

The Evolution of a National Reporting System on Child Maltreatment: 25 Years of Progress

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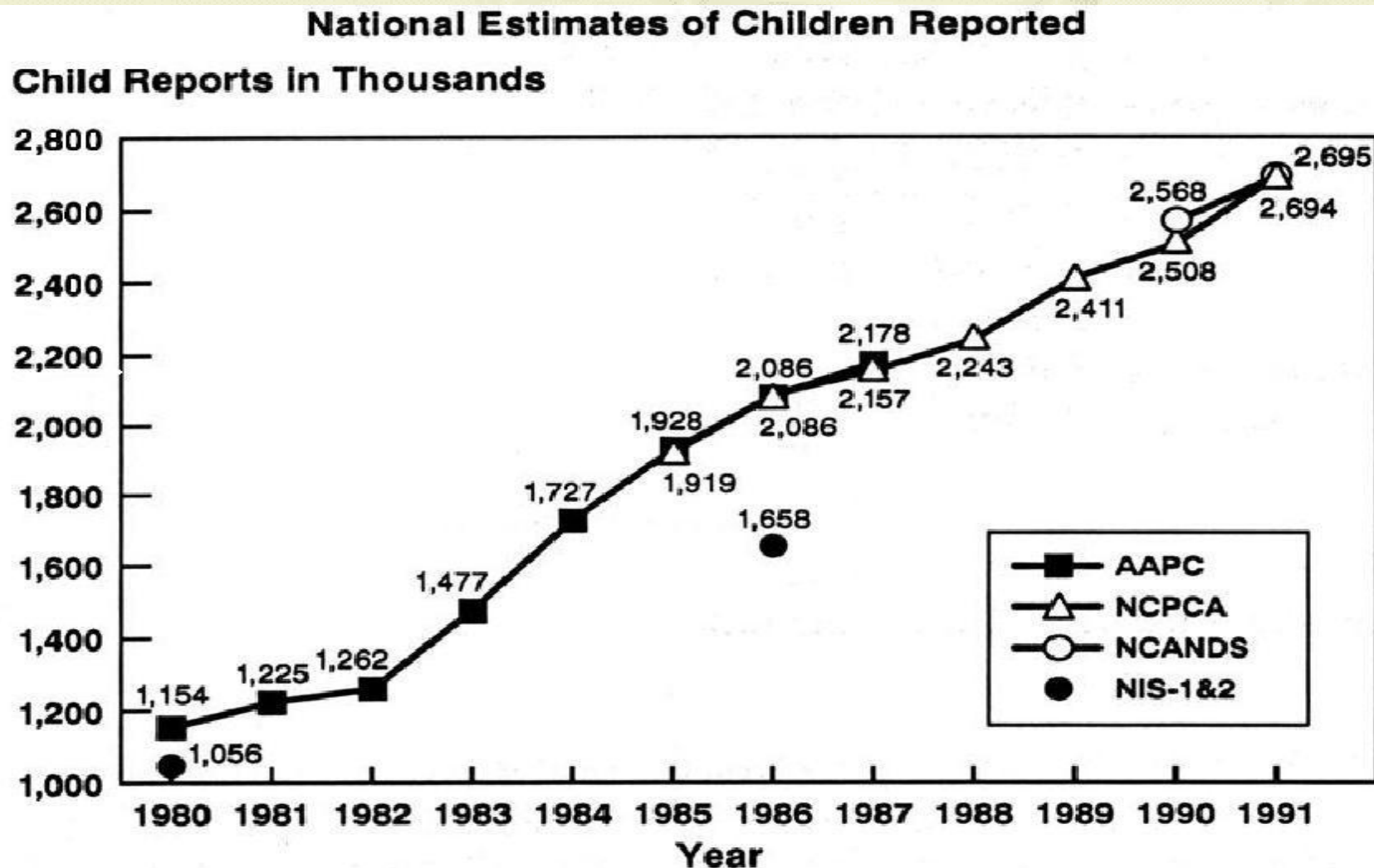
THE 14TH National Conference on Child Abuse and Neglect

April 2, 2003

Session Goals

- Describe the History and Roles of the Major CPS Reporting Studies in the US
- Identify the Key Forces Planned and Unplanned that Resulted in the Current System
- Assess the Progress Made and the Challenges Ahead

