Preventing Child Abuse and Neglect and Improving Responses to Families in Crisis
Hearing before the Subcommittee on Healthy Families and Communities
The Committee on Education and Labor
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### **Chairwoman McCarthy and Ranking Member Platts:**

I am pleased to have the opportunity to participate in this hearing with its focus on issues that need to be considered in the reauthorization of the Child Abuse Prevention and Treatment Act (CAPTA). I speak based on over forty years of experience working with or on behalf of children and families in distress. I continue to work with a number of child welfare agencies in their efforts to improve the quality of service to children and families. I wish to thank you both for your leadership on this issue.

## **Background**

CAPTA was originally enacted in 1974 to assure that all children experiencing maltreatment had the protection of the state. CAPTA initially encouraged the development of systems that could receive and evaluate allegation of abuse and provide protection to children. The focus was on identification of children at risk, prevention and intervention. CAPTA has facilitated the development of child protection systems across this nation and the development of knowledge and practice strategies to address this problem. Over the years the CAPTA has been modified to include a focus on adoption, abandoned infants, homeless children and children with disabilities. By providing funding for prevention, research, program development, this legislation has been a major building block for child protective services.

CAPTA authorizes in Section 106, the provision of formula grants to states and territories to help improve their child protective service (CPS) systems. To receive funding States must establish a child protective service system and be able to comply with various requirements related to the intake, screening, reporting, investigation, and treatment of child maltreatment cases. Among the requirements for funding of the basic grant States must define child abuse and neglect, at a minimum, to include any "recent act, or failure to act, on the part of a parent or

caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm." States are required to provide "to the maximum extent practicable" annual state data reports to the Secretary. Section 106 requires the Secretary to annually compile this State data in a report.

CAPTA does not direct the specific practices of state child protective agencies but rather identifies the essential components of a child protective service system. States have considerable discretion in the design of their systems consistent with the values of their community and the available resources. As a result all of the states have the shared goal of protecting children, but structure their responses differently.

### **Maltreatment Today**

Today we continue to struggle to make sure that every child has a safe and stable environment in which to grow up. According to *Child Maltreatment 2007*, during fiscal year 2007 the number of referrals received was nearly 3.2 million and involved 5.8 million children. 794,000 children were found to be maltreated. The most frequent problem was neglect (59%) followed by physical abuse (10.8%) and sexual abuse (7.6%).

Children of all ages are affected, but young children age of three and under are the most vulnerable. Their vulnerability stems from their age, dependency and their inability to protect themselves or speak out. Because may of these children are not in school or child care setting, they can be hurt without anyone recognizing injury, trauma and neglect. There were an estimated 1760 deaths attributed to maltreatment in 2007. Children under the age of one are had the highest rate of maltreatment related deaths and children under the age of 4 comprised 75% of the children who died.

For children at greatest risk, child protection involves using the police power of the state to intervene into the privacy of the family. We have an obligation to intervene and should do so with attention to the child's safety, stability and well being. We want to protect them and to do so in a manner that does the least damage. Most children are helped by working with their families to improve safety and the quality of care they receive. One in five maltreated children was placed in foster care in 2007.

Through a combination of assessment, decision making and service, child protective service agencies work to help vulnerable families and children. Staff must assess the safety and risks to children; determine whether it is safe to leave the child with the family or if placement is necessary; and decide which services are provided to increase safety and reduce risk in families. The work is complex.

I would like to identify four areas of concern that could be improved if addressed in the reauthorization of CAPTA: decision making, responsibility for inter- state allegations, support for frontline workers and partnerships with communities.

### **Issue #1: Decision-making**

CAPTA can assist in strengthening the capacity of state child protection programs to conduct systematic decision making related to the safety of children and selecting service options.

Several years ago, the City of Philadelphia was plagued by child fatalities. I was asked to head a review team to identify needed reforms. In reviewing the operation of the Department of Human Services, we learned that the agency was not consistent in its decision making. During investigations some children who were unsafe were being not served while other children whose families were struggling with the problems which were not related to safety and risk but rather material needs were being accepted for protective services. The resources of the agency were not being used in a focused way contributing to failure to identify some of the most vulnerable children. The criteria being used to screen for safety were not clear. As a result the purpose of child protection was not clear and the agency's ability to protect children was compromised.

