ASPE ASSISTANT SECRETARY FOR PLANNING AND EVALUATION | OFFICE OF HUMAN SERVICES POLICY

BRIEF
October 30, 2026

Structural Fragmentation Contributes to Administrative Complexity in Child Welfare Funding

Administration for Children and Families: Alex J. Adams
Office of the Assistant Secretary for Planning and Evaluation: Marissa Abbott, Sofi Martinez, Susan Ryerson Espino, and Danielle Berman

KEY POINTS

- The majority of federal child welfare funding is distributed across at least 14 federal programs or grants, including Title IV-E foster care.
- Federal funding accounts for less than half (43%) of total state child welfare agency spending; most funding comes from state and local funds.
- No one source of federal funding covers all services under the child welfare continuum of care and multiple programs cover the same services and stages of the continuum.
- States braid and sequence their federal child welfare funding**,** increasing administrative complexity to avoid duplication and maximize funding.
- Program-specific requirements for these 14 federal funding streams create an estimated reporting burden of over 30,000 hours for each state and require data to be entered across multiple different systems.
- Improved coordination and simplification of administrative requirements for federal funding streams could help states more effectively and efficiently provide child welfare services.

BACKGROUND

The child welfare system has many different functions, including preventing and addressing reports of child maltreatment, supporting children who are separated from parents or caretakers because of safety concerns, reunifying families who have been separated, or achieving and sustaining permanency for children through adoption and guardianship.[1] Child welfare agencies strive to promote the safety and well-being of all children, youth, and their families that encounter the system including those who age out of foster care without achieving permanency.[1,2]

Of total state child welfare agency spending, about 57 percent comes from state and local sources, with 43 percent coming from federal funding sources.[3] Although federal funding accounts for a minority of total child welfare spending for jurisdictions, it is distributed through multiple mandatory and discretionary funding streams. Congress established these federal funding streams, and the executive branch implemented them over time to address different policy goals, fill gaps in the service array, and provide resources for a broad

range of programs and services for children and families. As a result, related funding streams may operate under different rules, processes, requirements, and reporting structures.[4]

This brief focuses on fragmentation related to these federal child welfare funding streams. Fragmentation refers to the administration of related programs through separate or insufficiently aligned rules, processes, organizations, funding streams, or information systems.[5] Below are short descriptions of the major sources of federal child welfare funding from the U.S. Department of Health and Human Services (HHS) examined in this analysis. Many of the funding sources have multiple streams within them for a total of 14 different funding streams. Table 1 shows the most recent publicly available annual funding amounts for each of the federal child welfare funding streams discussed in this brief.

Title IV-E is the largest driver of federal child welfare funding and has multiple different programmatic components for states, tribes, and eligible territories.[i] Title IV-E foster care, guardianship assistance, and adoption assistance programs support foster care and permanency for children who meet eligibility rules.[3,6] Title IV-E prevention services and kinship navigator programs fund services that prevent foster care entry and facilitate kinship care. The John H. Chafee Foster Care Program for Successful Transition to Adulthood (Chafee) provides funding to support youth and young adults in or formerly in foster care in their transition to adulthood.[7] The Chafee Program also includes an additional appropriation for the Education and Training Voucher (ETV) program, which provides financial resources for young adults who have experienced foster care after age 14 to meet their post-secondary education and training needs.[7]

Title IV-B provides formula grants to states, tribes, and eligible territories for child and family services through two subparts.[ii, 8,9] Subpart 1: Stephanie Tubbs Jones Child Welfare Services (CWS), provides funding that may be used to promote the welfare of all children; prevent child neglect, abuse or exploitation; provide services to at-risk families that allow children to remain with or return to their families; promote the safety, permanency, and well-being of children in foster care and adoptive families; and provide training and support to ensure a well-qualified workforce.[10] Subpart 2: MaryLee Allen Promoting Safe and Stable Families (PSSF), provides funding that may be used in support of services related to community-based family support, family preservation, family reunification, and adoption promotion and support.[8]

Child Abuse Prevention and Treatment Act (CAPTA) provides grants to help states and eligible territories improve child protective services systems (also referred to as the State Grant Program) under CAPTA Title I and funds community-based child abuse prevention efforts through Community-Based Child Abuse Prevention (CBCAP) grants under Title II.[iii11,12]

Temporary Assistance for Needy Families (TANF) block grant funding provides states with the flexibility to cover a range of benefits and services for low-income families and children, including child welfare payments and services.[13,14] Through Tribal TANF, tribes can apply for funding to administer and operate their own TANF programs.[15]

[i] For Title IV-E, "state" includes the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, and American Samoa (42 U.S.C. 1301).
[ii] For Title IV-B, "state" includes the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Virgin Islands, the Commonwealth of the Northern Mariana Islands, and American Samoa (45 CFR 1355.20).
[iii] For CAPTA, grants are available for the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands (section 106(f) of CAPTA).

