How Science Contributes to Child Welfare Practice and Policy

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October 3, 2013

What is Science?



Science is logically structured – you can tell someone what you are doing and why it makes at least some sense.

Science is empirical (based on facts)

Science is public (it is something the whole human race does as a process)

Pretty simple really.

Asking "what is Child Maltreatment" is a little more complicated.

The History of Child Maltreatment (1): Discovery (1962)

THE BATTERED-CHILD SYNDROME

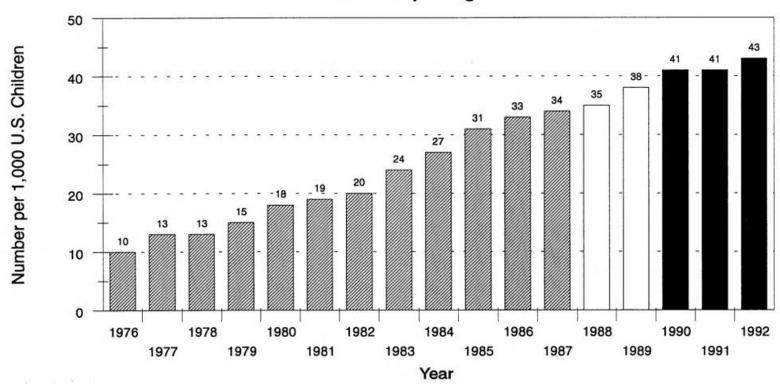
C. Henry Kempe, M.D., Denver, Frederic N. Silverman, M.D., Cincinnati, Brandt F. Steele, M.D., William Droegemueller, M.D., and Henry K. Silver, M.D., Denver

Professor and Chairman (Dr. Kempe) and Professor of Pediatrics (Dr. Silver), Department of Pediatrics; Associate Professor of Psychiatry (Dr. Steele), and Assistant Resident in Obstetrics and Gynecology (Dr. Droegemueller), University of Colorado School of Medicine; and Director, Division of Roentgenology, Children's Hospital (Dr. Silverman).

Psychiatric factors are probably of prime importance in the pathogenesis of the disorder, but our knowledge of these factors is limited. Parents who inflict abuse on their children do not necessarily have psychopathic or sociopathic personalities or come from borderline socioeconomic groups, although most published cases have been in these categories. In most cases some defect in character structure is probably present; often parents may be repeating the type of child care practiced on them in their childhood.

The History of Child Maltreatment (2): Explosion (1960's – 1980's)

Figure 1
Trend in Child Reporting Rates



Child Maltreatment 1992 (DHHS)

So what do child welfare workers do?

They take hotline reports and decide if they should go forward.

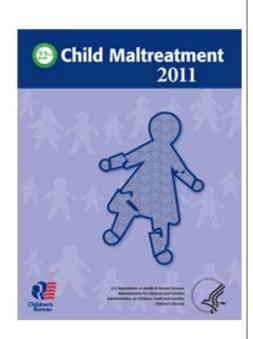
They do investigations/assessments designed to (hopefully) answer three questions (in my view): *Is the child safe? Does the family need help? Must I consider removing the child or invoking court intervention?* They also provide services to these families, usually case management.

Some children are removed from homes, and these are followed by assigned workers who work with birth families, foster families and may help with the adoption process.

What did Child Maltreatment Reports Look Like in 2011?

- 6.2M children in 3.4M reports.
- 60% of reports (2M) screened in 3% of child population.
- 1.5K official deaths

- Type 80% Neglect, 20% Physical, 10% Sexual.
- Perpetrators were 80% parents, almost all of them (90% of those) biological parents.



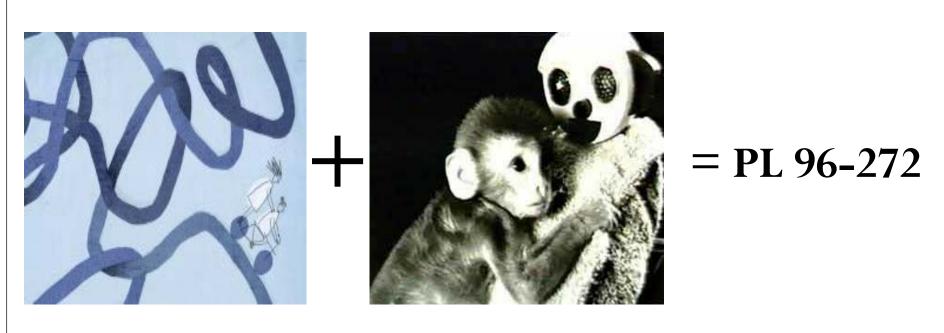
The History of Child Maltreatment (3): Policy Themes (PL96-272, ASFA, CAPTA...)

