

Current Trends in Child Abuse Prevention, Reporting, and Fatalities:

THE 1999 FIFTY STATE SURVEY

Working Paper Number 808

Published April 1, 2001

Revised August 28, 2001

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a program of
Prevent Child Abuse America

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ACKNOWLEDGEMENTS

Preventing the abuse and neglect of our nation's children is the mission of Prevent Child Abuse America (PCA America). Finding ways to prevent child abuse and neglect, and promoting strategies and programs in communities are key goals in reaching our mission. To achieve these goals, the National Center on Child Abuse Prevention Research, a program of PCA America, began collecting detailed information from all 50 states and the District of Columbia on the number and characteristics of child abuse reports, the number of child abuse fatalities, and changes in the funding and scope of child welfare services. We provide an annual summary of these data to PCA America's Chapter network, child protection service agencies, advocates, policy makers, researchers and the public at-large. It is our hope that by providing these data we can examine the scope of child abuse and neglect and its effective prevention strategies, and begin to establish child abuse and neglect prevention as a public policy priority at the national, state and local levels. In this way we can help to raise the value that society places on children, and prevent abuse and neglect, so that all of our nation's children can grow to their full potential.

This report, Current Trends in Child Abuse Prevention, Reporting, and Fatalities: The 1999 Fifty State Survey summarizes the findings from the most recent survey. These data represent the most current available estimates of the number of children reported and substantiated as victims of maltreatment, and the number of child abuse fatalities nationwide for 1999.³ More importantly, we hope that this report can assist you in your efforts to prevent child abuse locally, statewide or nationally.

On behalf of the National Center on Child Abuse Prevention Research and PCA America, we would like to thank the people who have contributed to this publication, for without you it would not be possible. Many thanks to state child protective services agency liaisons for the data, and special thanks to PCA America chapter executive directors and research board members, leading researchers, advocates, practitioners in the field, and state agency liaisons for helping with the revision of this year's survey. Thank you all for your time, talents and contributions.

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HIGHLIGHTS OF THE 1999 FIFTY STATE SURVEY FINDINGS

The following highlights are based on state responses to the *1999 Fifty State Survey*. A total of 49 states and the District of Columbia responded to the survey, but not all were able to respond to each question.

PREVENTION

Thirty-nine states provided information on questions regarding prevention issues (see Appendix B). These questions were taken from key recommendations for child protective services (CPS) outlined in the *National Call to Action* (Cohn Donnelly, Shaw, & Daro, 2000). In addition, 30 states reported innovative programs and practices being implemented to achieve the child welfare outcomes addressing safety, permanency, and child and family well-being.

- 39 state liaisons responded that they are taking some to notable action to address all of the *National Call to Action* key recommendations and strategies for CPS (see Figure 1).
- The most commonly expanded prevention services cited by respondents are HFA, a neonatal home visiting program for families (8), parenting skills programs (6) and child care services (6).
- 28 states are implementing new programs and initiatives to achieve outcomes of safety, permanency and well-being for children and families.

REPORTING AND SUBSTANTIATION STATISTICS

These highlights are based on information collected on reporting and substantiation rates from the *1999 Fifty State Survey*. Not all states were able to provide data on every item. Forty-six states provided reporting and substantiation data for both 1998 and 1999, representing 96.2% of the total U.S. child population under 18.

- Nationwide in 1999, we estimated that 3,244,000 children (see Table 1) were reported to CPS as alleged victims of child maltreatment, a rate of 46 of every 1,000 children in the population.
- We estimated an increase from 1998 of 51,000 children reported to CPS agencies as alleged victims of child maltreatment, a 1.6% increase in reports² (see Table 3).
- Nationwide, the rate³ of children reported for child abuse or neglect has risen 2% over the past five years.
- We estimated 1,070,000 children (see Table 2) were substantiated as victims of child abuse and neglect in 1999, a rate of 15 of every 1,000 children in the population.
- Almost half (46%) of all substantiated cases were children who were victims of neglect, while 18% suffered from physical abuse and 9% were sexually abused. Victims of emotional abuse and domestic violence represented 4% of the total. In addition, almost a quarter (23%) of the children

were reported to be victims of “other” types of maltreatment including both abuse and neglect, threat of harm, and abandonment.

- The types of cases most frequently substantiated by child protective services have remained relatively constant over the past five years.

CHILD MALTREATMENT FATALITIES

Child fatality estimates are based on the number of children who have died as a result of child abuse and neglect as confirmed by CPS agencies nationwide. Forty-four states representing 79% of the population under 18 were able to provide fatality data for 1999 (see Table 5).

- In 1999, an estimated 1,396 children died as a result of child abuse and neglect, nearly four children every day.
- In 1999, the estimated rate of deaths per 100,000 U. S. children in the population is 1.99.
- Children under five years old account for four out of five of all fatalities reported, with children under one year old accounting for two out of five of these deaths.

THE RESULTS OF THE 1999 FIFTY STATE SURVEY

INTRODUCTION

Concern for the welfare of children, particularly those who are abused or neglected, has been longstanding among medical and health professions, social service providers, and the general public. Legislation which defines child abuse and determines the appropriate role for child welfare agencies has been a part of state statutes for nearly 30 years (U.S. Department of Health and Human Services, 1999).

In 1974, the Federal government adopted a more direct role in child abuse policy with the passage of P.L. 93-247, the Child Abuse Prevention and Treatment Act (CAPTA). Although the passage of this legislation established a set of uniform operating standards with respect to the identification and management of child abuse cases, states are able to determine definitions of maltreatment, investigative procedures, service systems and data collection procedures. Moreover, implementation of CAPTA at the state levels emphasizes *treatment over prevention*.

Documenting the problem is a necessary but insufficient step in preventing child abuse and neglect. The challenge to collecting national totals on child abuse statistics and prevention efforts remains current. Limited information is readily available on the comparative scope of the child abuse given varying definitions and recording systems; likewise, child maltreatment prevention resources suffer from a lack of availability, uniformity, and standardization. Unlike prior annual surveys, this 1999 edition includes data on both state prevention efforts and child abuse and neglect.

OVERVIEW AND USER'S GUIDE

This report summarizes the highlights and findings from the most recent survey. The highlights and findings are based on responses from 49 states and the District of Columbia, although all states have not responded to all questions. This study presents the data in three main sections: Child Abuse and Neglect Prevention, Reporting and Substantiation Statistics, and Child Maltreatment Fatalities. At the beginning of each of these three sections are highlights followed by the complete findings for that section. Both estimating procedures used and methodological obstacles accompanying these findings should be used when interpreting the results. In addition, throughout the document are references and links to sites containing additional information on the topics cited.

Appendix A contains the data gathering procedure and a sample of the *1999 Fifty State Survey* questions. Questions relevant to the *Call for Action* are presented in Appendix B.

CHILD ABUSE AND NEGLECT PREVENTION

HIGHLIGHTS

These highlights are based on information collected on prevention efforts from the *1999 Fifty State Survey*. Thirty-nine states provided information on questions regarding prevention issues (see

Appendix B). These questions were taken from key recommendations for child protective services (CPS) outlined in the *National Call to Action* (Cohn Donnelly, Shaw, & Daro, 2000). In addition, 30 states reported innovative programs and practices being implemented to achieve the child welfare outcomes addressing safety, permanency, and child and family well-being.

- 39 state liaisons responded that they are taking some to notable action to address all of the *National Call to Action* key recommendations and strategies for CPS (see Figure 1).
- The most commonly expanded prevention services cited by respondents are HFA, a neonatal home visiting program for families (8), parenting skills programs (6) and child care services (6).
- 28 states are implementing new programs and initiatives to achieve outcomes of safety, permanency and well-being for children and families.

CHILD ABUSE PREVENTION EFFORTS

Efforts to prevent child abuse and neglect (CAN)⁴ include a wide range of activities with the goal of helping families of our nation's youngest children receive the support and education necessary, so that their children will not be subjected to maltreatment (Cohn Donnelly & Shaw, 2001; Harding, in press). To be effective, prevention efforts require an understanding of the types and causes of maltreatment, which are shown in this report. Prevention and intervention activities must address the risks and strengthen families and communities to create healthier environments for raising children. Prevention promotes the actions, thoughts and interactions that lead to families' well-being and healthy, optimal development of children (Britton, 2001).