U.S. Department of Health and Human Services (1991) NCANDS Working Paper 2: 1991 Summary Data Component



U.S. Department of Health and Human Services (1990)
NCANDS Working Paper 1: 1990 Summary Data Component

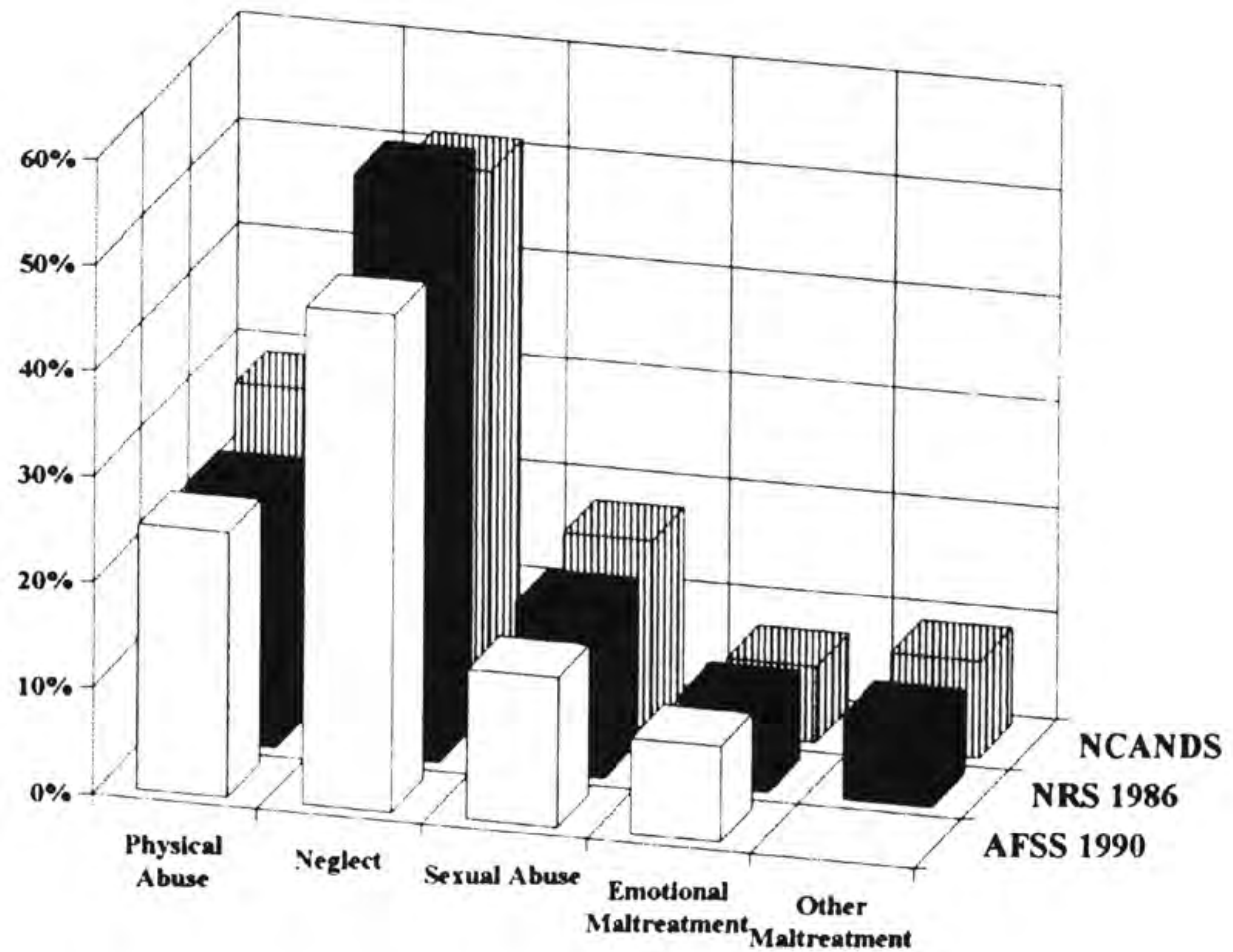


Figure 9. Percent of children by maltreatment type.