Key policy themes:

- Child safety
- * Permanence (children should not bounce around between homes)
- ❖ Reunification (children should be put back in their families of origin if possible)
- ❖ Speed (cases should not spend forever in court make a decision and place the kid in a safe and permanent home)

Positive Contributions of Science to the Field of Child Maltreatment

Foster Care Drift

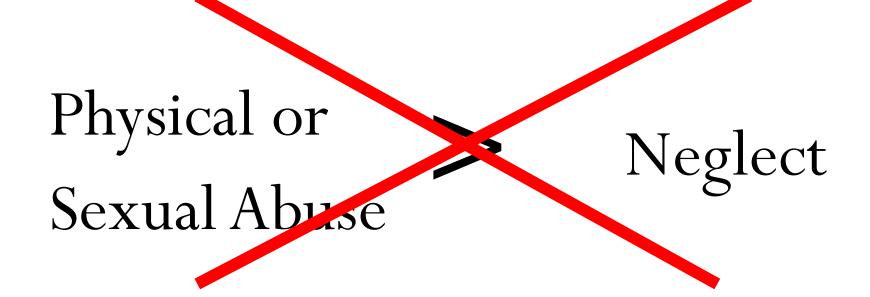


Addressing the "Neglect of Neglect"

Physical or Sexual Abuse

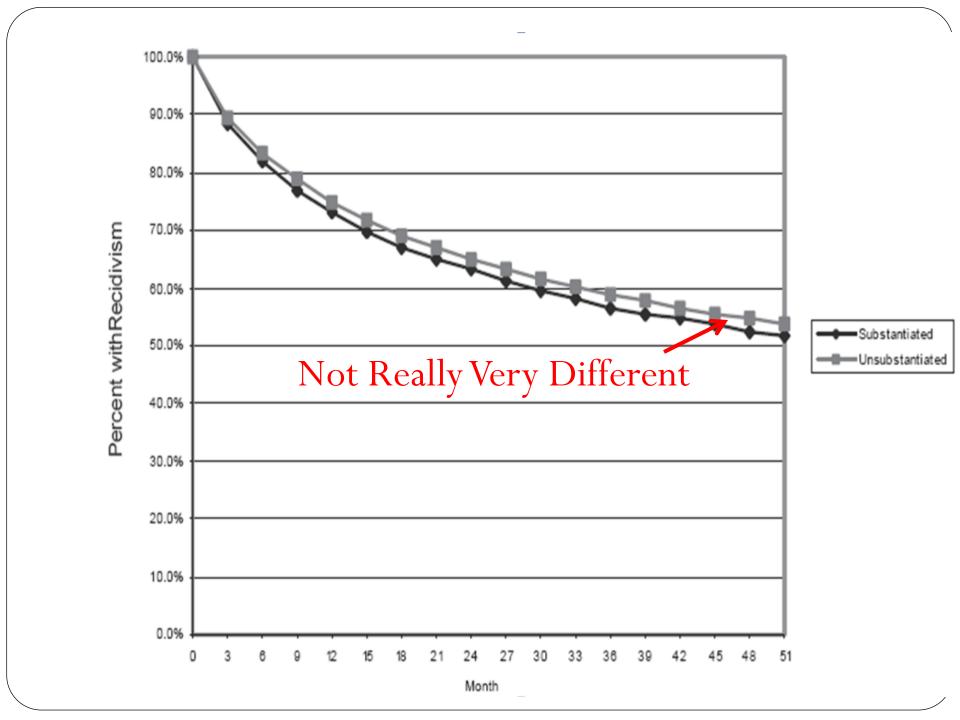
Neglect

Addressing the "Neglect of Neglect"



You might think that "Substantiated" cases of child abuse need more help and are more likely to recidivate than "Unsubstantiated" cases.

That's pretty easy to check scientifically.



This has big policy implications.

If your state does not provide preventative services to unsubstantiated cases because they are just "mistaken reports" and have low future risk, they probably should reconsider that position.

How about another, simple example of science answering an important question?

Would the Great Recession cause overall child maltreatment reports to spike? Can we check that out?



Contents lists available at ScienceDirect

Children and Youth Services Review



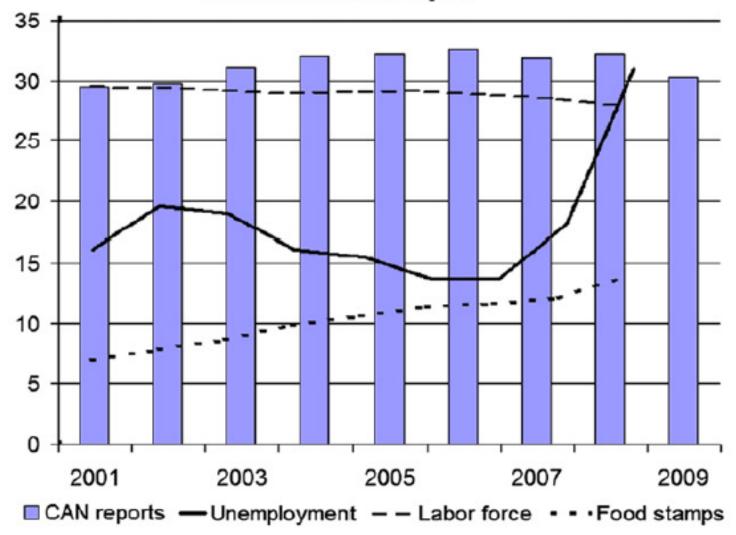


Are economic trends associated with child maltreatment? Preliminary results from the recent recession using state level data

