



It Takes a Village: A Policy Analysis of Texas Permanency Care Assistance Act

Dorothea L. Ivey, PhD

School of Social Work, University of Southern Maine, Masterton Hall, Rm G41B, 71 Bedford St. Portland, Maine 04101, United States.

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***Corresponding Author:** Dorothea L. Ivey, School of Social Work, University of Southern Maine, Masterton Hall, Rm G41B, 71 Bedford St. Portland, Maine 04101, United States. E-mail: dorothea.ivey@maine.edu

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Abstracts

Child maltreatment leads to complex negotiations between courts and families to find permanent living arrangements for children when they are no longer able to live with parents. Therefore, kinship foster care is an ongoing and growing phenomenon in the United States. This paper includes an integrated social policy framework from Prigmore & Atherton [14] and Segal [15] to analyze the Texas Permanency Care Assistance (PCA) for children living in kinship foster homes. The purpose of the paper was to analyze how the federal KGAP laid the groundwork for the implementation of the Texas PCA. Data for this analysis was drawn from a review of relevant literature, federal documents, and the Texas State Legislation. Overall results indicate that there are limitations and unintended consequences of the policy with regard to the well-being of the children in kinship foster care. Additionally, the results indicated that social workers can collaborate as liaisons with all parties involved, known as the village, to improve policy practice.

Keywords: kinship foster care, Texas Permanency Care Assistance, Federal Kinship Guardianship Assistance Program

Introduction

In 2008, Congress passed the Fostering Connections to Success in Increasing Adoptions Act (FCSIAA) during the presidency of George W. Bush [1]. The purpose of the FCSIAA law was to promote stable, out-of-home care for children that were unable to live with their parents. The law amended the Social Security Act to expand adoption incentives to relatives through the provision of the federal Kinship Guardianship Assistance Program (KGAP). Additionally, the KGAP created more options to extend eligibility for Title IV-E foster care. These additional options included adoption assistance for relatives and the extension of kinship guardianship payments for youth aging from 18 to age 21. Eventually, the FCSIAA law phased out all adoption assistance payments from Aid to Families with Dependent Children (AFDC) [2]. The KGAP, a federal grant to the FCSIAA, allowed States, Indian Tribes, Tribal Organization, and Tribal Consortia to provide guardianship assistance payments for children in kinship foster care under federal guidelines. The Children's Bureau [3] indicated that children were eligible to receive kinship payments for a minimum of six-months. Payments from this program were only intended for the care of eligible children by relatives who assumed legal guardianship. During this time, states participating in the program only had the option to follow federal guidelines.

In 2014, the Title IV-E plan amendments allowed states to branch out and implement the KGAP through their own laws and regulations[4].

In Texas, the policy is implemented as the Permanency Care Assistance (PCA) program. The PCA provides financial support of \$400 to \$545 depending on each child's need. To qualify, a kinship caregiver must: (1) apply to become foster parents; (2) have cared for the child at least six months; (3) negotiate and sign a permanency care agreement; and (4) go to court to gain legal custody of the child [5].

As of October 2018, the District of Columbia and 35 states have approved Title IV-E plans that enable them to make claims for federal support of guardianship assistance [2]. Those 35 states are Alabama, Alaska, Arkansas, California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Illinois, Indiana, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nebraska, New Jersey, New Mexico, New York, Nevada, North Carolina, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Vermont, and Washington, West Virginia and Wisconsin. Table 1 identifies states with the highest percentage of kinship placements for 2014 [6].

STATE	PERCENTAGE
Hawaii	47%
Arizona	46%
Florida	43%
Montana	41%
Maryland	38%

Table 1: Top Five States with Kinship Care Placements

In examining the trends of the top five states, it is important to mention the top five most improved states that increased placement numbers from 2000 to 2014 [6].

STATE	PERCENTAGE IN 2000	PERCENTAGE IN 2014	INCREASED PERCENTAGE AMOUNT
New Jersey	7%	36%	+29%
Maine	4%	31%	+27%
Iowa	1%	28%	+27%

Table. 2 To be Cont....

Louisiana	12%	33%	+23%
Vermont	10%	33%	+23%

Table 2: Top five most improved states with the highest percentage increase of kinship care placements (Alvarez).

Problem Statement

Child maltreatment leads to complex negotiations between courts and families to find permanent living arrangements for children. Therefore, kinship foster care is an ongoing and growing phenomenon in the United States. Extended families have played significant roles in raising children for many generations when parents were unable to care for their own children. Financial barriers, however, have prevented relatives from fully providing for children who were maltreated. Yet, some found a way to care for these children on limited resources.

