

The Sounding Board:

News and Reviews in Child Welfare

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“Longitudinal Analysis of Repeated Child Abuse Reporting and Victimization: Multistate Analysis of Associated Factors,” by John D. Fluke, Gila R. Shusterman, Dana M. Hollingshead and Ying –Ying T.Yuan, Child Maltreatment, February 2008.

In the study discussed in this article, John Fluke, et al tracked 505,621 unduplicated children in 8 states with a first CPS report between January 1, 2001 and December 31, 2002 to determine rates of re-report and substantiated re-report of child maltreatment over a two year period of time. Substantiated re-report was defined as “a subsequent investigation resulted in a disposition (by CPS) of victim.” The study design allowed the researchers to determine a recurrence rate, i.e., the percentage of first investigated CPS reports which were substantiated and then followed by substantiation of a subsequent report within 2 years. This data came from the National Child Abuse and Neglect Data System (NCANDS). The 8 states whose NCANDS data is included in the study are Connecticut, Delaware, Kentucky, Montana, Oklahoma, Texas, Utah and Vermont.

The researchers made use of survival analysis the purpose of which “is to examine the time until participants experience subsequent events.” “Cox regression... a form of multivariate survival analysis was used to arrive at findings regarding factors that are associated with reporting.” The researchers provide log rank statistics of tests of significance for each factor included in the study which included source of the initial report, child’s age at initial report, child’s gender, child’s race and ethnicity, child with indication of disability, caretaker abuse of alcohol, caretaker abuse of drugs, post - investigation services provided, child placement in foster care, child’s initial victimization status and intervening report prior to subsequent victimization.

The study found that 22% of 505,621 children were re-reported and 7% re-reported and substantiated within 2 years of the initial report. Over two thirds of all re-reports and substantiated re-reports occurred within 12 months. “Initial reports by law enforcement personnel were associated with the lowest cumulative percentage of re-reports (19.11%),” while “reports by day care and foster care providers were associated with the greatest level of re-reporting (23.10%).” The highest rates of substantiated re-reports came from social and mental health providers and from unknown sources; the lowest rate of substantiated re-reports came from educational personnel.

Initial reports from non- professionals was associated with an elevated rate (1.14 times greater risk) of re-reports but not substantiated re-reports. Re-reporting rates declined as children’s age increased. “In general, older children had decreased risk of both re-reports and substantiated re-

reports,” the authors state. Boys were slightly less likely to be re-reported and to have substantiated re-reports than girls. “African American and Hispanic children both had lower cumulative percentages of re-reporting and substantiated re-reporting compared with White children;” however, children of other or multiple races had higher rates of re-reports and substantiated re-reports (1.3 and 1.4 times the risk) than White children. Asian and Pacific Islander children had by far the lowest rates of re-reports (13.90%).

“Children with an indication of disabilities had higher cumulative percentages for both re-reporting and substantiated re-reporting (26.84% and 12.31%) compared to other children,” the authors state; and they add “For substantiated re-reporting, the cumulative percentage is almost twice as large as the overall rate of 6.92%.” In the researchers’ regression model, children with disabilities had about a 1.5 times greater risk of having both a re-report and substantiated re-report.

Caretaker abuse of alcohol and caretaker abuse of drugs were not statistically significant factors for re-reports but both factors were associated with higher rates of substantiated re-reports.

Children with initial substantiated reports were only slightly more likely to be re-reported (1.07 times the risk) but were considerably more likely (1.64 times the risk) to have a substantiated re-report than children whose first reports were not substantiated; 22.09% of victims and 20.90% of non-victims were re-reported; 9.67% of children classified as victims after the first investigated report had a substantiated re-report compared to 6.14% of non-victims.

This article moves from interesting to important in its discussion of the influence of post – investigation services on re-reports. In past studies of NCANDS data, Fluke and his colleagues have consistently found that CPS families referred for services have higher rates of re-reports than families not referred for services. Higher rates of CPS reports almost always lead to higher rates of substantiated re-reports as around 30% of re-reports are substantiated. Families referred for services are probably riskier by CPS standards to begin with; and these families are then exposed to mandated reporters who are required by law to report suspected child maltreatment. Arguably, a combination of increased risk and the surveillance of mandated reporters account for an increased rate of re-reports and substantiated re-reports. However, the federal government’s main measure of CPS effectiveness is the recurrence rate as measured by the percentage of investigated cases substantiated more than once within a 6 month time period. Fluke’s studies of CPS recidivism have consistently indicated that referring families for post – investigation services will increase an agency’s recurrence rate while closing cases after investigation will lower the rate. This research suggests a perverse incentive to close out cases prematurely and, in doing so, to “game” the federal measure of CPS performance.

In this study, “For children who were provided post- investigation services, 25.00% were re-reported and 10.12% were re-reported with substantiation.” Children in families receiving services were 1.35 times more likely ($p < .001$) to be re-reported and 1.74 times more likely ($p < .001$) to have a substantiated re-report than children whose families were not referred for services. “Children who were classified as victims (i.e., substantiated) and received post – investigation services had a cumulative percentage of substantiated re-reports of 11.09% compared to 6.40% for other children,” the authors state. “NCANDS data have shown that

victim children and their families are twice as often recipients of services compared to non-victims,” according to the authors.

Fortunately, this study, like a study of Brett Drake’s in Missouri, found that children initially classified as victims and referred for services had somewhat lower rates of re-reports than children classified as victims in first reports and not referred for services. “On the other hand, non-victims who received services had a greater degree of risk compared to non – victims who did not receive services,” the authors assert. One possible interpretation of these findings is that the beneficial effect of services outweighed the surveillance effect with child victims but not with non – victims. Fluke, et al, also mention the possibility that service provision per se may have less of an influence on subsequent reports and substantiations than a family’s compliance with the agency’s case plan.

This study also found elevated rates of re-reports for children placed in foster care during or after a first report. The authors write that “Children placed in foster care during or after an investigation were associated with a cumulative percentage of substantiated re-reports of 14.91%; and “children who received foster care services appeared to experience twice the risk for re-reporting and quadruple the risk for substantiated re -reporting ...” The authors describe this finding as “especially perplexing” because rates of substantiated child maltreatment for children in foster care are low. The authors speculate that the elevated rate of re-reports and substantiated re-reports for children receiving foster care services may be related to the length of foster placements in that a sizeable percentage of placements last a short time. “Unfortunately, the authors write, “NCANDS does not include information about how long the child was placed, so it was not known whether the subsequent maltreatment actually occurred after the placement.”

Fluke and his colleagues assert that “Ultimately, effective intervention depends on identifying and implementing effective service models that can be shown to prevent future harm, even if a child has high intrinsic risk.” In other words, CPS programs should be looking for services which will reduce re-reports and recurrence on first contact with families regardless of a surveillance effect. They do not consider the possibility that there is an inherent flaw in a measure which deems CPS intervention in serious or chronic cases ineffective if there is any future maltreatment regardless of severity or frequency. An either/ or CPS recurrence measure, i.e., any future maltreatment vs. no future maltreatment, does not model a plausible therapeutic process in the majority of serious or chronic cases of child abuse and neglect. If, in fact, families with chronic histories of child maltreatment are likely to progress in treatment programs by fits and starts, post – investigation services which result in re-reports and substantiated re-reports from service providers are not signs that services are ineffective; but rather an indication that treatment programs for these families are more likely to work gradually rather than all at once and that mandatory reporting statutes are working as designed.