



**Annual Report
of the California
Child Welfare Council**

2024-25



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Letter from the Cochairs



Ms. Kim Johnson
Secretary
California Health and
Human Services Agency



Hon. Laurie M. Earl
Administrative
Presiding Justice
Court of Appeal,
Third Appellate District

Dear Friends of the Child Welfare Council,

We are pleased to submit the fiscal year 2024–25 *Annual Report of the California Child Welfare Council* pursuant to Welfare and Institutions Code section 16540. This report highlights the council’s work in improving outcomes for youth in the juvenile justice system and continuing efforts to make behavioral health services and supports more easily accessible for children, youth, and families.

Supporting the council’s mission to improve outcomes for children, the Youth Justice Committee worked with the Office of Youth and Community Restoration to develop the Stepping Home model. This model provides guidelines for probation departments to transition youth back into their communities and families after their confinement in secure youth treatment facilities. In keeping with its purpose to rehabilitate rather than punish, youth are confined with a program of rehabilitative education, developmental programs, and therapy. As they reach completion of their treatment goals, they are gradually transitioned into less restrictive programs with more opportunity to positively engage with their communities and increasingly less supervision. The goal is for them to successfully transition back into their home settings without the need for supervision.

In the continuing effort to improve the access of youth in foster care to behavioral health services, the council approved four recommendations for system performance data and strengthening accountability. Three of these recommendations concern the Child and Adolescent Needs and Strengths (CANS) assessment. Child welfare agencies and service providers are encouraged to administer only one CANS assessment per child that can be used and updated for the duration of the child’s time in the child welfare system. Agencies and service providers are encouraged to provide training on the correct and consistent administration of the assessment.

Since it launched in 2021, the Children and Youth Behavioral Health Initiative (CYBHI) has improved the access of children and youth to behavioral health services and supports throughout the state and through new platforms. The CYBHI has expanded access through schools and colleges, homes and communities, and in the digital environment. Teaching methodology is centered around social and emotional learning, which is based on self-awareness, self-management, responsible decision-making, relationship skills, and social awareness.

The council could not accomplish its mission without the collaboration of the three branches of government, foster youth and their families, and key stakeholders who provide services in the child welfare and foster care systems. With these partners, Child Welfare Council members, committees, and task forces identify effective strategies and resources to help prevent entry into the child welfare and foster care systems, and to improve outcomes for those in these systems.

We appreciate the members of the council and individuals from a wide range of organizations who generously give their time and talent to further the council’s work. This work would not be possible without their commitment and leadership.

Sincerely,

Two handwritten signatures in black ink. The signature on the left is 'Kim Johnson' and the signature on the right is 'Laurie M. Earl'.

Executive Summary

In 2024–25, the California Child Welfare Council advanced statewide efforts to improve outcomes for children, youth, and families through collaboration across government, courts, and community partners. Work this year focused on juvenile justice reform, behavioral health access, data accountability, and the expansion of advocacy supports.

Key Highlights

- **Rehabilitative Juvenile Justice**

The council supported statewide implementation of the **Stepping Home** model, a research-based approach led by the Office of Youth and Community Restoration that transitions youth in secure youth treatment facilities toward community reintegration through trauma-informed care, restorative practices, less restrictive programs, and structured reentry supports.

- **Behavioral Health Accountability**

The Behavioral Health Committee advanced four recommendations to strengthen youth behavioral health systems: integrated data systems, a single Child and Adolescent Needs and Strengths (CANS) assessment per child, system-level use of CANS data to track needs, and training to ensure consistent practice.

- **Children and Youth Behavioral Health Initiative (CYBHI)**

The council monitored CYBHI programs that expanded school, community, and digital behavioral health services, including tools such as BrightLife Kids, Soluna, and school-linked programs that address rising behavioral health needs among youth.

- **Court Appointed Special Advocates (CASA) Infrastructure and Expansion**

A \$60 million investment strengthened the statewide CASA network, supporting 8,012 volunteers and expanding services to more counties. CASA pilot and statewide programs demonstrated improved youth outcomes, including stronger compliance, reduced recidivism, and academic gains.

- **Judicial Engagement**

Judicial officers provided council members with an overview of dependency and juvenile justice court processes to strengthen cross-system understanding and collaboration, including the courts' role in ensuring family engagement, reasonable efforts, and safe youth reentry.

Looking Forward

The council will continue advancing rehabilitative justice reforms, strengthening behavioral health access, expanding CASA supports, and deepening collaboration among state agencies, counties, and the courts to ensure children and youth statewide receive safe, stable, and equitable care.

An Overview of California's Child Welfare System

When children and families need to address child abuse and neglect, the primary governmental bodies that directly interact with them are California counties. County social services departments or agencies, through their child welfare divisions, administer and provide child welfare and foster care services under Welfare and Institutions Code section 300 et seq. (dependency child welfare cases), section 727 et seq. (probation-placed child welfare cases), and section 16500.

County child welfare agencies investigate reports of child abuse and provide case management and other services to help families stay together whenever possible. Each county maintains a hotline to receive reports of suspected child abuse, neglect, or both. Once a call or report is received, a child welfare social worker will evaluate the referral and find either that more information is needed or that it does not rise to the level of neglect or abuse, and no further investigation will be required.

