through Early Prevention and Support (HOPES)

Online Support for Families



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En Español

BABIES

TODDLERS

KIDS

TWEENS & TEENS

ALL AGES

PARENTS

POPULAR TOPICS

FIND LOCAL SUPPORT

The Best Gift You Can Give Is Time.

We are here to help you find that balance.



TWEENS & TEENS

Talking with Teens About Vaping

Learn how to talk to your tweens and teens about vaping and smoking.



KIDS

Healthy Meals for Kids

Raising your kids with healthy eating habits doesn't have to be hard.



PARENTS

Weathering COVID-19

Change is stressful even in good times, but when routines are disrupted it can make life really hard.

BABIES
0-12 MONTHS

TODDLERS
1-3 YRS

KIDS
4-10 YRS

TWEENS & TEENS
11+ YRS

ALL AGES

PARENTS





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Online Support for Families

Common Parenting Challenges



BABIES

Making a Family Calendar

Making a daily schedule for babies can keep your whole family on track.



TODDLERS

Handling Toddler Tantrums

Losing your cool over toddler tantrums? We have mom-tested tips to help.



TWEENS & TEENS

Setting Boundaries for Teen Behavior

Ten tips to stop rude teen behavior like backtalking, slamming doors, and more.





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Online Support for Families

Find Local Support

These services are offered by local agencies under contract to the **Prevention and Early Intervention** division of the Texas Department of Family & Protective Services. These programs offer services to parents and children to strengthen families and prevent child abuse and neglect. To learn more more about our programs, [visit our website](#).

Select Your County



WATER SAFETY

Keep water activities fun and safe for all

Some of the best family memories involve time near the water. No matter where you are, water can be fun if you pay attention and be safe.

[More about Water Safety](#)



Harvard University Fellows Program



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The Harvard Government Performance Lab (GPL) has launched a new collaboration with Texas's DFPS to help the agency bolster how and when families are connected to prevention services. This project will take a family-centered approach to design earlier prevention interventions to reduce child welfare involvement among families with complex needs and with young children.

A second project seeks to decrease the number of children DFPS removes into out-of-home care by helping caseworkers more quickly connect FBSS-involved parents to the best-fit behavioral health programs (mental healthcare and substance use treatment), as well as increase the share of parents starting and completing treatment

What We Know

- The goal in child welfare should be to ensure the **safety, permanency and well-being of children *and their families***.
- We know to support child and family well-being, it is important to **intervene as early as possible**.
- We know that the act of **removing children from their families and homes creates emotional distress and trauma** that should be avoided whenever possible.
- We know **some children can be better served by remaining safely at home** while their parents receive the community services and the support they need.

What are the outcomes for children who grow up in foster care?

MENTAL AND PHYSICAL HEALTH

- 39.0% have at least one mental health diagnosis in the prior year
- 44.1% have had substance abuse or dependence in their lifetime

EDUCATION AND TRAINING

- Less than half have a high school diploma (48.4%)

MARRIAGE, RELATIONSHIPS, AND CHILDREN

- 58.3% have given birth to or fathered a child
- 9.9% of those who have had a child have had a child placed in foster care

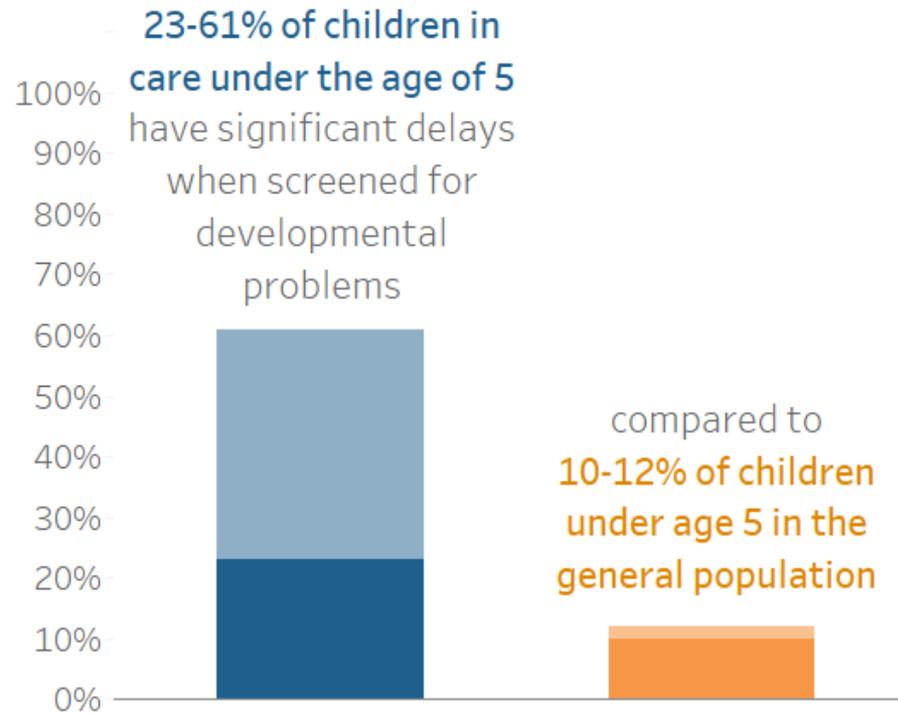
CRIMINAL JUSTICE INVOLVEMENT

- 68.0% of males and 40.5% of females have been arrested since leaving foster care

