

# BACKGROUND

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## The Role of Faith-Based Agencies in Child Welfare

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### Abstract

*Faith-based organizations have been a cornerstone of the child welfare system for decades, with many modern agencies tracing their roots back over 100 years. While the government has increased its involvement in the caretaking of vulnerable children over the past several decades, states still rely heavily on faith-based agencies (FBAs). It is common for states to contract with private child welfare agencies—including FBAs—for services like foster care, adoption, and recruitment of foster and adoptive families. Many communities rely heavily on the contribution and work of FBAs. However, in some areas FBAs have been forced to discontinue their foster and adoption services due to regulations that would require them to violate their sincerely held religious beliefs.*

Faith-based organizations have been a cornerstone of the child welfare system for decades, with many modern agencies tracing their roots back over 100 years. While the government has increased its involvement in the caretaking and well-being of vulnerable children over the past several decades, states still rely heavily on faith-based agencies (FBAs). It is common for states to contract with private child welfare agencies—including FBAs—for services like foster care and adoption and to utilize faith networks to help recruit foster and adoptive families.

This *Background* examines the role of faith communities and FBAs in the child welfare system, including:

- An assessment of states that do and do not seek out collaborations with faith communities and FBAs—particularly states impacted by the opioid crisis; and

### KEY POINTS

- In some areas, faith-based agencies (FBAs) have been forced to discontinue foster and adoption services due to regulations that would require them to violate their sincerely held religious beliefs.
- Several states have already passed laws to exempt FBAs from requirements that would compel them to choose between serving vulnerable children and families and following their faith.
- This is particularly important as the nationwide number of children in foster care rises sharply, at least in part due to the opioid crisis—which has been declared a national emergency.
- States would do well to take advantage of the contributions of faith communities and organizations, working with them to improve services for children and families, rather than pushing them out of the child welfare arena.

This paper, in its entirety, can be found at <http://report.heritage.org/bg3320>

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- How states may be impacted by regulations that conflict with some FBAs, forcing these organizations to cease their foster and foster-to-adopt programs.

The data on child welfare agencies, including private and faith-based agencies, are limited overall, though some organizations collect and analyze more data than others. Data collection and accessibility in an agency are dependent on a number of factors, including county, state, and federal requirements, size and resources of the organization, the practices and culture of the agency, and the data system used. Nonetheless, the information and research on FBAs currently available are able to give us important insights into the crucial role of FBAs in the child welfare system. As states and agencies across the nation begin moving towards more sophisticated data collection, a clearer picture will emerge of the operation and outcomes of FBAs.

What is already evident is that many communities rely heavily on the contribution and work of FBAs. However, in some areas there are FBAs that have been forced to discontinue foster and adoption services due to regulations that would require them to violate sincerely held religious beliefs. For example, Illinois began requiring all child welfare agencies, including FBAs such as Catholic Charities, to be willing to place children with same-sex couples. While many child welfare agencies in Illinois already worked with same-sex couples, Catholic Charities organizations were told they must also—despite religious beliefs which prevented them from doing so. In 2011, after decades of service, they ended their foster and adoption contracts with the state, displacing thousands of children. Some FBAs were forced to do the same in Boston, San Francisco, and Washington, DC.

Legislatures in several states—including Michigan, Texas, Virginia, South Dakota, North Dakota, Mississippi, Alabama, and, recently, Oklahoma and Kansas—have passed laws to exempt FBAs from

requirements that would compel them to choose between serving vulnerable children and families and following their faith. These protections ensure a diverse set of agencies to serve a diverse population and help maximize the number of foster and adoptive families available. This is particularly important as the nationwide number of children in foster care rises sharply, at least in part due to the opioid crisis, which has been declared a national emergency. From 2012–2016 alone, there was a 10 percent increase in the number of children in care.<sup>1</sup>

In the aim for quality foster care, states would do well to take advantage of the contributions of faith communities and organizations, working with them to improve services for children and families, rather than pushing them out of the child welfare arena.

