



Practical strategies

Should child protection services respond differently to maltreatment, risk of maltreatment, and risk of harm?

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ABSTRACT

Objective: To examine evidence available in large-scale North American datasets on child abuse and neglect that can assist in understanding the complexities of child protection case classifications.

Methods: A review of child abuse and neglect data from large North American epidemiological studies including the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS), the National Child Abuse and Neglect Data System (NCANDS), and the National Incidence Studies of Reported Child Abuse and Neglect (NIS).

Results: The authors of this paper argue that recent evidence from large North American epidemiological studies examining the incidence of child abuse and neglect demonstrate that children and families identified as being at risk of maltreatment present with as many household and caregiver concerns as investigations that are substantiated.

Conclusions: In order to continue to develop appropriate services and policies for vulnerable children the authors urge continue definitional clarity for research in child maltreatment that considers the exemplars or indicators of categories, in tandem with parental and child characteristics which can provide one source of evidence-basis to meaningful child protection case classifications. Continued monitoring, refined by the dilemmas faced in practice, are critical for a continued public health investment in children's well-being, predicated upon upholding children's rights.

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Introduction

The child protection services system is predicated on an expert (investigative team) decision-making, with service priority to those children and adolescents deemed to have experienced substantiated maltreatment. However, the distinction between substantiated and unsubstantiated maltreatment is questioned by many researchers (Drake, Jonson-Reid, Way, & Chung, 2003; Fluke, Parry, & Baumann, 2001). Informing this questioning is the potential confusion and conflict with concepts of demonstrable harm and risk of harm. However, child welfare statutes in most North American jurisdictions apply equally to children who have been harmed (substantiated maltreatment) and to children who are at high risk of harm (substantiated risk).

This risk of harm standard in child protection statutes recognizes that children need not have demonstrable emotional or physical harm to be in need of protection. It recognizes that, for the physically vulnerable child, a fatality is not the reasonable acceptable level of risk for child protection. A toddler who is left repeatedly in unsafe settings (e.g., in a crack

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house; around open waters; when criminal activity is occurring) and with an ever-changing cast of potentially dangerous persons (opportunistic, intoxicated/high; violent) is in a situation where there are high risks of serious harm, regardless of whether or not her/she is actually harmed at any given single time-point or whether the harm sustained is readily detected.

For instance in California, the definition of a “dependent” child provides for the inclusion of situations where there is a “substantial risk that the child will suffer, serious physical harm” (California Welfare & Institutions Code, 2009). In New York, a child is neglected if “physical, mental, or emotional condition has been impaired or is in imminent danger of becoming impaired” (New York Social Services Law, 2006). In Minnesota, the definition of physical abuse includes “physical injury, mental injury, or threatened injury” (Minnesota Statutes Annotated, 1998). In Ontario, Canada’s most populous province, section 37(2) of the Child and Family Services Act (CFSA) considers a child to be in need of protection if “there is a risk that the child is likely to suffer physical harm inflicted by the person having charge of the child or caused by or resulting from that person’s, (i) failure to adequately care for, provide for, supervise or protect. . .” (CFSA; http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes.90c11_e.htm).

Understanding when a child is at risk of maltreatment is an ongoing endeavor in the child protection field (Berger & Brooks-Gunn, 2005; Hamilton-Giachritsis & Browne, 2005; Jaudes & Mackey-Bilaver, 2008; Mullick, Miller, & Jacobsen, 2001; Portwood, 1999; Scannapieco & Connell-Carrick, 2003). In practice, child protection workers investigate and intervene in many situations in which children have not yet been harmed, but rather live in environments and with caregivers whose risks factors increase the likelihood that they will experience maltreatment (Bala, 2004; Trocmé et al., 2010a). To further complicate the question, the term risk has been elusive in finding a consensus definition. To wit, the conceptual validity of risk assessment tools is debated, with no single “gold” standard (Baird & Wagner, 2000; Baumann, Law, Sheets, Reid, & Graham, 2005; Shlonsky & Wagner, 2005).

Although rates of substantiated maltreatment have been declining in the United States, rates of reports to child protection authorities have remained constant. The rate of investigations was 40.3 per 1,000 US children in 2009 (unduplicated child count); this rate has remained consistent for the past 5 years (US Department of Health & Human Services, 2010). After a dramatic expansion from 1998 to 2003, rates of reported and substantiated maltreatment have leveled off in Canada (Trocmé et al., 2010b): the rate of investigations increased from 21.47 investigations per 1,000 children in 1998–38.33 per 1,000 children in 2003, to 39.16 in 2008.

The United States’ National Incidence Studies of Child Abuse and Neglect (NIS) have long recognized the distinction between maltreatment and risk thereof by providing both harm standard (maltreatment with harm demonstrated) estimates and endangerment (maltreatment with risk for harm) estimates. An estimated 2,905,800 children experienced some form of endangerment standard maltreatment during the 2005–2006 study year (an incidence rate of 39.5 children per 1,000; Sedlak et al., 2010, notably closer to Canada’s 2003 incidence rate). Using the harm standard for classifying maltreatment, during the NIS-4 (2005–2006), an incidence rate of 17.1 children per 1,000 children was estimated. Closer examination of the NIS-4 study’s endangerment standard shows that this standard applies to 2 different types of risk: (1) situations where a maltreating incident has occurred but a child was not visibly harmed and (2) situations where no specific abusive or neglectful incident has been documented, but it is very likely that such an incident could occur. For example, children are endangered by their parents’ problems including alcoholism, drug abuse, and/or prostitution (Sedlak et al., 2010).