Nationally, we have made progress in developing systematic decision making tools which identify factors that need to be assessed and the criteria for assessment. The tools have been developed for screening referrals and assessing risk and safety. The tools guide the worker's examination of important areas that are thought to be predictive. With some of the newer technology, we now have the ability to apply actuarial science to maltreatment to improve our protocols and decision making and to begin to identify which services work for which families. Moving this forward will require focused investments.

Recommendation: Create within CAPTA opportunities to enhance the development of decision making protocols that are empirically based; have the ability to predict future abuse; and identify appropriate services. Such tools can allow child protective services to focus resources on the families where children are at greatest current and future risk and to provide services that foster the outcomes of safety, permanency and well being.

#### Issue #2: Unclear responsibility for investigation of reports that cross state lines.

Child maltreatment is no respecter of state lines. Given the mobility of our society, it is not unusual for an incident of maltreatment to occur in a state other than the one which the child resides. For example a custodial parent may learn of abuse that occurred in an adjacent state during a visit to other members of the family. If the parent makes a report in the state where she resides, she may find that the state is without jurisdiction because it was not the location of the abuse. On the other hand,

if the report is made to the state in which the abuse occurred, they may indicate that they have no jurisdiction because the child is not currently living in their state.

The result is that neither of the jurisdictions will investigate the allegation and the opportunity for protection is lost. Future abuse may continue for this child or others. It is difficult to document how often this occurs, but in the absence of a clear federal standard or interstate agreements which provide clarity about responsibility, children in these situations do not have access to investigations or assessment that will evaluate the need for protection.

Interstate compacts have been developed in other areas of child welfare such as foster care and adoption, which clarify responsibilities among the states when a child moves beyond the original jurisdiction.

Recommendation: Using the authority of CAPTA, the federal government work with the states to develop clear guidelines that establish responsibility for investigation of allegations of child maltreatment in instances when the location of the abuse, the location of the victim and the location of the perpetrator involve more than one state.

# **Issue #3: Supervisory Support for Frontline Workers**

Frontline workers go out into communities every day and confront families and children where sexual and physical abuse and neglect are suspected. We expect workers to be fair and engage families who did not invite them into their lives and are understandably angry and defensive. Every day workers have to look at the consequences of maltreatment on children including physical injury; sexual trauma; the sadness, depression and anger.

Workers are asked to deal with trauma, conflict and hostility repeatedly in the course of their work. The work is stressful and over time can lead to secondary trauma and burnout and reduce effectiveness. In order to be productive and objective, frontline workers need to have supervision that focuses not only on the work tasks and decision making, but also on the impact of repeated stress on their performance. Key to providing this kind of support and guidance are supervisors. Most supervisors are good at managing the flow of work but not as skilled at managing the emotional aspects and it impact on performance.

There is general recognition that the work force needs to be supported and strengthened. One way to do this is to assist supervisors in developing the skills needed to assess and assist staff in dealing with the emotional impact of their work so that they can continue to work effectively.

Recommendation: Provide training and technical assistance resources that focus on the role of the supervisor in managing not only the administrative and practice requirement of the work, but also the soci- emotional aspects of the work.

# **Issue # 4: Partnership with communities**

Finally, the prevention of child abuse and neglect cannot be done by agencies alone. In the communities where children experience the greatest risk, there is a need for both agency and community leadership and residents to address the problem. We need to begin to change the cultural attitudes that make it easy to victimize children. This will require partnerships that extend beyond the usual collaborators. We need to develop strategies for child protection that focus on neighborhoods; and include decentralized services and the inclusion of neighbors, community institutions, faith-based organization and community leaders in the discussions about improving the safety and well being of children.

In the past, child protective services have operated with little interaction with residents. The work has been invisible except when children disappeared from the community or a tragedy occurred. We have come to recognize that how children are valued and cared for is more influenced by the attitudes of the community than the state or local government. When communities are provided data and information on the status of children, they mobilize to act and bring about change. In communities that have built partnerships with residents, there is a real interest in the conditions of children and leadership develops which offers new ideas and underscores the importance of raising children well. Houston, Texas has used this approach to deal with child safety and disparities in the child welfare system. We need to continue to expand and test this approach.

Recommendation: Establish demonstration grants to support neighborhood partnerships based on shared responsibility for child protection. These grants will be used for the purpose of adapting current approaches to new communities and evaluating the impact in order to better document and understand this approach.

Madam Chairwoman, Thank you again for the opportunity to address this Committee.