



Disparities in Screening & Reporting Child Abuse

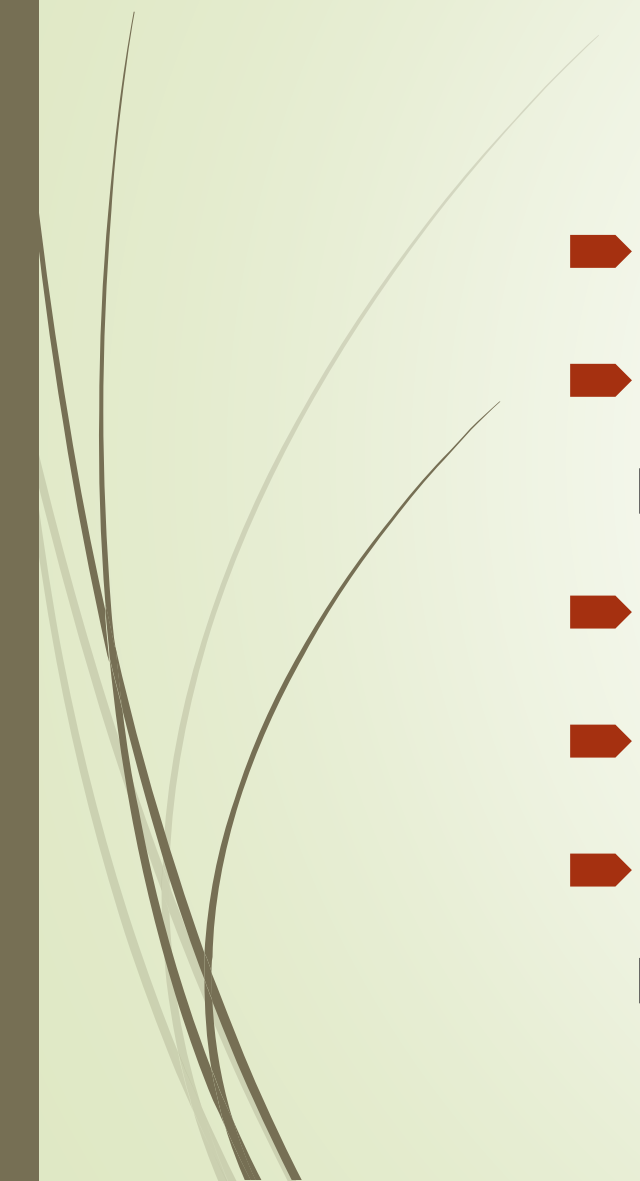
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Objectives

- Provide overview of child abuse
 - Identify disproportionality in child welfare reporting
 - Discuss strategies to reduce disparities
 - Offer examples of exemplary models
 - Recommend strategies for substance reporting in health care settings
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Disclosure Statement:

I have no actual or potential conflict of interest in relation to this program/presentation

I have no financial interest related to this presentation



Overview of Child Abuse Law, Reports, & Victims



Child Abuse Laws

- All states have child abuse laws and mandated reporting by professionals

How is child abuse defined:?

- Each individual state defines child abuse
- Federal legislation, Child Abuse Protection & Treatment Act (CAPA) provides the framework states use to define child abuse

How is child abuse data currently collected?

- The National Child Abuse & Neglect Data System (NCANDS) is federally funded system where child abuse data is collected and analyzed
- States voluntarily submit data to NCANDS
- 44 States voluntarily submitted in 2015



Federal Child Abuse Definition

Child Maltreatment 2015

CAPTA defines child abuse (at minimum) as:

Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act, which presents an imminent risk of serious harm.



Reporting

Overview:

- 4 mill cases were reports to Child Protective Services (CPS) involving 7.2 million children were reported in 2015
- 58.2% of cases screened in & 41.8% screened out
- 2.2 mill cases screened in for a CPS response
- 18.4% reporters are in the education field, 18.2% law enforcement, & social services 10.9, non-professional 18.2%
- Highest rates of victimization are from neglect (75.3%) and physical abuse (17.2%)

Note: victims of multiple maltreatment are counted once per type.