Casey Family Programs Foster Youth Alumni Study

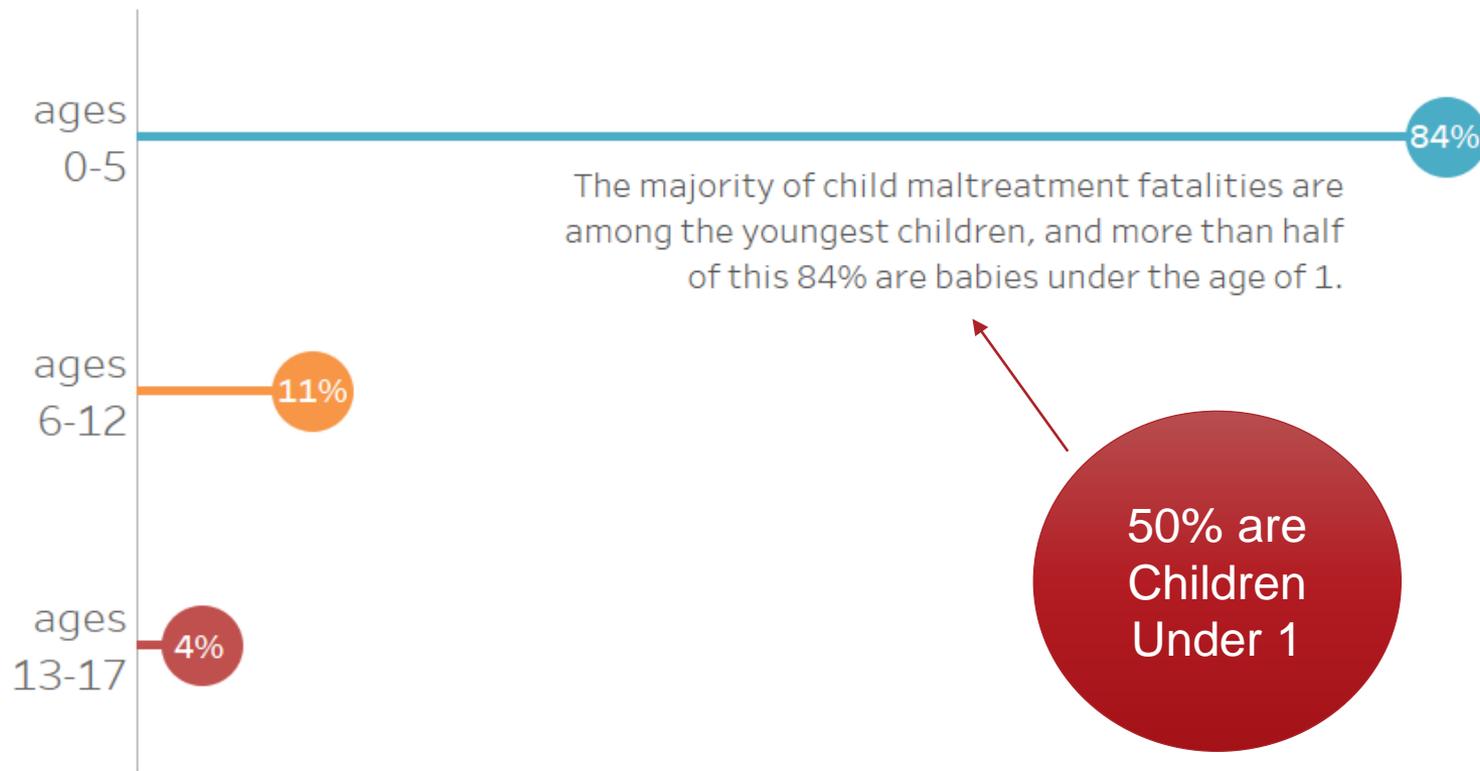
The “system” isn’t working!
The most expensive option for keeping children safe often results
in poor long-term outcomes

Impact of Foster Care on Young Children



Source: Stahmer et al, Dicker et al.