Social Services Block Grant (SSBG) block grant funding provides flexible funding to states and territories for social services for adults and children across a broad range of service categories, including service categories that may address child welfare-related needs.[16]

Medicaid and the Children's Health Insurance Program (CHIP) provides health coverage to low-income children and adults. Most children eligible for Title IV-E foster care, adoption, or guardianship programs are automatically eligible for Medicaid.[17] Medicaid funds can be used to pay for certain services for children in the child welfare system including rehabilitative services, targeted case management, or behavioral health or disability services.[3] Some title IV-E prevention services can also be Medicaid reimbursable.[18]

Table 1. Federal Funding for Child Welfare Funding Streams (Most Recent Fiscal Year Available)[i,ii]

Federal Child Welfare Funding Stream		FY Funding[ii]
Title IV-E (Fiscal Year 2026 (FY26))	Foster Care	$4.3 billion
	Adoption Assistance	$3.5 billion
	Kinship Guardianship Assistance	$273.9 million
	Prevention Services	$176.7 million
	Kinship Navigator Programs	$16.7 million
	Chafee Foster Care Program for Successful Transition to Adulthood	$142.9 million
	Education and Training Vouchers (ETV)	$42.6 million
Title IV-B (FY26)	Subpart 1: Stephanie Tubbs Jones Child Welfare Services (CWS)	$268.7 million
	Subpart 2: MaryLee Allen Promoting Safe and Stable Families (PSSF)	$490.2 million
CAPTA (FY26)	Title I: State Grant Program	$103.5 million
	Title II: Community-Based Child Abuse Prevention (CBCAP)	$70.4 million
TANF (FY24)	Title IV-A: State Family Assistance Grant	$2.3 billion[iii]
SSBG (FY23)		$971 million[iv]
Medicaid (FY22)		$1.2-1.4 billion[v]

[i]Estimated FY26 Obligations as reported on SAM.gov, except for TANF, SSBG, and Medicaid for which only a portion of total funding supports child welfare services.
[ii]Estimates for Title IV-E, Title IV-B, and CAPTA are based on FY26 funding amounts. TANF, SSBG, and Medicaid funding amounts are based on the most recent sources that are publicly available, which are prior to FY26.
[iii]Reflects spending and transfers of FY24 federal TANF funds only (not including MOE and SSP), including funds for foster care/child welfare services authorized solely under prior law.
[iv]Reflects spending from FY23 and represents only the portion of total SSBG funds reported to be allocated to "child welfare and youth at risk," which includes adoption services, foster care services, and protective services.
[v]Reflects spending from FY22 and represents only a fraction of total Medicaid spending. This estimate is based on child welfare agency reported Medicaid spending for child welfare activities. For more information, please see the Kaiser Family Foundation and the Child Welfare Wonk. The Centers for Medicare & Medicaid Services declined to provide an updated and more targeted estimate.

While this analysis focuses on these 14 sources of HHS child welfare funding, there are other federal funding sources within and outside of HHS that may have allowable uses for child welfare, including programs administered by Substance Abuse and Mental Health Services Administration (SAMHSA) within HHS, the U.S. Department of Housing and Urban Development (HUD), and the U.S. Department of Justice (DOJ). For example, HUD funds the Family Unification Program, as well as the Foster Youth to Independence voucher program, which provides specialized housing vouchers to young adults aging out of foster care.[19,20] There are also other federal funds allocated towards social programs that may help to prevent child abuse and neglect before maltreatment allegations, such as the Maternal, Infant, and Early Childhood Home Visting Program, which are not discussed or included in this analysis.[21]

Additionally, this analysis does not address non-federal child welfare funds, including state, local, and sometimes private funds that constitute the majority of state child welfare agency spending.[1] Finally this analysis focuses on the impacts of federal funding fragmentation for states and does not examine the impacts on territories or tribes, which may experience other challenges related to structural fragmentation.

CHILD WELFARE SERVICES EXIST WITHIN A CONTINUUM OF CARE AND VARY WIDELY IN SCOPE AND BUDGET, BUT NO ONE FUNDING STREAM COVERS ALL SERVICES ON THE CONTINUUM

Federal child welfare programs and services focus on improving child safety, permanency and well-being.[22] Child welfare services exist within a continuum of care which includes the primary prevention of child maltreatment, child welfare intake, investigation and assessment, family preservation, child placement, permanency, and transitions out of the system.[iv] While children and families involved with the child welfare system may experience different trajectories before and after encountering the system, the services they receive fall within this overarching continuum.

