Dear Chairman Alexander, Ranking Member Murray, Chairman Grassley, and Ranking Member Wyden:

On behalf of the National Child Abuse Coalition and its twenty-five national member organizations dedicated to the prevention, treatment, and intervention of child abuse and neglect, thank you for your continued efforts to respond to the COVID-19 pandemic. As you prepare the third legislative response package, the National Child Abuse Coalition urges you to act boldly by providing new funds to state and local communities, programs, and services that support vulnerable children and families through the prevention and intervention of child abuse and neglect during this crisis.

The research on child maltreatment could not be clearer: family stress leads to increased risk of child abuse and neglect. With more Americans losing their jobs and income, and having uncertain child care if they are working, families are already feeling the devastating impact of this pandemic. In addition, COVID-19 is forcing families into isolation and away from the extensive network of community supports they rely on in times of need. This isolation will not only put families under great stress, it can also lead to significant increases in the risk of child maltreatment. The Centers for Disease Control and Prevention has carefully studied these risks and issued a report in 2018 identifying family social isolation as one of the leading risk factors for child maltreatment.

We are already seeing the impact of the current crisis on the child welfare system. A national child abuse hotline reports that hotline traffic has doubled in the last 5 days. The calls highlight the many different types of challenges children and families are facing. An 8-year-old called asking for help on how to stop a toddler from crying because he is home watching his 2 younger siblings alone all day while his mom goes to work. An 11-year-old recently called the hotline wanting advice on ways to stay safe at home with her abuser since school was her "safe place." As reported in the Washington Post on Wednesday, the incidence of domestic violence worldwide is increasing as a result of coronavirus. This is particularly dangerous for children,
because perpetrators of domestic violence are much more likely to abuse their children. In addition, job loss is one of the known risk factors for lethal domestic violence, along with being at home with a gun.

In the face of these challenges, children and their families need prevention and intervention services now more than ever. The good news is that with the right resources, communities know how to strengthen families, keep children safe, and ensure that foster care is only used as an option of last resort. As the same 2018 CDC report referenced above makes clear, one of the most important protective factors available to prevent child maltreatment comes from “communities that support parents and take responsibility for preventing abuse.” Your help is critical to protecting children during this especially dangerous time by leveraging the infrastructures already in place to support services that help minimize the risk of child abuse and neglect. Without your help, the formal and informal support systems that families rely on will not be sufficiently available. States and communities need resources to craft new and different solutions, to activate those stakeholders with trusted relationships in the communities, and to provide this support in new ways. State and local prevention programs have already sprung into action, using technology and new methods of outreach to get needed help to families in their communities. We urge you to ensure the children and families who need this type of help can receive it during this crisis by providing increased dedicated funding to prevent child maltreatment during this uncertain and tumultuous time.

In addition, additional funding is needed to help child protective services make the needed adjustments in their response and intervention to new and ongoing cases of maltreatment. While current public health measures are appropriate for addressing the pandemic, they will have the unintended consequence of reducing our ability to identify children who are experiencing maltreatment, potentially leading to significant harm or death. As reported by the bipartisan federal Commission to Eliminate Child Abuse and Neglect Fatalities, risk factors for child deaths include social isolation, financial insecurity for families experiencing major stress, a lack of suitable child care, parents who struggle with mental health disorders and substance abuse issues, and domestic violence in the home. For children who have already come to the attention of the child welfare system but remain at home, they, too, will be at increased risk as states experience diminished capacity to screen and investigate reports of maltreatment and the federal government provides flexibility in the requirements for how monthly in-home caseworker visits are conducted. In addition, dependency courts that provide critical oversight and accountability for the safety of children are closing or postponing trials and hearings, leading to multiple concerns about the impact on child welfare cases, including delaying family reunification. These challenges may be even more pronounced in more rural areas, where children and families are further isolated from other adults and community institutions that could provide support.