Abuse Victims

- The perinatal period (first year of life) holds the highest victimization rate 24.2 per 1,000
- Victims consisted of three races or ethnicities—White (43.2%), Hispanic (23.6%), and African-American (21.4%)
- 6.7% of children were victims in more than one report
- Approximately 1,670 children died from abuse and neglect nationally
- The national child fatality rate is 2.25 deaths per 100,000 children
- Boys have a higher child fatality rate than girls at 2.42 vs 2.09 per 100,000
- Child fatalities by race White-42.3%, African-American-30.6%, Hispanic-14.5%
- 77.7% of child fatalities involved at least one parent



Child Welfare Information Gateway, 2016



Disproportionality

Table 1. Disproportionality Compared to Total Population, 2014*

Race (Non-Hispanic)/ Ethnicity	% of Total Child Population	% of Children Identified by CPS as Victims	RDI	% of Children in Foster Care	RDI	% of Children Entering Foster Care	RDI	% of Children Exiting Foster Care	RDI	% of Children Waiting to Be Adopted	RDI	% of Children Adopted With Public Agency Involvement	RDI
American Indian/ Alaska Native	0.9%	1.3%	1.5	2.4%	2.8	2.3%	2.7	2.1%	2.4	1.9%	2.2	1.5%	1.7
Asian	4.8%	0.9%	0.2	0.5%	0.1	0.6%	0.1	0.7%	0.1	0.4%	0.1	0.4%	0.1
Black or African-American	13.8%	22.6%	1.6	24.3%	1.8	22.4%	1.6	23.2%	1.7	23.1%	1.7	19.4%	1.4
Native Hawaiian/ Other Pacific Islander	0.2%	0.2%	1.0	0.2%	0.9	0.2%	1.1	0.2%	1.2	0.1%	0.6	0.2%	0.9
Hispanic (of Any Race)	24.4%	24.0%	1.0	22.5%	0.9	21.9%	0.9	21.8%	0.9	23.6%	1.0	22.1%	0.9
White	51.9%	46.4%	0.9	43.4%	0.8	46.1%	0.9	45.6%	0.9	43.2%	0.8	48.5%	0.9
Two or More Races	4.1%	4.7%	1.1	6.8%	1.7	6.4%	1.6	6.5%	1.6	7.7%	1.9	8.0%	2.0

*Each RDI cell is associated with the percentage cell to its left.



Causes

Why is there significant disproportionality in child welfare?

- Social Determinants of health/inequities (i.e. poverty)
- Racial bias & discrimination exhibited by individuals (i.e. mandated reporters)
- CPS System factors (resources for people of color, case worker composition)
- Geography (i.e. region, state, community)



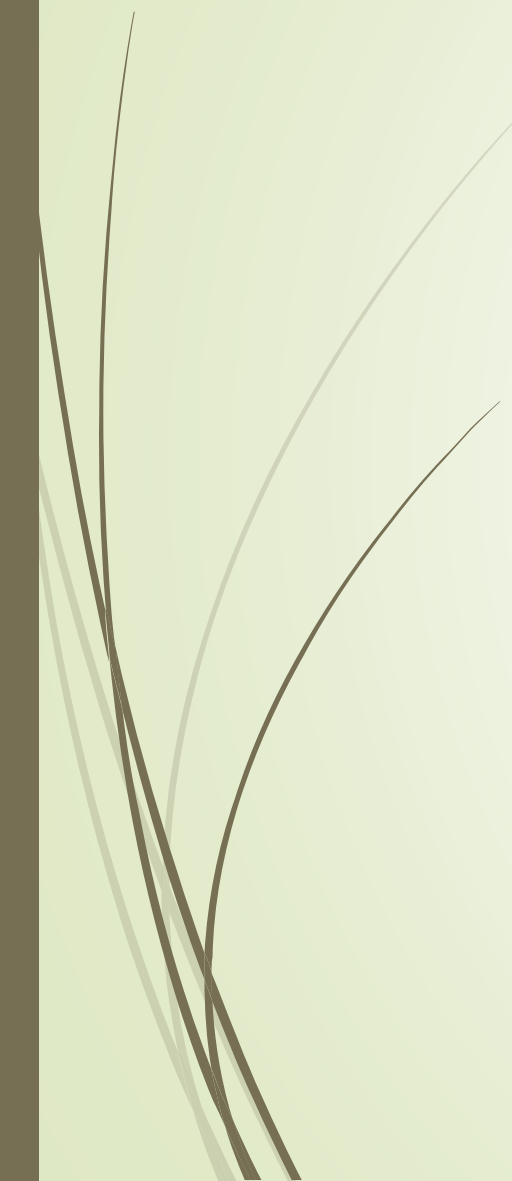
Social Determinants

- Gap in economic well-being since socioeconomic status is the strongest predictor of maltreatment rates.
- Correlation between poverty disparity & maltreatment disparity
- Visibility & exposure bias-poverty experiences increases exposure to social service systems (i.e. financial or housing assistance increases exposure to mandated reporters
- A study in California found that low SES Black children are less likely to be referred for maltreatment, have their cases substantiated, or enter foster care