Child Maltreatment Fatalities by Age Group



Data source: Child Maltreatment 2016

The 21st Century Paradigm Shift

Our Current Child Welfare System

Reactive – intervenes after maltreatment

Focused on investigations and findings

Deficit-oriented and siloed

Individual efforts and impact

21st Century Child Welfare System

Proactive – builds protective capacity before maltreatment

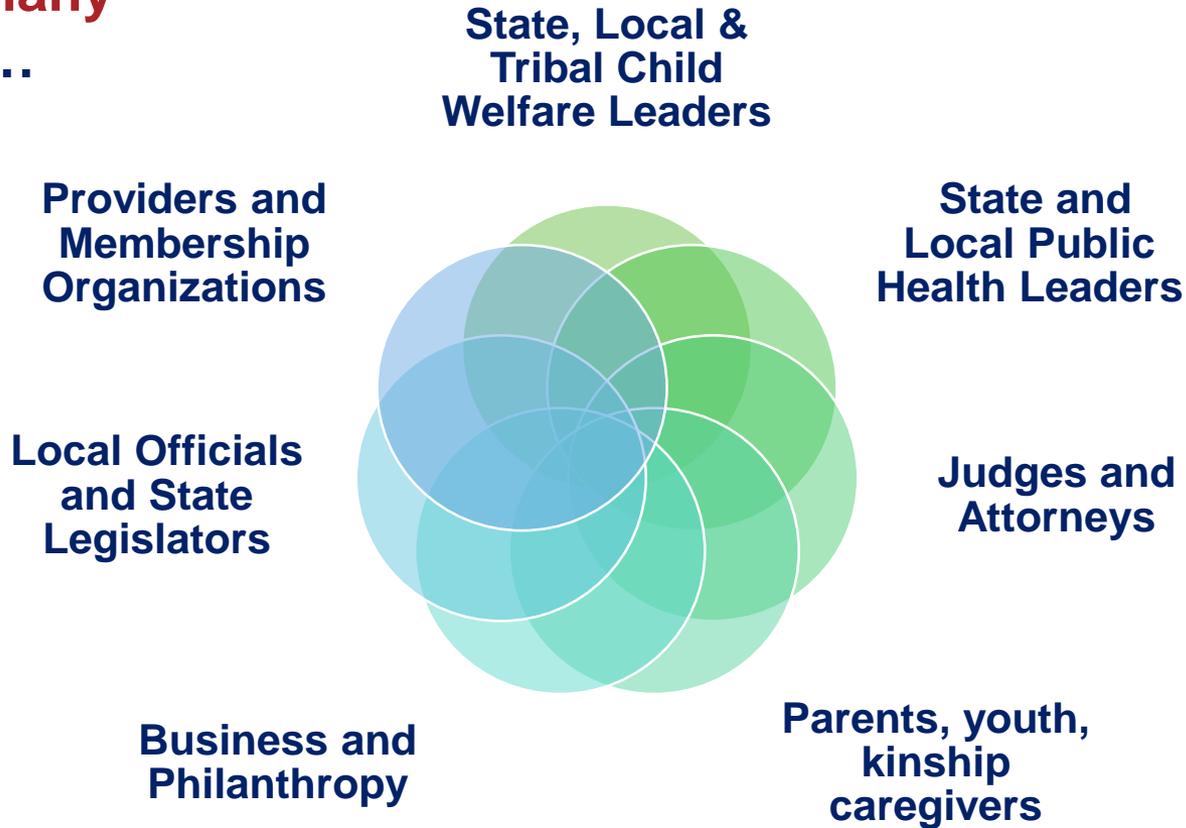
Focused on primary prevention and early intervention

Strengths-based and holistic

Universal, population-level efforts and impact

21st Century System Partners

And **many**
more...



Discussion

Could it be part of your role to keep families from entering system?

If so, how can you assist with prevention efforts before a case is filed?



Changing the Child Welfare Paradigm

The Family First Prevention Services Act

The Family First Act

The Family First Prevention Services Act was included in the Bipartisan Budget Act of 2018 and became law (P.L. 115-123) on February 9, 2018.

- Provides open-ended, entitlement funding for prevention services for up to 12 months at a 50% match rate:
 - evidence-based substance abuse prevention services
 - evidence-based mental health services
 - evidence-based in-home parenting skills
- Improve the quality of foster care by no longer allowing federal funds to support the use of group homes as a placement setting, and support kinship care.

New Funding for Prevention Services

Unlike federal support for foster care, federal support for prevention services does not require an income test for eligibility.

- States and eligible tribes determine who will receive services supported through these new federal funds.

Unlike federal support for foster care, federal support for prevention services is not limited to the child.

- Federal support is also available for their parent and/or a kin caregiver.

Family First Transition Act

In response to challenges in implementation, Congress passed and the President signed into law the Family First Transition Act of 2019.

- The Transition Act authorized \$500 million in FY2020 to all states and to tribal nations for transition grants for activities related to implementation of FFPSA with no match requirement.
- The Transition Act also responded to concerns about the anticipated loss of funds by states and a tribe who had expiring Title IV-E demonstration waivers by providing temporary grants in FYF2021 and FY2022 if waiver jurisdictions demonstrate a loss of funding. No match is required for this funding.
- 22 states, the District of Columbia, and the Port Gamble S’Klallam Tribe are eligible for these additional funds.

Consolidated Appropriations Act (CAA), 2021

Signed into law December 27, 2020

Challenges the child welfare provisions in this Act address.