Thanks to provisions in the Child Abuse Prevention and Treatment Act (CAPTA) and Title IV-B of the Social Security Act, the country already has in place a community-based prevention and intervention services system that can help to mitigate family stress and keep children safe, as well as respond when children are put at risk. Yet even in “normal” times, this infrastructure is stretched thin to provide vital support to families in need. To adequately respond in a time of national crisis, we urge Congress to provide the following funding to protect children from harm:
• $1 billion for Community-Based Child Abuse Prevention (CB-CAP) grants to quickly deploy resources directly to locally-driven prevention services and programs that are best suited to meet the needs of families in this crisis. CAPTA Title II CB-CAP grants are already supporting community-based services that are trusted by families, such as Family Resource Centers, and that are essential to ensure that funding gets to the communities who need it most. These programs have mobilized into action through baby pantries, providing assistance for distribution of food and medication, information and referral services, and forming of public-private partnerships to meet the needs of families under stress. An infusion of funding for CB-CAP will get funds to communities where it is needed most to help families who are directly affected during the crisis. This crisis is placing tremendous stress on these local systems to adapt and meet the needs of families in their communities. Without adequate support these programs will buckle under the new realities. Additionally, programs that have operated under a fee-for-service model, are unable to do so during this crisis, which threatens their long-term viability. These programs need robust support to avoid waiting lists and to overcome barriers to providing the assistance that families need to thrive under these difficult circumstances.

• $500 million for CAPTA Title I state grants. For children who have already become victims of child abuse and neglect and families already working to make sure they provide safe, stable, and nurturing homes for their children, this funding is vital to ensure state and local child protection systems can continue to respond as quickly as possible to the needs of this vulnerable population. This funding will ensure the child protection workforce have necessary technological resources, when the regular face-to-face contact may be difficult, and proper safety gear when needed to conduct home visits and when face-to-face investigations are necessary. Safety gear, modified facilities, and other resources may also be needed to allow for continued parent-child visits for children who are in foster care with a goal of reunification with their birth families. There is also a great need to protect child welfare first responders who will face their own health risks. Overall, the child protection system faces greater pressure as there is a loss in workforce and the need to work remotely potentially resulting in higher caseloads for fewer caseworkers, and the need to supplement this workforce. This will also be necessary for states to be able to appropriately respond to any increase in maltreatment incidence that occurs during the pandemic.

• $1 billion for Title IV-B Part 2. Also known as the MaryLee Allen Promoting Safe and Stable Families Program, Title IV-B Part 2 is a flexible funding source that can support prevention, family preservation, and intervention services provided by state child welfare agencies, whose demands will undoubtedly increase as a result of this crisis. It is critical that we make investments in these up-front interventions so that we can help families weather the stress of this crisis and prevent a major influx of children into the foster care system.

• $100 million for the Family Violence Prevention and Services Act. This funding will help domestic violence shelters stay open safely or be able to provide immediate flexible funding to victims of domestic violence so they are not forced back into abusive homes when faced with an unexpected job loss or health risk.

• $30 million for the Court Improvement Program (CIP). These funds will be used directly to mitigate the impact of the pandemic on the functioning of child welfare court cases. CIP is the only source of federal funding for state courts related to child welfare.
Dependency courts across the country are already being severely impacted by the pandemic. Court shutdowns and reduced staffing will result in delayed hearings, and, ultimately, to compromised child safety, delayed family reunification, and other critical support to child victims and their families.

- **Medicaid reimbursement for tele-mental health services.** During this crisis, children and families will likely experience disruptions in daily routine, a high degree of uncertainty, possible financial strain and related stress, heightened anxiety, isolation and possible experiences of grief and loss. These circumstances are likely to have disproportionate impact on people with mental health needs and already vulnerable families. While many families and children are practicing social distancing, it remains essential that they have access to necessary mental and behavioral health services. We request that the Center for Medicare and Medicaid services work with states to ensure that tele-mental health services provided by qualified mental health professionals are reimbursable under Medicaid and that any regulatory barriers are eased to enable continued care for children and their parents.

Providing funding through these existing systems will help to ensure that federal money is deployed effectively and efficiently to meet children and families in this time of need. This funding is also vital to ensure that the numerous community-based nonprofits who are on the ground can continue to provide critical services to children and families during this crisis, and to adapt quickly to the changing environment. We thank you for efforts to help children and families.

Respectfully,

Ruth J. Friedman, PhD
Executive Director
National Child Abuse Coalition