## Utilizing Faith-Based Agencies and Networks

**Why States Contract with Private and Faith-Based Agencies.** Child welfare services, such as foster care and child protection, initially began in the private sector, with some states' reliance on private and faith-based organizations tracing back into the early 1800s.<sup>2</sup> While the government provided some funding to these privately run programs, it was not until the early and mid-1900s that it took a more prominent role and a public child welfare system was created. But beginning in the 1990s, the majority of states increased their reliance on private providers again, partly to improve the cost and quality of services, and many states began using performance-based contracts. Some states, like Florida, Kansas, and Illinois, have heavily privatized their child welfare services. While there are many different types of relationships between public and private providers represented in local child welfare systems across the U.S., the states maintain ultimate authority over cases.

Private and faith-based agencies and networks can bring certain benefits to their partnerships with state child welfare agencies. For example, they may

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1. U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, "AFCARS Report No. 24," <https://www.acf.hhs.gov/sites/default/files/cb/afcarsreport24.pdf> (accessed May 16, 2018), and U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, "AFCARS Report No. 20," <https://www.acf.hhs.gov/sites/default/files/cb/afcarsreport20.pdf> (accessed May 16, 2018).

2. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, "Evolving Roles of Public and Private Agencies in Privatized Child Welfare Systems," March 2008, <https://aspe.hhs.gov/basic-report/evolving-roles-public-and-private-agencies-privatized-child-welfare-systems> (accessed May 9, 2017).

be able to tap into faith communities and attract new populations of foster and adoptive parents. In some instances, private providers may supplement the money they receive from the state to care for foster children. Randy Daniels, Vice President of International Resource and Program Development at Buckner International, which provides child welfare services in Texas, said that the organization uses private donations to supplement “about 35 percent on top of what the state pays us to care for a child, to ensure the kids get better care.”<sup>3</sup> That money goes toward things state dollars do not compensate. “We pass more money on to the foster family for a child’s school events, clothing, athletics, etc. We also do additional training, such as trauma-informed training.”

Some FBAs also excel at placing children who may have a more difficult time finding adoptive homes, including older children, sibling groups, and children with special needs. For instance, in 2016, 45 percent of Catholic Charities adoptions were children with special needs, according to the organization. One specific example of this is St. Vincent Catholic Charities in Michigan (which is in the midst of a lawsuit by the ACLU over its religious beliefs<sup>4</sup>), which excels at finding homes for large sibling groups and teens.<sup>5</sup> Partnerships with FBAs that are able to find permanent homes for more challenging cases are valuable for states and help prevent children from languishing in care or aging out of the system without a forever family.

There are a few large networks of FBAs, such as Lutheran Services, Catholic Charities, and Bethany

Christian Services. However, many states also have FBAs that are not part of such a network, making it harder to aggregate their performance and compare them to other agencies.

While FBAs do not dominate the child welfare arena, as Stephen Monsoma notes, “[T]hey are an active and substantial part of it.”<sup>6</sup> Catholic Charities alone provided adoption services to over 82,000 children from 2006–2016.<sup>7</sup> In 2016 alone, Catholic Charities agencies around the country served around 10,500 children through foster care and adoption services.<sup>8</sup> If one were to add in other faith-based networks and providers, such as Bethany Christian Services, Lutheran Services, and a plethora of other agencies, the total number of children served by FBAs would be significant.<sup>9</sup>

**How States Interact with Faith-Based Agencies and Faith Communities.** Below are a few examples of states that have and have not capitalized on FBAs and faith communities, along with some background numbers on child welfare and drug issues for each state.<sup>10</sup> The numbers for caretaker substance abuse being a factor in a child’s removal from their home—shown in the tables—are likely underreported, as case workers may only record the most egregious reason for removal or the substance abuse may not be discovered initially.

Recent research from the U.S. Department of Health and Human Services (HHS) and the Wisconsin Institute for Law & Liberty has shown that the uptick in substance abuse, partly driven by the opioid crisis, is associated with the increase of children

3. Author interview with Randy Daniels, March 21, 2018.

4. *Kristy Dumont, et al., v. Nick Lyon and Herman McCall*, No. 17-CV-13080 (Eastern District of Michigan, Sept. 20, 2017).

5. Shamber Flore, “My Adoption Saved Me,” *The Detroit News*, March 7, 2018, <https://www.detroitnews.com/story/opinion/2018/03/07/religious-adoption-agencies-aclu/32717127/> (accessed April 20, 2018).

6. Stephen V. Monsoma, *Pluralism and Freedom: Faith-Based Organizations in a Democratic Society* (Lanham, MD: Rowman and Littlefield, 2012), p. 29.