U.S. Department of Health and Human Services (1990)
NCANDS Working Paper 1: 1990 Summary Data Component

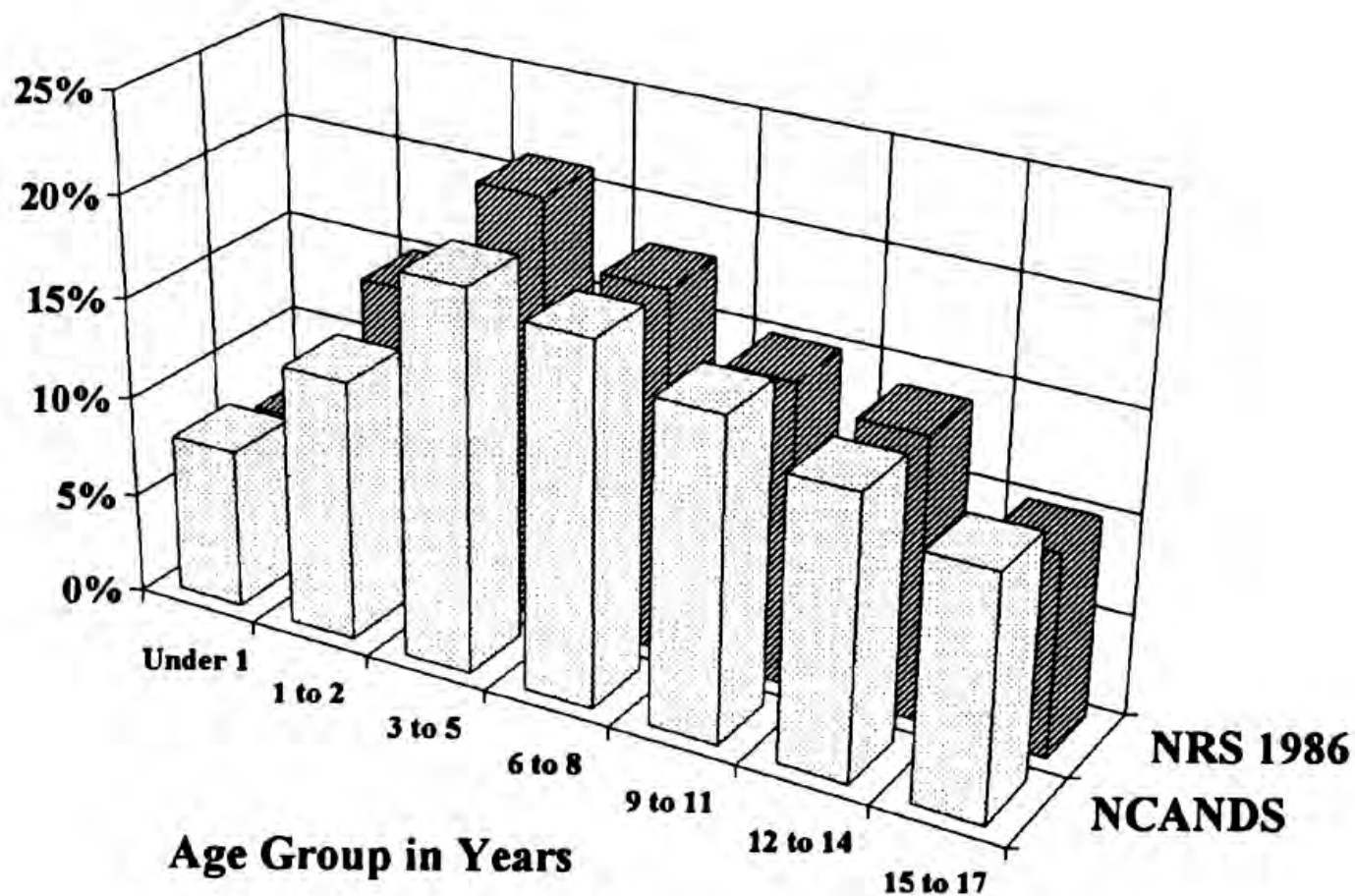


Figure 10. Age distribution of victim children.

Current Organizations and Associated Acronyms and Publications Circa 1990

American Humane Association (AAPC)

American Association for Protecting Children. *Highlights of Official Aggregate Child Neglect and Abuse Reporting, 1987*, Author, 1989

US Department of Health and Human Services (NCANDS and NIS)

U.S. Department of Health and Human Services, *NCANDS Working Paper 2: 1991 Summary Data Component*, Author, 1993.