RECOMMENDATIONS AND STRATEGIES FOR IMPROVING CPS

The Children's Hospital of San Diego convened a conference in January 1999, from which came the National Call to Action, a coordinated, collaborative and multidisciplinary national effort to work toward the elimination of child maltreatment (Chadwick, 1999; Cohn Donnelly & Shaw, 2001). One focus of the *National Call to Action* is to help the field build on past efforts by encouraging the realization of all the priority recommendations contained in seminal reports of the last decade. In the *1999 Fifty State Survey*, state liaisons were asked about actions regarding key recommendations and strategies for CPS, which were found in 18 of the most often cited reports or plans related to child maltreatment. These recommendations found in Figure 1 can be seen in current state efforts for CPS reform (see <http://www.pcaiowa.org>).

Thirty-nine of the responding liaisons reported that they had heard of most of the *National Call to Action* recommendations and strategies (see Figure 1), and had taken some action to address them. The most notable actions taken by states were in the following four areas:

- 1) Providing more services to facilitate adoption
- 2) Enhancing partnerships with public agencies and community services
- 3) Considering an expedited system for terminating parental rights
- 4) Conducting comprehensive assessments of child's development and service needs

The least notable actions taken by states were in the following four areas:

- 1) Improving family reunification efforts without increasing re-entry to system
- 2) Enhancing foster care and other out-of-home options
- 3) Improving quality of foster parents
- 4) Achieving competent practices with all cases

The areas in which states most frequently took some action:

- 1) Enhancing foster care and other out-of-home options
- 2) Improving quality of foster parents
- 3) Achieving competent practices with all cases
- 4) Improving family reunification efforts without increasing re-entry to system
- 5) Establishing best practices for operations of out-of-home options and monitor compliance with standards

Paying greater attention to unique services of domestic violence, substance abusers, developmental disabilities, and mental health seems to be the most challenging strategy for CPS states to put into action.

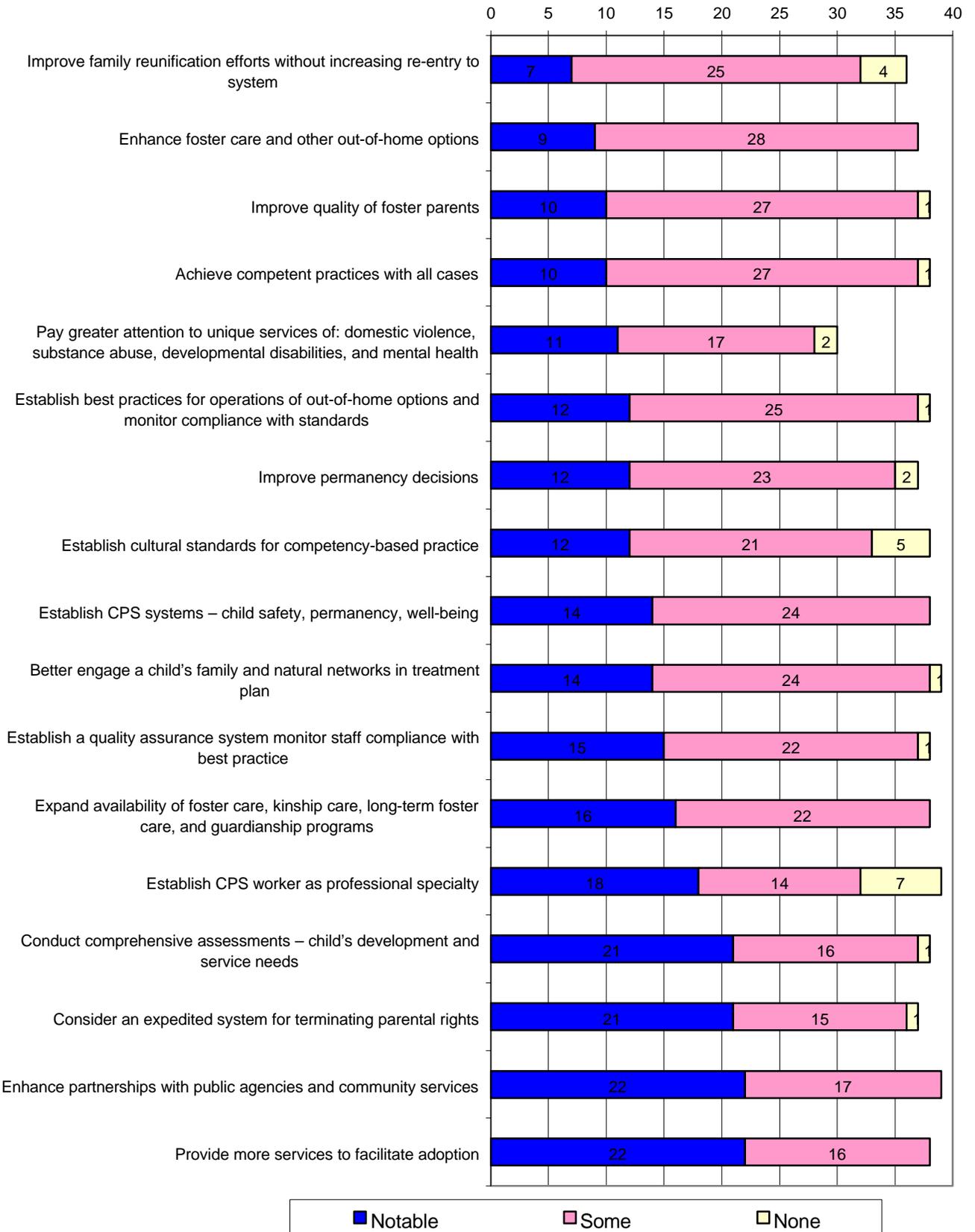


Figure 1. Action's taken by CPS to *Call to Action* Recommendation and Strategies (n=39)

PREVENTION SERVICES

Of the 35 liaisons responding to questions on prevention services, 23 (45%) are allocating Temporary Assistance for Needy Families (TANF) or Child Health Insurance Program (CHIP) funding to support CAN prevention efforts and another state is in the planning stage, while 24 (47%) of 39 respondents are leveraging TANF funds to expand prevention services. Among the most common prevention services cited by respondents are HFA (8), parenting skills (6), child care services (6), substance abuse programs (3), community programs to strengthen families (2) and domestic violence services (2).

In addition to using existing child welfare funding to support child abuse prevention services, eight states are also utilizing Maintenance of Effort (MOE) funds, Medicaid, and state department funds for prevention services. In order to ease the transition from welfare to work, states are required to sustain spending levels at 80% of their FY 1994 allocations regardless of the size of their welfare caseload.

State liaisons were asked what type of programs they funded. Types of programs most commonly reported include expanded day care, home visitation and job training. The most common prevention program reported was funding HFA or other home visiting programs (eight of the 25 states, 32%). Prevent Child Abuse America launched a nationwide prevention initiative HFA to offer voluntary home visiting services to parents of newborns (see www.healthyfamiliesamerica.org). The purpose of HFA is to ensure that all new parents, particularly those at high risk for child maltreatment, have access to the support they need to care for their babies. As of January 2001, this initiative has resulted in the establishment of 417 affiliated programs in 39 states and the District of Columbia, up from 311 programs in the same number of states in 1998 (Daro and Winje, 1999). HFA offered parenting education and support services to nearly 40,000 parents nationwide. Most other states have established task forces to explore the development of these efforts and funding opportunities. Funding of prevention programs, such as HFA, may look to federal and state agencies to supplement current funding in order to serve an extensive base of families (Britton, 2001).

INNOVATIVE PROGRAMS AND PRACTICES FOR POSITIVE CHILD WELFARE OUTCOMES

Thirty states responded to questions pertaining to new or innovative programs or practices to achieve outcomes of safety, permanency and well-being for children, with 28 states reporting that they had implemented programs and initiatives. Of these programs and practices, 68% reported they were focusing more closely on involving family members in the planning and providing of services for the protection of their children. Thirteen liaisons indicated that their states had instituted programs related to kinship and foster care to increase permanency outcomes and thirteen liaisons identified infrastructure and systems redesign to assure positive child welfare outcomes.