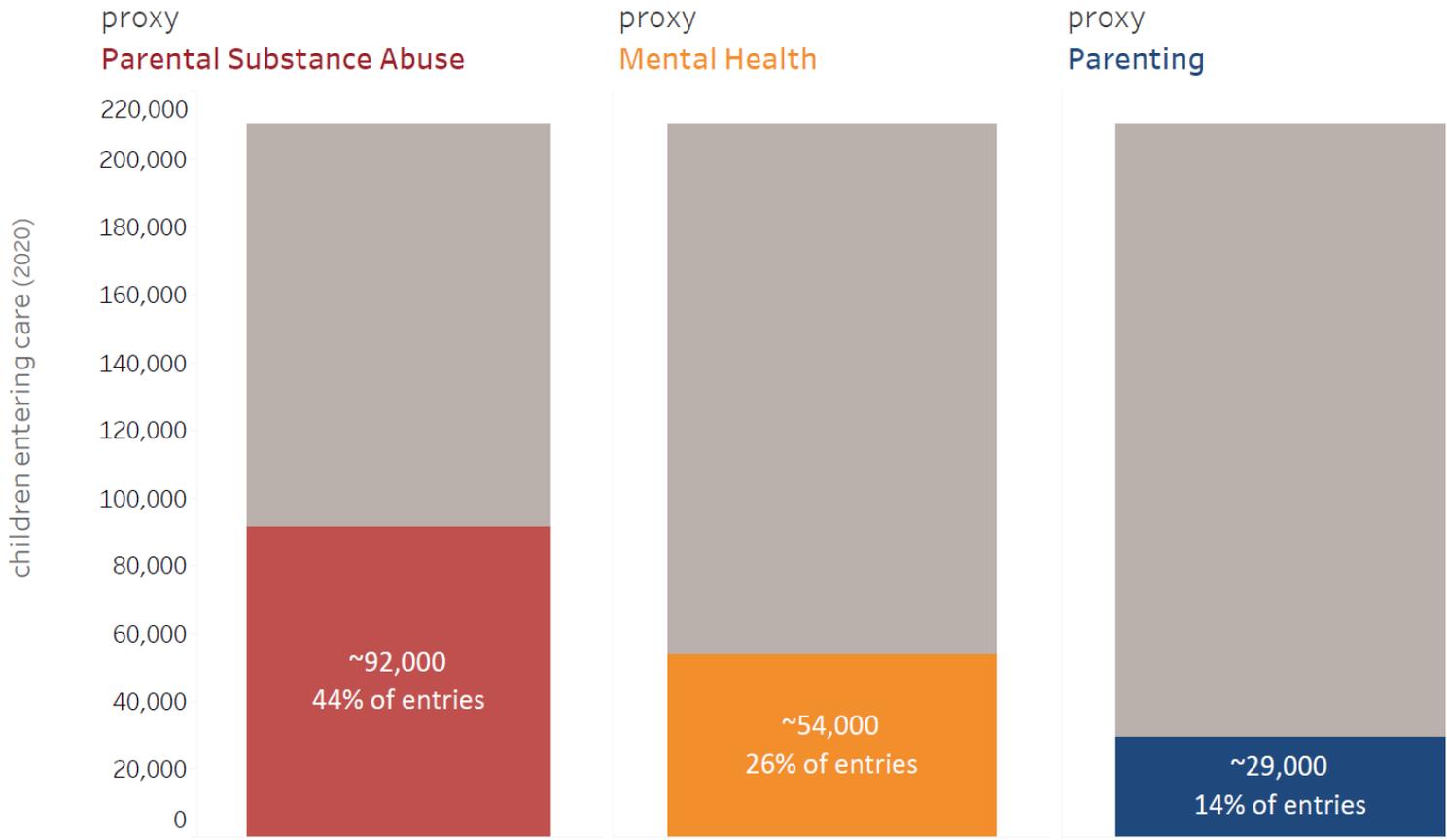
- Strong interest in supporting the direction of Family First and implementation during a challenging state budget time.
- Providing resources to address challenges amplified during the COVID-19 pandemic
 - Funding for prevention services
 - Support for kin and relative caregivers
 - Resources to support courts
- Challenges experienced by older youth in foster care, and those aging out of foster care during the COVID-19 pandemic.

CAA: Supporting Family First Implementation

Provides 100% reimbursement for preventive services by waiving state match.

- 100% federal funds for preventive services, administration and training costs is available from April 1, 2020 through September 30, 2021.
- Any state or tribe who submits a plan may receive these funds.

Why do most children enter foster care and how can prevention services make a difference?



CAA: Additional Prevention Resources

\$85 million in emergency fiscal year 2021 funding for the MaryLee Allen Promoting Safe and Stable Families Program, with no state match requirement.

\$10 million from the PSSF funds are provided for the federal Court Improvement Program (CIP), with no state match.

- The law lists the use of CIP emergency funds to address needs stemming from COVID-19 including technology to hold remote hearings, training, staffing, and programs that help families with their case plans to avoid delays.

CAA: Kinship Navigator Services

Provides 100% reimbursement for kinship navigator program services provided from April 1, 2020 through September 30, 2021.

Waives the requirement that for kinship navigator services to be reimbursed they meet the evidence-based standard required in Family First.

CAA: Kinship Navigator Services

Allows these kinship navigator funds to be used

- 1) For evaluations and related activities
- 2) For short-term support to kinship families for direct services or assistance from April 1, 2020 to September 30, 2021
- 3) To ensure kinship caregivers have needed information and resources

CAA: Resources for Older Youth

Provides an additional \$350 million for the John H. Chafee Foster Care Independence Program, with no state match for FY2021

- Increases the age of eligibility of services for the Chafee program to age 27 during FY2020 and FY2021.
- Reserves funding for technical assistance and other activities, including \$500,000 for youth driving programs.
- Removes the 30 percent cap on how much of the Chafee funds can be used for housing assistance (for youth ages 18 to 27 who were in foster care at age 14 or older).

CAA: Resources for Older Youth

Provides an additional \$50 million for Education and Training Vouchers (ETV), with no state match.

- Increases the maximum ETV from \$5,000 to \$12,000 per year through FY2022

Suspends through September 30, 2021 the training and postsecondary education requirements for the youth to be eligible for federally-funded extended foster care.

- States have the option under current law to extend foster care up to age 21

CAA: Preventing Aging Out of Foster Care During the Pandemic

Prohibits states from requiring a child to leave foster care solely due to their age – regardless of whether the state has exercised the option to provide extended foster care beyond age 18 – from April 1, 2020 through September 30, 2021.

- Specifies that children may not be found ineligible for Title IV-E foster care maintenance payments solely due to age, allowing federal funds to support this extended foster care.

CAA: Preventing Aging Out of Foster Care During the Pandemic

Permits youth who aged out of foster care due to age requirements from April 1, 2020 through September 30, 2021 to voluntarily re-enter care.

States are required to provide notice of the option to return to foster care to all youth who were formally discharged during the COVID-19 public health emergency period due to age, and to facilitate the voluntary return of these youth.

CAA: Preventing Aging Out of Foster Care During the Pandemic

States are required to conduct public awareness campaigns about the option to voluntarily re-enter foster care for youth under age 22 who aged out of foster care in FY2020 or FY2021, and who are otherwise eligible to return to foster care.