Child welfare services span the continuum of care (Table 2), with HHS funding sources supporting services at different points along the continuum (Appendix Table 1).

Table 2. Child Welfare (CW) Service Across a Continuum of Care

Continuum of Care		Services
Primary prevention		Voluntary community-based services
Child welfare intake		Documentation of suspected child abuse or neglect (e.g., report and intake)
Investigation and assessment		Screening and investigation Family assessment
Family preservation		Foster care prevention Early intervention services
Child placement		Foster care Extended Foster Care Kinship care
Permanency		Family reunification services Adoption Adoption promotion and support Kinship guardianship Kinship caregiver support Another planned permanency living arrangement
Transitions out of the system		Transitional and independent living services

Federal funding streams vary in how broadly they can be used across the child welfare continuum of care. Title IV-B Subpart 2, TANF, and SSBG have allowable uses that cover most services across the child welfare

[iv] Definitions from primary prevention and services on the continuum of care are listed in the Appendix.

continuum of care. Title IV-E provides funding across several stages of the child welfare continuum, but is divided among several programs (e.g., prevention services, foster care, adoption guardianship, etc.). For example, Title IV-E funds cover certain prevention services for families with children at imminent risk of entering foster care and for pregnant and parenting youth in foster care,[23] but do not extend to broader prevention services for children and families outside of this eligibility group. At the other end of the continuum, Title IV-E funds services for youth transitioning out of the child welfare system and into adulthood through programs such as Chafee and ETV. Other federal funding covers only parts of the continuum. For example, CAPTA Titles I and II cover many parts of the continuum, but do not cover transitions out of the system.[11,12] Figure 1 shows which pieces of the continuum are covered by each funding stream and how they vary in budget size.

While No One Funding Stream Covers All Services Under the Continuum, Many Cover the Same Services

Many sources of federal child welfare funds target similar populations or services but differ in eligibility rules or allowable uses. For example, CAPTA Title II, Title IV-B Subparts 1 and 2, and Title IV-E prevention services funding can cover foster care prevention and early intervention services, although how specific programs or services are funded may differ across states. Title IV-E prevention services are subject to eligibility criteria that vary by state and evidence-based criteria requirements for federal reimbursement that may not apply to other prevention efforts.[22] Title IV-B prevention services are often used to serve a broader range of families that need prevention services other than those allowable under Title IV-E.

To Address this Fragmentation of Funding, States Often Braid and Sequence Funds, Increasing Administrative Complexity

States often combine multiple funding streams to serve children and families. States are innovative in how they braid and sequence funding to maximize the allowable uses of each funding stream, while adhering to reporting requirements. However, this can increase administrative complexity and may make coordination, oversight, and implementation of services across the continuum of care challenging.[v]

Specifically, braiding refers to when multiple funding streams are combined with separate tracking and reporting for each individual source of funding.[8] This requires states to have cost allocation systems, program specific tracking, and compliance management. Sequencing refers to when states use separate funding streams to provide services at different points along a continuum, with one following another.[24] Some funding streams, including TANF and SSBG, individually provide states with flexibility to support services across several parts of the child welfare continuum of care, subject to each program's statutory and reporting requirements, making them well-suited for braiding and sequencing.