These innovative programs and practices include:

1. Family group decision making (FGDM) – Ohana Conferencing in Hawaii - (see <http://www.americanhumane.org> for more information, and http://www.wvdhhr.org/bcf/youth_services.htm for West Virginia's implementation);
2. Family support projects (see <http://www.ossweb.com/np/carenow.html> for Arizona's Family Builders and http://home.lunaweb.net/~coalitions/what_is_tea.html for Arkansas's Transitional Employment Assistance (TEA) program);

3. Kinship care adoption; and foster care initiatives (see <http://www.aoc.state.nc.us/www/public/aoc/pr/adoption.html> for North Carolina's Adoption Acceleration Project and <http://www.gov.state.ak.us/omb/2002site/Budget/H&SS/comp2305.pdf> for Alaska's Project Succeed).
4. Whole communities engaged as resources to families (see North Carolina's use of Community Child Protection Teams http://www.dhhs.state.nc.us/dss/c_srv/csर्व/commun.htm).

REPORTING AND SUBSTANTIATION STATISTICS

HIGHLIGHTS

These highlights are based on information collected on reporting and substantiation rates from the 1999 Fifty State Survey. Not all states were able to provide data on every item. Forty-six states provided reporting and substantiation data for both 1998 and 1999, representing 96.2% of the total U.S. child population under 18.

- Nationwide in 1999, we estimated that 3,244,000 children (see Table 1) were reported to CPS as alleged victims of child maltreatment, a rate of 46 of every 1,000 children in the population.
- We estimated an increase from 1998 of 51,000 children reported to CPS agencies as alleged victims of child maltreatment, a 1.6% increase in reports (see Table 3).
- Nationwide, the rate of children reported for child abuse or neglect has risen 2% per 1,000 over the past five years.
- We estimated 1,070,000 children (see Table 2) were substantiated as victims of child abuse and neglect in 1999, a rate of 15 of every 1,000 children in the population.
- Almost half (46%) of all substantiated cases were children who were victims of neglect, while 18% suffered from physical abuse and 9% were sexually abused. Victims of emotional abuse and domestic violence represented 4% of the total. In addition, almost a quarter (23%) of the children were reported to be victims of "other" types of maltreatment including both abuse and neglect, threat of harm, and abandonment.
- The types of cases most frequently substantiated by child protective services have remained relatively constant over the past five years.

Note: "Child" or "Children" as used in this paper, covers all methods of counting child maltreatment (i.e., child, incident, family, referral or case).

CHILD MALTREATMENT REPORTS AND SUBSTANTIATIONS

After a slight decline in 1998, we again saw numbers of reports and substantiated cases increase. It is interesting to note that although there was an overall increase, an examination of individual states' data reveals substantial percentage changes in both directions, with increases in 18 states, decreases in 25 states, and no change in three states.

In 1999, although states showing a decrease in reports outnumbered those showing an increase for the second time since 1986, our survey records show an overall increase in reports. A total of 25 states (54% of respondents) showed a decrease in reports from 1998 to 1999, averaging a 5% decrease. In contrast, states that reported an increase in reports showed an average growth in child maltreatment of 9%. Six states witnessed more than a 10% increase, compared to only two states that witnessed more than a 10% decrease in the number of child maltreatment reports.

REPORTS

As shown in Table 1, based on data collected from 46 states, representing 96.2% of the U.S. child population, we estimate that 3,244,000 children were reported to CPS agencies as alleged victims of child maltreatment. This number represents a 1.6% increase over the number reported in 1998. 46 out of every 1,000 children in the population were reported as victims of child maltreatment in 1999, up from 45 per 1,000 in 1998. Overall, the total number of reports nationwide shows a slight upward trend with a 4.5% increase over the number of reports, with only a 2% increase over the rate per 1,000 recorded in 1995. However, the trend over 10 years ago in 1989, shows a 33% increase in reports. Conversely, there are many factors contributing to this 10 year escalation other than the possibility of real increases in maltreatment rates. Many factors include: changes in data collection, management and recording systems, changing definitions of child maltreatment, public awareness, changes of mandated reporters, and an increased number of states reporting numbers providing a more accurate account.

Table 1
National Estimated Child Maltreatment Reports

	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Estimated Number of Children reported for maltreatment	2,435,000	2,557,000	2,684,000	2,909,000	2,967,000	3,062,000	3,105,000	3,120,000	3,232,000	3,193,000	3,244,000
Per 1,000 U.S. Children	38	40	42	45	45	45	45	45	46	46	46

Methodological Obstacles

A significant methodological obstacle preventing a direct count of the number of children reported and substantiated for maltreatment is the wide variation among states' data collection procedures:

- 23 states provided the number of children reported for maltreatment, while 23 states reported by incidents or families rather than children.
- 26 states count only investigated reports of child abuse and neglect, while 20 states count all reports made to child protective services.
- 24 states based their numbers on calendar year, whereas 22 states used fiscal year.
- 24 states could only provide duplicate numbers of children reported for maltreatment. This means that if a child were reported for child abuse and neglect more than once in a year, the child would be counted multiple times in the total number of reports.

Note: "report," as used in this paper, covers all methods of counting (i.e., child, incident, family, referral or case).

Estimating Procedures for Table 1

Procedural variations in recording child abuse and neglect cases preclude simply adding all reports for a grand total. In order to arrive at an estimated number of children reported for CAN in a one-year period:

- The estimated number of children reported for maltreatment in the previous year (i.e., 3,193,000 in 1998) was multiplied by the average percentage change in reports between two consecutive years (i.e., 1.6% increase from 1998 and 1999, see Table 3). The number is then added to the estimated number for the previous year (i.e., 1998) to derive the estimate for the current year (i.e., 1999).
- These procedures were used to obtain an estimated number of child maltreatment for 1989 through 1998, as well as numbers for 1987 and 1988, which were presented in previous reports.
- The estimate of children reported for maltreatment in 1986 (2,086,000), published by the American Association for Protecting Children (AAPC, 1988), was used as the baseline to derive PCA America's first estimate for 1987.

SUBSTANTIATED MALTREATMENT

As shown in Table 2, 1,070,000 children, a rate of 15 out of every 1,000 in the population were substantiated as victims of child maltreatment in 1999. This number of children approximates a 2% increase over the number substantiated in 1998, although the rate of 15 per 1,000 is constant. Based on the data from 45 states, an average of 33% of all reports/incidences were substantiated. Of the 46 states reporting for 1999, only California could not provide a substantiation rate. In 1999, substantiation rates ranged from a low of 10% in New Hampshire to a high of 56% in South Dakota.

Table 2
Estimated Confirmed Child Victims of Maltreatment

	1994	1995	1996	1997	1998	1999
Average Indicated/Substantiated Rate	33%	33%	32%	34%	33%	33%
Est. # of children confirmed as victims of maltreatment	1,010,000	1,025,000	998,000	1,099,000	1,054,000	1,070,000
Per 1,000 U.S. Children	15	15	14	15	15	15

Methodological Obstacles

We encounter similar methodological problems as above (see Table 1) in determining the number of children confirmed as victims of child maltreatment.

- Many states record the number of substantiated reports as opposed to the number of children.
- The amount of initial screening of child abuse reports impacts the overall substantiation rate, with states documenting all calls to their reporting system (i.e., formal reports and non-reports) generally showing lower substantiation rates.
- States use different standards for determining whether or not maltreatment occurred (e.g., one state may require evidence of **actual** harm to a child while another state may simply require evidence of **potential** harm).

Estimating Procedures for Table 2

The survey asked respondents to provide the number of substantiated and indicated victims and the substantiation rate (including indicated cases) for the prior three years.

- An average national substantiation rate is calculated from each state's substantiation rate without attempting to standardize these figures.
- The average substantiation rate is then multiplied by the estimated number of children reported (Table 1) for maltreatment to obtain an estimated number of children confirmed as victims of maltreatment.

Note: In this paper, the term "substantiated" includes indicated cases as well.

ANNUAL PERCENTAGE CHANGE OF CHILD ABUSE AND NEGLECT REPORTS

To obtain an estimate of both the total caseloads for CPS agencies nationwide and recent caseload changes encountered by these agencies, we calculated the percentage change in each state's reported cases. Table 3 presents the annual percentage change in each state's child maltreatment reports between 1995 and 1999, using a baseline from 1989.