7. These include different types of adoptions including infant, foster care, and inter-country.

8. Over the past few years, some states and cities ceased contracting with Catholic Charities, which lowers this number.

9. Finding statistics for every faith-based agency is difficult, but the evidence gathered from annual reports, interviews, and data requests strongly suggests the number of children served is significant.

10. Data gathered from The Adoption and Foster Care Analysis and Reporting System (AFCARS) state data from the U.S. Department of Health and Human Services, Administration for Children and Families; “The Foster Care Housing Crisis,” *Chronicles of Social Change*, October 2017, <https://chronicleofsocialchange.org/wp-content/uploads/2017/10/The-Foster-Care-Housing-Crisis-10-31.pdf> (accessed May 16, 2018); “Child Welfare Fact Sheets for FY 2015,” Child Trends, <https://www.childtrends.org/research/research-by-topic/child-welfare-factsheets-for-fy-2015/> (accessed May 16, 2018); and Centers for Disease Control and Prevention, National Center for Health Statistics, “About Multiple Causes of Death, 1999–2016,” <https://wonder.cdc.gov/mcd-icd10.html> (accessed April 16, 2018). Drug overdose deaths are those with underlying-cause-of-death ICD-10 codes of X40–X44. The year 2015 was used for “Percentage of Cases Where Caretaker Substance Abuse was a Factor in Removal of Child from Home in 2015” because that was the most recent year with accessible data for every state listed in these two tables. In some of these states, these percentages have increased over the past two years.

in foster care.<sup>11</sup> Furthermore, HHS finds “caseworkers and judges in areas hardest hit by the epidemic described the difficulty of finding relatives to care for children because in many cases multiple members are misusing opioids. They described this as a substantial shift from recent years, when they would commonly rely on family members.”<sup>12</sup> This increases the need for non-relative foster homes. While prescription rates have started going down, opioid overdose deaths are still increasing nationwide, largely due to the use of illicit drugs like fentanyl.<sup>13</sup> Nationwide, approximately 92,000 children were removed from their homes and entered foster care due to parental drug abuse in FY 2016.<sup>14</sup>

**States That Are More Open to Faith Communities and Faith-Based Agencies.** As worsening substance abuse issues increase the number of children in foster care, FBAs and faith communities can serve as valuable partners for states. While many states work closely with faith communities, here are six examples of states that take advantage of and protect FBAs and faith networks.

While Arkansas and Kentucky have not yet passed legislation protecting FBAs—as Michigan, Texas, and Oklahoma have done—they still respect and rely heavily on their faith communities. In Arkansas, a Christian organization named The CALL, founded in 2007, has helped recruit almost *half* the foster families in the

state, working with hundreds of churches.<sup>15</sup> While The CALL does not receive state funding and only works with Christian couples—referring all families who do not meet its criteria directly to the state’s Division of Child and Family Services (DCFS)—DCFS depends on The CALL’s assistance in finding foster homes as the number of children in care continues to rise.

As Professor Michael Howell-Moroney put it, “The CALL required the cooperation of the state to function.”<sup>16</sup> He further noted in another paper that 36 percent of CALL families said they would not have become foster or adoptive parents if they had not been exposed to the organization, and 40 percent were unsure.<sup>17</sup> Clearly faith communities can play a valuable role in expanding the number of foster families in states by tapping into new populations of foster and adoptive parents.

Kentucky is taking a different collaborative approach with its faith communities. In 2016, Governor Matt Bevin launched the “Open Hearts/Open Home” initiative, which “aims to find permanent placements for those children in foster care with a goal of adoption by relying on the state’s churches and nonprofit groups to engage nurturing families in local communities.”<sup>18</sup> Over the past few years Georgia has also worked to increase the involvement of faith communities as its number of children in foster care has rapidly grown. For example, its Division of