The 2008 cycle of the Canadian Incidence Study of Reported Child Abuse and Neglect distinguishes between harm, risk of harm and risk of maltreatment. Seventy-four percent of eligible cases were classified as maltreatment investigations—3% of which involved documented physical harm, and 28% involved documented emotional harm—while 24% were risk investigations where no specific incidents were being investigated, but there were concerns about risk of future maltreatment. Families and children in both types of investigations presented with similar concerns with respect to housing and poverty-related problems: frequent moves, running out of money for basic household necessities and the presence of a household hazard. However, parent mental health and substance abuse concerns were noted more often in the risk investigations than in maltreatment investigations. Conversely, fewer child behavioral and emotional concerns were noted in the risk cases compared to the maltreatment investigations (Fallon, Trocmé, MacLaurin, Sinha, & Black, n.d.).

The distinctions drawn by the NIS and the CIS between harm and endangerment or harm, risk of harm and risk of maltreatment are not only methodological considerations for studies like the NIS and the CIS, but are important developments in our understanding of the complex overlay between child maltreatment, parenting problems, community risk, and children’s needs and clearly highlight the need for definitional clarity in child protection research and practice. The assessment and investigation challenges inherent in making these distinctions can lead to difficulties in ensuring that limited resources are appropriately targeted (Waldfoegel, 1998). This is a particular challenge for families at risk—specifically those who have not crossed the line into readily proven child abuse or neglect, but who still need services to address abusive or neglectful parenting practices or substantial family dysfunction that threatens the safety of children. There is also a need for a clear understanding on when collecting forensic evidence is the priority for the investigation: is that decision only a function of the severity of the maltreatment being alleged, or should it consider the specific typology or combination of typologies and evidence of harm? For example, one study found that when intimate partner violence occurs where the mother is the victim, there is an increased likelihood of aggression towards the child (Taylor, Manganello, Lee, & Rice, 2010).

The development of differential response models reflects an attempt to adjust our policies and programs to the importance of distinguishing between protection investigations, where forensic evidence gathering must be a critical priority, from assessments where family functioning and children’s needs should be at the forefront (Anselmo et al., 2003; Waldegrave & Coy, 2005; Waldfoegel, 2004). Evaluations in the United States have provided some clarification on the relative merits of

differential response services compared to traditional protection investigations (Child & Family Policy Institute of California, 2006; Institute of Applied Research, 2010; Loman & Siegel, 2005; Thompson, Siegel, & Loman, 2008). Families using differential response programs reported greater satisfaction with services as well as with the workers, greater engagement and cooperation in service planning and decision making and more significant contact (Child & Family Policy Institute of California, 2006; Institute of Applied Research, 2010; Loman & Siegel, 2005). A review of short-term outcomes for families receiving differential response services highlight a decreased number of placements (Institute of Applied Research, 2010; Loman & Siegel, 2004), lower rates of recurrent maltreatment reports (Huebner et al., 2009; Ortiz, Shusterman, & Fluke, 2008), and increased reunification with families (Marts, Lee, McRoy, & McCroskey, 2008).

While initial reports are promising, more research is needed to identify which families are best served by an alternative response. Case factors more likely to be associated with the use of differential response services include younger age groups (ACTION Council of Monterey County and Monterey County Department of Family and Children's Services, 2008; Sawyer & Lohrbach, 2005; Shusterman, Fluke, Hollinshead, & Yuan, 2005), referrals from non-professional sources (parents, relative, friends, or children), as well as social services or school educators (English, Wingard, Marshall, Orme, & Orme, 2000; Shusterman et al., 2005), reports for neglect, emotional maltreatment or witnessing domestic violence (Chipley et al., 1999; Institute of Applied Research, 2010; Office of Children's Administration Research, 2005; Shusterman et al., 2005), and a history of previous child protection involvement (Huebner et al., 2009; Institute of Applied Research, 2010; Siegel & Loman, 2006). There is a lack of consensus on specific guidelines to inform decisions about differential response and decisions are often left to the discretion of workers or supervisors (Institute of Applied Research, 2010; Siegel & Loman, 2006), while some jurisdictions are utilizing a group decision-making process (Child & Family Policy Institute of California, 2006; Sawyer & Lohrbach, 2005). In addition, there is variation between jurisdictions regarding when the decision for different response is made. A response track may be immediately identified at first report, or following an initial risk assessment or investigation (US Department of Health and Human Services, 2008). Further clarity and precision in our classification systems through studies monitoring the child welfare system responses, like the NIS and the CIS, are part of the ongoing process to develop a taxonomy that informs child protection policy and practice. Epidemiological research in child maltreatment that considers the exemplars or indicators of categories, in tandem with parental and child characteristics can provide one source of evidence-basis to meaningful child protection case classifications. Continued monitoring, refined by the dilemmas faced in practice, would seem critical for a continued public health investment in children's well-being, predicated upon upholding children's rights (<http://www.unicef.org/crc/>) and violence prevention (http://www.cdc.gov/violenceprevention/pdf/history_violence-a.pdf). Risk of maltreatment is a legitimate cause for CPS involvement and should be part of the discussion to prevent the sort of child maltreatment-related injury and disability that will remain for the rest of the child's life.

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