* Studies yield conflicting data



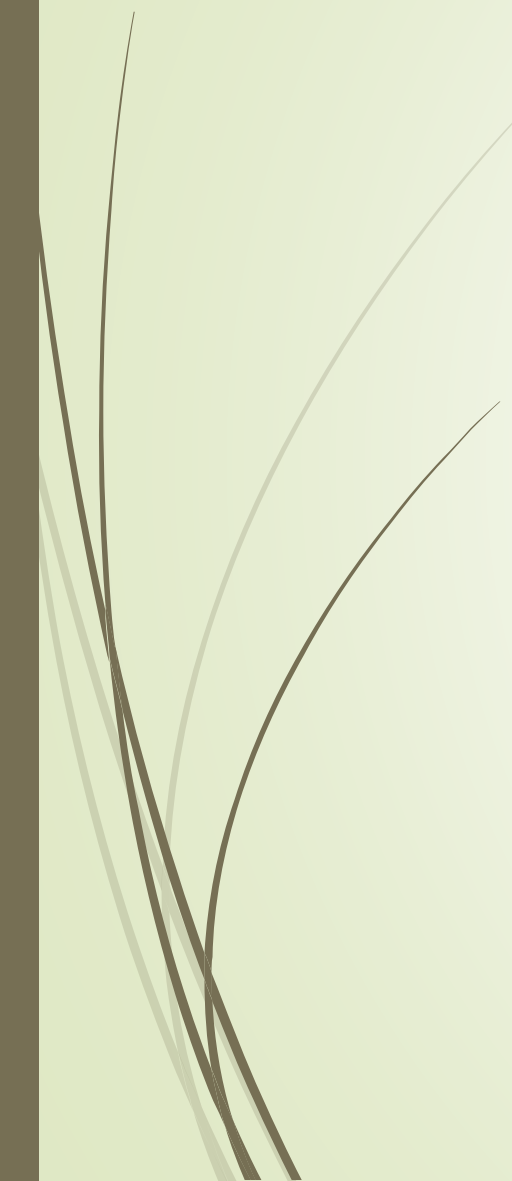
Racial Bias

- Personal biases effecting decision making (knowing & unknowing)
 - 2 studies in Texas found that race, risk, and income all influence case decision
 - African-American assessed with lower risk scores than White families, they were more likely than White families to have substantiated cases, more likely to have their children removed, and referred for family-based safety services
 - Families of color are disproportionately reported for abuse & neglect, their cases are more likely to be assigned for investigation and substantiated at investigation than White, non-Hispanic families
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CPS System Factors

Michigan CPS identified several institutional features that negatively impact children and families of color:

- limited access to court appointed special advocates
 - contracted agencies not providing services in African-American communities (even when required to do so)
 - lack of quality assurance mechanisms that may help identify & correct differential treatment
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Geographic Context

- Higher-level (e.g., national) data obscure differences that occur at lower levels (i.e. state, jurisdiction)
- Using National level in 2013, Hispanic children were slightly underrepresented in foster care but they were overrepresented in 14 States
- Similarly, one national study found that there were higher rates of maltreatment disparity for Black and Hispanic children in the most urban and most rural counties



