



Iowa Child Advocacy Board Annual Report

July 2024 – December 2025



IOWA CHILD
ADVOCACY BOARD

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Iowa Code 237.16 creates the Iowa Child Advocacy Board (ICAB) within the Iowa Department of Health and Human Services. This document meets the board's reporting requirements listed in Iowa Code 237.18. An 18-month reporting period is covered to transition board reporting from a fiscal year basis to the calendar year.

Executive Summary

From July 2024 through December 2025, the Iowa Child Advocacy Board advanced significant statewide efforts to strengthen child advocacy through the Court Appointed Special Advocate (CASA) and Foster Care Review Board (FCRB) programs, focusing on quality, volunteer support, and system-wide collaboration.

CASA implemented statewide training, court report audits, and a new impact assessment pilot—resulting in clearer documentation, stronger youth-voice representation, and improved volunteer preparedness. Recruitment and community engagement efforts expanded the program’s visibility and strengthened pathways toward serving all 99 counties.

During the same period, the FCRB program completed more than 1,000 citizen case reviews before transitioning to pilot a new review structure designed to meet federal review requirements and expand statewide coverage. Evaluation findings highlighted common barriers to permanency, such as parental mental health, substance use, and housing instability.

Together, these efforts demonstrate ICAB’s commitment to strengthening child advocacy, enhancing data-driven practice, and improving outcomes for Iowa’s children and families. The board applauds the work of the staff and volunteers working each day to achieve these priorities.

The board’s recommendations for continued effort are found on the following page.

Respectfully submitted,



Honorable Judge William S. Owens
Iowa Child Advocacy Board Chair

Board Recommendations

ICAB respectfully submits the following recommendations for consideration by the Iowa legislature, the Iowa Department of Health and Human Services, and the Office of the Governor.

1. The CASA program should continue work with juvenile judges and Iowa Children's Justice to foster connections and improve quality court advocacy across the state.
2. Iowa HHS should promote Iowa Code changes as necessary for full transition to an updated methodology for conducting case reviews of children in the child welfare system, in place of reviews conducted by local citizen foster care review boards.
3. Iowa HHS should engage in a collaborative project with board members to review and update the data being provided to the Iowa Child Advocacy Board. Data shared should be updated to meet current needs and priorities of both the Board and the department and ensure the Board is empowered to make informed program and system-level recommendations.
4. The Iowa HHS social work program should continue movement toward use of a standard case permanency plan template that is consistent across the state.
5. The CASA program should continue exploration of volunteers, staffing and funding needed to potentially fill the "best-interest advocacy" gap by assigning CASA volunteers to cases of children 10 and up.
6. The CASA program should continue implementation of the 'Reach 99' Campaign to ensure CASA programming is available to serve children and families in all of Iowa's 99 counties.
7. The CASA program should finalize and implement the app-based tool for CASA volunteers to complete case notes, reporting and required training.

Court Appointed Special Advocate (CASA) Program Update

CASA of Iowa recruits, trains, and supports volunteer advocates appointed to cases involving children who have experienced abuse or neglect and are engaged in Child in Need of Assistance (CINA) proceedings.

Appointed by judges, CASA volunteers monitor the child's case, maintain contact with key individuals, and submit Reports to the Court for each hearing. These reports include an assessment of the child's needs, the child's wishes and recommendations in their best interest. CASA volunteers advocate for these key principles:

- Families possess strengths that can be built upon to reduce risk.
- Separation from family causes trauma; children should remain with family when it is safe and appropriate.

CASA advocacy is tailored to each unique case. Volunteer advocates gather information from entities serving on the child and family's team, including service providers, the child's placement, schools and various health providers. In this way, the program serves a dual purpose of providing a wealth of information to judges, while establishing a caring, collaborative relationship with children and their family.



CASA QUALITY INITIATIVES

ICAB and CASA have increased focus on improving volunteer quality and engagement, strengthening advocacy documentation, and expanding statewide readiness. Key progress areas include:

Volunteer Advisory Council

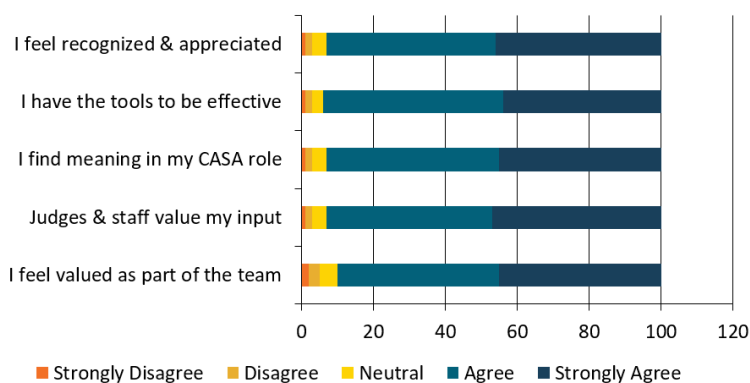
A new statewide Volunteer Advisory Council was launched to elevate volunteer perspectives and inform program decisions. The council prioritized volunteer-to-volunteer connections, training needs, and retention strategies.