Table 3
Child Abuse and Neglect Reports – Annual Percentage Change

STATE	89-90	95-96	96-97	97-98	98-99
CHANGE BY NUMBER OF CHILDREN REPORTED BETWEEN 1998 AND 1999					
(n = 23)					
Alabama	-1	2	-4	-5	1
Alaska	0	-7	0	6	1
Connecticut	-2	4	NA	-5	-5
Delaware	0	14	34	9	2
Florida	NP	5	2	0	19
Hawaii	17	5	10	-7	56
Illinois	1	-10	-5	-4	-5
Indiana	27	-3	-17	-16	-6
Iowa	4	6	NA	NA	-4
Kentucky	7	-4	NA	NA	-9
Louisiana	-1	1	1	-2	-2
Massachusetts	17	5	2	-6	2
Minnesota	-8	-3	4	-5	0
Missouri	2	-2	3	-6	-4
New Hampshire	10	9	3	3	-6
New Jersey	-7	29	3	9	-2
New Mexico	17	2	NA	NA	8
New York	7	11	-1	-2	-2
North Carolina	15	1	6	12	12
Ohio	6	NA	-5	-5	-3
Oklahoma	9	3	18	9	-8
Pennsylvania	4	-2	-4	0	-1
Rhode Island	24	-6	-6	1	-4
CHANGE BY NUMBER OF REPORTS BETWEEN 1998 AND 1999 (n = 23)					
Arizona	6	-7	35	-9	-6
Arkansas	1	11	9	-10	-3
California	3	0	NA	-5	7
Colorado	12	-1	2	-9	-1
District of Columbia	-4	-3	-4	-7	-6
Georgia	1	-9	-6	-4	0

TABLE 3. CHILD ABUSE AND NEGLECT REPORTS-ANNUAL PERCENTAGE CHANGE

STATE	89-90	95-96	96-97	97-98	98-99
Idaho	11	-11	2	-18	-7
Maryland	2	6	2	4	0
Michigan	4	2	1	4	-2
Mississippi	8	-1	1	5	2
Montana	8	-2	19	-12	4
Nebraska	2	4	-2	2	2
Nevada	12	7	8	-7	-2
Oregon	-5	-8	14	12	10
South Carolina	NP	-12	-6	0	-11
South Dakota	2	NA	24	-3	-4
Tennessee	1	0	-7	-4	7
Texas	13	-12	6	6	11
Utah	2	-12	11	-11	15
Vermont	-1	-2	2	-15	25
Virginia	NP	-7	-4	1	-13
Washington	0	-5	5	-3	-2
West Virginia	-7	NA	NA	-3	4
NO DATA AVAILABLE FOR 1999 (n = 5)					
Kansas	0	11	-3	-11	NA
Maine	-9	4	DNR	NA	NA
North Dakota	11	NA	NA	3	DNR
Wisconsin	12	2	NA	-7	NA
Wyoming	9	9	-1	NA	NA
Average Percentage Change	+5.0%	+0.5%	+3.6%	-1.2%	+1.6%

Notes:

- DNR Did not respond to survey.
- NA Not available at the time of data collection.
- NP Change could not be calculated due to change in data collection procedures

Estimating Procedures for Table 3

The percentage change in reports is calculated for those states providing this number. The calculation for national average percentage change reflects only those states that provided data.

Table 3 displays the fluctuation in percentage changes in each state's reports from 1995 to 1999. Of the six states that had over a 10% increase in reports, Hawaii reported the largest (+56%) and attributed this increase to the implementation of a statewide standardized mandated reporter form. Vermont's state liaison related the 25% increase to a child death in early 1999 and a subsequent policy change (inclusion of Risk of Harm). Florida and Utah identified no particular factors contributing to the significant increase in the number of reports. The North Carolina state liaison speculated that the 12% increase in reports observed in their state is likely due to the inclusion of all children in the home at the time of the report in the count of victims and the increase in substance abuse and domestic violence issues. According to the Texas liaison, the 11% increase in reports may be due to both 1.) An increased public awareness that was related to a number of events including: a new statewide intake program, increased child fatalities, abandoned infants, legislation related to a professional's responsibility to report; and 2.) The development of an improved risk assessment instrument.

Of the two states that experienced more than a 10% decrease in reports only South Carolina indicated any factors for their decline. The liaison attributed its decrease in reports to community awareness and involvement, and better reporting.

Additionally, 43 states answered questions regarding possible changes in policy, CPS administration, and environmental factors over the past year. Of those who answered, 12 liaisons reported better risk assessment protocols, 10 indicated changes in investigation procedures, 10 reported that their state had changes in definition of maltreatment, and 8 liaisons noted there were changes in the level of evidence required for investigation. Other changes had to do with the implementation of the Statewide Automated Child Welfare Information Systems (SACWIS) (13 states), the CAPTA appeals (10 states), changes regarding TANF (5 states), and implementation of a structured decision-making process (5 states). Lastly, four state liaisons indicated changes in structural or ecological (e.g., economics, employment factors, traumatic event) factors. These changes underscore the variability in reporting statistics over time and the sensitivity of the child welfare system to changes in social, political and administrative conditions or procedures.

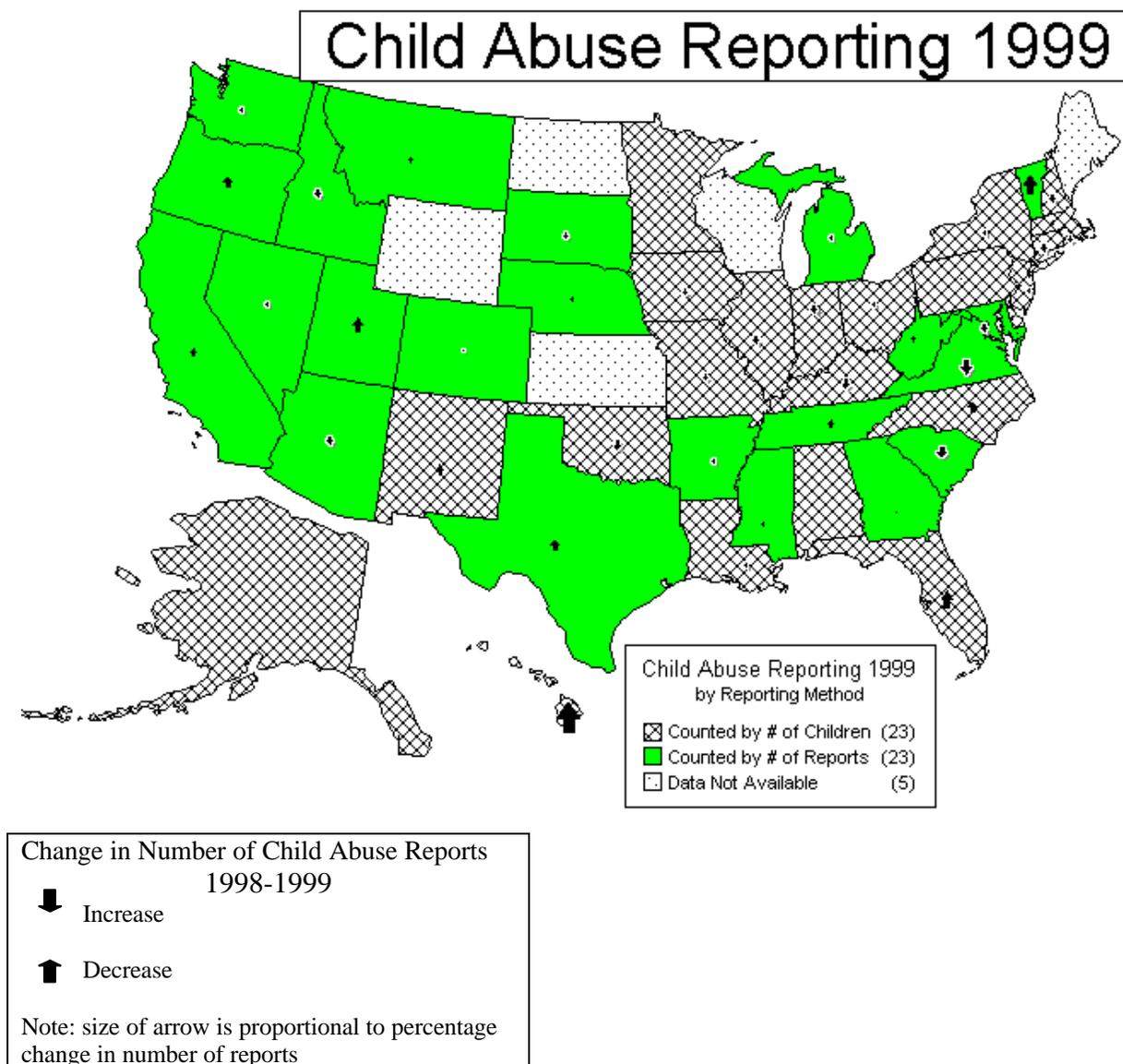


Figure 2. Map of Child Abuse and Neglect Reporting 1999

FACTORS ACCOUNTING FOR REPORTING CHANGES

To help determine whether changes in reporting rates represent an actual increase/decrease in child abuse or merely reflect a more accurate assessment of the problem, we asked each liaison to name the two most significant factors that accounted for the reporting trends in their state. These responses are based on CPS caseloads and provide a descriptive appraisal of those factors CPS administrators consider the most relevant.