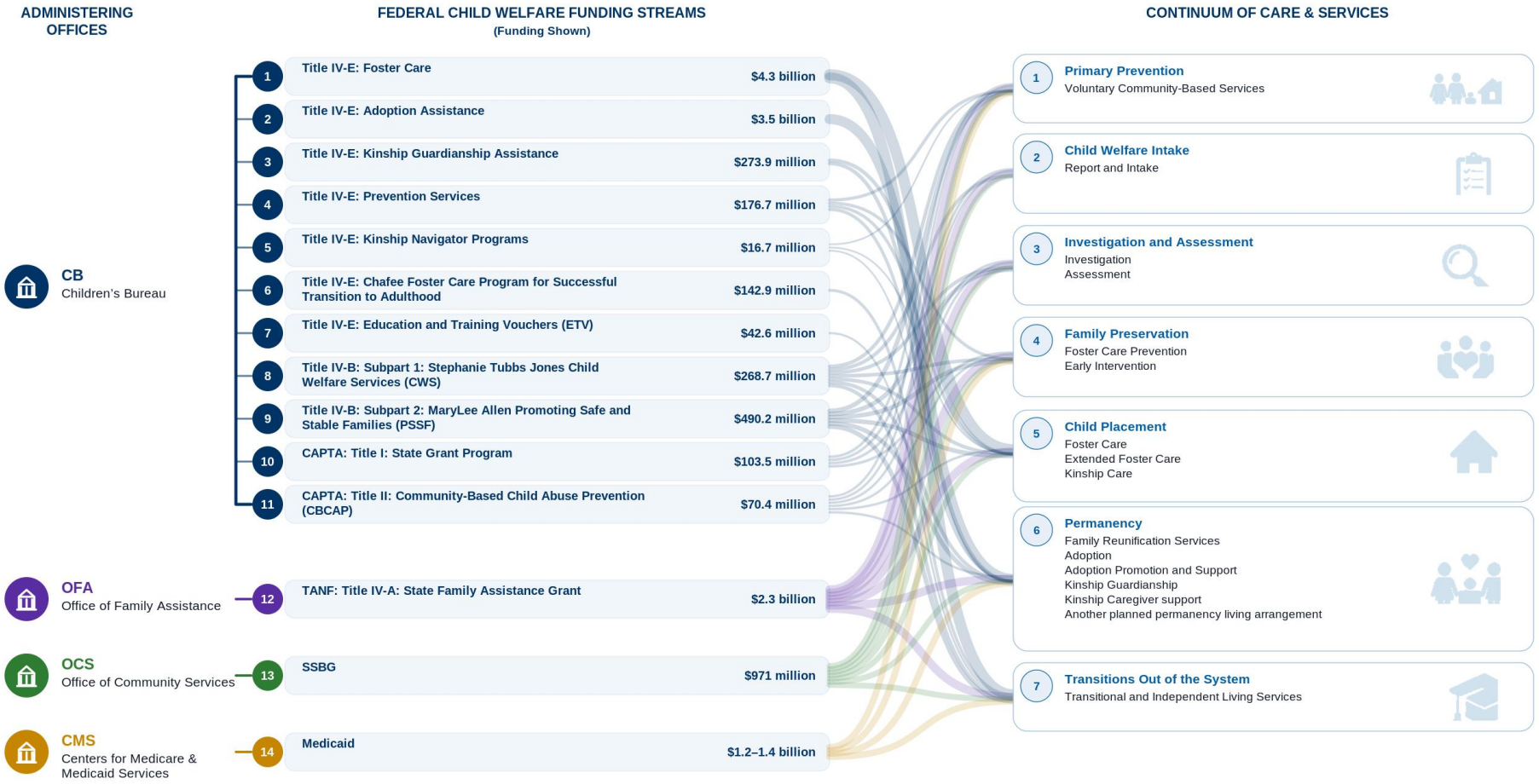
Braiding and sequencing are not just technical skills; they often require shared governance and decision-making with other departments or agencies. States may also braid and sequence their federal and non-federal funding, contributing further to administrative complexity. However, depending on varying state needs and budget constraints, states may not choose or be able to apply funding across all allowable uses, particularly when state matching funds are required. Therefore, it is plausible that states may not be accessing some

[v] Another way to combine multiple sources of funding is through blending. Blending combines funds into one central stream for a specific initiative, without tracking individual sources of funding. Opportunities for blending funds are limited, and therefore not discussed here, as states try to avoid audit risk.

Figure 1. Federal Child Welfare Funding Network

Fragmentation Contributes to Administrative Complexity in Child Welfare Funding

Federal child welfare funding is fragmented across multiple programs. No one source covers all services in the continuum.
States braid and sequence funds to maximize use while managing administrative complexity. Most services have multiple potential federal funding sources.
States may braid and sequence funding to maximize allowable uses.



KEY / NOTES

How to read: Three columns show administering office, funding stream, and continuum of care.
This graphic maps each funding stream to the continuum of care using Appendix Table 1.
Line thickness reflects the relative funding amount shown.
Total funding is known, but the share used for each continuum stage is not known.

Funding years: CB streams use FY2026; TANF FY2024;
SSBG FY2023; Medicaid FY2022.
Federal funds account for 43% of total spending;
state/local funds provide the majority.

Thread color: CB OFA OCS CMS

CHILD WELFARE FUNDING SOURCES CAN CREATE BURDEN FOR STATES

Adding to the complexity of federal child welfare funding is that each stream has its own requirements and constraints, including matching and maintenance of effort (MOE) requirements, whether funding is capped or open-ended, eligibility and service rules, cost allocation requirements, and reporting and audit requirements.