Volunteer Satisfaction Survey Redesign

The Volunteer Advisory Council partnered to redesign the annual volunteer satisfaction survey. The survey collected input from 104 volunteers statewide. Results show 91% would recommend serving as a CASA volunteer and 81% intend to continue serving.

Volunteer Experience & Satisfaction

Volunteer Survey Results



CASA High Quality Training Program

After the last judicial survey, the CASA training program completed a statewide learning needs assessment of volunteers. The program developed and delivered *High Quality CASA Advocacy: Elevating our Practice* training to all active volunteers in 2025 as a requirement for maintaining volunteer status.

Quality Court Report Audits

CASA launched a statewide report audit process in December 2024 to establish a baseline for how volunteer advocacy is reflected in reports to the court. Follow-up audits completed after launch of the High Quality Training Initiative indicated:

- Strong improvements in documentation of youth voice
- Better alignment between identified concerns, the purpose of the court hearing, and recommendations
- More consistent documentation of engagement efforts

Expanded Community Engagement & Recruitment

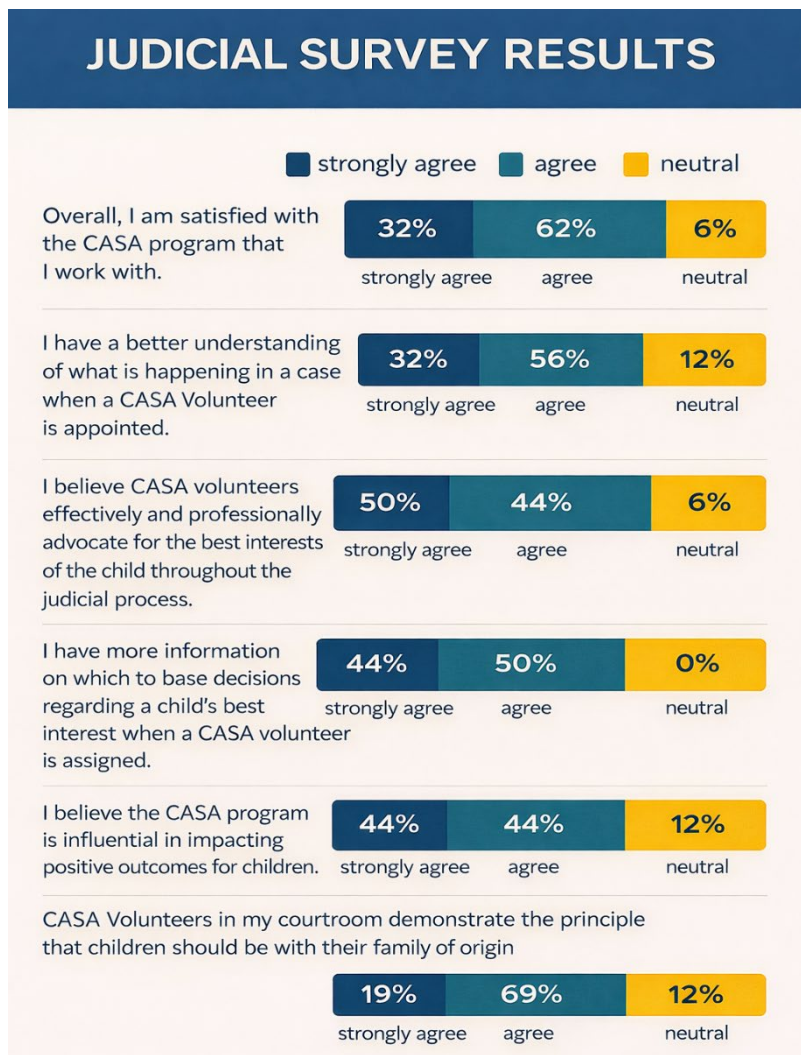
CASA expanded public education and volunteer recruitment efforts, engaging in direct outreach across more than 75 counties and launching a Reach99 campaign to ensure all counties are served by a CASA. These initiatives have improved statewide visibility and volunteer pipeline quality, strengthened community buy-in and positioned the program to grow sustainably without compromising advocacy standards.