Lina Millett *, Paul Lanier, Brett Drake

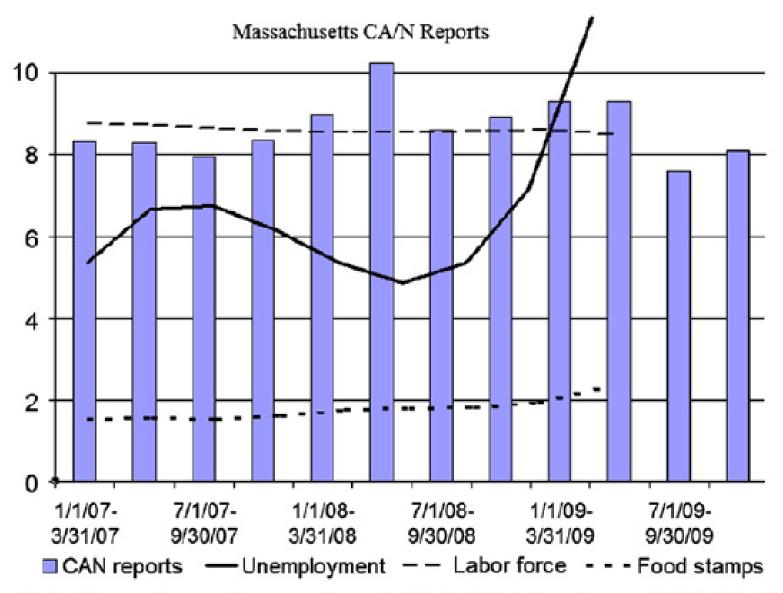
Brown School of Social Work, Washington University in St. Louis, Campus Box 1196, One Brookings Drive, St. Louis, MO 63130, United States

North Carolina CA/N Reports

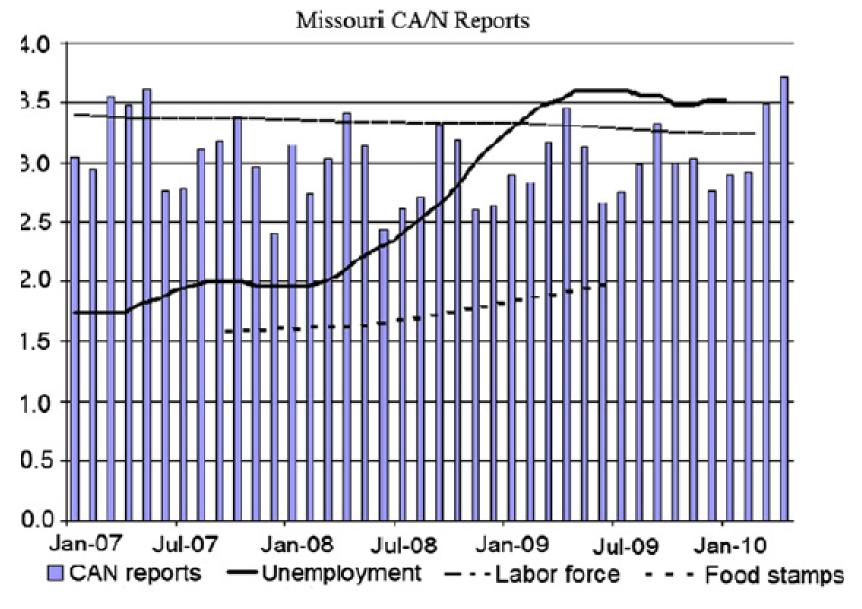


Note: Unemployment ranges from 5.5%-10.6%; Labor force: 67.1%-63.7%;

Food stamps: 26-51.6



Note: Unemployment ranges from 4.5%-9.2%; Labor force: 67.6%-64.9%; Food stamps: 36.7-59.0



Note: Unemployment ranges from 4.7%-9.5%; Labor force: 67.7%-64.5%;

Food stamps: 51.4-64.7

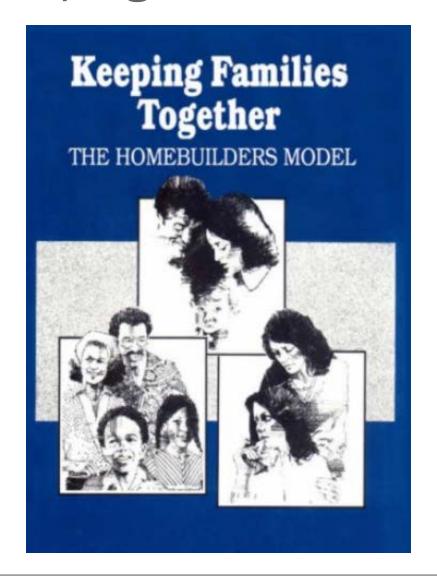
Science can tell us which child abuse and neglect interventions seem to be working well







But sometimes scientists disagree about if a program is effective or not.



Family Preservation Services provide an interesting case in point. Keeping Families Together THE HOMER HUDGES MODEL

- Some studies suggest FPS works.
- Some studies suggest FPS does not work.

There's been a complex history there – poor quality studies (especially early on), some good quality studies which often found negative results.

There were and are advocates for the program who are unwilling to accept that Family Preservation might not work as well as advertised.

Some influential websites (California Evidence Based Clearinghouse for Child Welfare) have taken a middle position, essentially stating "it seems to work, but we aren't really sure".