11. Laura Radel, Melinda Baldwin, Gilbert Crouse, Robin Ghertner, and Annette Waters, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, “Substance Use, the Opioid Epidemic, and the Child Welfare System: Key Findings from a Mixed Methods Study,” *ASPE Research Brief*, March 7, 2018, <https://aspe.hhs.gov/system/files/pdf/258836/SubstanceUseChildWelfareOverview.pdf> (accessed May 16, 2018), and Natalie Goodnow and Will Flanders, “Flooding the System: A Study of Opioids and Out-of-Home Care in Wisconsin,” Wisconsin Institute for Law & Liberty, February 2018, [http://www.will-law.org/wp-content/uploads/2018/02/flooding-the-system\\_opioids-and-ohc\\_final-1.pdf](http://www.will-law.org/wp-content/uploads/2018/02/flooding-the-system_opioids-and-ohc_final-1.pdf) (accessed April 15, 2018).
12. Robin Ghertner, Melinda Baldwin, Gilbert Crouse, Laura Radel, and Annette Waters, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, “The Relationship Between Substance Use Indicators and Child Welfare Caseloads,” *ASPE Research Brief*, March 9, 2018, <https://aspe.hhs.gov/system/files/pdf/258831/SubstanceUseCWCaseloads.pdf> (accessed May 16, 2018).
13. Centers for Disease Control and Prevention, “Annual Surveillance Report of Drug-Related Risks and Outcomes: United States, 2017,” August 31, 2017, <https://www.cdc.gov/drugoverdose/pdf/pubs/2017-cdc-drug-surveillance-report.pdf> (accessed May 16, 2018).
14. U.S. Department of Health and Human Services, “AFCARS Report No. 24.”
15. Benjamin Hardy, “In Arkansas, One Faith-Based Group Recruits Almost Half of Foster Homes,” *The Chronicles of Social Change*, November 28, 2017, <https://chronicleofsocialchange.org/featured/arkansas-one-faith-based-group-recruits-almost-half-foster-homes/28821> (accessed April 17, 2018).
16. Michael Howell-Moroney, “Faith-Based Partnerships and Foster Parent Satisfaction,” *Journal of Health and Human Services Administration*, Vol. 36, No. 2 (2013), p. 244, <http://www.jstor.org/stable/23621779> (accessed May 16, 2018).
17. Michael Howell-Moroney, “On the Effectiveness of Faith-Based Partnerships in Recruitment of Foster and Adoptive Parents,” *Journal of Public Management & Social Policy*, No. 19, Vol. 2, (2013), pp. 176-177.
18. Doug Hogan, “Governor Engages Nonprofits, Faith-Based Community to Help Find Forever Homes for Kids in Kentucky’s Child Welfare System,” Commonwealth of Kentucky, March 10, 2017, <http://kentucky.gov/Pages/Activity-stream.aspx?n=CHFS&prId=73> (accessed April 20, 2018).

TABLE 1

## Foster Care and the Drug Crisis in States

| Approach Towards Faith Communities and Faith-Based Agencies |       | FOSTER CARE  |  |   | SUBSTANCE ABUSE  |   |
|---|-------|--|--|---|--|---|
|   |       | Change in Children in Foster Care Waiting for Adoption, 2012-2016* | Change in All Children in Foster Care, 2012-2016** | Change in Non-Relative Foster Care Beds or Homes, 2012-2017 | Cases Where Caretaker Substance Abuse Factored in Removal of Child from Home, 2015 | Change in Drug Overdose Deaths, 2010-2016 |
|   | State |  |  |   |  |   |
| OPEN  | GA.   | 82%  | 61%  | 25%   | 33%  | 30%                                       |
|   | OKLA. | 56%  | 10%  | 143%  | 46%  | 21%                                       |
|   | KY.   | 31%  | 12%  | 46%   | 27%  | 48%                                       |
|   | ARK.  | 17%  | 32%  | 36%   | 48%  | 30%                                       |
|   | MICH. | -5%  | -20%   | n/a   | 35%  | 97%                                       |
|   | TEXAS | -6%  | 4%   | n/a   | 63%  | 22%                                       |
| CLOSED  | PA.   | 61%  | 11%  | n/a   | 53%  | 166%                                      |
|   | MASS. | 41%  | 28%  | n/a   | 29%  | 245%                                      |
|   | OHIO  | 21%  | 16%  | n/a   | 27%  | 157%                                      |
|   | ILL.  | 5%   | -4%  | -14%  | 9%   | 100%                                      |

\* Change in children in foster care waiting for adoption. Only a portion of children in care are adopted, as many children are reunified with their parents.

\*\* Change in total foster care population.