Of the 18 states that witnessed an increase in child maltreatment reports, 10 responded to this question (see Table 3). Six of the responding states attributed the rise in reports to increased public awareness through media and education about their reporting system which made the public, as well as mandated reporters, more aware of their responsibility to report suspected child maltreatment. Six states also cited substance abuse as a major contributor to growth in reports.

With respect to the decline in reports, 14 of the 25 states (see Table 3) with a decrease in reports gave an explanation for their decline. The most commonly noted factor, indicated by five (36%) of the responding states, was changes in reporting system and procedures, such as centralized intake, more effective intake assessments, and the use of standardized screening tools. Additionally, increased public awareness regarding child welfare and child protection issues was reported by four states as a factor contributing to the decrease in reports.

CASE CHARACTERISTICS

To provide appropriate prevention and treatment services, it is necessary to determine the prevalence of different types of maltreatment as well as other characteristics of the CPS caseload. Each state liaison was asked to provide a breakdown of all reported and substantiated cases by type of maltreatment for 1998 and 1999. Six categories were requested: physical abuse, sexual abuse, neglect, emotional maltreatment, witnessing domestic violence and other types of maltreatment.

Methodological Obstacles

Not all states were able to provide data using all six categories.

- 29 states provided a breakdown of reported cases for 1999, with 24 of these states providing data for both years.
- 45 states provided a breakdown of substantiated cases in 1999, with 30 states giving a breakdown for substantiated cases for both years.
- Witnessing domestic violence was a new category in 1999, with only 7 states considering it child abuse; of those 7, only one could provide numbers of reported cases and substantiated cases in this category and therefore did not keep a separate breakdown for 1998 and 1999.
- 2 states considered emotional maltreatment as a type of neglect; and
- 1 state included sexual abuse in the category of physical abuse.

Note: Because of the low number of states reporting information on domestic violence (n = 1) it is included in the emotional abuse category.

COMPARISON OF REPORTED AND SUBSTANTIATED CASES BY TYPE OF MALTREATMENT

As Figure 3 indicates, neglect represents the most common type of reported and substantiated maltreatment. Compared to the reported cases, the substantiated cases contain a slightly lower

percentage of neglect, physical abuse and sexual abuse, and a substantially higher percentage of “other” cases. As in the past four years, these two distributions are similar to each other. Trend data indicate that the “other” category grew larger over the past three years especially for substantiated cases, but leveled off in 1999. The “other” category accounted for 4% of all reports and 5% of substantiated cases in 1996, compared to 9% and 23% of reports and substantiated cases in 1999 respectively. One interpretation would be that states are using the “other” category for more detailed behaviors of child maltreatment that are not categories provided in this survey. For example, behaviors included under the “other” category are abandonment, multiple types of maltreatment, imminent risk, substance abuse, dependency, threat of harm and bizarre discipline.

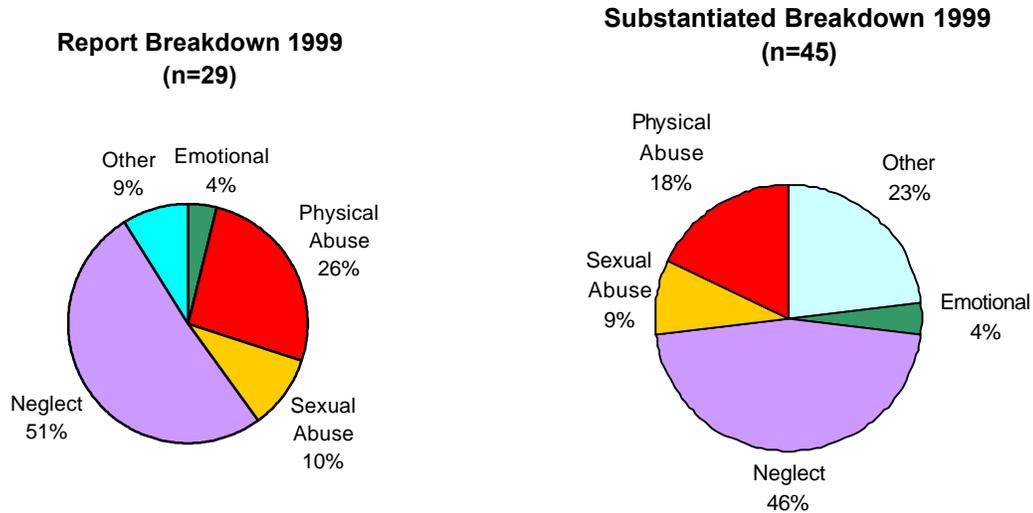
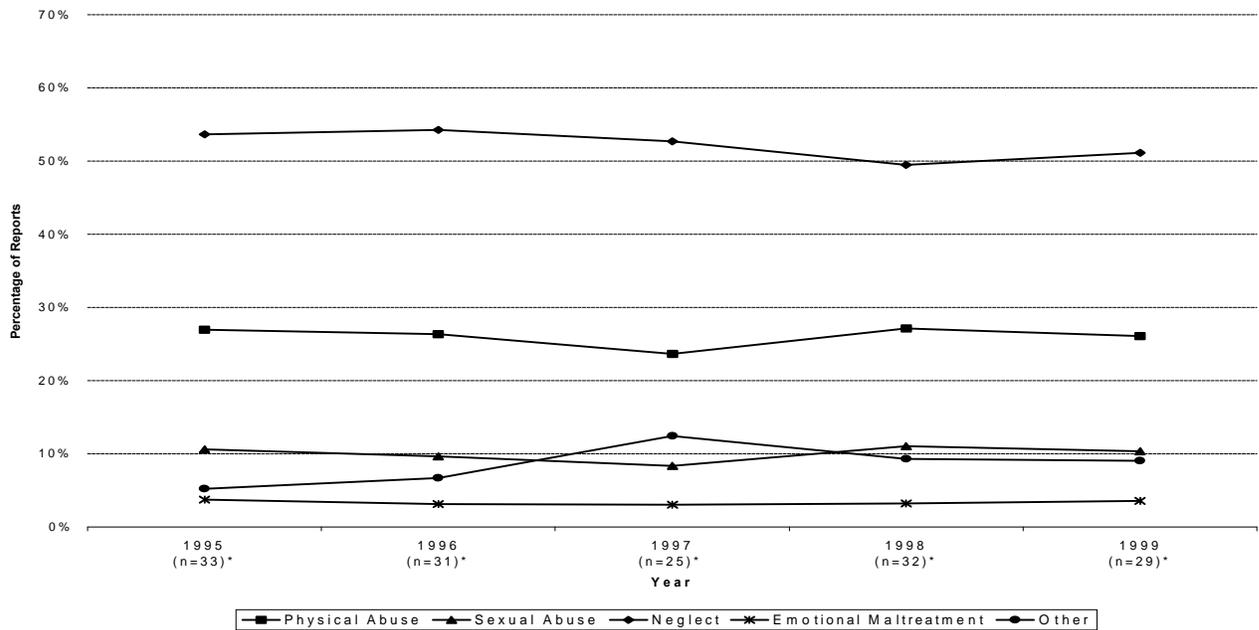


Figure 3. Breakdown by Type of Abuse and Neglect For 1999

In the 1980s and early 1990s, the greatest difference between the reported and substantiated distributions involved sexual abuse and neglect cases. Overall, substantiated cases tended to include a larger percentage of sexual abuse and a lower percentage of child neglect than was observed in reports. In recent years however, the similarity in the distribution of reported and substantiated cases in terms of primary type of abuse suggest that type of abuse, alone, may not be as important as in the past in determining whether a case will be substantiated. Neglect cases are now as likely to be substantiated as cases involving other forms of maltreatment.