For example, Title IV-E foster care, adoption, guardianship assistance and prevention services, are open-ended entitlements that reimburse agencies for a portion of allowable costs, but may require child-specific eligibility, cost allocation, quarterly reimbursement claims, and maintenance of effort.[25] Title IV-B Subparts 1 and 2 and CAPTA Title II CBCAP grants are examples of programs that require a non-federal match.[26,27]

TANF imposes MOE requirements and a work-participation accountability structure.[28] SSBG does not have match or MOE requirements but grant recipients must report planned and actual expenditures by service category, including through the Intended Use Plan, Pre-Expenditure Report, and Post-Expenditure Report.[15]

Several programmatic constraints and spending rules also apply to various child welfare prevention funding sources. For example, Title IV-B Subpart 2, also known as PSSF, requires that funds be tied to specific service categories, such as family support services and family preservation services.[29] Title IV-E prevention services are tied to specific time-limited services and evidence thresholds, and those evidence thresholds determine state ability to receive federal reimbursement for services provided.[22] The Title IV-E Prevention Services Clearinghouse determines whether the services meet the statutory evidence thresholds. Title IV-E prevention services are also subject to a payer of last resort provision, requiring public or private funding sources that would have covered an allowable Title IV-E prevention service to be expended before Title IV-E funds.[35] Compliance with payer of last resort requirements can be administratively demanding because the agency must make this determination for each child and service and document it for audit.

When these multiple and simultaneous program requirements are taken together for overlapping populations and services, the result is a large amount of cumulative administrative burden for states.

There are Significant Reporting and Paperwork Burdens Associated with Child Welfare Funding Streams

Federal funding streams have different reporting requirements, which often require entering information into separate data systems. Table 3 highlights that burden hours, as documented for Paperwork Reduction Act (PRA) review, vary across child welfare and other human services programs. States must operate through multiple reporting pipelines with different data definitions, reporting periods, staffing constraints, and validation requirements, which may further contribute to administrative burden.

Table 3 shows that the Adoption and Foster Care Analysis and Reporting System (AFCARS) has the largest reporting burden, as it is the primary nationally mandated data collection system for children in the Title IV-E foster care program, including those who have been adopted.[30] The AFCARS system is estimated to require over 18,000 annual burden hours per state. This estimate includes time needed to gather the required information, develop or modify IT systems, carry out administrative tasks, and report on the information collected[31] and amounts to the working hours of more than 8 full-time employees. The information gathered through AFCARS is also used for other Title IV-B reporting systems, which allows their burden estimates to be significantly lower since the reports rely on data collected for AFCARS.[32] Despite the large number of hours associated with the AFCARS system, all funding streams have administrative reporting burdens associated with them regardless of the amount of funding. When looking across federal funding streams, states spend nearly an additional 15,000 hours reporting data into other systems outside of AFCARS.

Table 3. Annual Burden Hours for States by Select Reporting Systems[i]

Reporting system	OMB Control Number	Average burden hours per response	Response frequency
AFCARS State Recordkeeping (June 2026)	0970-0422	9,035.97	2 per year
AFCARS Reporting (June 2026)	0970-0422	17	2 per year
National Youth in Transition Database (NYTD) Data File (March 2025)	0970-0340	1,238	2 per year
National Child Abuse and Neglect Data System (NCANDS; June 2026) Detailed Case Data Component: IT Staff	0970-0424	42.6	1 per year
National Child Abuse and Neglect Data System (NCANDS; June 2026) Detailed Case Data Component: Programmatic Staff	0970-0424	65.4	1 per year
Title IV-B Child and Family Service Plans (CFSP; July 2026)	0970-0426	90	1 every 5 years
Title IV-B Annual Progress and Services Reports (APSR; July 2026)	0970-0426	50	3 per year
Title IV-B Child and Family Services (CFS-101, Part I, II, and III; July 2026)	0970-0426	5	3 per year
CBCAP Application (February 2024)	0970-0155	40	3 per year
CBCAP Annual Report (February 2024)	0970-0155	24	3 per year
Children's Bureau (CB)-496 Title IV-E Financial Report (May 2024)	0970-0510	25	4 per year
Title IV-E Plan (July 2025)	0970-0433	16	1 every 4 years
Title IV-E Prevention Services Plan (July 2025)	0970-0433	5	1 every 5 years
TANF Administration for Children and Families ACF-199 (November 2025)	0970-0338	2,100	4 per year
TANF ACF-209 (November 2025)	0970-0338	714	4 per year
TANF ACF-196R (December 2023)	0970-0446	14	4 per year
SSBG Pre-Expenditure Report Form (February 2024)	0970-0234	2	1 per year
SSBG Intended Use Plan (February 2024)	0970-0234	40	1 per year
SSBG Post-Expenditure Reporting Form (February 2024)	0970-0234	110	1 per year

[i] Reported PRA burden hour estimates for each reporting system as tracked under their respective OMB control numbers. Individual form entries sharing a control number reflect allocations from a single, consolidated information collection package.