Personally, I have very grave doubts that it is effective.

So, overall, Science has contributed a lot to child maltreatment policy and practice, and continues to do so.

I'd like to present a case study in research and policy now.

Hopefully this will provide some insight into how science can shape policy and into how it can go wrong.

The Policy Question:

Are Blacks twice as likely to get reported as whites because there is more maltreatment among Blacks, or because the CPS system is racially biased and unfairly picking on them?

*This is not about Foster Care — that is a far more complex issue which I will not address.

Two Different Ideas

RISK:

Minority group has higher exposure to risk factors associated with CA/N (poverty) Child abuse rates influenced by risk



ACTUAL OCCURRENCE:

Higher actual incidence of CA/N in minority group Reporters and CPS system respond to risk

OFFICIAL VICTIMIZATION:

Higher official victimization rates in minority group

RISK:

Minority group has higher exposure to risk factors associated with CA/N (poverty) Risk and Protective Factors Offset



ACTUAL OCCURRENCE:

Equal rates of CA/N in minority and White groups

Bias inflates
official minority
victimization
rates



OFFICIAL VICTIMIZATION:

Higher official victimization rates in minority group

MODERATING FACTORS:

Protective cultural factors specific to minority group

BIAS:

Reporters and CPS system are inappropriately biased by race of child

Agree

OFFICIAL

victimization

group

OFFICIAL

victimization

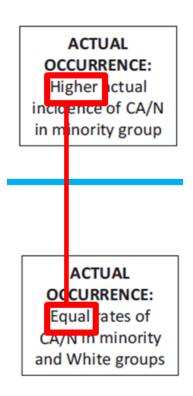
group

How can science help?

Simple – If Blacks are reported more because they are at higher risk, then this would indicate that the child welfare system is responding appropriately to higher need among Blacks.

But... if the actual rate of maltreatment for Blacks is the same as for whites, then the system is probably racist and we need policies put in place to fix that.

Models Disagree



So are Blacks actually abused at the same rate as whites or are they actually abused more? It would seem that since African-Americans are three times as likely to be poor, and poverty is strongly correlated with maltreatment, they might be.

We need to know the answer so we can implement correct policy.

Why not go look at the big, very expensive federally funded study designed to answer basic questions about who gets reported?

What Were the NIS-3 Findings Regarding Racial Disproportionality?

"Race: The NIS-3 found no race differences in maltreatment incidence. The NIS-3 reiterates the findings of the earlier national incidence studies in this regard. That is, the NIS-1 and the NIS-2 also found no significant race differences in the incidence of maltreatment or maltreatment related injuries. Service providers may find these results somewhat surprising in the view of the disproportionate representation of children of color in the child welfare population... The NIS findings suggest that the different races receive differential attention somewhere during the process of referral, investigation, and service allocation, and that the differential representation of minorities in the child welfare population does not derive from inherent differences in the rates at which they are abused or neglected" (NIS-3 Final Report, Page 8-7).

NIS Findings in English:

- The NIS-1 through NIS-3 were reported as showing that that African-Americans are <u>actually maltreated</u> at the same rate as Whites (1:1 rate).
- NCANDS (national reporting system data) shows that African-Americans <u>have more validated CPS reports</u> than Whites. (about a 2:1 rate)
- Therefore, if Blacks and Whites are abused at the same rate (NIS), but Blacks are reported and validated twice as often (NCANDS), then it stands to reason that the system is biased and needs to be fixed.

RISK:

Minority group has higher exposure to risk factors associated with CA/N (poverty)



Reporters ap CPS = .cem

respond to risk

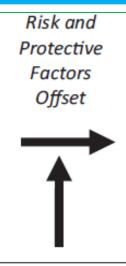


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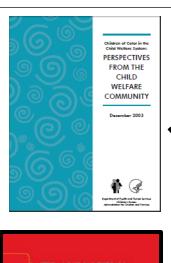
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MODERATING FACTORS:

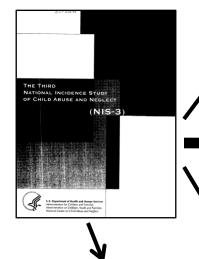
Protective cultural factors specific to minority group

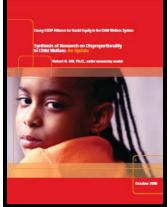
BIAS:

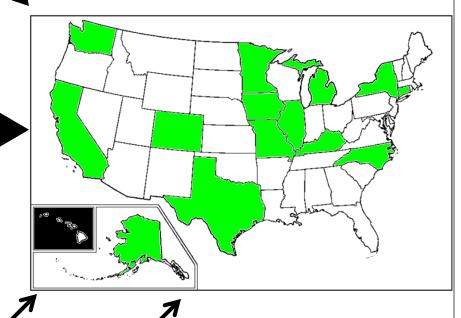
Reporters and CPS system are inappropriately biased by race of child

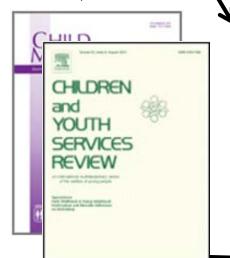


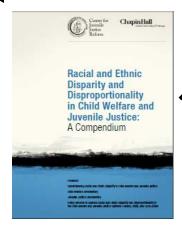
Message sent: Fix the racial bias in child welfare systems!