In some counties, the family will be connected to differential (flexible and customized) response services when the information does not indicate a substantial risk of serious physical harm or illness to a child but the family could benefit from additional services and supports that could prevent future entry into the system. If more information is needed, a child welfare social worker will go to the child's home and assess it for substantial risk of serious physical harm or illness.

When possible, the agency worker engages with the family to find the least intrusive approach to keep the child safe while supporting the parents in ameliorating the issues that brought them to the attention of the agency. This approach could lead to keeping the child with the family and connecting them to support services instead of court intervention.

If the agency's assessment of the problem indicates that formal court intervention is needed, the child may either be removed from or remain in the home while the agency requests court oversight through the juvenile court system. Services are provided using a family-centered, trauma-informed, strengths-based approach. For children who have Indian heritage, agencies and courts work to verify the children's status as Indian children and to comply with the requirements of the federal Indian Child Welfare Act.

Unless certain statutory exceptions apply, when children are removed from the care of their parents by the juvenile court, the agency provides family reunification services based on individualized case plans that will support a safe return of children to their parents. The agency is responsible for reporting to the court on the family's progress 6 and 12 months after a child's removal from the parents, with the court authorizing reunification when the parents have demonstrated the ability to safely care for their children. After 12 months, if the family has not reunified, the court may hold a permanency planning hearing to determine an alternative permanent family for the child through adoption or guardianship. Children who remain in foster care after they reach 18 years of age may be eligible for extended foster care services up to age 21, as well as transitional housing and other services up to age 24, and may retain eligibility for healthcare coverage under Medi-Cal until they reach age 26.

The Child Welfare Council and Its Vision, Mission, and Guiding Principles

The Child Welfare Council brings together the multiple agencies, organizations, and courts that serve the children, youth, and families in California's child welfare and foster care systems. Created through the Child Welfare Leadership and Performance Accountability Act of 2006,¹ the council serves as an advisory body responsible for improving the collaboration and processes of agencies and the courts. The council monitors and reports the extent to which child welfare and foster care programs and the courts are responsive to the needs of children in their joint care.

Vision

Every California child lives in a safe, stable, permanent home, nurtured by healthy families with the capacity to meet the child's needs and support the child's well-being, and is prepared for the transition into adulthood and becoming a contributing member of society.

Mission

We provide an effective, collaborative forum for the three branches of government, foster youth and their families, and key stakeholders to advocate for effective and promising strategies and adequate resources to improve outcomes for children, youth, and families involved with or at risk of involvement with the child welfare system.

Guiding Principles

1. Collaboration is essential among the three branches of government, foster youth and their families, and key stakeholders to achieving improved outcomes for children, youth, and families.
2. Accountability for child, youth, and family outcomes is shared between federal, state, and local governments and among multiple agencies, the courts, community partners, families, and youth.
3. Engaging families and youth in the development, implementation, and evaluation of services, programs, and policies is essential to achieving improved system outcomes.
4. Sharing data and information across governmental jurisdictions, agencies, and the courts promotes more informed program planning, development, and evaluation. At the local level, it enables the linkage of children, youth, and families to appropriate community services and supports.

¹ Assem. Bill 2216; Stats. 2006, ch. 384.

The California Child Welfare Council's general authority is granted under sections 16540–16545 of the Welfare and Institutions Code. The council's annual report is mandated by Welfare and Institutions Code section 16540.

5. Best and promising practices should be replicated statewide where appropriate and possible.
6. Maximizing and using multiple funding sources flexibly across systems provides resources needed to meet the comprehensive and complex needs of children, youth, and their families.
7. Recommendations will be culturally appropriate, strength-based, evidence-informed, and outcomes-driven to ensure that all children, youth, and their families are treated fairly and equally without regard to age, race, gender, sexual orientation, and ethnicity.

Committees of the Child Welfare Council

Steering Committee

The Steering Committee advises the council membership, cochairs, and staff on policy issues and systemic processes that should be addressed. The Steering Committee helps develop agendas for the council's quarterly meetings by identifying presentations that will aid the council in its work.

Prevention and Early Intervention Committee

The primary objective of the statewide Prevention and Early Intervention Committee is to advocate for needed resources, policies, and practices to promote child, parent, and family well-being, and prevent child abuse and neglect.

Permanency Committee

The Permanency Committee identifies barriers to permanent resolutions and recommends best practices to achieve speedy permanency for all children in foster care.

Empowerment Committee

The Empowerment Committee (formerly the Child Development and Successful Youth Transitions Committee) explores issues related to the physical health, mental health, and educational and social development needs of all children and youth in the child welfare system, from the very young to those transitioning to adulthood, and makes recommendations on how to address those needs. It also identifies successful policies and practices at the local and state levels so they can be replicated in more jurisdictions.

Data Linkage and Information Sharing Committee

The Data Linkage and Information Sharing Committee supports the integration of information across child-serving agencies—child welfare, healthcare services, education, vital statistics, and juvenile justice—to inform policy and practice at the individual and systems levels. Linked data provides staff, caregivers, and courts with crucial means to ensure continuity of care for the child welfare population. The committee also assists in the development of tools that measure outcomes across systems at the state and local levels. This information is critical for continuous quality improvements in child welfare services that adapt to the changing needs of children, families, and caregivers.