The percent made up by each type of maltreatment has remained relatively constant over the past five years. One exception is a decrease in cases involving neglect until 1999 when there was a slight increase (1%). There was also a corresponding increase in cases involving the “other” category of maltreatment (see Figure 4). This shift potentially reflects a change in the type of cases professionals and the public report to CPS and the classification systems used by child welfare systems in describing the reports they receive.

Note: The data shown in Figure 4 represents a different number of states (n) and a somewhat different sample of states providing data for each year, therefore, these trends must be interpreted with caution. For example, in 1997 only 25 states provided data on abuse types and of those states, only 22 provided data for both 1997 and 1998.



*Number of states that provided data

Figure 4. Type of Maltreatment- Report

As summarized in Figure 4, neglect consistently outnumbers other types of maltreatment reports with a slight decreasing trend over the past five years. The percentage of neglect reports fell to a low of 50% in 1998 with just a slight increase to 51% in 1999. At the same time, the “other” category rose from a low of 5% in 1995 reaching a high of 12% in 1997 to the present 9%. Sexual abuse reports have fluctuated only slightly over this period, within one to two percentage points of 10%, although they were higher in the early 90s (16% at the peak in 1991) with fewer states reporting (n = 11). With this most recent data on sexual abuse, we differ from the conclusion of a recent study that there is an “extensive period of marked declines in the 1990s” (Jones & Finkelhor, 2001, p.1).

PRIMARY PRESENTING PROBLEMS

Families reported for child maltreatment often display a number of problems, which can contribute to their likelihood for engaging in abusive and neglectful behavior. Identifying these problems is a first step toward prevention. To assess specific patterns shared by families on CPS caseloads across the country, respondents were asked to describe the major problems presented by their caseloads (see Table 4). Forty-one state liaisons responded to this question with 85% naming substance abuse as one of the top two problems exhibited by families reported for maltreatment. These results are supported by Reid, Macchetto, and Foster’s (1999) recent report that substance abuse was the main cause of the

significant increase in child welfare cases during the 1980s and 1990s and Chasnoff's (1999) review of data indicating that substance abuse in pregnancy is a major factor in child neglect and abuse cases.

The second most frequently cited problem area involved poverty and economic strains. Eighteen state liaisons (44%) indicated that their clients lack financial and transportation resources, face problems of inadequate housing and unemployment, and often have limited community resources and support. This mirrors findings that persons in lower income levels suffer most from maltreatment (Courtney, 1999; Sedlak & Broadhurst, 1996).

Nine state liaisons (22%) reported that their adult clients struggle with domestic violence, which research has shown to have a close relationship with child maltreatment, and a growing consensus that child witnessing of the violence is inherently abusive (Shepard & Raschick, 1999). Nine state liaisons also reported that lack of parental capacity and skills were common problems. These families lack parenting skills due either to various mental health problems, poor understanding of a child's normal developmental path or young maternal age. Daro and Harding's (1999) work speaks to the research that supports this finding and practices to address it. Finally, seven liaisons (17%) identified factors related to the system itself as problems clients struggle with. These include unresponsive or unavailable caseworkers, turnover of caseworkers, and lack of resources for prevention and treatment.

Table 4
Primary Presenting Problems

	Substance Abuse	Poverty & Economic Strains	Parental Capacity & Skills	Domestic Violence
1998	85% (29 states)	38% (13 states)	23% (8 states)	18% (6 states)
1999	85% (35 states)	44% (18 states)	22% (9 states)	22% (9 states)

CHILD MALTREATMENT FATALITIES

HIGHLIGHTS

Child fatality estimates are based on the number of children who have died as a result of child abuse and neglect as confirmed by CPS agencies nationwide. Forty-four states representing 79% of the population under 18 were able to provide fatality data for 1999 (see Table 5).

- In 1999, an estimated 1,396 children died as a result of child abuse and neglect, nearly four children every day.
- In 1999, the estimated rate of deaths per 100,000 U. S. children in the population is 1.99.
- Children under five years old account for four out of five of all fatalities reported, with children under one year old accounting for two out of five of these deaths.

CAN RELATED FATALITIES

One of the greatest tragedies is the death of a child from abuse or neglect. Although such deaths are relatively infrequent they have risen 11% (estimated) over the past 5 years.

Note: Extensive investigative procedures and the use of formal death review teams, now in 45 states (see http://ican-ncfr.org/surgeon_general.htm), that examine all of the evidence pertaining to fatalities have resulted in formal confirmation occurring several months, and in some cases, years after a child has died. The length of time it takes for the confirmation of fatalities and the timing of data collection impact the final child abuse and neglect related fatalities reported by CPS. This year, California, with the largest U.S. child population under 18 (12.7%), was not able to report 1998 or 1999 fatalities at the time of the survey. California would need to report 171 and 178 fatalities for 1998 and 1999, respectively, in order for the estimated results to remain at 1.91 for 1998 and 1.99 for 1999 per 100,000 children, which when compared to the numbers California provided for previous years (see Table 5) is not likely. Therefore, the death rate per 100,000 would decrease. Other agencies also collect data that is affected by this timing factor (see the National Child Abuse and Neglect Data Systems (NCANDS) Child Maltreatment 1998 at <http://www.acf.dhhs.gov/programs/cb>). Consequently, these data should only be viewed as estimates.

Data from other studies and anecdotal information from liaisons strongly suggest that official records under-count the actual incidence of maltreatment fatalities in the United States. Research has consistently found that some percentage of accidental deaths, child homicides and sudden infant death syndrome (SIDS) cases might be more appropriately labeled as child maltreatment deaths if comprehensive investigations were routinely conducted (California Office of the Auditor General, 1988; Ewigman, Kivlahan, & Land, 1993; McClain, Sacks, Froehlke, & Ewigman, 1993). McClain et al. (1993) utilized a mathematical model to estimate the total number of child abuse and neglect deaths. They found that child maltreatment fatalities remained relatively stable, with between 949 to 2,022 deaths each year, from 1979 through 1988. They also concluded that 85% of deaths due to parental maltreatment were coded as due to some other cause on the child's death certificate. A recent study that thoroughly reviewed death records of children in North Carolina further pointed out the coding problems involved in the vital records systems (Herman-Giddens et al., 1999). The authors estimated that the number of child maltreatment fatalities was underreported by 60% in the United States during the period from 1985 through 1996. In addition, Bonner, Crow, and Logue (1999) point to miscoding of neglect-related deaths on death certificates, as well as inaccurate and incomplete information along with an outdated death classification system, as a factor in the uncertainty in knowing the actual number of children who die as a result of child neglect each year.

Table 5
Child Abuse and Neglect Related Fatalities

STATE	1989	1995	1996	1997	1998	1999
Alabama	NA	26	32	25	27	32
Alaska	NA	NA	NA	DNR	NA	NA
Arizona	NA	26P	13	12	10	9P
Arkansas	9	3	9	3	5	6
California	18	135 ^a	152 ^b	135	NA	NA
Colorado	12	20	26	34	33	30P ^e
Connecticut	6	5	7	6	2	6
Delaware	2	4	12	2	3	3
District of Columbia	NA	4P	6	6	7	5 ^f
Florida	NA	62	82	78	54	57
Georgia	NA	16	23	24	37	42
Hawaii	1	1	4	6	2	5
Idaho	5	14	11	4	6	4
Illinois	53	98	84	89	69	74P
Indiana	29	44	43	46	65	41
Iowa	9	18	14	11	10	10