**NOTES:**

- Some states saw a decline in the number of children in foster care from 2012 to 2016. There are many reasons why states might see a decline in the number of children in foster care in the midst of a nationwide increase. These might include successful reforms, a decrease in the length of time children stay in care on average, and changes in how a child is removed from their home. For example, some states may be increasingly reluctant to remove children from their homes and place them in foster care, or removed too many children from their homes in the past. Depending on why these decreases are occurring, they may be positive or negative. States with decreases may still have very high levels of children in care.
- 2015 data on caretaker substance abuse were used because that was the most recent year with accessible data for every state listed; in some of these states, percentages have increased over the past two years.
- Drug overdose deaths are those with underlying-cause-of-death ICD-10 codes of X40-X44.

**SOURCES:**

- **Foster Care Children:** U.S. Department of Health and Human Services, Administration for Children and Families, "Adoption and Foster Care Analysis and Reporting System," [https://www.acf.hhs.gov/sites/default/files/cb/afcars\\_state\\_data\\_tables\\_07thru16.xlsx](https://www.acf.hhs.gov/sites/default/files/cb/afcars_state_data_tables_07thru16.xlsx) (accessed May 18, 2018).
- **Foster Care Beds:** Chronicles of Social Change, "The Foster Care Housing Crisis," October 2017, <https://chronicleofsocialchange.org/wp-content/uploads/2017/10/The-Foster-Care-Housing-Crisis-10-31.pdf> (accessed May 16, 2018).
- **Caretaker Substance Abuse:** Child Trends, "Child Welfare Fact Sheets for FY 2015," <https://www.childtrends.org/research/research-by-topic/child-welfare-factsheets-for-ffy-2015/> (accessed May 16, 2018).
- **Drug Overdose Deaths:** Centers for Disease Control and Prevention, National Center for Health Statistics, "About Multiple Cause of Death, 1999-2016," <https://wonder.cdc.gov/mcd-icd10.html> (accessed May 16, 2018).

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Family and Children Services partnered with Promise 686, which started the initiative "Live the Promise" in 2013 to recruit foster families from churches across the state.<sup>19</sup> Their website lists partnerships

with approximately 150 churches of several different denominations.

Michigan and Texas have gone a step further, passing legislation during the past three years to

19. "Overview," Promise 686, <https://www.promise686.org/overview/> (accessed April 20, 2018).

proactively protect FBAs so they can continue contracting with the state without being forced to violate their religious beliefs. In May 2018, Governor Mary Fallin signed legislation in Oklahoma that also shields FBAs. Georgia also tried to pass such a bill, but it only passed the state senate this session; it is unclear if it will be revisited in the next session.

Meanwhile, a lawsuit in Michigan has made the future of existing legislation that protects FBAs uncertain. The new law in Oklahoma will almost certainly face similar challenges. If that legislation is overturned, it is likely those states will lose the services of dozens of FBAs.

**States That Are More Closed to Faith Communities and Faith-Based Agencies.** Not all states embrace FBAs and faith communities in their child welfare work as fully as states like Arkansas and Michigan. Here are four examples of states that—even as they face significant drug issues and increases in the number of children waiting for adoption—have *reduced* their involvement with FBAs or signaled they may be on the path to reduce collaborations with FBAs and faith communities in the near future.

Illinois is one of the most prominent examples where FBAs have been compelled to cease their child welfare services. In 2011, Illinois told child welfare providers they must be willing to place children with same-sex couples—regardless of religious beliefs that might prohibit them from doing so. Catholic Charities, one of the most prominent networks affected by this policy, was forced to end its contract with the state. An estimated 2,000–3,000 children were displaced from FBAs because of this, and the state shuffled them into other agencies.

Steve Roach, Executive Director of Catholic Charities of Springfield—one of the Catholic Charities member organizations that stopped contracting with Illinois—spoke about this change and how that particular organization handled sexual orientation when it came to potential foster parents and rela-

tives who stepped forward to care for the children. “Our preference for non-relative foster placements was with married couples to give children the opportunity for a mother and a father figure in their lives. We would work with single parents as long as they were not cohabitating with another adult. We never inquired about sexual orientation.”<sup>20</sup>

Roach also stressed the importance the agency placed on maintaining a connection between children in care and their families. “If there’s a suitable relative, that’s always preferable [to a non-relative foster home], presuming they met the same foster parent standards, and we didn’t ask about sexual orientation. Family is always prioritized, and if the state deems them suitable then that’s where the children will go. If they have to be ripped from their homes, it is better they be placed at least with family.” When asked how Catholic Charities compared to its peer child welfare agencies in Illinois, Roach, who has worked for Catholic Charities for decades, said the Catholic Charities FBAs ranked toward the top of the state’s performance-based evaluation system. Nevertheless, they had to end their contracts with the state over regulations requiring them to place children with same-sex couples.