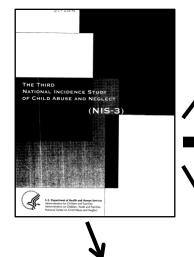


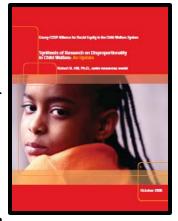


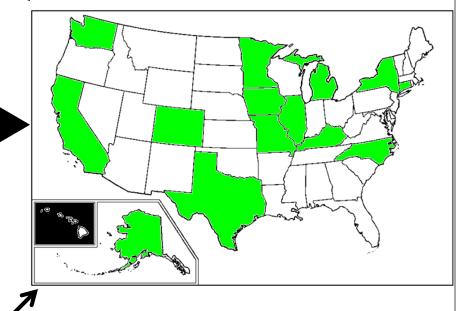


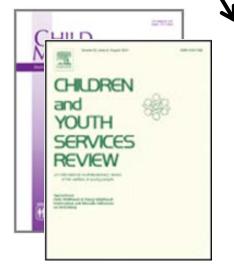


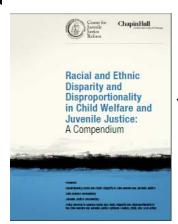
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Message sent: Fix the racial bias in child welfare systems!



Put simply, the NIS researchers reported that they found no statistically significant differences but didn't show us what the actual numbers were...

The NIS in More Detail

The Final Report of the NIS-3 reported <u>no numbers or</u> <u>statistics on racial disproportionality</u>. The **entire** results section on race was as follows:

"No significant or marginal race differences in the incidence of maltreatment were found either within the NIS-3 data or in the composition of changes since the NIS-2. This was true for both the Harm Standard and the Endangerment Standard findings. It is interesting to note that this was also the case in the NIS-2. That is, there were no significant race differences in any category for either standard, and none of the changes between the NIS-2 and NIS-3 were modified by child's race" (Sedlak & Broadhurst, 1996, p. 4-29)

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By which they mean "statistically significant"

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People bought it. Why wouldn't they?



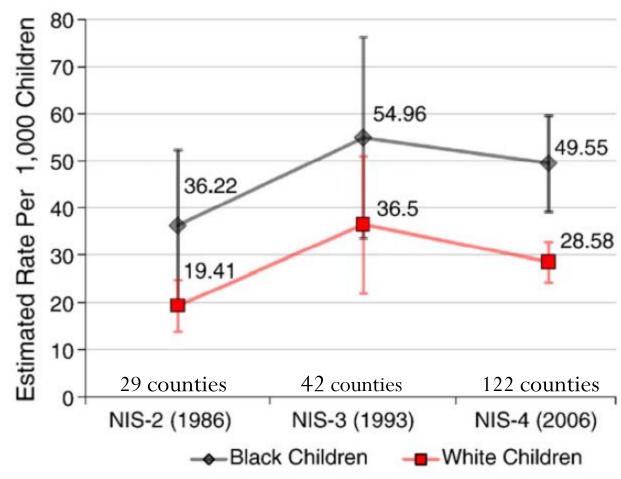
But what did the numbers really say?

We found out for the first time when the NIS-4 was published, and they finally showed us the numbers from NIS-3*.

* to be fair, the actual NIS-3 numbers were reported in a separate set of appendices, which, to my knowledge were never cited by anyone in policy or academia until Melissa Jonson-Reid Ph.D. found them and cited them a few years back.

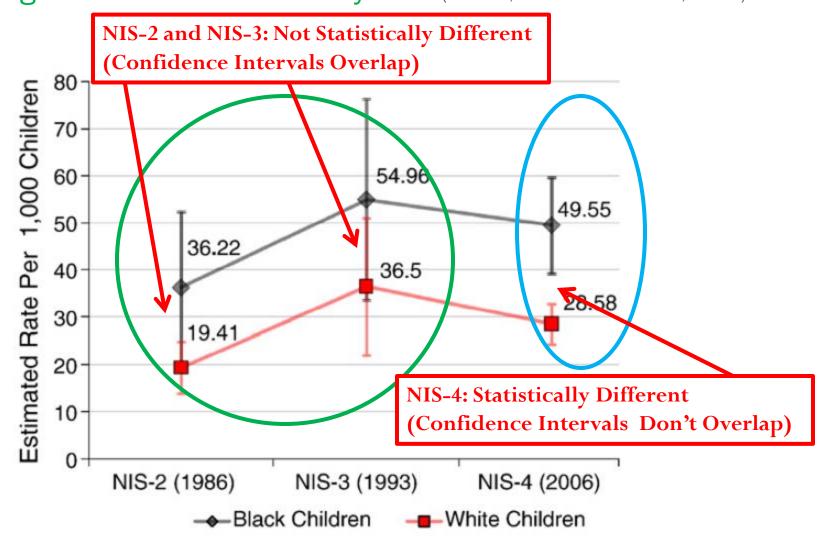
B/W Disproportionality, NIS-2, NIS-3, NIS-4. (Endangerment Standard)