Improving Access Through Technology

An app-based interface for the CASA case management system was designed and is ready for launch, aiming to give volunteers easier access to essential tools and resources while in the field. This user-friendly platform will support both advocacy effectiveness and overall volunteer experience.

Strengthening Relationships with Juvenile Courts

In May 2025 CASA was invited to speak to juvenile judges at their bi-annual conference, and local program coordinators have been engaging with local judges to discuss the CASA quality initiatives. CASA considers the judge to be the primary consumer of the program's 'product' – the CASA Report to the Court. An annual judges survey helps CASA learn more about the impact of programming through the eyes of Iowa's juvenile judges.



Foster Care Review Board (FCRB) Program Update

The FCRB program seeks to empower the citizens of Iowa to review cases, collect data, and recommend changes to promote the safety and permanency of children who have been removed from the homes of their families. In this review period citizens served on 12 different local review boards to assess the cases of children in 52 of Iowa's 99 counties.

ASSESSMENT OF PROGRAM DESIGN

The FCRB program has been operating at some capacity since 1984 utilizing citizen volunteers to serve on local boards. Over the last 40 years, the program experienced periods of growth and periods of regression. While local review boards were instituted in nearly every state in the 1980's, Iowa has one of the last operating programs.

FCRB and ICAB have been investigating options to update the review methodology used to better meet current needs of the child welfare system. This has included auditing and evaluating the FCRB program for improvement opportunities and scanning other state models.

Limitations identified with the current model include:

- Local review boards are not operating statewide, and resources are not sufficient to provide additional coverage using the current model.
- The FCRB program has not evolved in its practice or methodology to be current with changes in child welfare, which includes outdated Iowa Code provisions.
- There is limited buy-in and support from stakeholders such as parents, social workers, attorneys and foster parents. FCRB reviews are often one-sided as not all parties actively participate in the review process.
- FCRB reviews are perceived by participants to be duplicative of other case staffings and court reviews.
- Longevity of seasoned volunteers and consistent commitment from volunteers are waning, and recruitment of new volunteers has been challenging.

PILOT STRATEGY FOR NEW REVIEW METHOD

A pilot strategy was identified in which trained state employees complete case reviews in place of local citizen foster care review boards. The reviewers will utilize the Child and Family Services Review case reading method developed by the U.S. Department of Health and Human Services. Reviews will continue to be completed under the purview of ICAB and by HHS staff kept organizationally independent from the Child Protective Services program.

Benefits and Costs of the Pilot Project

Benefits	Costs
• Statewide coverage. • Increased number of cases reviewed. • Increased participation by interested parties in the review process. • Reviews are more robust and consistent. • Reviewers are held to higher standards of confidentiality. • Utilization of federal tool allows for statewide and nationwide comparison. • Ability to complete enough reviews to reach statistical significance, creating a powerful tool to inform improvements and recommendations. • FCRB team members learn new skills and expand professional expertise. • ICAB receives more complete data to inform program and system recommendations.	• Saying goodbye to long-time volunteers (but will encourage them to be CASAs). • Unclear if a report would continue to be provided to the judge. • Interested parties that appreciate the board structure lose that venue to express thoughts on a case. • Review structure utilizes a random sample each year, so a unique case is not continuously followed from entry into foster care until exit, as is the case under a local review board. • Lag time will exist between launching the pilot, evaluating success, and requesting updates to Iowa Code.

ICAB held a special board meeting on October 29, 2025, to discuss the pilot project and expressed unanimous support. To allow resources to be diverted to the pilot, ICAB supported the suspension of local foster care review boards effective November 1, 2025. State employees who previously assisted local review boards are undergoing training to conduct reviews themselves.

Pursuant to Iowa Code §237.18, subsection 4, ICAB must ensure an evaluation of the effectiveness of citizen reviews in “improving case permanency planning and meeting case permanency planning goals, identify the amount of time children spend in foster care placements, and identify problem issues in the foster care system.”

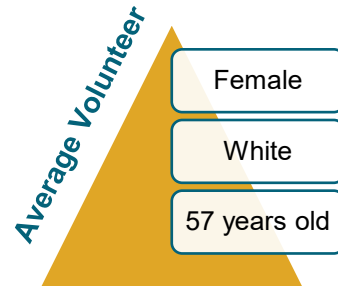
- 1,387 children from 52 counties in paid foster care placements.
- 1,063 reviews completed.