Ohio, a state particularly stricken by opioid addiction, has signaled with the recently introduced Ohio Fairness Act<sup>21</sup> that it may also eventually cease contracting with some FBAs.<sup>22</sup> This follows the precedent set by major cities that have already ended their contracts with several FBAs.

In 2010, Washington, DC, ended its partnership with Catholic Charities. After 100 years of service, Catholic Charities in Boston and San Francisco were forced in 2006 to stop providing foster and adoptive services for the same reason. The organization had found homes for tens of thousands of children in Boston over the years, “more than any other agency in the state,” according to the *Boston Globe*.<sup>23</sup> From 2011 to 2015, opioid overdose deaths increased 130 percent in Boston due to fentanyl.<sup>24</sup> Massachu-

20. Author interview with Steve Roach, March 27, 2018.

21. Ohio Fairness Act, H.B. 160, 132nd Assembly of the Ohio Legislature.

22. Emilie Kao and Jared Eckert, “A Change for Hope, Star of the State of the Union,” *Heritage Foundation Commentary*, February 2, 2018, <https://www.heritage.org/religious-liberty/commentary/chance-hope-star-the-state-the-union>.

23. Patricia Wen, “They Cared for the Children,” *The Boston Globe*, June 25, 2006, [http://archive.boston.com/news/local/massachusetts/articles/2006/06/25/they\\_cared\\_for\\_the\\_children/](http://archive.boston.com/news/local/massachusetts/articles/2006/06/25/they_cared_for_the_children/) (accessed April 22, 2018).

24. Boston Public Health Commission, Research and Evaluation Office, “Health of Boston 2016–2017,” 2018, [https://www.boston.gov/sites/default/files/health\\_of\\_boston\\_2016-2017.pdf](https://www.boston.gov/sites/default/files/health_of_boston_2016-2017.pdf) (accessed April 22, 2018).

setts overall has seen almost a 30 percent increase in the number of children in care in the past five years—and is so strapped for foster homes that in just a 12-month period it granted 50 percent more overcapacity waivers to families so they could take in more children.<sup>25</sup>

The latest example is from March 2018, when Philadelphia announced it was suspending placements with Catholic Social Services and Bethany Christian Services while it investigates whether the organizations violated the city’s Fair Practices Ordinance. In 2017, Bethany placed 170 of the city’s children in foster homes, and Catholic Social Services placed 226.<sup>26</sup>

Philadelphia’s decision to suspend services comes on the heels of an urgent call for 300 new foster families. According to the *Philadelphia Inquirer*, “In Philadelphia about 700 children are in group home placements. Of those, [Department of Human Services Commissioner Cynthia] Figueroa said, about 250 could be living with families, while 450 more need to stay in a staffed facility due to physical or emotional needs.”<sup>27</sup> It has been a decade since the city has had a recruitment effort of this size. In 2016, Philadelphia ranked second in drug overdose death rates among the nation’s most populous counties.<sup>28</sup> In a time when states are reeling from the opioid crisis and the number of kids in foster care is rapidly increasing, taking advantage of quality resources is key to protecting children and serving communities.

In states that have ceased or may cease contracts with some FBAs, the issues of capacity and disruption are also important to consider. Even in states where the number of children in care is decreasing or the number of foster homes has been increasing,

continual recruitment and training of foster parents is critical. Many foster parents stop fostering after one year, so recruiting and training families is important to reach and maintain a sufficient number of foster homes.<sup>29</sup> Without enough foster homes, children may be placed in group homes instead. (As shown in the Philadelphia example, some children are required to be in group homes for special interventions, but some children are placed in group homes as an overflow alternative to foster homes.) And some families may only take children with a specific age range, sex, or set of behaviors—e.g., girls ages zero to five—so even an equal number of foster homes to children does not necessarily mean there would be a match for every child.