Commercial Sexual Exploitation of Children Action Team

The Commercial Sexual Exploitation of Children Action Team brings together community-based and grassroots organizations, public agencies, lived-experience experts, service providers, parent partners, judges, lawyers, and interested community members to address commercial sexual exploitation (CSE). The committee meets quarterly to expand awareness about CSE, identify challenges facing California's young people affected by CSE, share promising practices, and develop tools and resources. The committee's goal is to spur council members across California to act to better serve youth who have been affected by exploitation, as well as their families.

Behavioral Health Committee

The Behavioral Health Committee was formed out of a clear consensus of the council that despite statewide efforts to improve access to behavioral health services for child welfare-involved youth and those at imminent risk of involvement, significant challenges still prevent youth and families from receiving comprehensive and integrated services and supports. Committee members include state agency leadership, representatives from the Governor's Office and the California Legislature, children's behavioral health providers, county representatives, caregivers, and advocates. The committee is tasked with developing best-practice recommendations to guide policy and inform statewide efforts to address the behavioral health needs of children and youth more effectively in the child welfare system.

Youth Justice Committee

The Youth Justice Committee (formerly the Office of Youth and Community Restoration Committee) advises and provides recommendations related to policies, programs, and approaches that improve youth outcomes and reduce youth detention and recidivism. The committee works to reduce the number of youth transferred into the adult penal system. It identifies and supports trauma-responsive and culturally informed services and approaches that can help youth successfully reenter their communities.

Activities and Accomplishments in 2024-25

Juvenile Justice—The Stepping Home Model

The council’s Youth Justice Committee partnered with the Office of Youth and Community Restoration to help guide their shift toward a rehabilitative juvenile justice system grounded in adolescent brain development research.² The traditional juvenile delinquency system confined youth, often for long durations, in juvenile detention centers that were intended for short stays. Research showed that lengthy incarceration is particularly harmful to youth because their brains and emotional regulation are still developing.

The reform gained momentum in 2021 when California closed the Department of Juvenile Justice within the Department of Corrections and Rehabilitation, and the Office of Youth and Community Restoration (OYCR) was created within the California Health and Human Services Agency. The OYCR’s two purposes are (1) to give policy and practice leadership to probation departments and (2) to give policy and practice leadership to support the transformation of the youth justice system from a corrections model to a health restoration model. The OYCR consulted with the council’s Youth Justice Committee in developing the Stepping Home model³ to create a rehabilitative program in secure youth treatment facilities (SYTFs) that gradually reintroduces youth back to their communities and facilitates the transition home after their confinement.

Stepping Home process

The Stepping Home model⁴ is a process of providing youth with education, therapy, and treatment and transitioning them from confinement back to their communities as soon as possible, while keeping public safety in mind. Youth are gradually transitioned from the SYTF to a less restrictive program (LRP) to increase their involvement in the community as they achieve the goals in their case plan. The process continues with increasing positive engagement with the community and decreasing supervision until their successful return home without supervision from county oversight agencies.

Built on the science of adolescent development, the principles of healing, restoration, and accountability, and each youth’s individual needs,⁵ the model is trauma informed, therapeutic, and fully resourced in the carceral and community settings. It prioritizes community safety and encourages meaningful ways for the youth to take responsibility, make amends with victims and communities, and exercise leadership in solutions that help others.

² Cal. Child Welfare Council, [agenda](#) (Sept. 4, 2024), item at 9:45 a.m., “‘Stepping Home’: Care in Secure Youth Track Facilities and Transitions to Less Restrictive Programs”; [video recording](#) of meeting at 3:47. Presentation participants: Hon. Katherine Lucero (Ret.), Director, Office of Youth and Community Restoration; Dr. Elizabeth Barnert, Associate Professor of Pediatrics, University of California, Los Angeles (UCLA); Dr. Laura Abrams, Professor of Social Welfare, UCLA; Ms. Kassandra Angel, UCLA Luskin School of Public Affairs.

³ The California Child Welfare Council voted to approve the recommendations in the Stepping Home model at its meeting on March 5, 2025; see the [meeting summary](#), at page 1.

⁴ [Video recording](#) of Child Welfare Council September 4, 2024, meeting at 9:40.

⁵ *Ibid.* at 10:12.

Key elements⁶ of this model include:

- Safe and secure facilities that protect youth from harm and abuse by promoting a culture and environment of dignity and respect;
- Screening and assessments to identify and address developmental needs, physical health needs, behavioral health treatment needs, and unmet social needs that contribute to juvenile legal system involvement;
- Mentoring from credible messengers with lived experience — those from the same communities who have similar life experiences such as former gang involvement or incarceration;⁷ and
- Robust reentry services and supports.