PROGRAM COVERAGE

A map of Iowa showing its 99 counties, color-coded into four regions. The Northwest region (light green) includes Lyon, Osceola, Dickinson, Emmet, Kossuth, Winnebago, Worth, Mitchell, Howard, Winneshiek, and Allamakee. The North region (yellow) includes Sioux, O'Brien, Clay, Palo Alto, Hancock, Cerro Gordo, Floyd, Chickasaw, Fayette, and Clayton. The Northeast region (orange) includes Plymouth, Cherokee, Buena Vista, Pocahontas, Humboldt, Wright, Franklin, Butler, Bremer, Buchanan, and Delaware. The South region (dark green) includes Woodbury, Ida, Sac, Calhoun, Webster, Hamilton, Hardin, Grundy, Black Hawk, Dubuque, Monona, Crawford, Carroll, Greene, Boone, Story, Marshall, Tama, Benton, Linn, Jones, Jackson, Harrison, Shelby, Audubon, Guthrie, Dallas, Polk, Jasper, Poweshiek, Iowa, Johnson, Cedar, Clinton, Scott, Pottawattamie, Cass, Adair, Madison, Warren, Marion, Mahaska, Keokuk, Washington, Muscatine, Mills, Montgomery, Adams, Union, Clarke, Lucas, Monroe, Wapello, Jefferson, Henry, Louisa, Des Moines, Fremont, Page, Taylor, Ringgold, Decatur, Wayne, Appanoose, Davis, Van Buren, and Lee.

Volunteer Demographics

Each local board is required to have a minimum of five board members, and no more than seven. The program averaged 60 volunteers serving on local boards the period. The average length of service was 6 years.



Children Eligible for Review

Pursuant to Chapter 237 of the Iowa Code, local review boards may review cases involving children in all foster care settings. Due to capacity limitations of the local boards, only cases of children in paid foster care placements were reviewed. Children in unlicensed relative and fictive kin placements or those placed in a qualified residential treatment program were not reviewed by a local board.

COMMENT CARD RESULTS

Comment cards are completed by participants after a local foster care review meeting is completed. Participants are asked to assess specific metrics and provide open comments.

- More than 750 comment cards were collected.
- No youth participated in the comment card process.
- Primary respondents were HHS social workers (32%), foster parents (30%) and parents.

Respondents' feedback shows positive experiences with the local boards and the review process. Of note, there was less agreement that the local board's recommendations will effectively impact case planning for the child(ren).

Comment Card Results

Survey item	% in Agreement
This review adequately addressed progress and/or issues in meeting the goals of the case permanency plan.	95.0%
This review actively focused on assessing the needs of the child (e.g., education, mental and/or physical health, relational permanence, transition planning, etc.)	94.5%
The review provided an opportunity to discuss concurrent planning.	93.8%
This review provided an opportunity to discuss barriers or issues that are preventing achievement of the permanency goal at this time.	95.5%
The Board's recommendations will effectively impact case planning for the child(ren).	88.9%

The facilitator conducted the review in a professional manner.	96.7%
The format of today's review allowed all participants to share their thoughts and provide updates.	94.6%
The Board listened to my comments and concerns and treated me respectfully.	96.3%

Themes of Open-Ended Responses

What did you like most about today's review?	How could the review process be improved?	Additional Comments
Open dialogue, shared updates and personalized attention	Stronger communication and reminders for meetings	Appreciation and thanks for the board's time and work
Professional, respectful facilitators	More presence from GALs, attorneys and HHS workers	Need more time for reviews on some cases
Helpful insights from boards	Allowing private foster parent input	Mixed views on the virtual format – pros and cons
Efficient virtual format (for many)	Better preparation and inclusion of all voices	
Engagement and care for the child's well-being		

BARRIERS TO ACHIEVING PERMANENCY

The review process works to identify obstacles to achieving permanency plan goals through discussions between local board members and the child's team. Each case presents unique challenges, and local review boards document the main barriers across various case categories.

Cases with the goal of reunification or guardianship

Of 2,435 documented barriers from local reviews, the top barriers documented were:

1. Parental mental health issues.
 2. Parental substance abuse issues.
 3. Family economic issues to include lack of stable housing.
- ★ 42 cases had no identified barriers because the achievement of the permanency goal was in process.

Cases with the goal of adoption

Of 330 documented barriers from local reviews, the top barriers documented were:

1. Children who were not yet in the pre-adoptive home for 180 days at the time of the review.

2. HHS selection staffing to determine adoptive placement has not yet been held at the time of the review.
3. Juvenile court TPR decision is under appeal / procedendo and not received at the time of the review.
- ★ 53 had no identified barriers because the finalization of adoption was pending.

Cases with the goal of another planned permanent living arrangement

Of 193 documented barriers from local reviews, the top barriers documented were:

1. Youth need employment or job experience.
2. Youth need to develop a plan for housing upon aging out of foster care.
3. Youth did not have enough credits to graduate high school.