Disproportionality

FYI

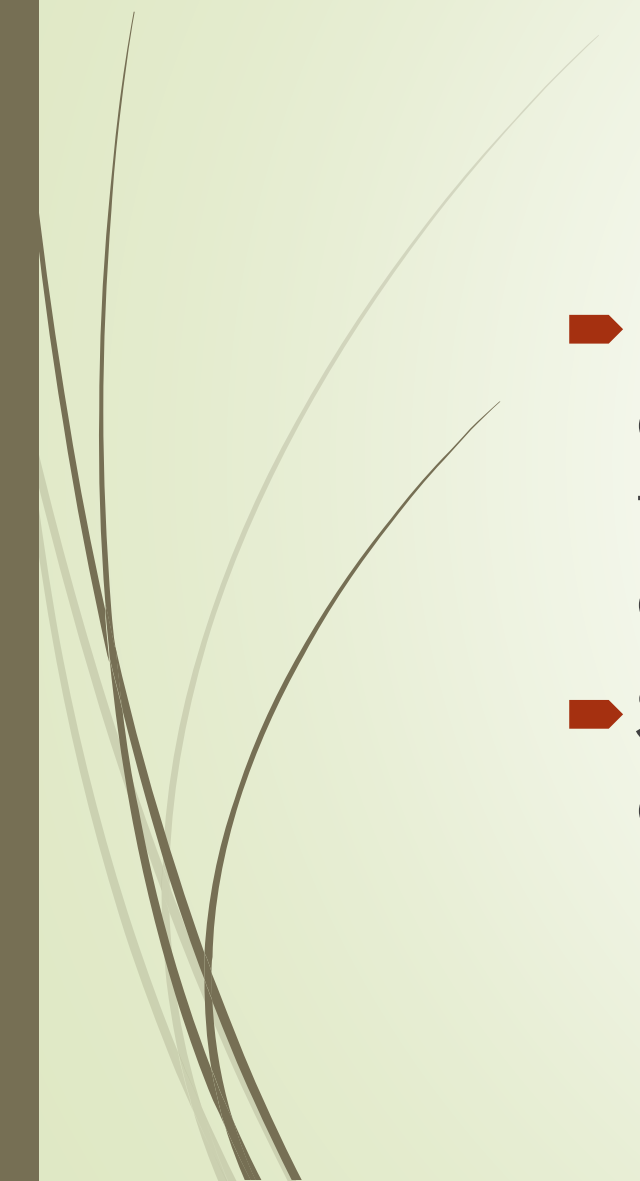
- Asian & Hispanic children are under-represented in child welfare
- Causes of underrepresentation include: less maltreatment, cultural protective factors, less likely to report based on cultural norms
- Analyzing data pertaining to race and ethnicity is difficult because: no quantifiable definition for race & ethnicity, how people define their race changes over time, and race/ethnicity incorrectly assumed



Reducing Disparities in Screening & Reporting Child Abuse



Future Direction

- Policymakers & programs should address disproportionality and disparities using data in their jurisdictions while being aware of national data
 - Strategies should be specific to the disproportionality/disparity affected and the points at which those differences are apparent.
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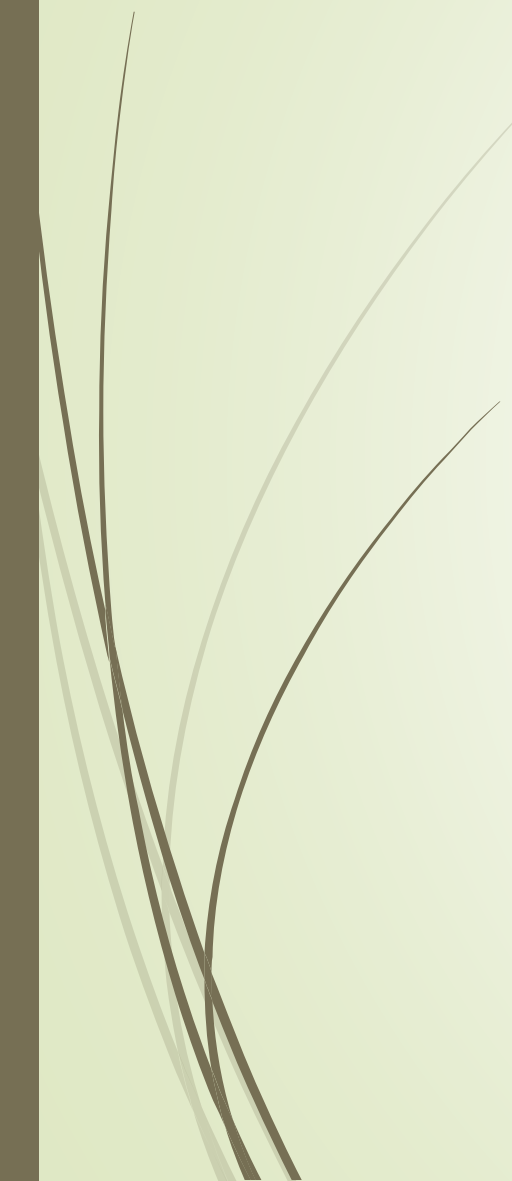


Reporting Solutions

- Ensure that reporters of maltreatment align suspicions with evidence or objective observations rather than racial or ethnic biases
- Visibility & exposure bias should result in higher incidence of education, prevention & support services rather than CPS reports
- On-hand, “first-response”, resources for mandated reporters to support families.
- Mandated reporters (initiating CPS report statutes) require specific guidelines and better child abuse training materials



Screening & Investigation

- Reduce differences in risk-threshold evidenced by racial bias & CPS system factors (i.e. streamlined process, evidence based assessment & screening measures, supervisor review/approval)
 - Racial or ethnic differences between a family and social worker
 - Conversely, one study using a national dataset found that Black caseworkers tended to assess all families regardless of race at higher risk levels than White caseworkers. Since African-American families are more likely to be assigned to a Black caseworker this increased chances of disproportionality
 - Risk assessment tools & standardized definitions may help guide the worker in assessing families on safety and risk issues and remove error from the decision-making process
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Cultural Competency/Humility