Sometimes children in foster care are moved from placement to placement because they are mismatched with families. For example, a family may find they are unable to provide the level of care necessary for that child’s needs, or perhaps they cannot handle certain behaviors. Each disrupted placement is difficult for a child, and this instability can contribute to attachment and behavioral issues. Having an abundance of qualified foster families helps ensure better compatibility in placements. Faith networks and FBAs help recruit and train thousands of families every year, as shown in the example of The CALL, and can be valuable assets to states in filling this need.

**The Negative Impact of Losing Faith-Based Agencies and the Importance of Keeping Kids First.** The big question is what states stand to lose if they cease working with many of their FBAs over religious regulations.<sup>30</sup> Illinois serves as one of the most prominent examples, though, as previously mentioned, Michigan and Texas are currently fac-

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25. Michael Levenson, “As Caseloads Soar, Capacity Lifted at Many Foster Homes,” *The Boston Globe*, January 23, 2016, <https://www.bostonglobe.com/metro/2016/01/22/mass-increases-number-foster-homes-with-extra-children/2ykrUeT8M1icvElmOp1M/story.html> (accessed April 22, 2018).

26. Julia Terruso, “Two Foster Agencies in Philly Won’t Place Kids With LGBTQ People,” *The Philadelphia Inquirer*, March 13, 2018, <http://www.philly.com/philly/news/foster-adoption-lgbtq-gay-same-sex-philly-bethany-archdiocese-20180313.html> (accessed April 24, 2018).

27. Julia Terruso, “Philly Puts Out ‘Urgent’ Call: 300 Families Needed for Fostering,” *The Philadelphia Inquirer*, March 8, 2018, <http://www.philly.com/philly/news/foster-parents-dhs-philly-child-welfare-adoptions-20180308.html> (accessed April 24, 2018).

28. Larry Eichel and Meagan Pharis, “Philadelphia’s Drug Overdose Death Rate Among Highest in Nation,” *The Pew Charitable Trusts*, February 15, 2018, <http://www.pewtrusts.org/en/research-and-analysis/analysis/2018/02/15/philadelphias-drug-overdose-death-rate-among-highest-in-nation> (accessed April 24, 2018).

29. National Council for Adoption, “Stats Show Our Nation’s Foster Care System Is in Trouble,” January 4, 2018, <http://www.adoptioncouncil.org/blog/2018/01/stats-show-our-nations-foster-care-system-is-in-trouble> (accessed May 5, 2018).

30. Faith-based agencies represent a range of religious views. Some faith-based agencies do work with LGBT couples and would not end their contracts with states over regulations on that matter.

ing lawsuits over their partnerships with FBAs that could result in a similar fate. Such lawsuits are occurring, or have been threatened, in several states that have passed or are considering passing laws protecting the religious freedom of their FBAs.

If the legislation protecting FBAs is overturned, FBAs in those states would be forced to choose between following their beliefs and ceasing their child welfare work or violating their faith in order to be able to continue to serve foster children. Randy Daniels from Buckner, which serves about 1,100 children in Texas through its foster and foster-to-adopt services, estimates that 15 percent of the child welfare agencies with which Texas contracts would strongly consider pulling out if forced to go against their beliefs.<sup>31</sup> Texas has the second-largest number of children in foster care nationwide, with about 30,000 children in care.<sup>32</sup>

In Michigan, the state contracts with dozens of FBAs. Bethany Christian Services and Catholic Charities both have a large presence in the state, each with several organizations providing foster and adoption services across Michigan. Many FBAs would be forced to cease foster care and foster-to-adopt services if the ACLU wins its current lawsuit against the state's laws offering religious freedom protections to FBAs. Losing them would be a permanent blow to the child welfare system. A brief filed in defense of the law notes that Bethany Christian Services and Catholic Charities' agencies facilitate about 25 percent to 30 percent of Michigan's foster care adoptions.<sup>33</sup> This does not take into account other FBAs in the state. And Bethany Christian Services alone had over 730 licensed foster homes in Michigan in 2016, according to the organization.

Research has also found that practicing Christians may be over twice as likely to adopt compared

to the general population, with Catholics three times as likely, and evangelicals five times as likely.<sup>34</sup> Practicing Christians are also 50 percent more likely to become foster parents—and almost twice as likely to consider becoming a foster parent.<sup>35</sup> As shown earlier, FBAs and faith networks have a unique ability to recruit these populations and increase the number of foster homes in their areas.

