



Improving The Mental, Behavioral And Emotional Health For Kids Involved With The Child Welfare System



THE PROBLEM:

- Children who are involved in the child welfare system often have experienced adverse and traumatic childhood experiences, including child abuse and neglect.
- In 2019, more than 3.4 million youth in the United States were the subject of an investigation or response from child welfare agencies (U.S. Department of Health & Human Services, 2021).
- Youth who are involved in the child welfare system are more likely than same-age peers to have mental, behavioral, and emotional health problems.
 - For example, one study found that, compared to their peers, former child welfare clients were more than twice as likely to have a suicide attempt during adolescence and young adulthood, and two to three times more likely to have a serious psychiatric condition requiring hospitalization (Vinnerljung, Hjern & Lindblad, 2006).
- There are various barriers to behavioral healthcare for youth who are currently and/or who previously had involvement with child welfare services. These include the lack of a medical home or primary care physician, lack of family support, lack of adequate insurance coverage, and a lack of accessibility and funding for preventative services (Christian & Schqarz, 2010).



WHAT WE CAN DO:

- Local communities of practice focused on improving behavioral healthcare for youth in the child welfare system can facilitate communication across sectors, accessibility, and information about appropriate services. These groups can also advocate for enhanced policies and funding to support behavioral healthcare for youth involved in child welfare services.
- Family-based interventions that help to improve parenting skills for families involved in child welfare systems (For example, [Mt. Hope Family Center's The Incredible Years Parenting Group](#)).
- Programs that work to prevent child maltreatment can subsequently prevent child welfare system involvement and consequent mental health problems for youth.
- Upstream prevention approaches that strengthen youths' protective traits and reduce risk factors. For example, the Fostering Healthy Futures program is designed to empower teens involved in the foster care system through mentorship and skill building (Taussig et al., 2015).

- Developmentally-informed policies in child welfare are needed. There is also a need for guidelines and policies that aim to reduce racial and ethnic disparities in child welfare involvement (National Academies of Sciences, Engineering, and Medicine, 2019).
 - Webinar: Using Adolescent Developmental Science to Transform the Child Welfare and Juvenile Justice Systems, Susan Vivian Mangold:
<http://www.thetransformcenter.org/2020-21-webinars>
- Child-centered policies and decision-making that support children’s need for secure attachment relationships can help prevent the experience of further toxic stress for children in foster care. (Rafeedie et al., 2019).
- Practitioners should read and understand the Family First Prevention Services Act of 2018. Resources and tools for practitioners available from the American Bar Association at: https://www.americanbar.org/groups/public_interest/child_law/resources/family-first-act-resources/.



References:

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For Community of Practice examples, resources, and references, [click here](#).