Cultural Competence

- Often necessary services are unavailable or not easily accessible to, communities of color (i.e. Hispanic, African-American, or Native American)
- A study found that 25 percent of Black and Hispanic neighborhoods did not have any child welfare services within a 5-mile radius, no bus transportation, and/or had long public transportation times
- A study found that African-American mothers involved with child welfare had the highest rate of substance abuse problems compared to other racial and ethnic groups, they had relatively low rates of participation in mental health and substance abuse treatment
- A study did not have any accessible services in 50 percent of its neighborhoods.
- Clients who receive in-home or community services will be more receptive to services offered by culturally competent providers



Cultural Competence



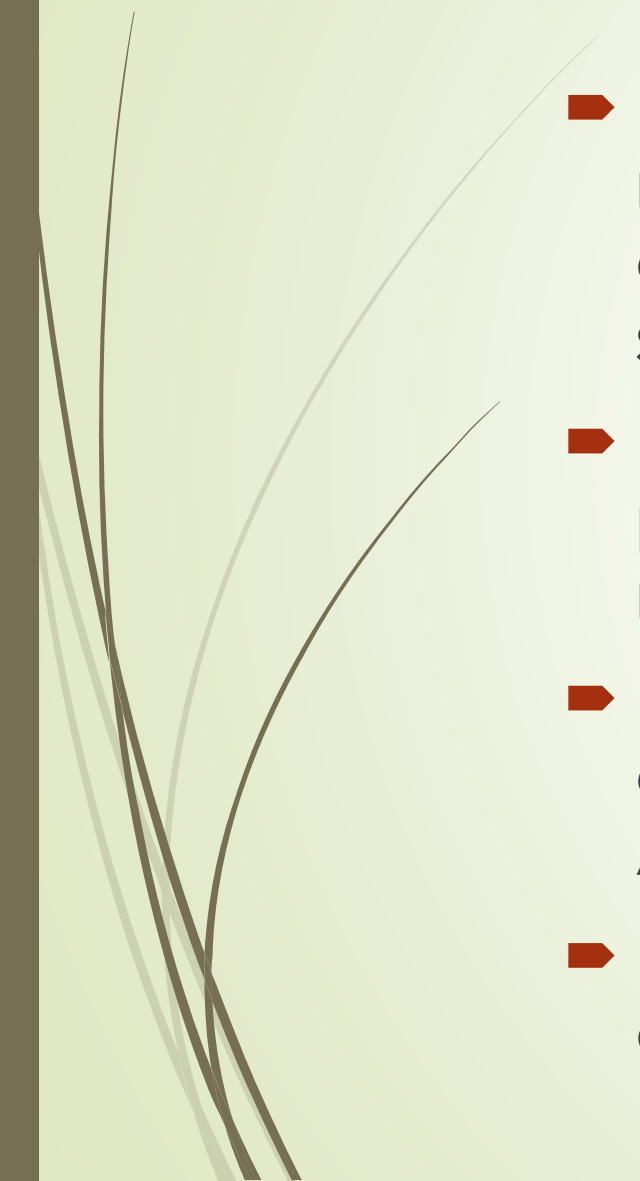
- More referrals are needed to providers who are culturally competent and can converse in the preferred language of the client.
- Referrers should make sure providers have full understanding of the client's cultural background, beliefs about health, parenting, and behavior.
- Providers must be able to incorporate the client's cultural beliefs into services or use strategies found to be effective with the client's culture.



Exemplary Models



Family Group Decision Making

- FGDM brings together immediate and extended family members, a trained facilitator, and others (i.e. community members, agency personnel) to develop safety and well-being plan
 - In FGDM families are generally more willing to participate when agencies use already trusted such as ministers or community organizers
 - FGDM reflects traditional values of kinship and community observed in Native American, African-American, and Hispanic cultures
 - FGDM appears to help in reducing racial disproportionality and disparity
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Alternative Response

- Differential response/alternative response /dual-track response uses tailored response for families reported for child maltreatment
- Used when there is a determination of low risk or when the family might not otherwise qualify for services.
- Services are available for substantiated and unsubstantiated cases and the child remains in the home during services.
- Alternative response is a flexible approach to working with families and provides more options for family involvement in case planning and service provision
- This is another promising approach to reducing disproportionality & disparities



Questions