

Testimony Submitted by the National Child Abuse Coalition, Washington, D.C., to the Subcommittee on Healthy Families and Communities, Committee on Education and Labor, U.S. House of Representatives, regarding the reauthorization of the Child Abuse Prevention and Treatment Act (CAPTA); November 5, 2009

The National Child Abuse Coalition, representing a collaboration of national organizations committed to strengthening the federal response to the protection of children and the prevention of child abuse and neglect, calls on Congress to reauthorize the Child Abuse Prevention and Treatment Act (CAPTA) programs to provide the core federal policy and support for:

- 1) strengthening the child protective services (CPS) infrastructure;
- 2) promoting community-based services in prevention of child maltreatment; and
- 3) initiating research and development of innovative programs to advance the field of prevention and treatment of child abuse and neglect.

Child maltreatment is a serious public health problem. The U.S. Department of Health and Human Services (HHS) reports that CPS agencies in 2007 received 3.2 million reports of suspected child abuse and neglect. Following the investigation of 1.97 million of these reports, an estimated 794,000 of these reports were found to be victims of abuse and neglect. Overall, the youngest children suffer the highest rate of victimization. Infants aged birth to 1 year are the most vulnerable victims of abuse and neglect, with a rate of victimization (21.9 per 1,000 children). Slightly more than 42 percent of children who died of abuse or neglect had not reached their first birthday, and more than three-quarters of children who were killed (75.7 percent) were younger than 4 years of age. Fatalities due to child abuse and neglect claimed the lives of an estimated 1,760 children in 2007 (compared to 1,530 in 2006 and 1,460 children in 2005) – 5 deaths each day.¹ Indeed the actual number of child fatalities is believed to be much higher than these official statistics suggest.²

These are the abused and neglected children who come to the attention of communities across the country for protection from further, even more serious harm. HHS also reports that many more children – whether known or unknown to protective services – are abused and neglected each year: According to the Third National Incidence Study of Child Abuse and Neglect, an estimated 2.8 million children are the victims of abuse and neglect in the United States.³ These numbers – and the lives of these children – can not be taken lightly or dismissed.

In times of economic hardship such as these, communities are challenged to protect vulnerable children from abuse and neglect and support parents in economic distress. Over the years, experience, shown through research, reveals that rates of child abuse are higher in areas with unusually high unemployment rates⁴, and that increases in child abuse are preceded by periods of high job loss.⁵ The National Research Council has identified unemployment among the stresses associated with child maltreatment.⁶

Preventing the abuse and neglect of children from happening in the first place will keep children safe and avert the consequences of child maltreatment. Research into the results later in life for children who have been maltreated show that:

¹ U.S. Department of Health and Human Services, Administration on Children, Youth and Families. *Child Maltreatment 2007*. Washington, D.C., U.S. Government Printing Office, 2009.

² Every Child Matters Education Fund, *We Can Do Better: Child Abuse and Neglect Deaths in America*, Washington, D.C., 2009.

³ Sedlak, A. D. Broadhurst. *The Third National Incidence Study of Child Abuse and Neglect*. Washington, D.C., U.S. Department of Health and Human Services, Administration on Children, Youth and Families, 1996.

⁴ Cochran, M. and Bronfenbrenner, U. "Child Rearing, Parenthood, and the World of Work." In C. Kerr & J. Rosen (Eds.), *Work in America: The Decade Ahead*. New York: Van Nostrand Reinhold, 1979.

⁵ Steinberg, L.D., Catalano, R. and Dooley, D. "Economic Antecedents of Child Abuse and Neglect." *Child Development*, 1981, 52, 975-985.

⁶ Panel on Research on Child Abuse and Neglect, National Research Council (1993). *Understanding Child Abuse*. National Academy of Sciences, Washington, DC.

1. Child abuse prevention can help to prevent crime. Victims of child abuse are more likely to become juvenile offenders, teenage runaways, and adult criminals later in life.⁷
2. Ensuring that children are ready to learn means ensuring that children are safe at home. Abused and neglected children may experience poor prospects for success in school, typically suffering language and other developmental delays, and a disproportionate amount of incompetence and failure.⁸
3. Preventing child abuse can help to prevent disabling conditions in children. Physical abuse of children can result in brain damage, mental retardation, cerebral palsy, and learning disorders.⁹
4. Preventing child abuse helps prevent serious illnesses later in life. Research links childhood abuse with adult behaviors which result in the development of chronic diseases that cause death and disability.¹⁰

We know that prevention works. Communities across the country have developed preventive services which show success in support programs for new parents, parent education, respite and crisis care, home visitor services, parent mutual support, and family support services.