Additional complexities also lead to the death and illness of parents

where children were no longer able to reside with their own homes. Regardless of the situation, some parents requested that children be placed with relatives in their absence. Whatever the decision, the placement must be in the best interest of the child. With the onset of growing numbers of children in the foster care system, courts continually sought to place children with relatives. With the ongoing demands of rearing children, kinship caregivers reported feeling socially isolated and financially burdened [7]. They also reported the lack of information regarding support services, programs, benefits, and policies [8]. The American Association of Retired Persons reported that there were approximately 7.8 million children living in homes where grandparents and other relatives are guardians of over 5.8 million children in the United States [9]. Within the state of Texas, approximately 37% of children are living in kinship care arrangements [10]. Figure 1 illustrates the percentages of children, grouped by ages, living in kinship households in the state of Texas.

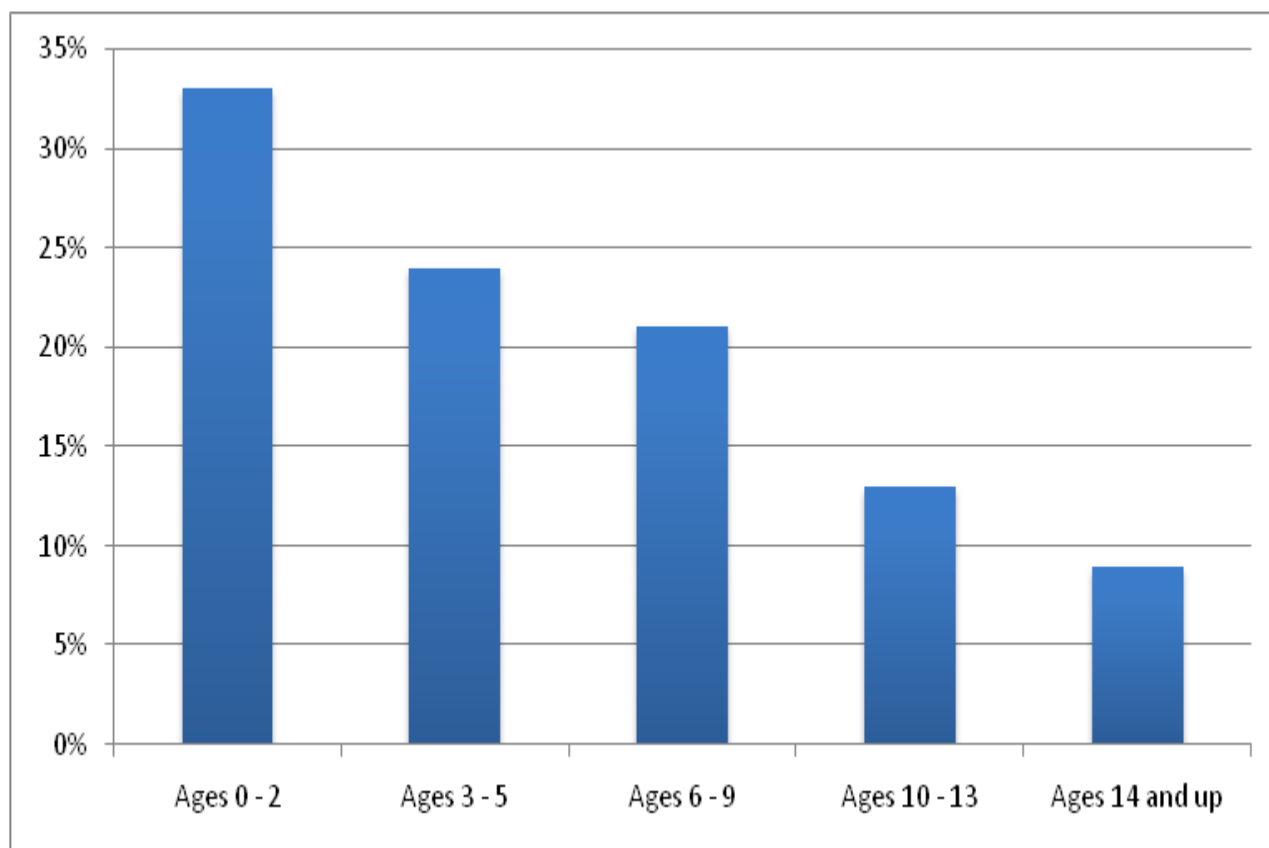


Figure 1: Percentages by ages of children in kinship care in Texas.

These percentages indicate that older the child, the less likely that he or she is placed in kinship care. This does not reveal a specific group of children in kinship care that have not been specifically reported for relative care [11]. This is partly due to those kinship caregivers not reporting as legal guardians. This phenomenon is known as informal kinship care where relatives care for children without the involvement of state authorities [12]. More than 250,000 children are living with family members on an informal basis [13].

