

The Reauthorization of the Child Abuse Prevention and Treatment Act (CAPTA)

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The Scope and Gravity of Child Maltreatment

Child maltreatment, including physical abuse, sexual abuse, and neglect, is a pervasive public health issue, with [12.5%](#) of children experiencing confirmed child maltreatment before age 18. In 2020 alone, 3.9 million child maltreatment referrals were received involving 7.1 million children, and 1,750 child deaths were attributed to child maltreatment. All told, the annual economic burden of substantiated child maltreatment cases in the U.S. is estimated at [\\$428 billion](#), which includes the costs associated with the deleterious consequences of child maltreatment. Recently, there have been [increases](#) in child maltreatment referrals, investigations, and infant deaths attributed to child maltreatment, and rates of child maltreatment have not significantly decreased in over two decades.

Costs Associated with Child Maltreatment

Survivors of child maltreatment are:



9 times more likely to become involved in [criminal activity](#)



twice as likely to experience [teen pregnancy](#)



3 times more likely to have a [substance use disorder](#)



at high risk for [homelessness](#)

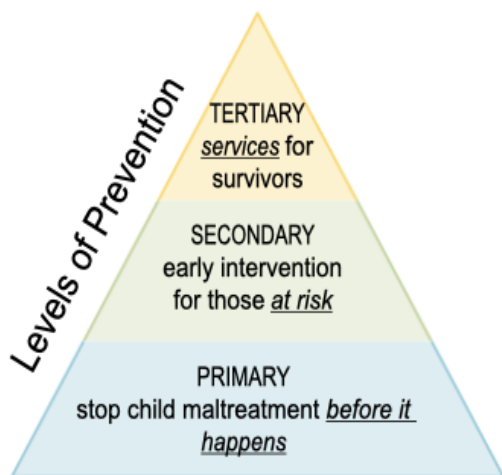


at risk for poor [educational attainment](#)



at high risk for chronic [health conditions](#) and myriad [mental health disorders](#)

Policies Supporting *Primary Prevention* or Stopping Child Maltreatment Before It Happens are Needed



The stagnation of child maltreatment rates signals the dire need for innovation and increases in ***primary prevention efforts that stop child maltreatment before it happens***. Although several policies focused on supporting at-risk families exist, they are distributed from several disconnected sources and are not necessarily designed for the *primary prevention* of child maltreatment. For example, Maternal, Infant, and Early Childhood Home Visiting ([MIECHV](#)) does not target child maltreatment specifically but rather supports home visiting for expectant and new parents who are at risk for poor maternal and child health outcomes. The Family First Prevention Services Act ([FFPSA](#)) does not address primary prevention of child maltreatment as it is designed to provide secondary intervention to promote family preservation as opposed to placements in foster care.

Economic policies are sometimes considered child maltreatment primary prevention because though designed to reduce the impact of poverty have resulted in slight reductions in child maltreatment as an ancillary byproduct. For example:

- Anti-poverty programs, such as the Earned Income Tax Credit (EITC), and policies, such as a higher minimum wage, appear to modestly [reduce CPS reports](#).
- A [review](#) of the link between TANF, child care subsidies, SNAP, and EITC and child maltreatment suggest some reductions in child maltreatment, though their benefits range considerably, with the clearest evidence for TANF.
- [Several studies](#) investigating the positive consequences of Medicaid expansion in states demonstrated reductions in risk factors for child maltreatment, such as domestic violence, substance use, and untreated mental illness. Moreover, in states that expanded Medicaid, rates of neglect significantly declined, but rates of physical and sexual abuse were unaffected.

Moreover, poverty as a risk factor for child maltreatment has created racial disproportionality in the child welfare system. For example: Black children have the highest [lifetime prevalence](#) of maltreatment investigations at 53.0%, followed by Hispanic children at 32.0%, White children at 28.2%, Native American children at 23.4%, and Asians/Pacific Islander children at 10.2%. Further, Black and American Indian/Alaska Native children are [overrepresented](#) in the child welfare system for receiving services. [Research](#) shows that racial disproportionalities can be accounted for by socioeconomic status. For children and families with lower socioeconomic status, sexual and physical abuse is three times higher and neglect is seven times higher compared to youth from higher socioeconomic strata. In addition, a number of policy initiatives have aims at reducing disproportionality over the past decades. Recent papers under review suggest that prior tendencies for Black children to be substantiated or placed at slightly higher rates than White children have disappeared or reversed. Despite this, [qualitative research](#) suggests that there might be serious practice variations that need to be addressed to improve responses to family needs and child safety and mitigate any overrepresentation of youth of color in the child welfare system.

Strategies to reduce disproportionality

- Address risk factors for child maltreatment such as poverty that can contribute to disproportionality
- Continuing education to reduce child welfare practice variations
- Maximize use of data systems to reveal and address sources of disproportionality

Expanding *Primary Prevention* through CAPTA

CAPTA is the major federal policy specifically designed to impact rates of child maltreatment and increase support services. CAPTA's Community-Based Child Abuse Prevention (CB-CAP) [grants can be used](#) to strengthen and support community and family programs and activities that prevent child maltreatment by increasing communities' capacity for primary prevention service coordination and continuous quality improvement efforts. Targeted child maltreatment prevention parenting programs (e.g., Triple P) successfully [reduce rates](#), [potential for child maltreatment](#), and increase [positive parenting](#) behaviors. *Yet, less than one third of CAPTA's [funding is directed towards primary prevention](#).*

Policies to Improve the Quality of State Child Welfare Data Collection Systems are Needed

In exchange for Title IV-E funding, and guided by the Comprehensive Child Welfare Information System (CCWIS) policies, the Children's Bureau and CAPTA mandate that each state maintain their own data collection systems which are then funneled into the two major federal systems that drive decision making and spending: the National Child Abuse and Neglect Data System Child File (NCANDS) provides information related to child maltreatment investigations; the Adoption and Foster Care Analysis and Reporting System (AFCARS) compiles information on children and youth involved in the foster care system.

Strategies to improve the usefulness of state child welfare data systems

- Standardization across states
- Streamlined required data elements
- Tools to reduce workforce effort:
 - ✓ eliminate unnecessary elements
 - ✓ reduce redundancy
 - ✓ dropdown menus
- Allow cross-agency integration
- Grants to incentivize improvements

While these federal data systems include many well curated variables—such as dates, report sources, and case dispositions—data elements are prone to [cross-state differences](#) in information collected, inconsistencies in [data quality](#), and the siloed nature of public service systems records which can lead to misinformation from invalid [data](#) and limit the usefulness of these data for evidence-informed policymaking. For example, the variable indicating public assistance is implausibly low at around 20% nationally, with states varying from 0 to over 60%. Given that the [disentangling of poverty from neglect](#) is a current priority, variables such as income and other indicators of poverty are currently absent from federal data systems. Although the emergence of CCWIS may rectify some longstanding challenges, strategies to first improve the quality of state data will

be essential. Moreover, data integration across systems such as child welfare, health care, and economic assistance (e.g., California's [Children's Data Network](#) and Michigan's [Child & Adolescent Data Lab](#)) will serve to advance evidence-based programs and policies for children and families. Quality improvements and integration could be incentivized through competitive demonstration grants or other targeted efforts such as efforts by ACF/[Mathematica](#).