National Center on Child Abuse and Neglect. *National Incidence and Prevalence of Child Abuse and Neglect: 1988 Revised Report (NIS-2)*, Westat, 1991.

Prevent Child Abuse America (NCPCA and AFSS)

National Committee for the Prevention of Child Abuse. *Current Trends in Child Abuse Reporting and Fatalities: The Results of the 1991 Annual Fifty State Survey*, Author, 1992.

Developmental Issues and Assumptions in the US

- Historical Assumptions for the US
 - Focus on Agencies Providing CPS Services
 - States are the Source of Data
- Importance of Surveillance
- The Role of Advocacy in Data Development
- The Analytic Importance of Units of Analysis and Events

The American Humane Association, Children's Division
NATIONAL STUDY ON CHILD NEGLECT AND ABUSE REPORTING
P.O. Box 1319, Denver, Colorado 80201

Please use hard ball point pen!

A. Case Number _____ Date Report/Referral Made ____/____/____ NSCNAR I.D. No. _____

1. Parent(s)/Substitute(s)

(Last Name)	(First)	(Middle)	(Former)	Role	Age	Sex	Ethnicity
1.)							
2.)							

Ethnicity Code

A-Asian
B-Black
C-Caucasian
D-Spanish
 Surname
E-Native American
F-Other (specify) _____

Child(ren)	Relationship		Role	Age	Sex	Ethnicity
	1.	2.				
A.)						
B.)						
C.)						
D.)						
E.)						
F.)						

Sex Code

M-Male
F-Female

Other [Alleged Perpetrator(s) if different from parent(s)/substitute(s)]	Relationship	Role	Age	Sex	Ethnicity
3.)					
4.)					

Role Code	Relationship Code					
V-Victim	A-Natural Child	C-Stepchild	E-Grandparent/child	G-Babysitter/Childcare	J-Institution Staff	L-Unknown
P-Alleged Perpetrator	B-Adopted Child	D-Foster Child	F-Sibling	H-Other Relative	K-Teacher	M-Other
N-Not Involved				I-Parent Out of the Home		

2. Marital Status of Parent(s)/Substitute(s) [Circle one letter]

A-Legal Marriage C-Never Married E-Widow/Widower G-Marriage Partner Permanently Absent
B-Consensual Union D-Divorced/Separated F-Marriage Partner Temporarily Absent H-Unknown

3. a) _____
 Address of Family City (NSCNAR Code _____) County (NSCNAR Code _____)

b) _____
 Address of Alleged Perpetrator (if different) City County

4. _____/_____/_____
 Worker Completing Form Date Form Completed State (NSCNAR Code _____) District/Region (NSCNAR Code _____)

5. Nature of Complaint (specify):

6. Source of Initial Report [Circle one letter]

A. Private Physician E. School Nurse I. Public Social Agency N. Victim T. Friend/Neighbor
B. Hospital/Clinic Physician F. Teacher J. Private Social Agency O. Relative U. Other (specify) _____
C. Hospital/Clinic Personnel G. Other School Personnel K. Court P. Sibling
D. Nurse H. Day Care, Headstart, L. Law Enforcement R. Parent/Substitute
 Babysitter, etc. M. Coroner/Medical Examiner S. Anonymous

7. Agency Receiving Initial Report [Circle one letter]

A. State DSS D. Court
B. County/Local DSS E. Law Enforcement Agency
C. Private Agency F. Prosecuting Attorney

8. Determination of Case Status [Circle applicable letter(s)]

Abuse	Neglect
A. Substantiated	C. Substantiated
B. Unsubstantiated	D. Unsubstantiated

IF UNSUBSTANTIATED, DO NOT COMPLETE REST OF FORM!

9. Involved child(ren) [Circle applicable letters for each involved child]

Type of Abuse/Neglect	
A B C D E F (1) Brain Damage/Skull Fracture	A B C D E F (11) Burns, Scalds
A B C D E F (2) Subdural Hemorrhage or Hematoma	A B C D E F (12) Cuts, Bruises, Welts
A B C D E F (3) Bone Fracture (Other than Skull)	A B C D E F (13) Sexual Abuse (specify) _____
A B C D E F (4) Dislocation/Sprains/Twisting/Shaking	A B C D E F (14) Congenital Drug Addiction
A B C D E F (5) Internal Injuries	A B C D E F (15) Physical Neglect
A B C D E F (6) Malnutrition	A B C D E F (16) Emotional Neglect
A B C D E F (7) Failure to Thrive	A B C D E F (17) Medical Neglect
A B C D E F (8) Exposure to Elements	A B C D E F (18) Educational Neglect
A B C D E F (9) Locking In/Out	A B C D E F (19) Abandonment
A B C D E F (10) Poisoning (Unintentional)	A B C D E F (20) Lack of Supervision
	A B C D E F (21) Other (specify) _____