States may use the emergency funds provided through Chafee to offset costs of supporting these youth, if the state would otherwise not receive Title IV-E for these costs.

CAA: Preventing Aging Out of Foster Care During the Pandemic

Continues protections for youth in foster care to ensure their safety, permanence, and well-being.

Requires jurisdictions to work with any youth who remains in foster care beyond age 18 to develop, review or revise a transition plan, and identify adults who can offer meaningful and permanent connections.

CAA: Provides Stable Housing Opportunities for Youth Aging Out of Foster Care

Makes available on demand Family Unification Program (FUP) vouchers, provided by public housing agencies, to foster youth who are at risk of homelessness as they transition to adulthood.

Appropriates \$25 million for the FUP program with a \$20 million set aside for FUP vouchers for youth.

Permits the foster youth's voucher to be extended by up to an additional 24 months under certain conditions.

Permits youth who receive a voucher to be eligible for supportive services such as transportation and child care.

Next Opportunities

The window of opportunity exists through September 30, 2021 for any state, tribe, or older youth to access these additional resources.

- How do we make the most of these opportunities to shift the child welfare system?
- How do we engage constituents on the opportunities?

Accessing resources, and providing support to older youth who have aged out or at risk of aging out, may require state action.

- How best do we educate on the opportunities?

Discussion

- Do Family First prevention services make sense for your clients?
- What type of prevention services are needed in your community to make a difference in removal of children in your practice?



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FFPSA Planning in Texas

**PEI Associate Commissioner
Sasha Rasco**

Existing DFPS Prevention Efforts



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One goal of FFPSA is to reduce the entry of children into foster care by providing families with evidence-based parenting support, substance abuse prevention and treatment, and mental health prevention and treatment. In Texas, these prevention services would impact children and families involved in FBSS. Texas currently serves families and children at imminent risk of entering the foster care system through FBSS and DFPS partners with HHSC to access mental health and substance use disorder services for families.

Services Accessed through HHSC

- Texas HHSC programs fund and provide services for mental health and substance use disorder services through Local Mental Health Authorities (LMHA) and Substance Use Disorder (SUD) treatment programs. Families needing these services have access to LMHA programs, such as the Youth Empowerment Services (YES) Waiver, and a full range of mental health services. Families involved with DFPS access mental health and SUD services at no additional cost to DFPS. Families are referred and/or court ordered to these services based on the needs determined through the course of the investigation and/or while the family is receiving services through FBSS.

Existing DFPS Prevention Efforts



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Prevention and Early Intervention Services

- DFPS uses a number of evidence-based prevention service models through PEI grantees to offer services to families who may not be involved with the child welfare system or may not be at imminent risk of entering the system. PEI manages grants to community-based programs whose primary objective is to prevent juvenile delinquency and child abuse and neglect in a majority of cases before formal involvement with the child welfare system. PEI funds evidence-based prevention services to at-risk families and their children to increase protective factors, promote safety and healthy relationships in the home, and promote resilience and healthy development for youth in the community.
- Through home visiting program models, PEI grants serve families with children ages 0-5, an age group particularly vulnerable to child abuse and neglect. PEI grants also serve families with children 6 years of age and older through the Family and Youth Success (FAYS) program (previously STAR). To date, PEI has granted state and federal funding to 132 prevention lead service contractors across the state, many of whom have multiple subcontractors, who served over 67,000 families across Texas in FY 2019

Existing DFPS Prevention Efforts



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Family Based Safety Services

- FBSS is the DFPS family preservation program designed to help avoid the removal of children from their homes by strengthening the family's ability to protect their child and reduce threats to their child's safety. The FBSS program provides in-home services to help stabilize the family and reduce the risk of future abuse or neglect.
- FBSS provides services to approximately 9,500 families and 25,300 children during any given month. In Fiscal Year 2019, FBSS served a total of 27,585 families and 74,092 children. Services provided to children and families are accessed through various resources to include those available in communities, SUD and mental health services provided through HHSC, and services purchased by DFPS.

Existing DFPS Prevention Efforts



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Other CPS Services

In addition to FBSS, children may receive prevention services through the following:

- CPS provides limited services (based on appropriation levels) to children who have been adopted (post-adoption); children who have achieved permanency through permanent managing conservatorship, often with a family member (post-permanency); and children who are in the conservatorship of the state but are in the process of family reunification (family reunification).
- The state Medicaid program provides a comprehensive spectrum of services to children.

At present, children and families receiving post-adoption, post-permanency, and family reunification services are not included in Texas' Title IV-E foster care candidate definition. A proposed expanded Title IV-E foster care candidate definition is discussed in slides 15 and 16.



DFPS Strategic Plan for FFPSA: Possible Options Presented for Prevention

There are several opportunities to increase or improve the quality of prevention services provided in Texas. Some options would require Texas to invest additional state funds (at varying levels) but would allow for some federally matched funds. Other options would work to improve the quality and delivery of services, while requiring little to no additional state investment and receiving no federally matched funds.

1. Coordination of FBSS Services in Community Based Care (CBC) Including FFPSA Prevention Services

Includes implementing FBSS in the CBC model, but implementing in a way that draws down IV-E funding for evidence-based prevention services.

2. Build FBSS Capacity for FFPSA Prevention Services

DFPS could use existing agency contracting structure to purchase evidence based-prevention services included on the Title IV-E Prevention Services Clearinghouse, including but not limited to in-home parenting services not currently purchased today and therapeutic interventions.

