# MANDATED REPORTING AND CHILD WELFARE AGENCIES: DATA Mandated Reporting and Child Welfare Agencies: A Look at the Data

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Mandated reporting is a cornerstone of the child protection system in the United States. Recently, some (Melton, 2005) have called for abolishing this policy, asserting that it is more harmful than beneficial. In addition to mandated reporting laws, other aspects of child welfare policy have drawn criticism, including concerns about unnecessary intrusiveness, low effectiveness, and general overreaching (Besharov, 1990; Melton & Thompson, 2001). It is only in the last 2 decades that we have begun to develop sufficient empirical data to effectively evaluate these concerns.

This brief report summarizes a larger article (Drake & Jonson-Reid, 2007) recently appearing in *Child Abuse & Neglect*. It addressed the following concerns relating to child welfare policy and practice:

- That reports are escalating due to overly broad mandates to report.
- That this escalation in reports is due to a "lowering of the bar," with less serious cases flooding the system.

This overloading is claimed to result in a series of negative outcomes, specifically,

- That child welfare agencies are overwhelmed by massive investigation caseloads.
- That these overwhelmed systems are therefore unable to provide preventative or protective services.
- That child welfare services are viewed negatively by clients and professionals alike.
- That with current reporting levels, case finding (identifying children who need protection) is no longer a problem.

In addressing the above concerns, we utilized a number of existing studies and publications, especially *Child Maltreatment 2003* (DHHS, 2005), the annual publication tracking child maltreatment nationwide, as well as its precursor document from the mid-1970s, the *National Analysis of Official Child Abuse and Neglect Reporting:* 1977 (National Humane Association, 1979). The data from the 1970s provide an opportunity to understand child welfare reporting at a time when mandated reporting policies were new and when child maltreatment reports were far less common than they are today.

# Key Findings

#### Escalation of Reporting (1977-2003)

Maltreatment reports were about 4 times as common (per 1,000 children) in 2003 compared with 1977. Reports from professional (mandated) sources were about 5 times as common, whereas reports from nonprofessional sources were about 3 times as common. It is unclear if this increase in reports from professionals is due to mandated reporting laws or from the larger number of professionals contacting children (e.g., school social workers, etc.). In any case, it is interesting to note that if the increase in reports from professionals had increased at *only* the rate of reports from nonprofessionals, then the total number of child maltreatment reports being received in 2003 would have dropped by less than 20%. *We found no evidence that mandated reporting laws were primarily responsible for overall increases in reporting*.

# Myth: Current Reports Are Less Severe Than in the Past (1977–2003)

We were able to track the proportions of cases that were reported and then substantiated, and we were also able to track the number of substantiated cases that were moved into foster care. These were the best data we could develop to give a sense of how many "serious" cases were being encountered. We were surprised to discover that the "throughput" (initial report to substantiation to foster care) was similar in both time frames (about 7% in 1977, about 6% in 2007). We found no evidence that today's reports are less serious than reports from 3 decades ago.

### Myth: Investigation and Intake Functions Are Overwhelming Child Welfare Agencies

We were able to find a number of sources that addressed this issue, notably the Urban Institute publication *The Cost of Protecting Vulnerable Children IV* (Scarcella et. al., 2004). This and other sources (including studies of worker time utilization) showed that investigation and intake functions probably consume between 5% and 10% of agency resources, with the lion's share of other resources being devoted to foster care. *The main factor burdening child welfare agencies is foster care, not intake or investigation.* 

# Myth: Child Welfare Agencies Are Too Overwhelmed to Help Families

This is simply false. In 2003, most substantiated cases and about a quarter of unsubstantiated cases received post-investigation services (DHHS, 2005). Given the larger number of unsubstantiated cases, there are actually more unsubstantiated than substantiated cases served. As of 2003, 20 states had alternative response systems in place, providing a formalized means of intervening in less emergent or severe situations. The movement toward provision of preventative services and community collaboration is one of the bright spots in recent child welfare policy developments. *Although service provision could undoubtedly be increased, we found clear evidence that very large numbers of families, both substantiated and unsubstantiated, are currently being served.* 

### Myth: Clients Have Negative Attitudes Toward Child Welfare Agencies

There is a large volume of literature in this area, from early work by Magura and Moses (1984) to more recent work based on the National Study of Child and Adolescent Well-Being (NASCAW) (Chapman, Gibbons, Barth, & McCrae, 2003) and including some detailed work from Washington State (English, Brummel, Graham, Clark, & Coghlan, 2002). Clients report satisfaction with child welfare services about 75% of the time. It is interesting to compare this with levels of satisfaction claimed by families using (voluntary) mental health programs. These levels of satisfaction are only slightly higher, varying from about 75% to about 90%. *In summary, we found that clients have generally positive views of child welfare agencies, and the commonly asserted characterization of families as generally disgruntled is simply wrong.* 

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#### Myth: Providers Have Negative Attitudes Toward Child Welfare Agencies

A number of researchers have surveyed mental health professionals with regard to their views of child welfare agencies. Findings are consistent and show that service providers generally view child welfare positively and feel that child welfare intervention is more likely to help than to hinder therapy. They believe that child welfare interventions help keep children safe, and they strongly support mandated reporting laws. One study (Kalichman & Craig, 1991) found that 94% of service providers felt such laws were necessary.

#### Myth: Case Finding Is No Longer a Problem

Many studies have determined that large numbers of maltreatment events are not reported to child welfare agencies. While it may be easy to look at millions of reports per year and feel that we are getting "enough" reports, it is hard to morally justify such a judgment in the face of ongoing harm to children in situations that are not known to child welfare services.

#### Summary

Conventional wisdom sometimes characterizes child welfare services as intrusive, overburdened, and in a perpetual state of crisis. There is a familiar image of these agencies being flooded by new intakes and unable to respond in any way except to triage and then drop cases. The well-known escalation in reports has caused many to believe that child welfare agencies exist in a sort of perpetually besieged state. The data we found simply did not support these conclusions. We found that the child welfare system spends only a small part of agency efforts on intake and investigations, that it provides protective and preventive services to large numbers of families, and that it is generally well-liked by those individuals (both clients and providers) with whom it comes in contact. New policies for engaging families and communities, such as alternative response systems, may improve our ability to prevent future child maltreatment. The child welfare system is certainly not perfect, but by no means does it appear to be broken or under a desperate state of siege.



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