TABLE 5. CHILD ABUSE AND NEGLECT RELATED FATALITIES

STATE	1989	1995	1996	1997	1998	1999
Kansas	9	4	NA	11	12	6
Kentucky	10	24	15	22	19	25
Louisiana	50	18	25	17	27	25P
Maine	0	3	2P	DNR	NA	2P
Maryland	8	NA	NA	17	24	36
Massachusetts	13	11	5	1 ^c	13 ^c	NA
Michigan	11	NA	NA	NA	34	33
Minnesota	6	9	8	6	3	27
Mississippi	NA	12	12	18	5	5P
Missouri	25	46	36	49	37	46
Montana	2	11	5	2	2	4
Nebraska	2	1	1	4R	DNR	NA
Nevada	6	4	17	18	13	7
New Hampshire	NA	1	3	1	1	3
New Jersey	21	28	21	39	27	27P
New Mexico	10	7	7	5	5	7
New York	63	63	54	57	61	79
North Carolina	4	17	45	45	21 ^d	NA
North Dakota	0	0	NA	1	0	DNR
Ohio	37	NA	NA	99R	97R	87R
Oklahoma	16	34	29	42	45	47
Oregon	8	36	30	34	17	18
Pennsylvania	34	61	33	49	52	50
Rhode Island	5	7	4	3	3	4
South Carolina	21	7	7	9	16	13
South Dakota	4	2	2	3	3R	3R
Tennessee	NA	25	32	9	22	16
Texas	113	98	110	103	171	135
Utah	8	12	9	7	12	7
Vermont	1	0	1	3	0	4
Virginia	14	27	25	29	36	35
Washington	27	17R	9	15	12	12
West Virginia	NA	NA	NA	NA	7	20
Wisconsin	10	16	18	17	13	NA
Wyoming	3	4	1	4	4	1
Total Fatalities	685	1081	1084	1220	1144	1108

% of U.S. Child Population Under 18	85.1	89.4	88.3	95.1	85.9	79.4
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Total Projected Fatalities Nationwide	805	1209	1228	1283	1332	1396
Per 100,000 Children	1.30	1.79	1.80	1.84	1.91	1.99

% Change 1995-1999 -----11%-----

- P Pending cases, numbers are not finalized. For example, Maine has 2 deaths still under review for 1999.
- NA Not available at time data collected.
- R Reported fatalities only.
- DNR Did not respond to survey.
- a Estimate based upon efforts of the CA State Child Death Review Council (CSCDRC) to reconcile three statewide databases (Vital Statistics Death Records, Dept. of Justice Homicide Files, and Child Abuse Central Index).
- b Under the auspice of the CSCDRC, CA Department of Health Services produced estimates based on a "Reconciliation Audit for 1996" with county Child Death Review Teams using three statewide databases.
- c Undercount of child deaths due to including only children known to DSS in fatality count.
- d Office of Chief Medical Examiner reports CAN Deaths with a broader definition of caretaker than that of Child Welfare.
- e Fatality data for 1999 is preliminary.
- f In 1999 began reviewing closed cases where fatality occurred in the past ten years – 21 confirmed CAN deaths reported but not included in 1999 figures.

Estimating Procedures Table 5

Estimation procedures for the number of child maltreatment fatalities confirmed by CPS agencies:

- The total number of fatalities due to child maltreatment is calculated for all states providing these data.
- The percentage of the total U.S. child population living in these states is used to project the national estimate based on the assumption that the rate of fatalities in the reporting states is comparable to the rate occurring in the non-reporting states.

To better understand how and why child abuse fatalities occur, we examined three characteristics of these deaths for the past three years: 1) prior involvement of the victim with CPS agencies, 2) type of maltreatment leading to death, and 3) the ages of the child victims. Table 6 presents the results.

Table 6
Breakdown of Child Maltreatment Fatalities: % Distribution by Category

	1997	1998	1999	Average
Prior or Current Contact With CPS	40% (28 states)	38% (32 states)	38% (28 states)	39%
Deaths Due to Neglect	42% (38 states)	43% (41 states)	44% (33 states)	43%
Deaths Due to Abuse	51% (38 states)	50% (41 states)	52% (33 states)	51%
Deaths Due to Neglect and Abuse	7% (36 states)	7% (38 states)	5% (35 states)	6%
Deaths to Children Under Five Years Old	75% (36 states)	75% (38 states)	77% (31 states)	76%
Deaths to Children Under One Year Old	39% (36 states)	38% (38 states)	42% (31 states)	40%

According to information from at least 28 states, an average of 39% of children who died between 1997 and 1999 had prior or current contact with CPS agencies. This substantial percentage may reflect the fact that many states only investigate deaths of children with current or prior CPS contact, thereby ensuring that a high percentage of the reported deaths will involve such children. On the other hand, the inability of child welfare agencies to provide sufficient services to all victims or to conduct comprehensive investigations of all reports most likely contributes to this pattern.

At least 33 states were able to report the type of maltreatment that caused the child's death. These percentages remained fairly stable over the past several years. Between 1997 and 1999, 43% died from neglect, 51% died from abuse, while 6% died as a result of multiple forms of maltreatment. Young children remain at highest risk for loss of life. Based on data from all three years, this study found that 76% of these children were under the age of five while an alarming 40% were under the age of one at the time of their death. Michael Durfee M.D. at the Inter-Agency Council on Child Abuse and Neglect National Center on Child Fatality's (ICAN/NCFR) has further examined infant deaths on a statewide basis (see <http://ican-ncfr.org/data/state.fatal.html>).

CPS POLICIES AND REFORMS

The ability of the child protection system to respond to the continued increase in reports and child abuse fatalities largely depends on the resources available. The amount of funding CPS agencies receive dictates whether reports are investigated, victims receive services or efforts are made to

prevent maltreatment before a family enters the system. In this section, we investigate not only changes in child welfare budgets, but also plans for spending future resources designed to prevent child abuse.

Compared to 1998, there was improvement in state funding for child protective services in 1999. Seventeen out of 40 states (43%) reported an increase in resources between 1998 and 1999 and one state reported a budget cut, while 22 states maintained stable funding. Although increases in funding did not always translate into more staff, the situation did improve from 1998 to 1999. In 1999, 13 (33%) of the responding states increased the number of case managers and 24 (59%) retained the same number as 1998. Furthermore, 14 of the responding states (36%) were able to enlarge their supervisory staff and 17 of the responding states (43%) hired new investigative staff in 1999. Finally, seven states (22%) increased staff qualifications in 1999. Overall, 11 states had sufficient resources to expand investigation, case manager and supervisory staff and four states expanded service capacity in all four areas.

In 1993, all states were provided new funding for child welfare intervention and prevention services when Congress approved the Safe and Stable Families Program (formerly the Federal Family Preservation and Support Services Program). As part of this legislation, states were required to initiate a comprehensive planning process to determine how best to allocate these revenues, FY 1999 appropriations of \$275,000,000 (see <http://www.research.fsu.edu/medschool/manual/toc.html>). When asked how their state is allocating these resources, 38 state liaisons indicated that, on average, 37% of the funds are allocated to family support services (with responses ranging from 8% to 100%), while an average of 27% of the funds go to family preservation (responses ranged from 0% to 75%). Finally, an average of 30% (compared to an average of 14% in 1998) is allocated to other programs such as time-limited family reunification, adoption, promotion and support, or to other activities such as administration, training, technical assistance and ongoing planning. In comparison, this represented a decrease in percentage of funds allocated to family support compared to 1998 for family support services (55%) and for family preservation allocations (31%), but an increase in allocating funds to CPS infrastructure needs and other programs.

The 1999 survey results suggest that fewer states are targeting funds to reach high-risk families. Only 17 of the responding states (33.3%) indicated that their program money was used for any specific target population compared to 22 states in 1998. Likewise, 17 of the responding states (33.3%) used the money with populations who are thought to be at high risk for child maltreatment, including teen mothers, substance abusing parents, families experiencing domestic violence and families in poverty, compared to 20 states in 1998. Only one state responded that the decisions on what populations to serve were made at the county, community or local district levels rather than by their agencies.

LEGISLATIVE TRENDS

Of the 35 state administrators who responded to questions regarding the impacts of emerging legislation on their operations, 14 states (40%) cited the federal "Adoption and Safe Families Act (ASFA) of 1997" and state legislation to respond to ASFA as the most significant legislative event in recent years. The remaining responses named new state legislation or policy changes specific to state practices, including, among others, establishing policy practices for family protection, permanency legislation, dual track response systems on assessments and investigations, centralized intake procedures and more stringent response policies.

Respondents also were asked to gauge the actual or potential impact of federal welfare reform legislation (e.g., TANF) on child welfare caseloads or procedures. TANF, which became law in 1996,

consolidated three programs, Aid to Families with Dependent Children (AFDC), Job Opportunities and Basic Skills (JOBS, a job-training program), and Emergency Assistance, into one block grant to states. States receive a fixed allocation of funds each year from the federal government, yet have a great deal of flexibility in how they design and operate TANF. Eligibility, benefits and services provided differ substantially from state to state. TANF mandates time limits on assistance and work requirements.