Evaluations of home visiting services have shown positive effects in the areas of parenting and child abuse and neglect, birth outcomes, and health care.¹¹ Crisis nurseries have been demonstrated to protect children against abuse at home. According to a recent evaluation funded by the HHS Children's Bureau analyzing the number of substantiated reports of child maltreatment in families using crisis nurseries with a comparison group of families for whom crisis respite services were unavailable, the families receiving crisis respite services were far less likely to ever have a substantiated report of maltreatment than the families without nursery services.¹² According to a nationwide longitudinal study conducted by the National Council on Crime and Delinquency funded by the U.S. Department of Justice, parents who participated over time in Parents Anonymous parent mutual support-shared leadership groups showed improvement in child protective factors and reduced child maltreatment and other risk factors.¹³

The incidence of child abuse and neglect exceeds the capacity of our system to respond adequately. HHS reports that the average time from start of investigation to provision of service is 40 days. More than a third (37.9%) of child victims receives no services. According to the HHS report, "...the efforts of the CPS system have not been successful in preventing subsequent victimization." An analysis of the factors influencing the likelihood of recurrence includes the following results:

- Children who had been prior victims of maltreatment were 96 percent more likely to experience maltreatment again than those who were not prior victims.
- Child victims who were reported with a disability were 52 percent more likely to experience recurrence than children without a disability.

Federal officials have repeatedly cited states for certain deficiencies: significant numbers of children suffering abuse or neglect more than once in a six-month period; caseworkers who are not visiting children often enough to assess needs; and failure to provide promised medical and mental health services. We as a nation can do better. A CAPTA-funded 2001 study shows that job stress related to the number and composition of a child protective service worker's caseload affects decisions on

⁷ C. S. Widom (1992). *The Cycle of Violence*. Washington, DC: National Institute of Justice.

⁸ S.R. Morgan (1976). *The Battered Child in the Classroom*. Journal of Pediatric Psychology.

⁹ H.P. Martin & M.A. Rodeheffer (1980). *The Psychological Impact of Abuse in Children*. In: G.J. Williams. Traumatic Abuse and Neglect of Children at Home. Baltimore, MD: Johns Hopkins University Press.

¹⁰ V.J. Felitti, R.F. Anda, et al. (1998). *Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. The Adverse Childhood Experiences (ACE) Study*. American Journal of Preventive Medicine.

¹¹ Hahn, R.A., Bilukha, O.O., Crosby, A., Fullilove, M.T., Liberman, A., Moscicki, E.K., et al. (2003). *First reports evaluating the effectiveness of strategies for preventing violence: Early childhood home visitation*. Center for Disease Control, Morbidity and Mortality Weekly Report, 52, 109.

¹² Crisis Respite: Evaluating Outcomes for Children and Families Receiving Crisis Nursery Services. ARCH National Respite Network, 2007.

¹³ *National Outcome Study of Parents Anonymous*, 2007.

substantiation of maltreatment reports. The same study reveals that a perceived lack of service resources in a community may be tied to an increased recurrence of reports.¹⁴

In the 2003 reauthorization of CAPTA, the basic state grant section was amended to require that children under the age of 3 involved in a substantiated case of child abuse or neglect must be referred to early intervention services funded under Part C of the Individuals with Disabilities Education Act. Unfortunately, the implementation of this essential provision has been sorely lacking. Part C does not have the capacity, without appropriate resources, to serve all children involved in substantiated cases referred by CPS. Nor do Part C agencies necessarily possess the knowledge and expertise to engage families referred by CPS. HHS needs to provide guidance to the states on implementing these procedures, and additional funding is essential in order to serve these children. Some agencies are making this work, but more needs to be done to attend to the important potential lying in these provisions in CAPTA.

Current federal spending for child protective services and preventive services falls far short of the dollars invested in supporting the placement of children in foster care and adoptive families. For every dollar spent by the federal government in subsidies for the out-of-home placement of children, just 14 cents is spent on prevention and protective services. Federal laws have created a system of child welfare support heavily weighted toward protecting children who have been so seriously maltreated they are not safe at home and must be placed in foster care or adoptive homes. These are children whose safety is in danger; they demand our immediate attention. Increasing funding for CAPTA's basic state grants and community-based prevention grants will help to begin to address the current imbalance. It is time to invest additional resources to work in partnership with the states to help families and prevent children from being abused and neglected.