Research-supported recommendations

The OYCR worked with a team from the UCLA Luskin School of Public Affairs to develop recommendations for this model that are grounded in the best available science gathered from published research.⁸ The research that supports the model is detailed in nine briefs:

[Stepping Home Elements—Restorative Justice](#) (2024)

[Stepping Home Elements—Credible Messengers](#) (2024)

[Stepping Home Elements—Trauma-Informed Care](#) (2024)

[Stepping Home Elements—Reentry](#) (2024)

[Stepping Home Elements—Positive Youth Development](#) (2024)

[Stepping Home Elements—Less Restrictive Programs: Considerations and Possibilities](#) (2024)

[Practice Guidelines for Treating Behavioral Health Disorders in SYTFs and Other Facilities](#) (2024)

[Gender & Sexuality](#) (2024)

[Disabilities](#) (2024)

Positive youth development

Understanding the adolescent brain has become increasingly important in the child welfare continuum of care, and it is especially important in the juvenile legal system. Behavior that has traditionally been considered delinquent has to be reconsidered in the context of adolescent development and risk taking. We must move away from the reactive notion of the need to fix or punish harmful adolescent behavior and develop a positive focus on a youth's strengths and competencies. Transforming the juvenile legal system from a punitive model focuses on six practice domains:

⁶ *Ibid.* at 10:50.

⁷ OYCR & UCLA Luskin School of Public Affairs, [Stepping Home Elements—Credible Messengers](#) (2024), p. 1.

⁸ For details about the research methodology used by the team from UCLA, see the [video recording](#) of the Child Welfare Council September 4, 2024, meeting at 11:46–18:12.

1. Work (job experience, apprenticeships, preparedness, income and independence)
2. Education (literacy, credentials, learning skills, career planning)
3. Relationships (communication skills, conflict resolution family systems, intimacy)
4. Community (civic engagement, leadership, service, responsibility)
5. Health (activity, diet and nutrition, behavioral health, lifestyle and sexuality)
6. Creativity (personal expression, visual arts, performing arts, language arts)

Positive youth development cannot be layered onto the current punitive model of the juvenile legal system; it requires transformation into a system that holds adolescents accountable in a developmentally appropriate manner.⁹

Trauma-informed care

Incarceration compounds the trauma many youths have already experienced. Trauma-informed care¹⁰ in the juvenile legal system must be system-wide. Policies should encompass leadership and staff training to ensure personnel possess the necessary competencies to establish trust and rapport with justice-involved youth. Staff need to conduct qualitative evaluations and screening and assessments to identify the individual needs and sensitivities of youth. Interventions, such as Trauma-Focused Cognitive Behavioral Therapy, must be evidence-based. Trauma-informed design must be reflected in physical environments that include soft and hard surfaces. Family members should be engaged in treatment and staff should be receptive to community approaches to cultural healing.

Restorative justice

Restorative justice is an important component in the model. The aim is to promote accountability and healing and to repair harm done to people and communities by bringing together impacted parties to determine how amends can be made. Practices include conferencing, mediation, restitution, or community service. The process can be formal through the court or school system or informal through communities.¹¹

The utility of restorative justice for adolescent participants will depend on the age of the youth, the severity of the offense, and the specific intervention setting. The Office of Youth and Community Restoration has a standing Restorative Justice Advisory Board, comprised of prosecutors, practitioners, and advocates, that is tasked with exploring the role of restorative justice in California's youth carceral system.¹²

⁹ [Video recording](#) of Child Welfare Council September 4, 2024, meeting at 18:16–19:46.

¹⁰ *Ibid.* at 19:47–21:26.

¹¹ OYCR & UCLA Luskin School of Public Affairs, [Stepping Home Elements—Restorative Justice](#) (2024), p. 1.

¹² [Video recording](#) of Child Welfare Council September 4, 2024, meeting at 22:33–23:17.

Less restrictive programs

Senate Bill 92 (Stats. 2021, ch. 18) allowed for the use of less restrictive programs (LRPs)¹³ to facilitate the safe and successful reintegration of youth into the community. This offers a pathway out of SYTFs for youth who are meeting their developmental goals and their individualized rehabilitation plans as they continue to fulfill their baseline commitment. Committed youth and probation officers may petition the court to transition a youth from an SYTF to an LRP, which can be a halfway house that is a home-based or educational-based setting where youth are placed as part of their commitment time. To mitigate the adverse effects of long-term incarceration, youth should be transitioned into community-based LRPs as quickly as public safety allows.

Current LRP settings include the Pine Grove Fire Camp, California Conservation Corps centers, county ranches, programs operated by community-based organizations, and college housing. The Office of Youth and Community Restoration has given grants to county probation departments that are working with SYTF youth to develop transition plans in collaboration with family, county staff, health providers, and other partners.¹⁴

Reentry

Reentry into the community after the youth's completion of their commitment to the juvenile legal system should be the culmination of the individualized process that started being planned when the youth entered the juvenile legal system.¹⁵ Cross-system collaboration is necessary to ensure the continuity of services and the involvement of family members and credible messengers, including those with lived experience. Educational and vocational programs tailored to a youth's needs and strengths must be available before and after release. Employment and income are predictive of successful reentry.

Behavioral Health—Outcome Recommendations

In 2021, the Behavioral Health Committee developed recommendations¹⁶ to improve access to behavioral health services for youth and define the full continuum of these services.¹⁷ One of these recommendations concerned system performance data and strengthened accountability. From 2021 to 2024, the committee focused on implementing this recommendation.¹⁸

The committee developed four recommendations for system performance data and strengthening accountability.¹⁹ These recommendations are intended to help agencies and service providers determine whether children and youth are getting the behavioral health services they need and

¹³ *Ibid.* at 24:34–26:01.

