

7521 Main Street, Suite 103 Omaha, Nebraska 68127

(402) 597-3100 P (402) 597-2705 F

www.voicesforchildren.com

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Aubrey Mancuso, MSW Executive Director March 2, 2017

To: Members of the Health and Human Services Committee From: Julia Tse, Policy Associate

RE: Opposition to LB 537 – Provide for drug screening for applicants and recipients of cash assistance

We all want our youngest Nebraskans to have every opportunity to succeed in life. Children do best when they are supported by strong parents and a supportive community. Voices for Children in Nebraska opposes LB 537 because it hinders the ability of our state to move families to self-sufficiency and protect children from harm. The primary purpose of the Aid to Dependent Children (ADC) program is to support families so that children can remain in their own homes, while also promoting self-sufficiency in parents. **Research from other states show that drug** screening in public assistance programs produces fiscally irresponsible outcomes.¹ LB 537 would also directly harm innocent Nebraska children through the loss of benefits utilized to meet basic needs.

ADC currently supports children who are already in the most desperate financial circumstances. Although children living in poverty and extreme poverty has risen over the last decade, ADC enrollment and payment levels have not kept pace with growing needs.² The average monthly payment per family was \$330.39 in 2015, and nearly 79% of recipients were children, with children under age six representing a third of recipients. Moreover, ADC payments are often the sole source of income for families and are used for basic needs such as rent, utilities, and food.³

Strong supports that enhance parental capacity are essential to protecting child well-being. As a state, our efforts in keeping children in their own homes should be focused on making substance abuse and mental health treatment programs more accessible to those who need it. Currently, **92 of our 93 counties have a mental** health provider shortage.⁴ Moreover, because ADC benefits are reserved for our neediest families—a family of 3 receiving ADC can have a yearly income of no more than \$9,516⁵—they are unlikely to be able to afford appropriate treatment programs.

Substance abuse has reached crisis levels in many other states, and we at Voices for Children have been concerned by the impact of parental substance abuse in our

¹ Randi Hall, "Drug Testing and Public Assistance," CLASP, October 2016.

² Voices for Children in Nebraska, *Kids Count in Nebraska 2016 Report*, available online at: <u>www.kidscountnebraska.com</u>.

³ Nebraska Department of Health and Human Services, "Aid to Dependent Children," <u>http://dhhs.ne.gov/children_family_services/Pages/fia_adc.aspx</u>.

⁴ Voices for Children in Nebraska, Kids Count in Nebraska 2016 Report.

⁵ 468 NAC 000-209.

child welfare system. In 2015, parental drug abuse was identified 1,609 times, or 22% of all reasons for a child's removal from their home. Just two years ago, only 462 instances were identified, or 14% of all removal reasons.⁶ As such, we are concerned that although LB 537 would identify cases of parental drug use, it offers no corollary financial committment to supporting the children and families affected by the issue. Although LB 537 would allow children to receive payments through a "protective payee," there is no provision to address the severe, underlying issue of parental substance abuse.

We believe that the increased costs of drug screening would be exacerbated by additional costs to our alreadyoverburdened child welfare system. As a state, Nebraska has the responsibility to respond effectively to cases of child maltreatment, but amidst our revenue shortfall, a number of important services are already facing proposed cuts that would hamstring our important obligation to our most vulnerable children.

We thank Senator Hughes and this committee for their time and consideration. We respectfully urge the committee to not advance the bill and instead work to address parental substance abuse in a way that better supports children and families by making treatment accessible to all who need them. Thank you.

⁶ Data obtained from the Department of Health and Human Services. Children may have more than one removal reason in their petition for removal.