Chair Frank, Vice Chair Hinojosa, and Committee Members,

My name is Marjan Linnell, MD, FAAP, and I am a pediatrician in Kyle, Texas. I am testifying on behalf of the Texas Pediatric Society and the Texas Medical Association in support of Senate Bill 355, which directs the Department of Family and Protective Services to create a strategic plan to ensure Texas can maximize new federal matching funds for prevention services for children at risk of entering foster care and their caregivers.

In February 2018, Congress passed the Family First Prevention Services Act (FFPSA) as a part of the Bipartisan Budget Act. This landmark legislation aims to shift focus and investment nationwide toward family-based prevention services and, to the extent possible, the placement of children in family-like and least restrictive settings. As a pediatrician, I know that education and support to caregivers is critical because it helps them better understand child development, foster healthy coping mechanisms, and use appropriate discipline techniques, all of which help break intergenerational cycles of abuse and neglect. FFPSA provides an opportunity for Texas to enhance its efforts in child abuse prevention by allowing states to draw down new federal matching funds to prevent the need for a child to enter foster care. FFPSA dollars will support evidence-based and trauma-informed mental health and substance use services as well as in-home parenting skill-based programs. With strategic investment and planning, Texas will be able to leverage the new dollars to bolster state programs that increase the resiliency, health, safety, and productivity of children and families.1

In my clinic, we regularly see children who would benefit from community-based prevention services were they available to more families. One of my three-year-old patients and her family are a tragic example of this glaring need. This patient’s mother was very young when she had her and was unfortunately a victim of abuse herself, with little family support or understanding of how to break this cycle and help her child thrive. Unfortunately, the little girl was admitted to the hospital and eventually taken into kinship foster care. I know this mother well and she loves her daughter. As a pediatrician who has devoted her career to caring for children, it is painful to watch a scenario like this play out. I cannot help but think how the outcome would have been different had this mother had access to the in-home parenting supports that FFPSA promises to bolster in our state. With this legislation, you can help bring Texas a step closer to being able to provide the type of prevention services families like this one need. Prevention services provide cost savings to the state, give parents the support they need to care for children, and most importantly, give children a fair chance at a bright future.
While not addressed in SB 355, FFPSA also stipulates that states must take steps to safely reduce the use of inappropriate congregate and group care. In its statement supporting FFPSA, the American Academy of Pediatrics (AAP) urged Congress to ensure the bill required that “federally-funded congregate, or group, care facilities meet common-sense standards for licensed clinical and nursing staff.” In addition, AAP asserted that “children fare best when they are raised in families equipped to meet their needs. Congregate care, when necessary, should be of high-quality for the shortest possible duration and reserved for instances when it is absolutely essential.”

Enhancing family-based placement capacity and improving standards in congregate or group care settings are essential to ensure children are placed in the least restrictive, most family-like setting and, when necessary, receive appropriate therapeutic supports. We urge the legislature and state agencies to plan strategically for the placement changes necessary to implement FFPSA as well.

Thank you for the opportunity to provide testimony today and for the dedication of Senator West, Representative Klick, and this committee to the health, safety, and resilience of children and families.

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