DFPS Strategic Plan for FFPSA: Possible Options Presented for Prevention, cont'd



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3. Study the Coordination of FBSS Services in CBC, Including FFPSA Prevention Services

In order to allow for further consideration of incorporating FBSS into the CBC model, DFPS could pay for a study to fully inform that transition. While the funding and implementation structure for the existing CBC model is well-established, the addition of prevention services will require additional considerations.

4. Pilot FFPSA Prevention Service Coordination through PEI Community Grants

PEI could pilot a model where a single community organization would be knowledgeable of their community resources and serve as a central hub to receive referrals, assess family information for best community service fit, and connect families to FFPSA prevention services.

5. Expand Helping through Intervention and Prevention (HIP) Services for Pregnant and Parenting Foster Youth

DFPS can expand evidence-based prevention services eligible for federal match by serving additional pregnant and parenting foster youth through the HIP Program.



DFPS Strategic Plan for FFPSA: Possible Options Presented for Prevention

6. Expand Capacity for FFPSA Prevention In-Home Parenting Programs

DFPS can expand existing evidence-based in-home parenting programs that are proven to increase parents' protective capacity therefore decreasing the likelihood of their child's entry into foster care.

7. CPS Rural Service Area: Evidence-Based Prevention Services Model

Training FBSS caseworkers in an evidenced-based parenting model would ensure that the in-home training rural families receive in FBSS is high quality, consistent with FFPSA, and assures fidelity to an evidence-based prevention service model.



DFPS Strategic Plan for FFPSA: Proposed Candidacy

Current Title IV-E Foster Care Candidate

- Focusing on children at imminent risk of entering foster care, Texas currently has a definition for a Title IV-E foster care candidate in DFPS policy developed for FBSS which DFPS uses as the basis for claiming Title IV-E reimbursement for some expenses associated with administering the Title IV-E state plan. The FBSS caseworker designates a child as a foster care candidate:
 - Any time a child is the subject of a safety plan and absent preventive services the plan is removal; or
 - A child is not the subject of a safety plan but is at high or very high risk of abuse or neglect, and absent preventive services the plan is removal.

Expanded Title IV-E Foster Care Candidate

- Should the Legislature direct, under FFPSA, the State may expand evidence-based services to the existing candidate population and also may expand the definition of foster care candidate. These changes will determine eligible populations for FFPSA prevention services.
- If evidence-based prevention services are to be provided in accordance with FFPSA, DFPS will submit the proposed foster care candidacy definition to ACF for consideration and approval. A candidate for foster care is a child who is at imminent risk for removal and but for the provision of services to the child and child's family, would be removed from the child's home and placed in foster care.



DFPS Strategic Plan for FFPSA: Proposed Candidacy

Expanded Title IV-E Foster Care Candidate (Cont.)

Populations can include:

1. Children receiving family preservation services through DFPS.
2. Children who have exited DFPS conservatorship through reunification, managing conservatorship, or adoption and are at risk of disruption and re-entry.
3. Pregnant youth or parent in DFPS conservatorship.

Circumstances of a child, parent, or kinship caregiver that place a child at risk of entering foster care include:

- Child maltreatment, including abuse and neglect;
- Children born to mothers with a positive toxicology screening or children who are born with a positive toxicology screening;
- Substance use or addiction;
- Lack of protective capacity; or
- Parents' inability or need for additional support to address serious needs for the child.



DFPS Strategic Plan for FFPSA: Other Considerations for Implementation

Data Collection

- The Children's Bureau requires states implementing FFPSA to report on a specified set of data elements that include child level demographic data, data about prevention services provided to individuals, and outcome data for children who received prevention services. No major changes would be required to generate data for FFPSA reporting on child demographics. However, data about services provided to children or families are tracked in multiple DFPS automation systems. To generate data about services provided to individuals, changes to multiple applications are required.

Evaluation

- Services provided under FFPSA that meet the promising or supported criteria as defined in the Title IV-E Prevention Services Clearinghouse must be rigorously evaluated; services that are well-supported require either rigorous evaluation or monitoring under a continuous quality improvement (CQI) plan. If a CQI approach is approved, well-supported practices do not require evaluation. Evaluation plans must be submitted for each individual service requiring evaluation.

Discussion

- Where does a family in your community go to get legal services that might prevent loss of their children such as preventing evictions or guardianships? Bankruptcy?
- Is pro bono or lower cost legal aid readily available? Could receipt of these legal services help to keep families together and out of the child welfare system?