Historical
Exhibit
0024
Form,
1977

REMOVE CARBON BEFORE BEGINNING THIS SIDE

10. Severity of Abuse/Neglect *[Circle one letter for each involved child]*

- A B C D E F (1) No treatment
 A B C D E F (2) Moderate
 A B C D E F (3) Serious/Hospitalized
 A B C D E F (4) Permanent Disability
 A B C D E F (5) Fatal

11. Special Characteristics of Involved Child(ren) *[Circle all applicable letters]*

- A B C D E F (1) Premature Birth
 A B C D E F (2) Diagnosed Mentally Retarded
 A B C D E F (3) Congenital Physical Handicap
 A B C D E F (4) Physically Handicapped
 A B C D E F (5) Chronic Illness (e.g., asthma, muscular dystrophy, cerebral palsy, diabetes, epilepsy, etc.)
 A B C D E F (6) Emotionally Disturbed
 A B C D E F (7) None

12. Education *[Circle one letter for each Parent/Substitute]*

- | Mother/Sub. | Father/Sub. | |
|-------------|-------------|----------------------------------|
| A | G | Grades 0-3 |
| B | H | Grades 4-8 |
| C | I | Some High School |
| D | J | High School Graduate |
| E | K | Some College/Vocational Training |
| F | L | College Graduate |

13. Occupation *[Circle one letter for each Parent/Substitute]*

- | Mother/Sub. | Father/Sub. | |
|-------------|-------------|-----------------------|
| A | H | Unemployed |
| B | I | Unskilled Labor |
| C | J | Skilled Labor |
| D | K | Business/Professional |
| E | L | Agriculture |
| F | M | Technical |
| G | N | Other (specify) _____ |

14. Estimated Yearly Income *[Circle one letter]*

- | | |
|------------------------|------------------------|
| A. \$0 - \$2,999 | G. \$13,000 - \$15,999 |
| B. \$3,000 - \$4,999 | H. \$16,000 - \$19,999 |
| C. \$5,000 - \$6,999 | I. \$20,000 - \$24,999 |
| D. \$7,000 - \$8,999 | J. \$25,000 - \$29,999 |
| E. \$9,000 - \$10,999 | K. \$30,000 - \$39,999 |
| F. \$11,000 - \$12,999 | L. \$40,000+ |

15. Source of Income Supplement *[Circle one letter]*

- A. None C. Other Public Assistance
 B. AFDC D. Retirement/Social Security/Pensions, etc.

16. Factors Present *[Circle all applicable letters]*

- | Family | Parental Capacity |
|--|--|
| A. Broken Family | K. Loss of Control During Discipline |
| B. Family Discord | L. Lack of Tolerance to Child's Disobedience and Provocation |
| C. Insufficient Income/Misuse of Adequate Income | M. Incapacity Due to Physical Handicap/Chronic Illness |
| D. New Baby in Home/Pregnancy | N. Alcohol Dependence |
| E. Heavy Continuous Child Care Responsibility | O. Drug Dependence |
| F. Physical Abuse of Spouse/Fighting | P. Mental Retardation |
| G. Parental History of Abuse as a Child | Q. Mental Health Problem |
| H. Environment/Social | R. Police/Court Record (excluding traffic) |
| I. Recent Relocation | S. Normal Authoritarian Method of Discipline |
| J. Inadequate Housing | T. Lack of Parenting Skills |
| K. Social Isolation | |

17. Disposition of Involved Child(ren) at Completion of this Form

- [Circle all applicable letters]*
- A B C D E F (1) Child At Home
 A B C D E F (2) Disposition Pending
 A B C D E F (3) Voluntary Placement
 A B C D E F (4) Court Ordered Placement
 A B C D E F (5) Consent to Adoption
 A B C D E F (6) Termination of Parental Rights