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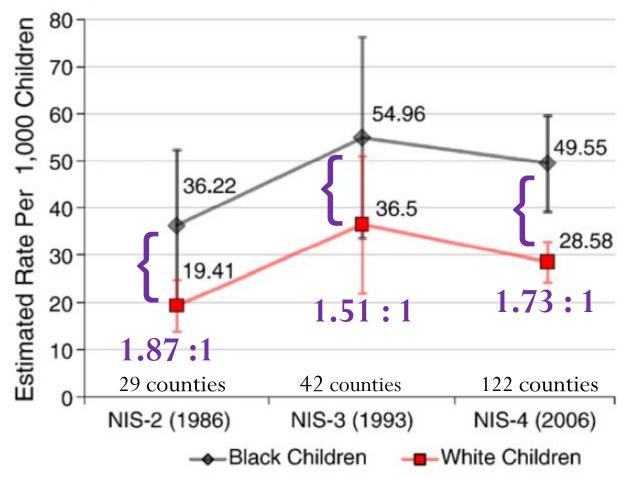
Note: NIS-2 estimate from Sedlak, Hantman, & Schultz, 1997, p. D-27. NIS-2 Confidence Intervals from Sedlak, 2010. Other Estimates from Sedlak, McPherson & Das, 2010, p. A-2.

"the NIS-4 found statistically significant differences between Black and White rates of child maltreatment, contrary to the findings of the first three NIS cycles" (Sedlak, McPherson & Das, 2010)



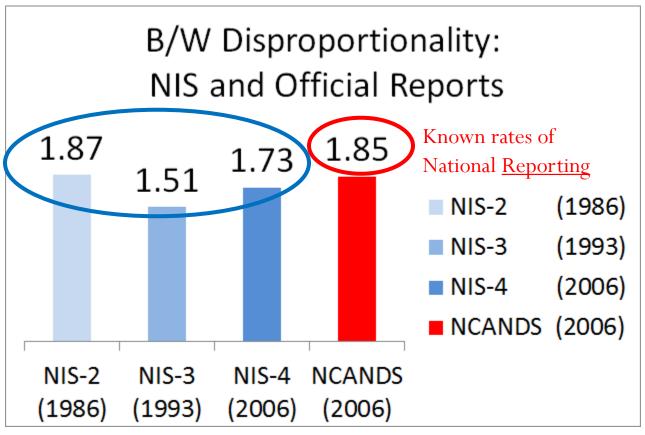
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NIS estimates of <u>Actual</u>
Maltreatment



So it turns out that African-Americans are probably more likely to be abused (in real life, not just reported) after all. Turns out that official reporting is in line with what's actually going on out there on the ground.

RISK:

Minority group has higher exposure to risk factors associated with CA/N (poverty)

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risk factors

associated with

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Reporters and CPS system respond to risk

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ACTUAL

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ACTUAL CURRENC

CA/N in minority and White groups

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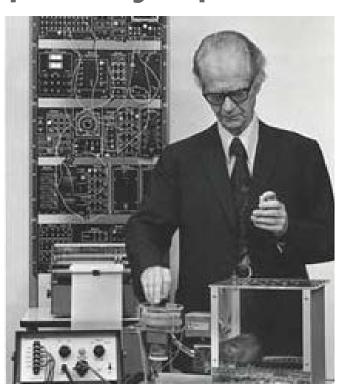
UII. Minority group has higher exposure to

MODERATING FACTORS:

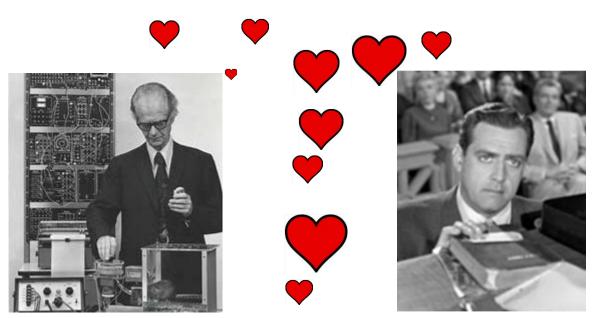
Protective cultural factors specific to minority group

BIAS:

Reporters and CPS system are inappropriately biased by race of child So far this has all been very scientific-ish and numbery. Is that the only way to use social science to answer policy questions?



Science and common sense should be complimentary allies. If you have one or the other you are ahead of most people. If you have both on your side, you have the best possible chance of understanding the situation.



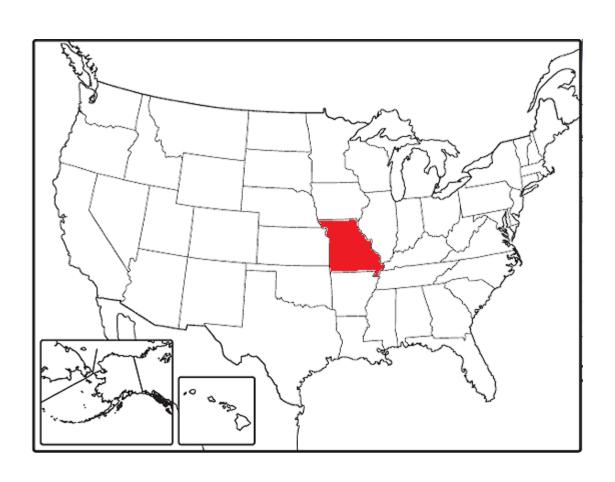
So I tried to use some common sense.