¹⁴ *Ibid.* at 26:05 (slide).

¹⁵ *Ibid.* at 27:19–28:17.

¹⁶ Cal. Child Welfare Council, [agenda](#) (Dec. 4, 2024), item at 11:00 a.m., “Behavioral Health Outcome Recommendations”; [video recording](#) of meeting at 1:22:04. Presentation participants: Christine Stoner-Mertz, Chief Executive Officer, California Alliance of Children and Family Services; Karen Larsen, Chief Executive Officer, Steinberg Institute.

¹⁷ [Video recording](#) of December 4, 2024, meeting at 1:24:28.

¹⁸ *Ibid.* at 1:24:45.

¹⁹ *Ibid.* at 1:28:27.

whether service intervention is reaching families early enough to avoid the entry of children and youth into the child welfare system altogether or minimize their time in the system.²⁰ The Child Welfare Council approved these recommendations at its meeting on December 4, 2024.²¹

1. Integrate data systems and provide timely access to data.

Make data accessible and understandable to children and families so they can use the data to make decisions about the care they need and receive.

2. Implement only one CANS (Child and Adolescent Needs and Strengths) assessment for each youth.²²

When children and youth are involved in multiple systems, such as the child welfare and juvenile justice systems, different agencies will use the CANS assessment to make decisions about services to be provided. Systems need to integrate their data systems so that each agency does not do its own CANS assessment and instead uses one.

3. Utilize the CANS assessment to track needs and strengths over time at the systems level.²³

Data from the CANS assessment needs to be used to track needs and strengths over time at the individual, program, and system levels. Agencies must go beyond evaluating how they use the CANS assessment to identify what services are needed and see what else might be happening in the child's or adolescent's environment that might be affecting them.²⁴ Decisions about meeting the needs of a child or adolescent must be made with as much information about them as individuals, not general data.

4. Provide training and ongoing technical assistance to ensure fidelity to CANS.²⁵

Staff must be trained and provided with ongoing technical assistance to administer the CANS assessment with fidelity. The assessment must be done correctly and consistently with established practices and a focus on collaborative child and family teams (CFTs) to improve youth outcomes.²⁶ There must be a robust continuous quality improvement (CQI) process.

²⁰ *Ibid.* at 1:29:07.

²¹ *Ibid.* at 1:53:38.

²² *Ibid.* at 1:31:11.

²³ *Ibid.* at 1:32:56.

²⁴ *Ibid.* at 1:33:14.

²⁵ *Ibid.* at 1:34:08.

²⁶ Cal. Department of Social Services webpage, [Fidelity to IP-CANS and CFT Practices](#).

Children and Youth Behavioral Health Initiative

The Child Welfare Council continues to monitor the critical need for behavioral and mental health services of children and youth.²⁷ Depending on the age group, suicide is the second or third leading cause of death for youth ages 10 and older. Between 2005 and 2020, the suicide rate for youth ages 15 to 24 rose in California and across the country. Suicide rates have been higher among youth who are of color or LGBTQ+ youth. The rates of children and youth being seen in acute-care settings for self-harm increased from 2017 to 2021. The percentage of Medi-Cal enrollees ages 0 to 25 with mental health diagnoses for depression, anxiety, and trauma increased between 2018 and 2022. These rates are higher for children and youth with disabilities. When teachers were asked to rate the severity of student depression or other mental health problems, from 2014 to 2023 teachers increasingly reported this problem to be moderate to severe. Between 2013 and 2021, the number of seventh- to eleventh-grade students who reported symptoms of clinical depression also rose.²⁸

California's Children and Youth Behavioral Health Initiative (CYBHI) was launched in 2021 as a five-year investment to transform youth mental health services by creating a more integrated, youth-centered system to help youth find support for their mental health needs and substance use issues.²⁹ The work of the initiative has four strategic areas:

- Workforce training and capacity
- Behavioral health ecosystem infrastructure
- Coverage
- Public awareness

Children and youth in foster care have a heightened need for behavioral health services and social and emotional learning. For example, while it is common for children to feel stress when moving and attending a new school, the same experience for foster youth is often preceded by trauma experienced in their home environments. When foster children display disruptive behaviors in response to stress and trauma, training programs help teachers recognize a child's needs, and schools can provide services to address the causes of these behavioral issues.³⁰

Expanding the behavioral healthcare workforce

Because there are not enough behavioral healthcare specialists to meet the needs of California's children and youth, one of the goals of the initiative is to expand the behavioral healthcare workforce and the number of behavioral healthcare facilities. To improve behavioral healthcare among non-behavioral healthcare specialists, additional training must be provided to healthcare professionals so they understand the nuances of diagnosing psychiatric conditions in children and youth.³¹

²⁷ Cal. Child Welfare Council, [agenda](#) (June 4, 2025), item at 10:15 a.m., "Children and Youth Behavioral Health Initiative (CYBHI) Update"; [video recording](#) of meeting at 19:22. Presentation participants: Dr. Sohil Sud, Director, CYBHI; Ms. Brittney Blake, Project Manager, CYBHI.