Unfortunately, far less attention in federal funding and policy is directed at preventing harm to these children from happening in the first place, or providing the appropriate services and treatment needed by families and children victimized by abuse or neglect. CAPTA must be reauthorized to respond to the current demand for treatment and prevention of child abuse and neglect. States continue to report record budget shortfalls and, for the first time in memory, state legislatures are cutting child welfare services and other supports to families to avoid spending deficits. As economic stresses increase pressures on families, we are concerned that over the coming months children will suffer as the funds for necessary services will go down. CAPTA, with a focus on support to improve the CPS infrastructure and our system of community-based prevention services, should be the source to help in providing those resources for prevention, intervention, and treatment.

CAPTA BASIC STATE GRANT PROGRAM

CAPTA should be the core source of funding for child protective services, yet it is not. CAPTA funding for basic state grants at the current level of \$27 million is not up to addressing the scope of the need for support of CPS. The National Child Abuse Coalition believes that an annual authorized funding level of \$500 million is a realistic approach to developing the CAPTA basic state grant program as a source of core funding for child protective services. A commitment at this level of funding will begin to help close the gap between what federal, state and local dollars currently allocate to protect children and treat child victims, and what those services cost.

CAPTA basic state grants are used for developing innovative approaches in CPS systems. This is potentially an important source of support for improving the child protective service system from state to state. Through the CAPTA basic state grant program, the federal government has the opportunity to step up to a leadership role in providing support for the CPS system infrastructure and to begin to rectify the imbalance in the federal government's response to the abuse and neglect of children.

¹⁴ Fluke, J. D. Parry et al. *The Dynamics of Unsubstantiated Reports: A Multi-State Study*. American Humane Association, Englewood, CO, 2001.

States report having difficulty in recruiting and retaining child welfare workers, because of issues like low salaries, high caseloads, insufficient training and limited supervision, and the turnover of child welfare workers -- estimated to be between 30 and 40 percent annually nationwide.¹⁵ The average caseload for child welfare workers has typically been nearly double the recommended level, and obviously much higher in many jurisdictions.¹⁶ Because our system is weighted toward protecting the most seriously injured children, we wait until it gets so bad that we have to step in. Far less attention in policy or funding is directed at preventing harm to children from ever happening in the first place or providing the appropriate services and treatment needed by families and children victimized by abuse or neglect.

In addition to authorizing meaningful appropriations for the basic state grants to help improve the CPS infrastructure, the National Child Abuse Coalition proposes to address through those grants a variety of activities essential to a responsive, efficient and appropriate protective service system, enabling states to improve their CPS systems through CAPTA grant support. In addition to the purposes for basic state grants in current law which address CPS improvements, the Coalition proposes that CAPTA funds be available to address the following issues:

CPS and family violence services collaboration: recognizing that domestic violence and child maltreatment coexist in 30 to 60 percent of the families among whom either is present, child welfare and domestic violence prevention programs should adopt assessment and intervention procedures aimed at enhancing the safety both of children and victims of domestic violence, including, where appropriate, developing and implementing collaborative procedures between child protective services and domestic violence services, in the investigation, intervention, and delivery of services and treatment provided to children and families.

Data sharing: to develop systems of technology that support the program and track reports of child abuse and neglect from intake through final disposition and allow interstate and intrastate information exchange.

Services to families: to promote the implementation of policies and procedures which encourage the development of differential, multiple responses for referral of family to a community organization or voluntary preventive services where the child is not at risk of imminent harm; and policies and procedures encouraging the involvement of families in decision-making pertaining to cases of abuse and neglect of children.

Linkages to animal welfare: to promote collaborations between the child protection system and animal welfare agencies in recognizing incidences of child abuse and neglect.

Legal representation: to require the appointment of an attorney to represent the legal interests of the child, as well as a guardian ad litem to represent the child's best interests.

Medical neglect: to extend protection to all children from medical neglect by removing language from CAPTA with the effect of allowing states to permit parents to withhold medical care from sick and injured children on religious grounds in the provision stating that there is no "Federal requirement that a parent or legal guardian provide a child any medical service or treatment against the religious beliefs of the parent or legal guardian. . .", in accord with the U.S. Supreme Court holding that the First Amendment does not allow one's religious practices or beliefs to endanger one's children.

CAPTA COMMUNITY-BASED CHILD ABUSE PREVENTION PROGRAM (Title II)

CAPTA should be the basic source of funding for community-based prevention programs, yet its resources are inadequate. Current funding for the community-based prevention program at \$42 million is insufficient on a significant scale to the task of preventing the abuse and neglect of children from

¹⁵ U.S. General Accounting Office (2003). *HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff* (GAO-03-357).