The big problem with the science, of course, is that we can't know rates of actual maltreatment for sure.

So is there anything kind of like maltreatment that we can know about for sure?

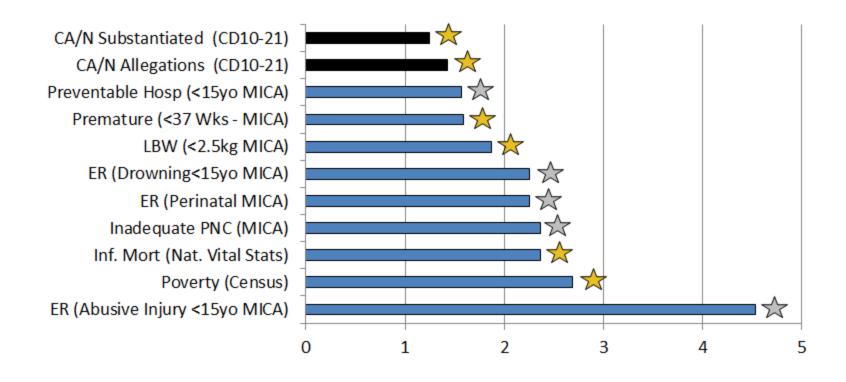
Sure there is.

Let's look at some public domain data from Missouri.



Black/White Disproportionality Ratios* (Missouri Data)

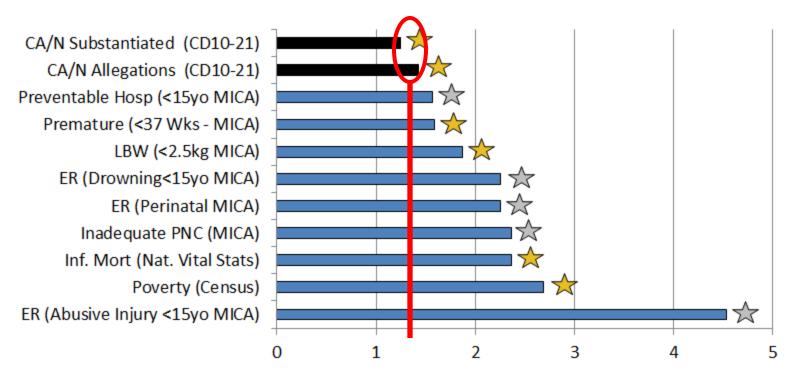
*(e.g. "2" means a ratio of "2:1" - Blacks reported twice as often as Whites)



Census: http://www.statehealthfacts.org/comparecat.jsp?cat=9&rgn=27&rgn=1 MICA: http://www.dhss.mo.gov/mica CD10-21 http://www.dhss.mo.gov/mica NVS: http://www.dhss.mo.gov/mica 17.pdf.

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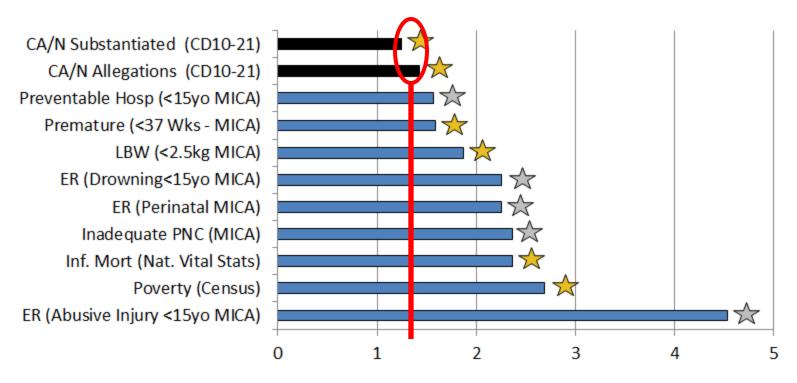
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Wow — all these measures of child well-being, some completely unbias-able (death) are even more disproportionate than the child maltreatment reporting numbers...

Black/White Disproportionality Ratios* (Missouri Data)

*(e.g. "2" means a ratio of "2:1" - Blacks reported twice as often as Whites)



I find these data troubling — I think these numbers would make Perry worry that maybe, in Missouri, Blacks might be slightly *under-*reported compared to Whites. They certainly don't look over-reported in my state.

We can also look at national numbers.