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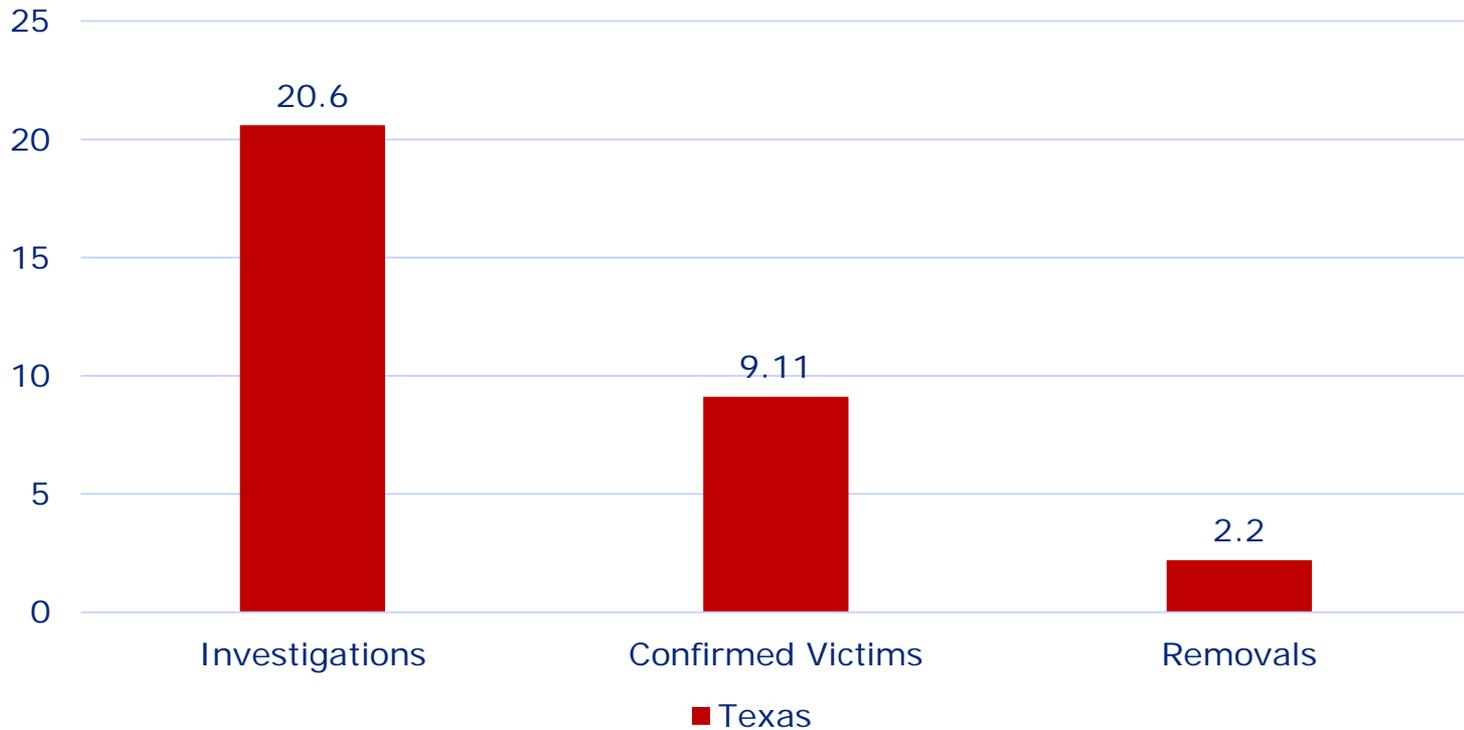
Planning a Community Response

**PEI Associate Commissioner
Sasha Rasco**



Community Risk – Child Maltreatment Rates

FY 2020 Maltreatment Outcomes per 1,000
Children

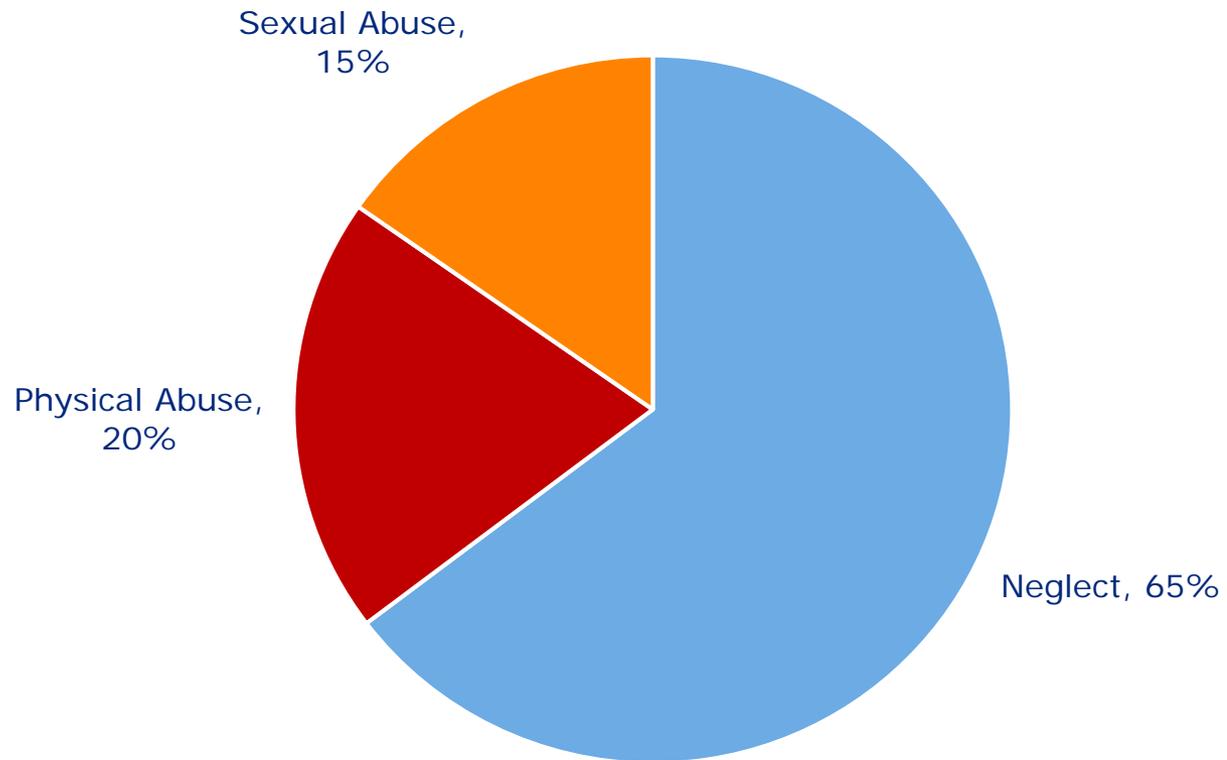


Community Risk - Child Maltreatment Allegations FY 2020



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Child Maltreatment Allegations FY 2020