18. Services Provided/Actions Taken *[Circle all applicable letters]*

- | | |
|---------------------------------------|--|
| A. Casework Counseling | G. Juvenile/Family Court Petition Filed |
| B. Homemaker Services | H. Criminal Action Taken |
| C. Day Care Services | I. No Action Taken; Awaiting Further Investigation |
| D. Foster Care | J. Other Protective Services (specify) _____ |
| E. Shelter Care | |
| F. Health Services (including mental) | |

Comments: _____

0024 Form,
page 2



History of the National Reporting Study

American Humane Association 1877

- Promote the interests of SPCAs and humane societies wherever found
- 1885, child welfare became part of mission
- 1910, first International Humane Conference, second in 1923
- 1950s, focus on Child Protective Services as a unique service, reporting systems and information systems become important

Early Reporting System Development

- 1946-1962 Medical studies
 - Caffey (1946)
 - Silverman (1953)
 - Kempe (1962)
- Large Case History Studies
 - DeFrancis (1956, 1962, 1970)
 - Gill (1970)

AHA National Reporting Study 1973-1974

- '73-'74, Planning
 - Design and develop liaison network
 - Definition of reporting categories
- Major Issues
 - Definitions of Abuse and Neglect across States
 - Mandatory versus Permissive Reporting
 - Accusatory versus Non-accusatory basis of law
 - Specification of the perpetrator as a person responsible for the care of the child

AHA National Reporting Study 1973-1977

- '74-'75, 23 States (22 States submitted hardcopy NSF0024)
- 1974, CAPTA provided a vehicle for data collection rather than a mandate
- '75-'76, rev NSF0024, 26 States
- '76-'77, 50 State, 3 Territories and D.C.
 - 31 States, 3 Territories full participation (27/31 hardcopy)
 - 19 States and D.C. provided summary information

AHA National Reporting Study 1978-1987

- 1978, shift data collection focus from NSF0024(rev) to Central Registry Extracts
- 1978, parallel process of collecting aggregate data from States
- 1983, NSF0024 virtually abandoned, but it was influential on developing systems
- 1984-1987, case level data from central registries and more advanced systems



History of Prevent Child Abuse America's 50 State Survey

BACKGROUND

- Prevent Child Abuse America (PCA America)
Prevent Child Abuse America (formerly the National Committee to Prevent Child Abuse)
 - established in 1972 as a not-for-profit organization
 - committed to preventing child abuse and neglect through education, research, public awareness, and advocacy.
- The 50 State Survey (and the District of Columbia)
 - 1980 - 2000
 - built on the American Humane Association's (AHA) work
 - voluntary

PHASES

- developed to understand the scope of the CAN problem and to be used to measure the effects of PCA America's prevention efforts on the problem;
- initially included information on reports, substantiations, fatalities, child welfare funding, policies, and legislative trends;
- first published report 1986;

THEMES

- Core data

- collects information on CAN prevention efforts, child welfare funding, policies, legislative trends, and fatalities (2000 report).
- PCA America defined based on prevention fields needs and efforts
- Federal Legislation impacted growth of “N” over the years as well as greater standardization of the data

- Sponsorship and support

- Foundation support
- PCA America and PCA State Chapters

- Data collection methods

- Survey

THEMES

- Analytical methods

- Counts, percentages, rates
- Estimation

- Data utilization

- ICAN, NCANDS, CDC and PCA America collaboration on the scope of problem;
- Performance measurement (Chapter prevention efforts)

- Challenges

- Pooling talents versus duplicating efforts
- Data quality
- timeliness of statistics
- Standardization of data collection
- Trend Analysis

FUTURE DIRECTIONS

- Greater collaboration
- Increased knowledge about the problem

History of NCANDS



BACKGROUND

- National Child Abuse and Neglect Reporting Study (AHA)
 - 1976-1988
- Amendments to CAPTA(1988, 1992)
 - establish a national data collection and analysis program on child abuse and neglect;
 - universal and case-specific;
 - voluntary

PHASES

- Work with States to design a “system” (1988-1990)
 - Identify data elements
 - Identify data collection approaches
 - Develop a partnership environment
- Create State Advisory Group

PHASES continued

- Pilot of the aggregate (1990)
- First annual report 1992
- Pilot the case-level component (1993)
- First report using case-level (1996)

PHASES continued

- CAPTA Amendments 1996 required specific data elements
- ASFA (1997) mandated child welfare monitoring
- NCANDS used for State performance monitoring (2000)

THEMES

- Core data
 - What are they?
 - Who defines?
 - How compatible?
 - How available?

