



The relationship between child welfare financing, screening, and substantiation



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ABSTRACT

This study examines the relationship between state-level child welfare spending and two important decision points in the child welfare system: the decision to screen out a referral and the decision to substantiate. The model is estimated using a pooled fractional probit estimator that controls for year effects and state-level clustering. The findings suggest that decreases in state-level child welfare expenditures predict increases in the proportion of referrals that are screened out and decreases in the proportion of maltreatment claims that are substantiated. The results are robust to the inclusion of caseload and federal spending as control variables, to the exclusion of states known to have changed their screening or funding practices during the sample period, and to the use of combined state and local child welfare expenditures as an explanatory variable in lieu of state-level child welfare expenditures. The findings imply that the amount of money a state spends on child welfare may influence important decisions in the child welfare process.

1. Introduction

In 2014, child protective service agencies in the United States screened out nearly forty percent of child maltreatment referrals, which means that no investigation was conducted (U.S. Department of Health & Human Services, 2016). Referrals are screened out when there is insufficient information to follow up, the report does not meet the state's definition of child abuse or neglect, the child is over the age of eighteen, or the child lives outside the agency's jurisdiction (Child Welfare Information Gateway, 2013). In cases where an investigation is conducted, the claims of child maltreatment were substantiated just 17.8% of the time (U.S. Department of Health & Human Services, 2016). Prior researchers have identified a number of factors that may affect these two critical decision points, but the role of funding has not yet been examined.

Conducting an investigation is costly (American Humane Association, 1994). While some child welfare functions are federally subsidized, the cost of investigating referrals is typically borne at the state or local level (Courtney, 1998). Most states have a formal process for determining whether a referral should be investigated (Jonson-Reid et al., 2017), but the decision to conduct an investigation is ultimately made by a person who may be subject to unconscious bias. A large literature suggests that people may be subject to unconscious biases which lead to suboptimal decision-making (Kahneman, 2011; Thaler & Sunstein, 2009). Child welfare workers, for example, might

make a different decision depending on the race (Dettlaff, Rivaux, Baumann, Fluke, & Rycraft, 2011) or ethnicity (Lee, Fuller-Thomson, Fallon, Black, & Trocmé, 2017) of the family being investigated. Factors other than race or ethnicity, such as organizational constraints and the ability to provide services, have also been found to play a role in the decision to substantiate (Font & Maguire-Jack, 2015).

The need to understand whether child welfare funding affects the screen-out and the substantiation decisions is paramount given the significant costs associated with child maltreatment (Fang, Brown, Florence, & Mercy, 2012; Jonson-Reid, Kohl, & Drake, 2012). Research suggests that very few child maltreatment referrals are the result of bogus claims (Wells, Fluke, & Brown, 1995). If some referrals are not being investigated or if some claims are not being substantiated due to budgetary pressures, policy makers need to be made aware of this so they can take corrective action.

This study aims to make two contributions. First, it is the only study to examine the determinants of screen-out rates. While several studies have discussed variation in screen-out rates at the state level (Downing, Wells, & Fluke, 1990; Tumlin & Geen, 2000), no prior study has performed empirical tests. Second, this is the first study to investigate whether changes in child welfare financing predict changes in substantiation rates. A growing body of research has examined the ways in which ecological factors affect decisions made in the child welfare system (Baumann, Dalgeish, Fluke, & Kern, 2011; Fluke, Chabot, Fallon, MacLaurin, & Blackstock, 2010; Font & Maguire-Jack, 2015; Lee et al.,

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2017; Maguire-Jack & Byers, 2014) but the effect of budgetary allocations remains unexplored. These two questions are worthy of study because shrinking budgets could impair child welfare service provision (DeVooght, Fletcher, & Cooper, 2014).

2. Literature review

There is very little research related to screen-out rates (Jonson-Reid et al., 2017), with most of the studies being at least two decades old. What is known is that there is considerable variation in screen-out rates across states; two states screen in 100% of referrals for an investigation, while one state screens in just 17.5% of referrals (U.S. Department of Health & Human Services, 2016). Some of this variation may be attributable to worker beliefs, or demographic characteristics of communities, and different categorizations of risk across states (Wells, Lyons, Doueck, Brown, & Thomas, 2004). Take Massachusetts and Oklahoma, for example. Both states require referrals to be screened out when the reported behavior does not meet the statutory definition of child abuse or neglect. However, Massachusetts also requires a referral to be screened out when, “the reporter is not credible” while Oklahoma requires a referral to be screened out if, “a child 6 years of age or older is spanked on the buttocks by a foster or trial adoptive parent with no unreasonable force used or injuries” (U.S. Department of Health & Human Services, 2016). Intake workers in Oklahoma might not take into consideration the credibility of the reporter, whereas they would automatically screen out a hotline call that involved a foster parent spanking a 6-year old child provided the child was not injured. In each case, the response might differ from the response of an intake worker in Massachusetts who is following different screening protocol.