Method of Analysis

A tailored integration of both Prigmore & Atherton and Segal policy models was selected for this analysis [14, 15]. The extraction of relevant segments from the two models provided a framework to layout the financial benefit that the PCA policy provides to families and to evaluate its implementation in Texas. In this analysis, the researcher viewed the Texas PCA policy as a social welfare service that spans across the macro to the micro levels [15]. This means that

the assistance program exists at both the federal and state levels of government as well as within social service settings. Therefore, inferences are made from all levels throughout the analysis.

History of the Kinship Guardianship Assistance Program

The KGAP provided the basis for implementation of the Texas PCA. The KGAP was designed to address barriers that resulted in delays to kinship placements in foster care. The purpose of the KGAP was to make additional funding provisions to the FCSIAA in 2008 (Association of Administrators of the Interstate Compact on Adoption and Medical Assistance [AAICAMA], 2014). According to the Children's Bureau, the KGAP program was authorized by the Social Security Act and was amended and implemented under the Code of Federal Regulations (CFR) 45 CFR parts 1355, 1356, and 1357 [17]. Funding for the KGAP was not guaranteed for each state that chose to participate. States were required to seek the federal grant

funding and all monetary provisions from the KGAP were dependent upon an approved Title IV-E plan to manage the administration of the program.

Texas Permanency Care Assistance Equity And Fairness

Equity, justice, and fairness should be paramount for all social welfare policies [14]. Texas attempts to exemplify equity, justice, and fairness for all placement decisions to be made in the best interest of the child. However, the process to access the PCA benefits are tedious and qualified applicants may opt out of applying. The process begins with a status court hearing that is held after 60 days of applying for assistance to ensure that a family service plan was in place and that there was no option for the child to return home. If it is established that the child will reside with the kinship caregiver permanently, the court holds another hearing within five months after the initial 60-day hearing. If approved to proceed, the kinship caregiver will be given temporary legal status. During the temporary status, additional permanency review hearings are held every four months as needed. Within 12 months, the Texas Department of Family Protective Services (DFPS) will offer permanent custody of the child if returning to the parent is no longer an option. Extensions may be granted as needed for an additional six months. This entire process can take place from 12 to 18 months before kinship families receive financial assistance.

Legal aid and attorney referral services are provided to ensure that families have an equitable and fair experience in the process. Caseworkers are assigned to oversee the entire process and to serve as the liaison between the family and the court. Case workers are also responsible for children's safety and that the children's needs are met. If known deficiencies arise, the caseworker will make recommendations as needed. Overall, the state of Texas seeks to pursue a permanency solution for the child. However, the long and tedious process may not be favorable for some families. Certain living situations may change over the 12 to 18 month period such as the kinship caregiver becoming ill or becoming unfit to care for the child. The policy does not outline the timeline neither does it indicate what provisions can be made if another family member takes over a legal guardian.

Policy, Public Law, and Administrative Rules

According to Segal, public policies should be relevant to improving a social problem [15]. The Texas PCA seeks to pursue a permanent solution for the well-being of children living with kinship caregivers. The kinship caregiver in the Texas state statute and must be related to or have a longstanding significant relationship to the child [18]. To receive benefits under the Texas PCA, the kinship caregiver must also become a licensed foster care provider and obtain legal guardianship. The child must have stayed with the kinship caregiver for at least six months after becoming licensed to provide foster care. A criminal background check is conducted for the kinship caregiver. Once all the eligibility is established, a permanency care assistance agreement is completed. The agreement indicates that the kinship provider will receive assistance payments for child rearing.

Compatibility with Social Work Values and Ethics

Social workers often encounter difficulties choosing between personal values and social work professional values [14]. It is at the discretion of the social worker to gauge the variance between the two and make decisions accordingly. According to the NASW Code of Ethics, the primary goal of the social work profession is to enhance human well-being and meet basic needs of all people [19]. Section 6.04(c) states that "Social workers should also promote policies and practices that advocate for programs and promote policies that safeguard the rights of and confirm equity and social justice for all people" [19]. For the Texas PCA, the primary goal is to enhance the well-being of children in kinship foster care.

Relevance to the Appropriate Interest Group

Social welfare policies often have loopholes and unintended consequences that may or may not affect all stakeholders. Kinship caregivers that received benefits from the PCA have spoken out both in favor and against this policy. For some, the PCA has offered continual financial assistance while for others reported the lack of assistance due to delays in the tedious process [20]. Politicians often criticized the Texas PCA from both ends of the spectrum. While some thought that the policy was costly and irrelevant, others defined its requirements as tedious. Politicians that defined it as tedious described that the requirements created barriers for families that need it most. Social workers can be the advocates that collaborate priorities among all interest groups. "Formulation and promotion of alternative policies can be enhanced if social workers build coalitions with interest groups who share common concerns" [14]. The Texas PCA was a result of extensive negotiations between federal and state governments. Representatives from federal and state governments spent time hashing out barriers and made amendments that were with good intention to expand access to more kinship families.