Where to start? Community Risk Maps

Factor	Example Indicators
Families in Poverty	Child poverty, Adults without health insurance, Families using SNAP or WIC, Fathers not on birth certificate, Low education
Health and Disability	Smoking during pregnancy, Adults receiving disability, Low rates of breastfeeding in hospital
Low-Income	Low employment in managerial positions, high employment in service sector and sales, low median home value, Low educational attainment
Child Safety and Health	Hospitalization due to non-abuse injury among children, Emergency department visits among infants, Motor vehicle injuries <18
Other factors	Infant mortality rates, Assaults needing medical attention, School enrollment 3-4 year-olds, School enrollment 18-19 year-olds

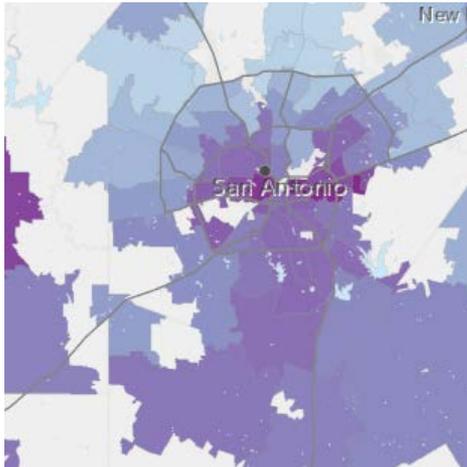
The risk maps are publicly available to stakeholders through [UT Population Health's website](#).

Example Bexar County

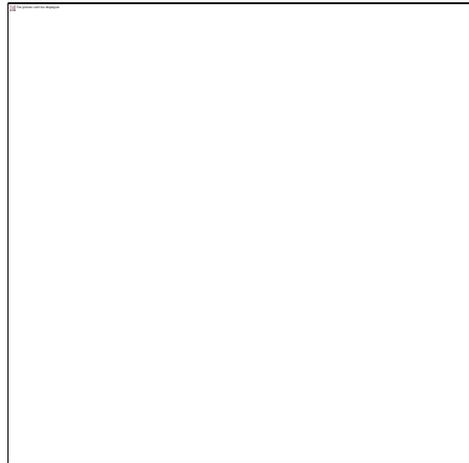


TEXAS
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Infants



Age 1 to 4



Key Community Factors Related to Maltreatment in Early Childhood:

- Child Health & Safety (especially prenatal drug exposure)
- Low-Income
- Assaults Needing Medical Attention*
- Unaffordable Rent*
- Infant Mortality*
- Health and Disability*

EXAMPLE: Highest Risk Zip Codes in San Antonio for Early Childhood Maltreatment:

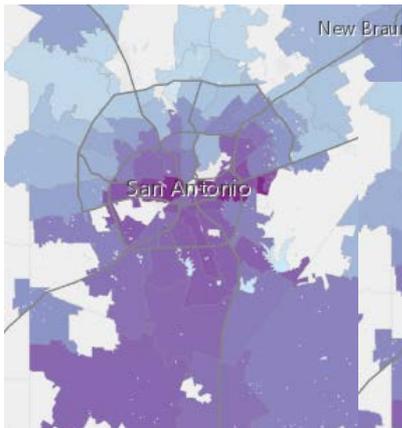
- 78202
- 78203
- 78207
- 78220



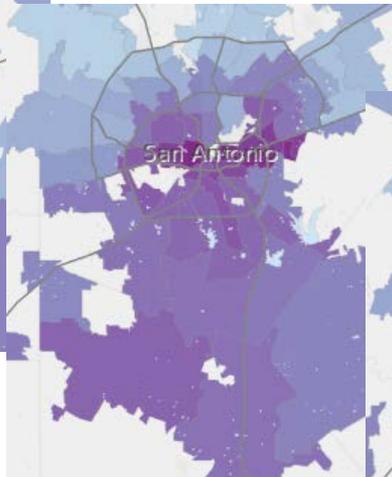
TEXAS

Department of Family
and Protective Services

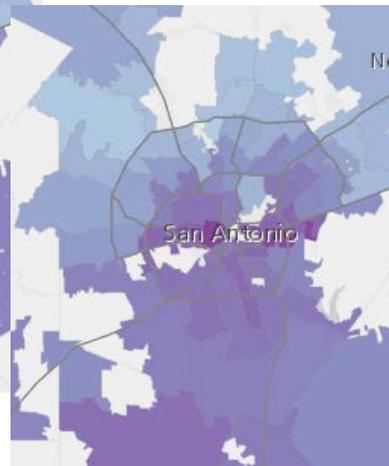
Age 5 to 9



Age 10 to 14



Age 15 to 17



Key Community Factors Related to Maltreatment in School Age:

- Child Health & Safety
- Low-Income
- Health & Disability*
- Assaults Needing Medical Attention*
- Families in Poverty*

EXAMPLE Highest Risk Zip Codes in San Antonio for School Age Maltreatment:

- 78202
- 78203
- 78207
- 78220

Discussion

- Have you seen examples of attorneys/caseworkers/CASA's doing this type work in your communities?
- What could you do in your community?

THANK YOU

Provide
Additional
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