Of the 39 states responding to this question, the vast majority of state administrators continue to indicate that it is still premature to evaluate the impact of TANF on child abuse reports. Only one state indicated that they saw an initial increase in reports to CPS by TANF staff, but 100% of respondents indicated that they have no tangible evidence of any significant change in the risk of maltreatment or actual incidence of maltreatment as a result of welfare reform. While most families have not yet reached the lifetime assistance limits established by TANF, the Department of Health and Human Services (DHHS) is undertaking a study of the effectiveness of welfare-to-work programs through The National Evaluation of Welfare-to-Work Strategies (NEWWS) <http://aspe.hhs.gov/hsp/NEWWS/index.htm>. A preliminary study by Zaslow, McGroder, and Moore (2000) says that welfare-to-work programs do have the potential to affect children favorably as well as negatively.

CONCLUSION

Despite states' many prevention efforts, child abuse reports remain high. The majority of states are implementing new and innovative programs to achieve safety, permanency and well-being for children and families. The data suggest that these efforts are offset by changes in the states such as: better data collection systems, broader definitions of CAN, a greater number of caseworkers, and a more knowledgeable public. In addition, prevention resources are still just a fraction of the total child welfare budget.

In 1999, the number of child abuse reports increased by 1.6%, the estimated number of national reports exceeds 3.2 million. With an average rate of 33% substantiated cases, the number of children confirmed to be victims of abuse or neglect continues to number over 1 million. For the past several years, the proportion of cases involving various forms of maltreatment has remained fairly consistent, with nearly the same distribution among the reported and substantiated cases.

Child fatalities continue to rise with an 11% increase over the past five years. Looking across the past three years, 39% of child maltreatment fatalities involved children who had current or prior contact with local child protective service agencies. The vast majority of these cases (76%) involved children under the age of five and more than one-third were under the age of one (40%). Despite the increased implementation of child death review committees and administrative attention to the issue of child abuse fatalities, recent research continues to indicate that such cases are substantially underreported.

Compared to 1998, states saw some improvement in state funding for child protective services in 1999, and only one state reported a budget cut. Although it is still premature to determine what impact welfare reform may have on child abuse and neglect, the greater emphasis on prevention in many states suggests an important shift in child welfare.

APPENDIX A

DATA GATHERING

In August 2000, the National Center on Child Abuse Prevention Research at PCA America surveyed federally appointed liaisons for child abuse and neglect in each state and the District of Columbia, chapter executive directors of PCA America, and key CAN researchers nationally on revising PCA America's *1999 Fifty State Survey*. They received a letter requesting input on areas including: how the results of the Fifty State Survey could better help them in their work, questions that elicited information on prevention efforts, and state information collected but not reported on the survey.

In November of 2000, a revised survey for PCA America's *1999 Fifty State Survey* was sent to the state liaisons for completion. The specific areas of interest on the survey included the following topics: prevention, child abuse reports, child abuse fatalities, child welfare case management, substance abuse and policy changes.

The state liaisons were contacted by telephone to complete the survey, if they had not replied in writing. All state liaisons, except North Dakota, provided some data as requested in the survey by January 4, 2001. Of the 49 respondents, 46 knew or were able to project their child abuse reporting statistics for 1998 and 43 respondents gave 1999 statistics with respect to child abuse fatalities. Lastly, 45 respondents answered some questions on their state's child welfare practices.

SAMPLE OF SURVEY AREAS

- the description of new and innovative programs and initiatives for achieving positive outcomes for safety, permanency, and well-being of children and families;
- the type of expanded prevention activities;
- the actual number of children reported as alleged victims of child maltreatment during 1997, 1998 and 1999;
- the number of substantiated and indicated victims for 1997, 1998 and 1999;
- the factors accounting for any observed changes in reporting levels during the past year;
- the number of reported and substantiated cases by type of maltreatment (e.g., physical abuse, neglect, sexual abuse and emotional maltreatment);
- the number of confirmed child abuse fatalities reported for 1997, 1998 and 1999;
- the characteristics of the child protective services reporting and case management systems;
- the level of funding for child protective service agencies; and
- agency attitudes toward policy reforms and pending legislation.

APPENDIX B

CPS CASE MANAGEMENT

Children’s Hospital’s (San Diego, CA) National Call to Action identified 18 most often cited reports over the past 10 years from CDC, Dept. of Justice, CYF, WHO, the Advisory Board on Child Abuse and Neglect and others devoted to answering the question, “What would it take to address the child abuse problem in our country?” They came up with four key recommendations and strategies for CPS in order to reduce child abuse/neglect listed below. We would like to know if you have heard of these recommendations and if you have, where your state is in their implementation. The Adoption & Safe Families Act of 1997 is taken into consideration.

	Heard of	Action Taken		
	NO	None	Some	Notable
8. Establish CPS systems that ensure a child’s safety, provide Permanency, and enhance his or her well being.				
<i>Strategies:</i>				
a. Conduct more comprehensive assessments that explore all Relevant domains of a child’s development and service needs.				
b. Better engage a child’s family and natural Networks in the treatment plan.				
c. Enhance partnerships and collaborative agreements with Other local public agencies and community-based services.				
d. Pay greater attention to the unique service needs of : _____domestic violence _____developmental disabilities _____substance abuse _____mental health				
9. Achieve competent practice with all cases.				
<i>Strategies:</i>				
a. Establish standards for competency-based practice, Particularly cultural competence.				
b. Establish a quality assurance system designed to monitor Staff compliance with best practice standards.				
c. Establish “child protective services caseworker” as a Professional specialty with entry level requirements, Salary ranges, supervisory needs, continuing education Requirements, advancement ladder, etc.				
10. Enhance foster care and other out-of-home options.				
<i>Strategies:</i>				
a. Establish clear standards of best practice governing the operation of all out-of-home options and monitor compliance with these standards.				
b. Expand the availability of foster care, kinship care, Long-term foster care, and guardianship programs.				
c. Improve quality of foster parents				
11. Improve permanency decisions.				
<i>Strategies:</i>				
a. Provide more services to facilitate adoption				
b. Improve family reunification efforts without increasing re-entry.				
c. Consider an expedited system for terminating parental rights.				

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ENDNOTES

1. In 1989, the federal government established the National Child Abuse and Neglect Data System (NCANDS) which is a voluntary data collection and analysis system on child maltreatment. NCANDS is designed to collect summary and case level data from all states on an annual basis. NCANDS most recent report, Child Maltreatment 1998: Reports from the States to the National Child Abuse and Neglect Data System, was published in 2000. The report is available from the National Clearinghouse on Child Abuse and Neglect Information by calling (800) FYI-3366 or by internet <http://www.acf.dhhs.gov/programs/cb>. The Child Welfare League of America (CWLA) also publishes NCANDS state numbers on their web site, www.cwla.org.
2. As the survey requests data on child abuse reports for the past three years, several states updated their reporting figures for 1997 and 1998. In addition, a few states volunteered corrected information for 1995 and 1996. This survey reflects these revisions. As a result, the annual percentage change and total estimated child reports for these years differ from the figures published in the 1998 Annual Fifty State Survey. The more recent statistics are more accurate and have greater reliability.
3. The rates for reports and fatalities for 1989 are based on population estimates from U.S. Bureau of the Census, Current Population Reports, Series P-25, No. 1058, State Population and Household Estimates: July, 1989, U.S. Government Printing Office, Washington, DC, 1990. The rates for 1990 to 1992 are based on population estimates from U.S. Bureau of the Census, Statistical Abstract of the United States: 1992 (112th Edition), Washington, DC, 1992. The rates for 1993 and 1994 are based on population estimates from the Annie E. Casey Foundation, Kids Count Data Book, 1995. The rates for 1995 to 1999 are based on population estimates from the U.S. Bureau of the Census, online at <http://www.census.gov/population/estimates/state/sage9890txt>, December 2000, and <http://www.census.gov/population/estimates/state/stats/st-99-10.txt>, March 2000.
4. The terms child abuse and neglect (CAN) and child maltreatment are used interchangeably in this document.