CONCLUSION

Reflecting fragmented federal policy making over time, the 14 funding streams examined in this brief are allocated towards programs and services across different and overlapping parts of the child welfare continuum of care.[2] Despite federal funds covering less than half of state spending on child welfare, structural fragmentation creates significant reporting burdens and administrative complexities for states in managing their funding sources. Administrative complexity may also create some difficulty for states in aligning funding with local needs.[33]

To help manage this structural fragmentation, states must often work across funding streams to achieve positive child welfare system outcomes. This process includes braiding and sequencing of federal funds and combining federal funding with non-federal funding to meet the needs of children and families. Fragmentation in federal funding could theoretically leave gaps that states need to fill in providing services that are essential

to a well-functioning, efficient, and effective child welfare system. Fragmentation also has the potential to generate program integrity concerns, particularly related to payer of last resort provisions, as multiple funding streams can cover the same services.

These challenges suggest there may be an opportunity to better align across federal funding sources and simplify administrative requirements to further promote state flexibility and decrease burden. Even with existing funding sources staying the same, there may be opportunities to modernize reporting requirements to decrease response burdens. There is also an opportunity for researchers to better understand how states braid and sequence their welfare funding to explore if and how fragmentation manifests gaps in the care continuum when implemented at the state-level. Addressing challenges associated with child welfare financing could improve administrative efficiency, service coordination, and potentially outcomes for children and families.

REFERENCES

[1]Child Welfare Information Gateway. (2025). *How the child welfare system works.* U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. https://www.childwelfare.gov/resources/how-child-welfare-system-works/

[2]Child Welfare Information Gateway. (2025). Working with youth to develop a transition plan. U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. https://www.childwelfare.gov/resources/working-youth-develop-transition-plan/

[3]Rosinsky, K., Fischer, M., Haas, M., Ibarra, A., & Williams, S.C. (2025). *Child Welfare Financing SFY 2022: A survey of federal, state, and local expenditures*. Child Trends. DOI: 10.56417/5123x6901v

[4]Stoltzfus, E. (2021). *Child welfare programs: A timeline.* Congressional Research Service. https://www.congress.gov/crs-product/IF11843

[5]U.S. Government Accountability Office (2015). *Fragmentation, overlap, and duplication: An evaluation and management guide.* U.S. Government Accountability Office. https://www.gao.gov/assets/gao-15-49sp.pdf

[6]Children's Bureau (2024, November). *Focus areas.* U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/focus-areas

[7]Children's Bureau (2025, September). *John H. Chafee foster care program for successful transition to adulthood.* U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/grant-funding/john-h-chafee-foster-care-independence-program

[8]Children's Bureau (2024, June). *MaryLee Allen Promoting Safe and Stable Families*. U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/law-regulation/pssf-title-iv-b-subpart2-ssa

[9]Stoltzfus, E. (2026). *Child welfare: Purposes, federal programs, and funding* (IF10590). Congressional Research Service. https://www.congress.gov/crs-product/IF1059

[10]Children's Bureau (2012). *Stephanie Tubbs Jones Child Welfare Services Program Title IV-B Subpart 1 Child Welfare Services*. U.S Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/grants-funding/stephanie-tubbs-jones-child-welfare-services-program-title-iv-b-subpart-1-child

[11]Children's Bureau (2024, June). *Child abuse prevention and treatment act (CAPTA) state grants*. U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/grant-funding/child-abuse-prevention-and-treatment-act-capta-state-grants

[12]Children's Bureau (2026, March). *Community-based child abuse prevention (CBCAP) grants*. U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/grant-funding/community-based-child-abuse-prevention-cbcap-grants

[13]Office of Family Assistance (2022, June). *Temporary Assistance for Needy Families (TANF).* U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/ofa/programs/temporary-assistance-needy-families-tanf

[14] U.S. Government Accountability Office (2025). *Child welfare: States' use of TANF and other major federal funding sources.* U.S. Government Accountability Office. https://www.gao.gov/assets/gao-25-107467.pdf

[15] Office of Family Assistance. (n.d.). *Tribal TANF*. Administration for Children and Families. https://acf.gov/ofa/programs-services/TANF/tribal

[16]Office of Community Services (2026, August). *Social Services Block Grant Program (SSBG).* U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/ocs/programs/ssbg