²⁸ [Video recording](#) of June 4, 2025, meeting at 19:22–24:09.

²⁹ Cal. Health & Human Services Agency webpage, [About the CYBHI](#).

³⁰ [Video recording](#) of June 4, 2025, meeting at 36:23–41:34

³¹ *Ibid.* at 27:27–28:39.

Another goal is to expand the access and availability of these services to schools and colleges, homes and communities, and in the digital environment. Wellness must be brought into the classroom. In order for students to be able to speak about their needs with less stigma and in a more informed environment, the behavioral health workforce needs to be community-based and bring essential services directly into neighborhoods. To reach children and youth who have transportation or mobility issues, behavioral health services and supports need to be available online.³²

Integrating a framework of social and emotional learning into instruction, nurturing a supportive campus culture, and expanding access to school-linked care services significantly improve a child's outcomes in the classroom and overall health.³³ This framework relies on five core pillars:

- Self-awareness
- Self-management
- Responsible decision-making
- Relationship skills
- Social awareness

The CYBHI worked with all 58 counties to implement this teaching method. Work with the Sacramento County Office of Education resulted in an overall decrease in post-pandemic absenteeism.

Other projects include grant-funded, peer-to-peer mental health support programs at eight California high schools and free online training on recognizing and responding to signs of trauma and stress for teachers and individuals working with children and youth in educational and care settings.³⁴ These programs empower high school students to serve as peer supports while allowing schools to tailor the program to work for the specific needs of their students. Creating safe spaces at schools for children and youth impacted by trauma and stress is done in conjunction with the Office of the California Surgeon General.

With the CYBHI's Fee Schedule program, California became the first state in the country to connect public schools and colleges to eligible health insurance plans, including Medi-Cal, so they can fund behavioral health services for their students. A third-party administrator manages the program's funds and claims, and students under the age of 26 are eligible for these services.³⁵

Providing online behavioral health services

Digital services can provide timely support with emotional issues and crises:

- [*BrightLife Kids*](#), a state-funded mental health platform, supports parents and caregivers of children ages 0 to 12. BrightLife Kids offers a curated content library and access to free behavioral health support from trained coaches who can refer parents and caregivers to licensed therapists if needed.

³² *Ibid.* at 28:40–29:58.

³³ *Ibid.* at 29:59–32:24.

³⁴ *Ibid.* at 32:25–34:37.

³⁵ *Ibid.* at 34:40–36:22.

- [Soluna](#), a free, confidential mental health support app, supports youth ages 13 to 25. Soluna provides self-guided resources and coaching support by appointment or on a drop-in basis.
- [Mirror](#) is a mental health journaling app that allows youth to write, record a video, or leave voicemail for themselves. AI features will organize and summarize statements, which youth find helpful when they are frustrated and feel incoherent.³⁶
- [Live Beyond](#) is a campaign of the Office of the California Surgeon General that focuses on adverse childhood experiences (ACEs) and encourages youth to overcome and live beyond their experiences. ACEs are stressful or potentially traumatic experiences that happen before the age of 18. They can impact mental and physical health as well as lives and relationships well into adulthood.³⁷
- [Never a Bother](#) is a youth suicide-prevention campaign addressing the common feeling among youth that they are a bother to their families.³⁸

Court Appointed Special Advocate (CASA) Grant

Expanding services

In its ongoing efforts to examine the needs of children, youth, and nonminor dependents in foster care, the council invited the California CASA Association to present updates on the improvements made to the statewide CASA network funded by the three-year, \$60 million allocation from the Budget Act of 2022.³⁹ The grant supports the work of 8,012 CASA volunteers across 44 local CASA programs located in 52 counties.⁴⁰ The main goal of this grant was to stabilize the network of local CASA programs so they can expand services and provide a volunteer to every child in the child welfare system who requests one. With far more children in the foster care system statewide than there are CASA volunteers, many children who want and need a volunteer remain on waiting lists.⁴¹

A CASA volunteer is a trained community member who is appointed by a court to support and mentor a child in the foster care or juvenile justice system. CASA volunteers spend time with the child and meet with caregivers, teachers, service providers, and social workers, and monitor the child's well-being. They read social worker reports, prepare reports to the court, and attend court hearings to advocate for the child's physical and mental health, education, self-advocacy, placements, visitation with siblings and family, and transition to independent living.⁴² During a child's experience in foster care, a CASA volunteer can be an important person who provides consistency and continuity amid frequent changes.

³⁶ *Ibid.* at 1:02:02–1:15.

³⁷ *Ibid.* at 1:21:06–1:26:12.

³⁸ *Ibid.* at 1:26:13.

³⁹ Assem. Bill 178; Stats. 2022, ch. 45.

⁴⁰ Cal. Child Welfare Council, [agenda](#) (Mar. 5, 2025), item at 11:00 a.m., “California Court Appointed Special Advocates (CASA) for Children Presentation”; [video recording](#) of meeting at 1:01:10. Presentation participants: Ms. Sharon Lawrence, Chief Executive Officer, California CASA Association; Hon. Craig Arthur, Presiding Judge of the Juvenile Court, Superior Court of Orange County; Ms. Jeana Marie Pecha, Executive Chef and Owner, Omakase Por Favor, former foster youth; Ms. Lisa Addy-Peat, CASA volunteer, Placer County.