¹⁶ Alliance for Children and Families, American Public Human Services Association, Child Welfare League of America (2001). *The child welfare workforce challenge: Results from a preliminary study*. Dallas.

happening in the first place. The National Child Abuse Coalition believes that annual authorized funding of \$500 million represents a modest commitment to support prevention of child abuse and neglect through CAPTA. Putting dollars aside for prevention is sound investing, not luxury spending.

According to the Urban Institute, states reported spending \$22 billion on child welfare in 2002, and they could categorize how \$17.4 billion of the funds were used. Of that amount, \$10 billion was spent for out-of-home placements, \$1.7 billion on administration, \$2.6 billion on adoption, and \$3.1 billion (about 18 percent) on all other services, including prevention, family preservation and support services, and child protective services.¹⁷ As one of the few dedicated federal funding sources for prevention, a proper investment in CAPTA Community-Based Child Abuse Prevention grants would go a long way towards correcting the current imbalance between funding services for children after abuse and neglect have occurred, and funding services to ensure that abuse and neglect do not happen in the first place.”

The CAPTA Community-Based Child Abuse Prevention grants should assist states and communities to develop tested successful approaches to preventing child abuse and neglect through such essential community-based, family-centered, prevention services as support programs for new parents, parent education, respite and crisis child care, home visitor services, parent mutual support, and other family support services.

To improve upon the ability of CAPTA to support state and local preventive services, the Coalition proposes that CAPTA Title II should be amended to:

- Focus the Title II, Community-Based Child Abuse Prevention grants on support of services aimed at prevention.
- Allow for the redistribution of unexpended funds back through the program.
- Strengthen accountability provisions in the Title II program.
- Strengthen Title II language to include meaningful parent involvement through all areas of preventive services.
- Elevate home visiting and respite services to the same level as other identified core services of activities, and add crisis nurseries as a core service (removing the phrase “as practicable”).

CAPTA RESEARCH AND DEMONSTRATION GRANTS FOR INNOVATIONS

CAPTA is the only federal program for support of research and innovations to improve practices in preventing and treating child abuse and neglect, yet funding remains insufficient. CAPTA dollars for R&D at the current funding of \$37 million is inadequate to satisfy the need for advancing our knowledge and improving services for protecting children. At the current funding level, HHS is able to fund only a fraction of the applications for field-initiated research. The Coalition proposes raising the authorized appropriations to the level of \$100 million, which would help to advance the field’s knowledge through support for research and program innovations, as well as funding for the training, technical assistance, data collection and information sharing functions also authorized by CAPTA out of this money.

CAPTA funding is an efficient means of enabling states and communities to improve their practices in preventing and treating child abuse and neglect. The discretionary grant program is able to support a broad array of leadership activities which are uniquely suited to the federal government’s national perspective and ability to address current issues in order to advance the field of prevention and treatment of child abuse and neglect. Public agencies beleaguered by the crises of the day often do not have the capacity to undertake such activities, but they benefit from tested approaches, like those CAPTA supports. These discretionary grants help ensure that the CAPTA state grant funds and other child protection investments will actually benefit children.

¹⁷ Scarcella, C.A. (2004). *The Cost of Protecting Vulnerable Children IV: How Child Welfare Funding Fared during the Recession*, Washington, DC. Urban Institute

Over the years, important strategies in child abuse prevention and protection of children have developed with seed money from CAPTA. The history of CAPTA funding demonstrates the value of this investment.

- Early in the development of the Parents Anonymous program, CAPTA support helped to enable this parent mutual support-shared leadership organization to expand, through technical assistance and training, beyond its beginnings in southern California to become today an important prevention resource for tens of thousands of families in communities nationwide.
- An initial grant from CAPTA helped the first children's advocacy center developed in Huntsville, Alabama by then-district attorney and now Rep. Bud Cramer (D) to serve as the model program for centers protecting children in states across the country.
- In Hawaii, seed money from CAPTA went to develop the successful program of home health visitors. The research and knowledge gained through this experience contributed to the development of the Healthy Families America program now operating in hundreds of communities in almost every state to help parents get their children off to a healthy start.

Research, Training and Technical Assistance Grants

The National Child Abuse Coalition proposes amending CAPTA to focus discretionary spending on current topics important to improving our ability to protect children and prevent abuse and neglect.