[17]Centers for Medicare & Medicaid Services. *Improving Timely Health Care for Children and Youth in Foster Care.* U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services. https://www.medicaid.gov/medicaid/quality-of-care/quality-improvement/foster-care-learning-collaborative

[18]Urban Institute (2025). *Medicaid spending by child welfare agencies in SFY2022.* Urban Institute. https://media.childtrends.org/media/SFY2022MedicaidFactsheet_ChildTrends_July2025.pdf

[19]U.S. Department of Housing and Urban Development (2026, September). *Family unification program (FUP).* U.S. Department of Housing and Urban Development. https://www.hud.gov/helping-americans/housing-choice-vouchers-family

[20]HUD Exchange (2026). *Foster youth to independence initiative.* U.S. Department of Housing and Urban Development. https://www.hudexchange.info/programs/public-housing/foster-youth-to-independence-initiative/

[21]Health Resources & Services Administration (2026). *Maternal, infant, and early childhood home visiting (MIECHV) program*. U.S. Department of Health and Human Services, Health Resources and Services Administration. https://mchb.hrsa.gov/programs-impact/maternal-infant-early-childhood-home-visiting-miechv-program?

[22]Children's Bureau (2026, September). *Current issues & priorities.* U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/about/current-priorities-issues
[23]Children's Bureau (2026, September). *Title IV-E prevention program.* U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/programs-services/title-iv-e-prevention-program
[24]Office of Disability Employment Policy (2026). *Blending, braiding, and sequencing*. U.S. Department of Labor. https://www.dol.gov/agencies/odep/program-areas/cie/bbs
[25]Congressional Declaration and Purpose: Authorization of Appropriations. 42 U.S.C. § 620 (2026).
[26]Children's Bureau (2026, September). *Child welfare policy manual.* U.S. Department of Health and Human Services, Administration for Children and Families. https://cwpm.acf.gov/
[27]Children's Bureau (2025). Program Instruction: community-based grants for the prevention of child abuse and neglect. U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/sites/default/files/documents/cb/pi-25-04.pdf
[28]Falk, G., Landers, P.A. (2026). *Work requirements: The Temporary Assistance for Needy Families (TANF) work standard and how states met it.* Congressional Research Services. https://www.congress.gov/crs-product/R48827
[29]Children's Bureau (2026, September). *Promoting Safe and Stable Families: Title IV-B, subpart 2, of the Social Security Act.* U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/grant-funding/promoting-safe-and-stable-families-title-iv-b-subpart-2-social-security-act
[30]Children's Bureau (2026, September). *Adoption and foster care analysis reporting system (AFCARS).* U.S. Department of Health and Human Services, Administration for Children and Families. https://acf.gov/cb/data-research/adoption-fostercare
[31] Office of Management and Budget. (n.d.). *ICR documents*. Reginfo.gov. https://www.reginfo.gov/public/do/PRAViewDocument?ref_nbr=202606-0970-022
[32] Office of Management and Budget. (n.d.). *ICR documents*. Reginfo.gov. https://www.reginfo.gov/public/do/PRAViewDocument?ref_nbr=202607-0970-007
[33]U.S. Government Accountability Office (2013). *Child welfare: States use flexible federal funds, but struggle to meet service needs.* U.S. Government Accountability Office. https://www.gao.gov/products/gao-13-170

APPENDIX

Appendix Table 1. Allowable Uses of Select Federal Funding Sources Across the Child Welfare Continuum of Care

		Funding													
Continuum of Care	**Service**	**Title IV-E Foster Care**	**Title IV-E Adoption Assistance**	**Title IV-E Kinship Guardianship Assistance Program**	**Title IV-E Prevention Services**	**Title IV-E Kinship Navigator Program**	**Chafee Foster Care Program for Successful Transition to Adulthood (Title IV-E)**	**Education and Training Vouchers (Title IV-E)**	**Title IV-B, Subpart 1 (CWS)**	**Title IV-B, Subpart 2 (PSSF)**	**CAPTA Title I**	**CAPTA Title II**	**TANF**	**SSBG**	**Medicaid**
Primary Prevention	Voluntary Community-Based Services				X	X			X	X	X	X	X	X	X
Child Welfare Intake	Report and Intake								X		X	X	X	X	
Investigation and Assessment	Investigation								X		X			X	
	Assessment								X	X	X	X	X	X	
Family Preservation	Foster Care Prevention				X				X	X	X	X	X	X	X
	Early Intervention				X				X	X	X	X	X	X	X
Child Placement	Foster Care	X			X				X	X		X	X	X	
	Extended Foster Care	X													