⁴¹ [Video recording](#) of meeting at 1:30:21–1:31:21.

⁴² *Ibid.* at 1:32:22–1:36:25.

As shared by a former foster youth and her CASA volunteer at the council’s March 2025 meeting, a CASA volunteer can help a youth see and think beyond their time in foster care, plan and take steps forward, and pursue their goals for specialized education and a successful career.⁴³ A juvenile court judge who spoke at the same meeting explained that children and youth may find it hard to believe that their social worker, attorney, or even the judge is there to support them and help them because of past trauma and history of being disappointed by the adults in their lives. A CASA volunteer can build a trusting relationship with the youth and introduce them to new experiences, such as events or classes they might not otherwise access. Through this relationship, the volunteer can also provide the court with the most current information about a child that helps the judge relate to the child.⁴⁴

CASA volunteers in juvenile justice

In 2018 the CASA network of local programs obtained private funding to conduct a pilot to provide CASA volunteers to youth in the juvenile justice systems in Santa Cruz, Ventura, and Monterey Counties between 2019 and 2023. This pilot project showed that juvenile justice youth with a CASA volunteer improved their self-efficacy, were more likely to complete conditions of probation, were more likely not to commit a new offense, and performed better academically.⁴⁵ In 2025, the California CASA Association launched a statewide juvenile justice program to provide training for CASA volunteers in counties that want to expand their services to juvenile justice youth.⁴⁶

Of the \$60 million that was allocated to the CASA system over three years, 80 percent went to local programs to stabilize their operations, staffing, training, and funding, and 20 percent went to California CASA for centralized services and administrative supports for the network. These administrative services and supports included a statewide volunteer recruitment campaign, human resources services, data collection and outcomes evaluation, volunteer recruitment specialists, and strategic planning consultants. Volunteer recruitment focused on attracting more volunteers whose economic, cultural, and experiential backgrounds reflect those of the children and youth served by CASA volunteers.⁴⁷

Juvenile Courts

With much of the Child Welfare Council’s focus on agencies and service providers, members are often not as familiar with the court process that brings children and families into the foster care and juvenile justice systems. In addition, some members noted that they were not familiar with the work of juvenile court judicial officers and the statutory and ethical mandates they must consider in their decision-making. Because the courts are an essential partner in interpreting and implementing policies with both mandated and discretionary authority, the judges on the council saw a need to familiarize council members with their roles and work.

⁴³ *Ibid.* at 1:03:02–1:17:37.

⁴⁴ *Ibid.* at 1:20:35–1:30:19.

⁴⁵ *Ibid.* at 1:37:12–1:38:36.

⁴⁶ *Ibid.* at 1:38:37–1:39:55.

⁴⁷ *Ibid.* at 1:39:58–1:43:34.

At the council's meeting in June 2025, the judges gave a preview of a full presentation that they would later make at the September 2025 meeting.⁴⁸ Their overview summarized the different types of juvenile courts—dependency, juvenile justice, and collaborative—and the types of hearings—detention, jurisdictional, dispositional, status review, permanency planning, contested hearings (trials), arraignment, fitness, and restitution.

Judges discussed the requirement that they evaluate reasonable efforts made to prevent removing a child from their home when a petition for removal or a wardship petition is before them. Judges have always played this important role in making sure that children are kept in their homes if services can be provided to families to make homes safe for the children. As the child welfare system moves from mandated reporting to community support systems, the focus is on helping families provide safe homes for children and avoiding entry into the child welfare system.

Minimizing the inconvenience of delays in parties' hearings is also something the judges discussed. Sometimes attorneys cannot communicate with their clients before court hearings and need time to meet with them privately before hearings can begin. Other times, the lack of a court interpreter or court reporter can cause delay.

Judges also highlighted their role in making sure juvenile justice youth can return home when they are released from a youth detention center. They work with families, social workers, and support services providers to help ensure that youth will have a safe home.

Judges invited council members to observe court proceedings during days and times that would minimize distraction and intrusion to children and families. Although members have not yet been able to attend, judges remain willing to host these observations and receive feedback.

⁴⁸ Cal. Child Welfare Council, [agenda](#) (June 4, 2025), item at 9:45 a.m.; [video recording](#) of meeting at 1:08. Presentation participants: Hon. Laurie M. Earl, Court of Appeal, Third Appellate District; Hon. Craig Arthur, Superior Court of Orange County; Hon. Denine Guy, Superior Court of Santa Cruz County; Hon. Tilisha Martin, Superior Court of San Diego County; Hon. Shawna Schwarz, Superior Court of Santa Clara County.

Continuing the Work

The Child Welfare Council remains diligent in its commitment to overseeing and improving the state's child welfare and juvenile justice systems. Through sustained interagency collaboration, the council has made significant progress on several key objectives during the 2024–25 fiscal year:

- **Rehabilitative Reform** The adoption of the Stepping Home model—developed in partnership with the Office of Youth and Community Restoration—represents a significant advancement in transforming juvenile justice into a research-based, rehabilitative system focused on successful community reintegration.
- **Behavioral Health Services Access** The Children and Youth Behavioral Health Initiative has strengthened the state's capacity to provide accessible, accountable, and integrated behavioral health supports, and the council's Behavioral Health Committee continues to monitor state programs and develop recommendations to improve state and local programs.
- **Advocacy Infrastructure** The CASA program has stabilized, strengthened, and expanded mentoring and advocacy supports for children and youth in foster care.
- **Judicial Partnership:** The council is taking steps to ensure that its members and the public understand the role of courts in the child welfare and juvenile justice systems in order to open avenues for more collaboration.

