

TESTIMONY OF  
TERRY L. CLARK, MPA

ADMINISTRATOR  
YORK COUNTY OFFICE OF CHILDREN, YOUTH & FAMILIES

BEFORE THE  
HOUSE POLICY COMMITTEES

PENNSYLVANIA'S DRUG EPIDEMIC & ITS IMPACT ON  
LOCAL COUNTY CHILDREN & YOUTH AGENCY

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Thank you for the opportunity to provide comments related to Pennsylvania's Drug Epidemic. My name is Terry Clark. I am the County Administrator for York County's Office of Children, Youth & Families. I have worked in child welfare for over 24 years in a variety of positions at both the state and county level.

The drug epidemic in York County has impacted our children and youth agency in multiple ways. According to the 2015 Pennsylvania State Coroners Association Report on Overdose Deaths Statistics, 3,505 Pennsylvanians died in 2015 from a drug related overdose, a 30% increase over the prior year. Ninety-nine of those drug related deaths occurred in York County; however, the number of deaths from heroin kept pace with the previous year as there were 85 opioid related deaths in 2015.

The number of children being placed in out of home care by our agency has dramatically increased over the last several years. As of July 2016, we have experienced a 16% increase in children placed in out of home care compared to July of 2014. In July of 2014, we took custody of 374 children compared to 444 children in July of 2015. The most likely reason for children to be placed by our agency is due to the parent or caregiver's substance abuse issues and their ability to cope with everyday life. The numbers of referrals to our agency have also significantly increased over the last 2 years. As of 2016, we have accepted approximately 400 – 450 referrals each month related to allegations of child abuse and neglect. Of those accepted referrals, approximately 150 are related to drug and alcohol issues in the home. While that may not sound like a large number, in 2014 we were only accepting approximately 160 – 285 referrals each month and only approximately 35 of those cases were related to drug and alcohol issues in the home. So you can see that the number of drug and alcohol related referrals have essentially skyrocketed over the last two years. Pennsylvania law requires health care providers to make a report of newborns or children under the age of one year old if they are identified as being affected by the illegal substance abuse of the mother, withdrawal symptoms from prenatal drug exposure or born having a Fetal Alcohol Spectrum Disorder. Referrals to the agency for drug affected babies has increased 38% from 2015 to 2016 and we have 4 months of this year remaining and therefore predict the percentage to be even higher by years end.

County children and youth caseworkers are primarily trained in investigating child abuse and neglect cases and become experts in assessing child risk and safety. Parental substance abuse makes assessing the risk and safety of children more complex due to the varying effects that different types of drugs have on individuals, sometimes making it almost impossible to predict the future likelihood of abuse or even the immediacy of a threat of harm the moment that caseworker leaves that home. There is research that suggests that parental substance abuse is a risk factor for child maltreatment and research that suggest that once a child is placed in out of home care due to substance

abuse issues of the parents, the children stay in care longer than children who are placed due to other reasons.

With substance abuse our caseworkers are walking into homes where the parent's ability to function effectively is sometimes quite concerning. In these situations, caseworkers must be able to identify safety threats related to present and impending danger and the protective capacities of parents. They may be experiencing physical or mental impairments caused by the drugs they are using. They may have a reduced capacity to respond to a child's cues and needs. They may have difficulty regulating their emotions and controlling their anger and impulsivity. They may be more pre-occupied or fixated on how and where they are going to get their next hit/fix. They may be spending already limited funds on drugs rather than buying food or other household needs for their children and have little to no food in the home or no working utilities. Lastly, they may be incarcerated for drug activities, which then result in our caseworkers needing to quickly identify family resources who may be able to safely care for the children to avoid placement in foster care.

In the last fiscal year (FY 15-16), York County Office of Children, Youth & Families spent \$335,436 on drug testing alone. Although, with the continual changes in ingredients of drugs in the synthetic drug categories, it becomes almost a game of cat and mouse to catch individuals who may be using drugs because as soon as drug tests are created to test for a particular ingredient, synthetic drug makers change the ingredients to avoid positive results by its users. This often results in individuals going undetected for longer periods of time thus placing any children they may be caring for at greater risk of harm.

In closing, another challenge often experienced by our caseworkers is the ability or inability to obtain information related to a parent's participation, compliance and progress in treatment when trying to assess the risk and safety of children for whom they are responsible. Caseworkers must have releases signed by parents to communicate and obtain information from drug and alcohol providers; however many addicts who have relapsed or who are not making progress in their treatment will go to great lengths to manipulate caseworkers in order to keep them from finding out what is doing on with regards to their treatment by not signing releases, rescinding/revoking releases, delaying signing releases, etc.. which makes it more difficult for our caseworkers to adequately assess the risk and safety of the children in their care.

York County Office of Children, Youth & Families is currently exploring partnerships with other human service organizations to look at creative ways to work together on providing services to families who come to our attention due to child abuse and neglect related to substance abuse issues. Our child welfare caseworkers cannot do it alone and they are not the experts when it comes to the complex substance abuse issues of

the many families who come before us. Legislation and policy that makes it less bureaucratic for child welfare workers to have access to information on a parent's treatment would assist caseworkers as they assess child safety. Access to such information in child protection investigations can support the various systems in working together more effectively.