	Kinship Care	X		X	X	X			X	X		X	X	X	
Permanency	Family Reunification Services								X	X		X	X	X	X
	Adoption		X						X	X		X	X	X	
	Adoption Promotion and Support		X						X	X		X	X	X	
	Kinship Guardianship		X	X		X			X	X		X	X	X	
	Kinship Caregiver Support				X	X			X	X		X	X	X	X
Transitions Out of the System	Transitional and Independent Living Services	X					X	X	X	X			X	X	X
	Statutory Authority	42 U.S.C. §§ 670–679c; foster care mainte-nance at § 672	42 U.S.C. § 673(a)–(c)	42 U.S.C. § 673(d)	42 U.S.C. § 671(e); payment authority at § 674(a)(6)	42 U.S.C. § 627; IV-E reimburse-ment at § 674(a)(7)	42 U.S.C. § 677	42 U.S.C. § 677(h)(2), § 677(i)	42 U.S.C. §§ 621–628c	42 U.S.C. §§ 629–629m	42 U.S.C. § 5106a	42 U.S.C. §§ 5116–5116i	42 U.S.C. §§ 601–619	Title XX / 42 U.S.C. §§ 1397–1397f	Title XIX of the Social Security Act

Appendix Table 1 Definitions

- **Primary Prevention:** Primary prevention programs are provided broadly to communities to prevent child abuse and neglect prior to Primary prevention includes programs like public education and parenting classes.
- **Report and Intake:** The child protective services (CPS) agency receives and screens a report of suspected or known child abuse or neglect (CAN) to determine if the allegation meets criteria for investigation.
- **Investigation:** The child protective services (CPS) agency assesses whether abuse or neglect occurred and the level of risk to the child.
- **Assessment:** The child protective services (CPS) agency assesses the family to determine whether the child and family would benefit from services or concrete supports.
- **Foster Care Prevention:** Child welfare agency or community-based services provided to a child and their caregiver(s) to address factors putting the child at risk of entering foster care.
- **Early Intervention:** Services and supports for young children with developmental delays or disabilities and their families, such as speech therapy, physical therapy, and other supports for social-emotional development and family education.
- **Foster Care:** Care for children who are placed away from their parents or guardians and for whom the child welfare agency has placement and care responsibility. Foster care maintenance payments may be made on behalf of the child using state, tribal, local and/or federal funds.
- **Kinship Care:** Kinship care is when a child in need lives with a relative. This can be an informal arrangement or a formal arrangement through foster care or legal guardianship.
- **Family Reunification Services:** Services and activities provided to a child in foster care or who has returned home from foster care to facilitate the reunification of the child safely and appropriately, and to ensure the strength and stability of the reunification. For example, counseling, substance abuse treatment services, support groups, and visitation support.
- **Adoption:** Provided by state or tribal law, establishes the legal relationship of parent and child between persons who are not related by birth, with the same mutual rights and obligations that exist between children and their birth parents. Adoption assistance payments may be made on behalf of the child using state, tribal, local and/or federal funds.
- **Adoption Promotion and Support:** Services and activities designed to encourage more adoptions out of the foster care system and that provide pre- and post-adoptive services to support adoptive families.
- **Kinship Guardianship:** When relatives or kin assume legal guardianship of children. Definitions of legal guardianship vary state-by-state. Kinship guardianship assistance payments may be made on behalf of the child using state, tribal, local and/or federal funds.
- **Kinship Caregiver Support:** Programs and services to help kin caregivers meet their own needs and the needs of the children they are raising, such as through training, legal assistance and community services.
- **Transitional and Independent Living Services:** Services and supports to help young people exiting foster care in their transition to adulthood.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Assistant Secretary for Planning and Evaluation

200 Independence Avenue SW, Mailstop 447D
Washington, D.C. 20201

For more ASPE briefs and other publications, visit:
aspe.hhs.gov/reports

SUGGESTED CITATION
Adams, A. J., Abbott, M., Martinez, S., Ryerson Espino, S., Berman, D. Structural Fragmentation Contributes to Administrative Complexity in Child Welfare Funding. Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. October 2026.

COPYRIGHT INFORMATION
All material appearing in this report is in the public domain and may be reproduced or copied without permission; citation as to source, however, is appreciated.

DISCLAIMER REGARDING WEB LINKS
Links and references to information from non-governmental organizations are provided for informational purposes and are not an HHS endorsement, recommendation, or preference for the non-governmental organizations.

DISCLOSURE
This communication was printed, published, or produced and disseminated at U.S. taxpayer expense.

Subscribe to the ASPE mailing list to receive email updates on new publications:
Sign up for email updates (hhs.gov)
For general questions or general information about ASPE:
aspe.hhs.gov/about