The Child Welfare Council will continue to advocate for the effective strategies and resources necessary to realize its vision: ensuring every California child resides in a safe, permanent home supported by the family and services they need to thrive.

Child Welfare Council Members

July 1, 2024–June 30, 2025

Ms. Michelle Baass

Director of the California Department of Health Care Services

Ms. Nancy Bargmann

Director of the California Department of Developmental Services

Ms. Dana Blackwell

Senior Director of California Strategic Consulting, Casey Family Programs

Ms. Sheila Boxley

President and Chief Executive Officer of the Child Abuse Prevention Center

Ms. Sanja Bugay

Director of the Fresno County Department of Social Services

Mr. Pete Cervinka

Director of the California Department of Developmental Services

Ms. Ebony Chambers McClinton

Director of Equity-Grounded Leadership at Stanford Sierra Youth & Families

Ms. Eileen Cubanski

Interim Executive Director of the County Welfare Directors Association of California

Ms. Michelle (Shelley) Curran

Administrative Director of the Judicial Council of California

Mr. Roger De Leon

Parent Advocate

Ms. Cheryl Douglas

Executive Director of the Department of Indian Child Welfare, Wilton Rancheria

Hon. Laurie M. Earl

Administrative Presiding Justice of the Court of Appeal, Third Appellate District

Hon. Leonard P. Edwards (Ret.)

Judge of the Superior Court of California, County of Santa Clara

Ms. Janay Eustace

President and Chief Executive Officer of the Child Abuse Prevention Center

Mr. Larry Fluharty

Foster Care Ombudsperson, California Department of Social Services

Mr. Bob Friend

Director of the National Institute for Permanent Family Connectedness, Seneca Family of Agencies

Ms. Leticia Galyean

Chief Executive Officer of Seneca Family of Agencies

Ms. Gail Gronert

Director of Strategic Initiatives, County Behavioral Health Directors Association of California

Hon. Denine J. Guy

Judge of the Superior Court of California, County of Santa Cruz

Ms. Leslie Starr Heimov

Executive Director of the Children's Law Center of California

Hon. Melissa Hurtado

California State Senator, District 16

Dr. Kathryn Icenhower

Cofounder and Chief Executive Officer of SHIELDS for Families

Ms. Diane Iglesias

Senior Deputy Director of the Los Angeles County Department of Children and Family Services

Hon. Corey A. Jackson

California State Assembly Member, District 60

Ms. Kim Johnson

Secretary of the California Health and Human Services Agency

Ms. Sharon M. Lawrence
*Chief Executive Officer of the California
CASA Association*

Hon. Katherine Lucero (Ret.)
*Director of the California Office of Youth
and Community Restoration*

Mr. Carlos Marquez III
*Executive Director, County Welfare
Directors Association of California*

Hon. Tilisha Martin
*Judge of the Superior Court of California,
County of San Diego*

Ms. Jennifer McLaren
*Assistant County Counsel of Sacramento
County*

Dr. Michael Olenick
*Chief Executive Officer of the Child Care
Resource Center*

Hon. Blanca Pacheco
*California State Assembly Member,
District 64*

Ms. Amy Price
*Program Officer for Zellerbach Family
Foundation*

Mr. Dan Prince
Chief Probation Officer of Imperial County

Ms. Cheryl Rave
Foster-Adoptive Parent

Mr. Trent Rhorer
*Executive Director of the San Francisco
Human Services Agency*

Hon. Susan Rubio
California State Senator, District 22

Ms. Cherie Schroeder
*Program Coordinator of the Foster and
Kinship Care Education Program,
Woodland Community College*

Hon. Shawna M. Schwarz
*Judge of the Superior Court of California,
County of Santa Clara*

Ms. Christine Stoner-Mertz
*Chief Executive Director of the California
Alliance of Child and Family Services*

Dr. Erika Torres
*Deputy Superintendent of Public
Instruction, California Department of
Education*

Ms. Jennifer Troia
*Director of the California Department
of Social Services*

Ms. Thomisha Wallace
*Executive Director of the Youth
Empowerment Commission of California*

Ms. Kristen Weber
*Senior Director of Child Welfare, National
Center for Youth Law*

Mr. Daniel Webster
*Principal Investigator, California Child
Welfare Indicators Project, University
of California, Berkeley*

Mr. Jevon Wilkes
*Executive Director of the California
Coalition for Youth*

Child Welfare Council 2025 Committee Reports

Original, unedited 2025 committee reports are available at the links below.

[*Behavioral Health*](#)

[*Commercial Sexual Exploitation of Children*](#)

[*Data Linkages and Information Sharing*](#)

[*Empowerment*](#)

[*Permanency*](#)

[*Prevention and Early Intervention*](#)

[*Youth Justice*](#)