THEMES (continued)

- Data collection methods
 - Information Systems Technology
 - Communications Technology
- Analytical methods
 - Unit of analysis
 - Counts, percentages, rates
 - Estimation
 - Survival analysis and logistic regression

THEMES (continued)

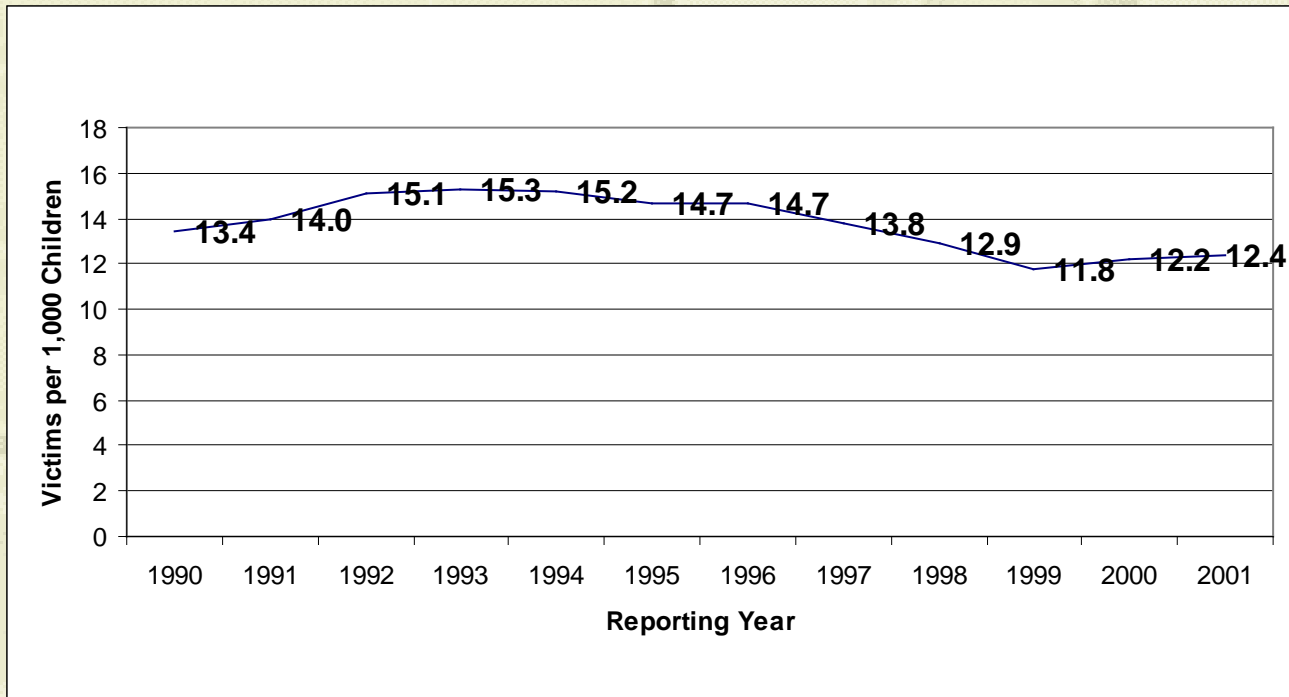
- Data Utilization
 - Reporting
 - Annual Reporting
 - Trends
 - Other Official Publications
 - Expanded data needs
 - Performance measurement
 - Archiving and distribution of data
 - Research

CURRENT STATUS

- Child Maltreatment 2001
 - 12th Year of Reporting
 - Data Available Now for 2001
 - Based on Child File case level data from 39 states
 - 12 states reporting through SDC aggregate process
 - All reported data are now derived from case level sources rather than aggregate data for those 39 states