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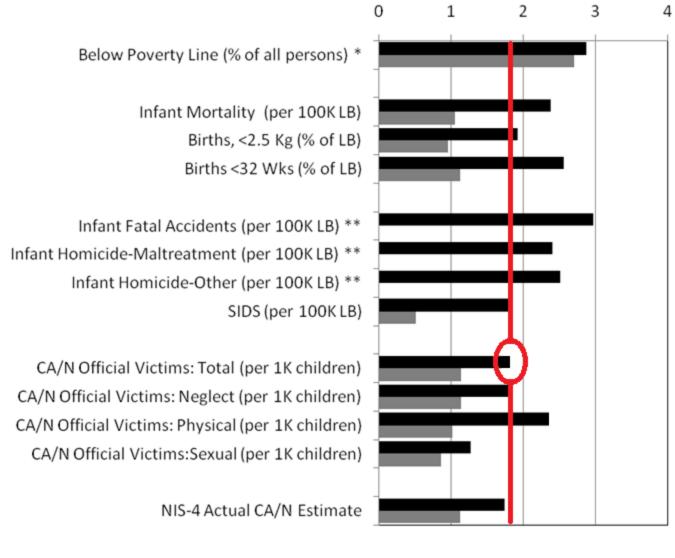
Racial Bias in Child Protection? A Comparison of Competing Explanations Using National Data

Brett Drake, Jennifer M. Jolley, Paul Lanier, John Fluke, Richard P. Barth and Melissa Jonson-Reid

Pediatrics published online Feb 7, 2011;

DOI: 10.1542/peds.2010-1710

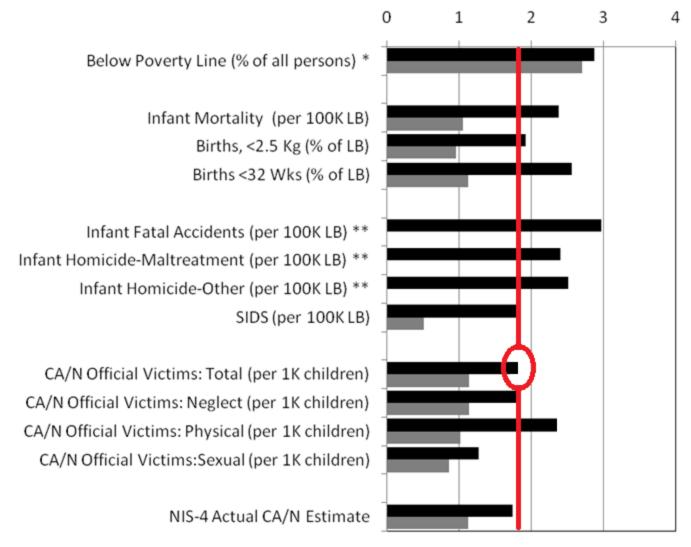
Black/White and Hispanic/White Disproportionality Ratios



■ Black/White Ratio

■ Hispanic/White Ratio

Black/White and Hispanic/White Disproportionality Ratios



Same story again - Child Maltreatment racial disproportionality is generally lower than for other indicators of child well-being — many of them (first cluster of three indicators) unbiased.

Important Disclaimers!

Does all this prove that CPS is absolutely "Racism-Free"? - Of course not.

Does all this mean that we can just forget about the possibility that racial bias may exist in CPS in some cases? - No.

What it does mean is that CPS bias is not driving racial disproportionality. Addressing racial bias cannot solve the problem of disproportionality. You need a deeper solution, in my view, like addressing the rampant poverty within African-American populations.

And... I don't want to make it seem like all this was my own brilliant work. Other people had come to the conclusion that something was wrong independently.

So far, we've highlighted some very good things science has done for the field of Child Welfare.

We've also highlighted a case or two where there were some problems.

You yourself will probably be in a situation where you have to understand, use or possibly confront science in your own work.

Self Defense Against Scientists





Trust Yourself

You are probably as smart as they are and may be more knowledgeable than they are in some aspects of the issue.



Clarity

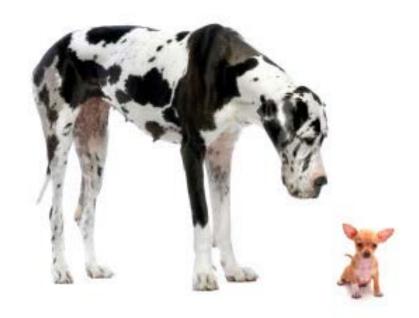
Demand clarity. It is their job to come to you. Failure to communicate is almost never because you are stupid or uneducated — it generally is because the scientist is failing to meet his responsibility to communicate clearly. There are many examples of scientists who do this well.



Magnitude Matters

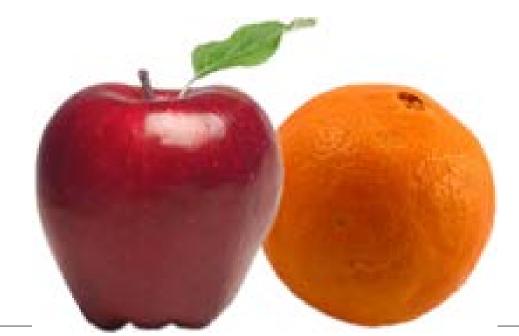
Many scientists talk endlessly about how they've proven a relationship at a high level of statistical significance and don't spend much time telling you how big a difference their finding shows. Ask them about this. Make them tell you how big the effect is in simple language.

Brett's Advice: Do not accept or use findings without understanding how big a difference you are talking about!



Understand the Sample

Understand who the scientist studied. Is the sample relevant to you? For example, there is very little research on rural populations, so if you're a program director in South Dakota, you need to approach some parts of the knowledge base with some respectful skepticism.



And Most Importantly -

Step Back and Use Common Sense

Because that's really what science is, when you get right down to it.

Thanks.