Among appropriate topics which should be addressed by CAPTA funding are the following:

1. training for domestic violence and for child protection personnel in issues relating to child abuse and neglect and family violence;
2. collect and disseminate information on effective programs and best practices for developing and carrying out collaborations between child protective services and domestic violence services; and
3. development of best practices for research and evaluation to build on the base of evidence regarding differential response.

Training

The connection between workforce quality and family outcomes was documented in a 2003 report by the U. S. General Accounting Office: "A stable and highly skilled child welfare workforce is necessary to effectively provide child welfare services that meet federal goals. [However,] large caseloads and worker turnover delay the timeliness of investigation and limit the frequency of worker visits with children, hampering agencies' attainment of some key federal safety and permanency outcomes."¹⁸

It has been documented that a well prepared staff is more likely to remain in the field of child welfare, thus reducing worker turnover and increasing continuity of services with the family. Some social workers are able to take advantage of Federal assistance through the Title IV-E and Title IV-B programs of the Social Security Act. These funds are used to upgrade the skills and qualifications of child welfare workers though their participation in training programs specifically focused on child welfare practice. While these programs serve a useful purpose and must be preserved, we know that these two programs alone cannot support the entire field of child welfare workers.

A recent NASW study, *Assuring the Sufficiency of a Frontline Workforce: A National Study of Licensed Social Workers*,¹⁹ shines a bright light on issues related to workforce retention. The study warns of an impending shortage of social workers that threatens future services for all Americans, especially the most vulnerable among us, children and older adults. Key findings include:

- The supply of licensed social workers is insufficient to meet the needs of organizations serving children and families

¹⁸ U.S. General Accounting Office. (March 2003). "HHS Could Play a Greater Role in Helping Child Welfare Agencies Recruit and Retain Staff". Washington, DC.

¹⁹ Whitaker, T. Weismiller, T. & Clark, E. (2006). "Assuring the sufficiency of a frontline workforce: A national study of licensed social workers. Executive summary." Washington, DC: National Association of Social Workers

- Workload expansion plus fewer resources impedes social worker retention
- Agencies struggle to fill social work vacancies

Congress should provide sufficient funds to allow for research, training, and evaluation of services in the child welfare system. Also, greater investments are needed to provide social workers with professional development preparation and ongoing training opportunities, particularly in the area of cultural competence. We believe that valuable employment incentives, including pay increases, benefits, student loan forgiveness, and promotional opportunities are essential for the development of a highly skilled human services workforce

Demonstration Grants

In response to needs often overlooked in the prevention of child maltreatment and the protection of abused and neglected children, the National Child Abuse Coalition proposes amending CAPTA to address priorities in:

1. evaluation and replication of models in the medical diagnosis and treatment of child abuse and neglect; and
2. effective collaborations between child protective services and domestic violence services, including attention to investigation and intervention procedures, with regard for the safety of children and of the non-abusing parent, and the necessary services to children exposed to domestic violence.

The technical assistance offerings, evaluation measures, and information dissemination functions supported by CAPTA should address these priorities as well. The statute should focus on improving the evaluations of CAPTA-funded demonstration grants, the replication of successful model programs, and the distribution of information on programs with potential for broad-scale implementation and replication.

DEFINITION OF CHILD ABUSE AND NEGLECT

The National Child Abuse Coalition proposes amending the definition of “child abuse and neglect” in CAPTA to conform with the preponderance of state child abuse reporting laws and to recognize the value and import of early intervention in the protection of children who have been maltreated or are at risk of more serious abuse or neglect. We urge Congress to return the statutory definition to the language of CAPTA as originally enacted in 1974 by removing the words “serious”, “recent”, and “imminent” in recognition of the reality of practice in child protective services and the increased attention to providing preventive services and a differential response to families and children in need of support and assistance.

CONCLUSION

CAPTA has an important role in the federal response to the prevention of child maltreatment and the protection of abused and neglected children. Unfortunately, the federal role bears almost no relationship to the extent of the problem of child maltreatment in our society. While the numbers of children abused and neglected each year in the United States remain high, federal budgetary policy remains focused on paying billions of dollars for the removal of children from homes where they are no longer safe. Relatively few federal resources are directed at helping states and communities in their response to protecting children at the first instance of harm, or preventing that harm from happening at all.

The prevention of child abuse requires intensive effort and the commitment of resources such as we rarely see in government, certainly more than is allocated to date through CAPTA. We are at a point now where we can act to improve upon the federal support and leadership. We urge the adoption of legislation to amend CAPTA in ways that will truly assist states and communities in their efforts to keep children from harm. We stand ready to assist this subcommittee and your colleagues in Congress in developing a responsive federal role for protecting children and preventing child abuse.