Some allege that working with FBAs can come at a cost, arguing that because some FBAs do not work with LGBT people, states are losing prospective LGBT foster parents (who are unable to be licensed by some FBAs and thus do not foster), reducing the number of homes available for children. However, the presence of FBAs does not exclude LGBT couples and individuals from the opportunity to open their homes to foster children. Indeed, there are many public and private agencies in every state that welcome qualified LGBT foster parents.

Given the many options that already exist for LGBT couples and individuals that wish to foster and adopt children, trying to compel FBAs to place children with same-sex couples will not impact the number of LGBT foster homes, as some argue.<sup>36</sup> Instead there will be a decrease or elimination in options for people who value working with an FBA that shares their beliefs. Rather than increasing the number of homes available to children in care, forcing FBAs to cease their child welfare services *decreases* both the number and diversity of a state's partners in recruiting and supporting foster and adoptive homes.

Particularly now, FBAs and faith communities play an important role in recruiting and training foster families and sharing the caseloads of thousands of children. Many states are seeing their child welfare caseloads increase following a national trend of foster care growth, due in part to an increase in

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31. Author interview with Randy Daniels.

32. U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau, data from the FY 2007–2016 state tables of the Adoption and Foster Care Analysis and Reporting System (AFCARS).

33. News release, "Michigan Legislators Seek to Keep Children First in Adoption, Foster Care," Alliance Defending Freedom, January 31, 2018, <https://www.adflegal.org/detailspages/press-release-details/michigan-legislators-seek-to-keep-children-first-in-adoption-foster-care> (accessed April 24, 2018).

34. Jedd Medefind, "New Barna Research Highlights Christian Adoption and Foster Care Among Three Most Notable Vocational Trends," Christian Alliance for Orphans, February 12, 2014, <https://cafo.org/2014/02/12/new-barna-research-highlights-christian-adoption-foster-care-among-3-most-notable-vocational-trends/> (accessed May 8, 2018).

35. *Ibid.*

36. Susan Miller, "ACLU Sues Michigan Over Religious Exemptions for Adoptions," *USA Today*, September 20, 2017, <https://www.usatoday.com/story/news/nation/2017/09/20/aclu-sues-michigan-over-religious-exemptions-adoptions/682065001/> (accessed May 1, 2018).

caretaker substance abuse. Research has shown that substance-involved cases are often more complicated and take longer to resolve, meaning children stay in foster care longer.<sup>37</sup>

With these increased pressures on the child welfare system, states should not reduce the number of quality providers who work to improve the lives of children and families. One proposed approach to ensuring that FBAs can provide foster and adoptive services in states is the Child Welfare Provider Inclusion Act introduced in Congress, which seeks to allow FBAs to continue operating in accordance with their sincerely held religious beliefs.<sup>38</sup>

### Conclusion

Preventing FBAs from serving their communities—which many have been doing for decades, some for over 100 years—by providing foster care and adoption services because of their sincerely held religious beliefs is not a win. It only places a greater strain on other agencies, particularly those in areas

where FBAs make up a large portion of providers or where there are few providers. The population that bears the consequences of this cost is the children in foster care. As Chuck Johnson, President of the National Council for Adoption, said, “Whether public agencies, secular private agencies, or faith-based agencies, all are providing a very valuable contribution to the arena of services. The need for children to have more resources is growing not decreasing.... There’s a diverse community of families and children out there, and we need a diverse set of agencies.”<sup>39</sup>

Forcing out FBAs undercuts communities rather than building them up. States that seek to maximize the number of loving homes for vulnerable children in need of foster care and adoption would do well to embrace FBAs and faith networks as valuable partners in child welfare work—and ensure they remain free to serve in ways consistent with their sincerely held religious convictions.

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37. U.S. Department of Health and Human Services, Child Welfare Information Gateway, “Parental Substance Abuse and the Child Welfare System,” October 2014, <https://www.childwelfare.gov/pubpdfs/parentalsubabuse.pdf> (accessed May 16, 2018).

38. Child Welfare Provider Inclusion Act, H.R. 1881, 115th Cong., 1st Sess.

39. Chuck Johnson, Remarks at “Children in Crisis: Safeguarding Faith-Based Adoption and Foster Care,” Heritage Foundation event, April 9, 2018, <https://www.heritage.org/marriage-and-family/event/children-crisis-safeguarding-faith-based-adoption-and-foster-care>.