CURRENT STATUS

Figure 3-2 Victimization Rates, 1990-2001



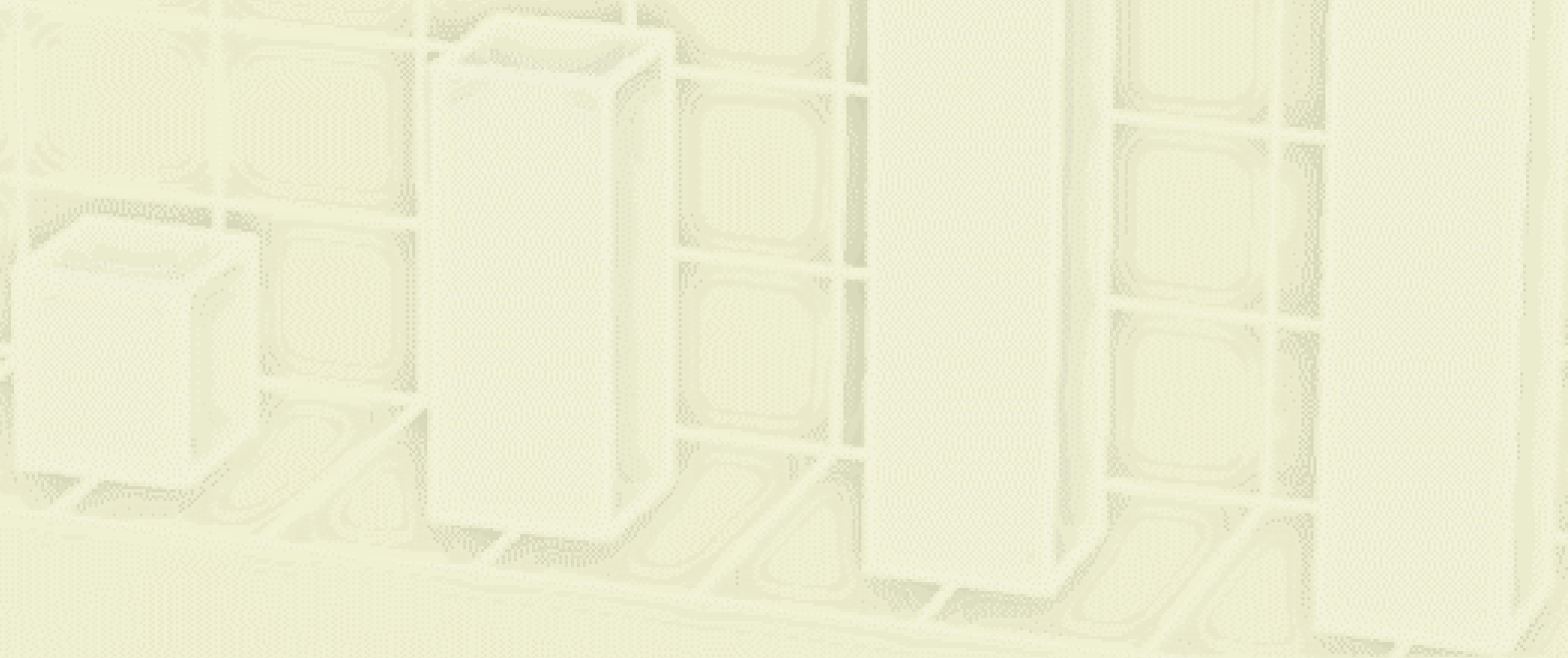
FUTURE DIRECTIONS

- Change in Reporting Period
 - Moving from Calendar Year to Federal Fiscal Year
- Improved Data Collection
 - Aggregate Data Collection will be Discontinued
 - Address Issues to Improve CFSR Reporting and Eventual Revision of Standards
 - Address Other Long Term Needs for Improvements

FUTURE DIRECTIONS

- Increased utilization
 - changing data collection needs/requirements
 - integration with other data sources
- New research topics
 - risk factors, services
 - perpetrators
 - longitudinal
 - workforce

Conclusions



Challenges

- Challenges Met
 - Cooperation/Collaboration Among Organizations
 - Advocacy Organizations
 - States
 - Federal Government
 - A Method Has Been Implemented
 - The Data Collection Program Is Adaptable
 - Data Collection and Analysis is Sustainable
 - There Is a Reasonably Well Developed Infrastructure
 - Data Are Used for a Range of Purposes

Challenges

- Ongoing Challenges
 - Taxonomy
 - Compatibility of Definitions
 - Services
 - Explanation of the Data
 - Identification of Data that are Most Useful
 - Under Reporting
 - Data Quality/Accuracy
 - Standards for Data vs. Public Needs and Expectations

Some Questions

- What has sustained the evolution of the reporting system?
- What has been learned in 30 plus years of national reporting?
 - About Child Maltreatment
 - About CPS