

Exploration of Child Welfare Systems' Experiences with Custody Relinguishment While foster care is intended to provide substitute care when children can't remain safely with their family, some children enter foster care primarily to obtain behavioral health and/or disability services which they would otherwise be unable to access – a practice known in the field as custody relinquishment or voluntary placement. Placing a child in the care of a child welfare agency so that children may receive treatment can be traumatizing for children and families and costly for state and local service systems. There is policy and practice interest in understanding this issue, yet the frequency of and reasons for custody relinquishment are largely anecdotal because most states do not systematically track these cases.

The HHS Office of the Assistant Secretary for Planning and Evaluation (ASPE), with their contractor Mathematica, is using mixed research methods to examine the prevalence and characteristics of children who have experienced custody relinquishment as well as factors associated with custody relinquishment. The study will leverage recent linkages between administrative child welfare and Medicaid data systems that may allow for new insights into these cases.

## **RESEARCH QUESTIONS**

Through analysis of linked health and child welfare data in two states combined with key informant interviews and focus groups, the project will explore the following questions:

- 1. What is the prevalence of children entering foster care primarily to receive behavioral health and/or disability services?
- 2. What are the demographic characteristics, family circumstances, and needs of children who enter foster care primarily to receive behavioral health and/or disability services?
- 3. How do these characteristics compare to other children in foster care?
- 4. What types of interventions are most often utilized by children who enter foster care in this fashion?
- 5. What factors associated with access to care drive parents to relinquish custody?
- 6. How do states' arrays of behavioral health services relate to services needed by these children and the capacity of foster care system to provide services?
- 7. What policy options might enable the child welfare and behavioral health treatment systems to address the needs of these children more appropriately?

Quantitative analyses will use data from the Child and Caregiver Outcomes Using Linked Data (CCOULD) project, sponsored by ASPE and the Administration for Children and Families, which links administrative data on Medicaid and child welfare services delivered to children in Florida and Kentucky. Quantitative analysis will be complemented by qualitative data from interviews with staff of state and local agencies providing child welfare, behavioral health, and disability services as well as family members, family advocacy organizations, and service provider associations. Initial results, to be published in one or more research briefs, are expected in the fall of 2024. For more information, contact Laura Radel (Laura.Radel@hhs.gov).