Cost vs. Benefit

Costs should be kept to a minimum and benefits should be extended to everyone that really need it [15]. Costs for training and administration may be claimed with an approved allocation plan as per the Departmental regulations at 45 CFR 95.507. The administrative costs and training for a Title IV-E agency operating under the KGAP:

- 50% of nonrecurring expenses related to child placement up to \$2,000 pursuant to section 474(a)(2)(E) of the Act.
- 75% for employee training of KGAP (both short and long term) or for employment by the agency should be pursuant to section 474(a)(2)(A) of the Act.
- 75% for short-term training of existing foster parents pursuant to 474(a)(2)(B) of the Act.
- 55% for short term training of kinship relatives who have assumed legal guardianship increased by 5% each year pursuant to 474(a)(2)(B) of the Act.
- 50% for Statewide Automated Child Welfare Information System costs pursuant to 474(a)(3)(B) of the Act [16].

Benefits of the Texas PCA are determined by the Texas DFPS based on the level of services for the child. These levels measured in range from low to intense {10, 15}. Low being that the child only needs basic care and intense meaning that the child had strong special needs. The basic monthly benefit is \$400 for children with a low service level. The ceiling monthly benefit is \$545 for children with moderate, specialized, or intense service levels. Families that received benefits must meet all eligibility requirements for the Texas PCA. To gain eligibility to sign a TX PCA agreement with the DFPS, kinship families must be verified as foster families and the caregiver must serve as legal guardian for six consecutive months. In addition, the most recent requirements must be met:

- DFPS must determine that reunification and adoption are not permanency options for the child.
- The child must demonstrate a strong attachment to the kinship caregiver.
- The kinship caregiver must have a strong commitment to caring permanently for the child.
- Older youth must be consulted about the PCA plan.
- The caregiver must negotiate, sign, and abide by a PCA agreement, which takes effect on the date that Permanent Management Conservatorship is transferred.
- The child must be in the temporary or permanent managing conservatorship of DFPS on the day before PMC is transferred.

- Subsequent to signing the PCA agreement, the kinship caregiver must be named in court as the permanent managing conservator for the child [10, 15].

Overall, the costs are kept to a minimum and the benefit to a maximum as the policy can allow.

Is the policy effective?

Overall, the policy accomplishes what it was created to do. It achieves the desired outcome of providing financial assistance to children in kinship foster care. Furthermore, it also provides additional financial assistance as the children age out of the foster care system. The requirements to continue payments for those of ages from 18 to 21 are reasonable and would help the young adult to become a productive citizen. Youth ages 18 to 21 must meet one or more of the following requirements: (1) complete high school or equivalent; (2) be enrolled in a post secondary or vocational school; (3) be involved in a program to eliminate barriers to employment; (4) be employed for 80 hours or more per month; or is incapable of any of the aforementioned due to a medical condition [22].

Is the policy efficient?

Prigmore & Atherton noted that this section has a two-fold criterion. First, it should indicate that society could afford to pay for the programs [14]. Second, it should indicate if society actual receives the most for its money. As aforementioned throughout the study, the Texas PCA processes are quite tedious. There are more than 250,000 children within the state that are not supported due to informal kinship care arrangements [13]. Some of these children in informal kinship care arrangements are unsupported due to the caregivers omitting the process from older age, medical reasons, or from overall confusion of the process. Society can, indeed, afford to pay for the PCA program and there is evidence that kinship caregivers are receiving the benefits.

Recommendations

Several recommendations could help strengthen the policy both at the federal and state levels. First, the verbiage outlining the requirements should be more concise so that individuals of all ages, educational levels, and cultural backgrounds can understand. It was often reported in online materials and in legislation that individuals must obtain a permanent managing conservatorship. However, there is no real definition of this to reveal how it compares or contrasts to obtaining legal guardianship. Establishing clear definitions may help reduce the frequency of delays in the process. Second, more placement options should be made available for siblings. It was often reported that siblings were placed in separate homes even if the relative wanted to care for all of them. Information regarding the overall outcomes of the state program is sparse leaving it almost impossible to gauge its effectiveness. More information should be readily available so that social workers and policy analysts can advocate for the people.

Conclusion

The analysis identified that there are limitations and unintended consequences in the policies in regard to the well-being of the children in kinship foster care. One limitation includes the strict requirements to access benefits to keep siblings together in the same home. Due to this process, siblings are often separated. Few caregivers reported that they fizzled out of the program due to the tedious process and time consumption. The analysis also identified how social workers can collaborate as liaisons with all parties involved, known as the village, to improve policy practice.

Conflicts of Interest: The authors declare no conflicts of interest.

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