While differences in intake protocol, statutory definitions, etc. account for some of the variation in screen-out rates, budgetary concerns may also be a factor (Surbeck, 1981). In one study, 92% of interviewees cited budget considerations as an important factor in improving the workforce for child welfare agencies (Farber & Munson, 2010). Front-line child welfare workers have stated that they do not always follow best practices due to time pressures and the need to prioritize among conflicting goals (Smith & Donovan, 2003). When making decisions about whether to conduct an investigation or substantiate a claim of maltreatment, workers and their agencies may become exposed to legal liability (Mezey, 1998) and public scrutiny (Besharov, 1990).

Determining whether a referral should be screened in can be particularly challenging when it comes to cases of neglect, which comprise 75% of referrals (U.S. Department of Health & Human Services, 2016) and are subject to greater ambiguity than cases of physical or sexual abuse. To reduce the amount of subjectivity involved in this process, most states have adopted formal policies for screening (Child Welfare Information Gateway, 2013). Yet, the limited research on screening suggests that intake workers often wield considerable discretion in the decision-making process (Tumlin & Geen, 2000). Intake supervisors in fifteen percent of counties said they screen out referrals that would otherwise be accepted because of worker caseload and time (Wells, Stein, Fluke, & Downing, 1989). This figure might be a conservative estimate, as supervisors probably wish to avoid admitting that children are being placed at risk due to agency constraints (Downing et al., 1990). Other environmental factors, such as judges' support for the actions of child protection workers, may also influence the screening process (Wells et al., 1989). An intake worker's beliefs about the role of CPS may even influence the decision to screen out referrals (Wells et al., 2004).

The literature on substantiation is much more recent, with a number of studies documenting factors that affect the decision to substantiate. Workers' beliefs about race may be at least partly responsible for the disproportionate number of African-American children in the child welfare system (Dettlaff et al., 2011), although this may reflect differential needs attributable to the effects of poverty rather than institutional bias (Font, Berger, & Slack, 2012; Jonson-Reid, Drake, & Kohl,

2009). The substantiation decision may also be affected by workers' ability to provide services (Maguire-Jack & Byers, 2014), the availability of community resources (Fluke et al., 2010), organizational climate (Font & Maguire-Jack, 2015), and other ecological factors (Baumann et al., 2011). As with the screening decision, there are also differences in statutory definitions of what constitutes child maltreatment. Not all states require the same burden of proof to determine that child maltreatment has been substantiated. In Kansas the level of evidence must be “clear and convincing,” in Illinois it must be “credible,” in Arizona there must be “probable cause,” in Alaska there must be a “preponderance” of the evidence, and in Louisiana the evidence must be “reasonable” (U.S. Department of Health & Human Services, 2016).

Because budget cuts hinder the ability of child welfare agencies to perform their duties (Surbeck, 1981), however, changes in funding may also affect workers' beliefs and, consequently, the screen-out and substantiation decisions. Surbeck noted one instance in which budget cuts led to reduced headcount, office space for protective services, and residential living for clients (1981). With investigations costing as much as \$813 (American Humane Association, 1994) and caseloads increasing at a faster rate than state funding, child welfare agencies might be forced to reduce the number of investigations (Courtney, 1998). To cope with shrinking resources, workers might informally increase the threshold for what constitutes child maltreatment (Font & Maguire-Jack, 2015). The practical implication is that some referrals will not be investigated due to insufficient resources, not because the referral lacks merit (Tumlin & Geen, 2000).

While child welfare agencies receive substantial funding from the federal government, federal funding has largely been earmarked for foster care (Title IV-E funds) and adoption assistance (Courtney, 1998). Child welfare agencies have increasingly been able to rely on funds from the Social Service Block Grant, Medicaid, and Temporary Assistance for Needy Families programs, Title IV-E funds remain the primary source of federal funding for child welfare agencies, and these funds do not provide money for child maltreatment investigations (DeVooght et al., 2014). Thus, state-level child welfare expenditures (as well as local-level expenditures) are critical to funding the investigation and screening of child maltreatment referrals.

The effect of child welfare expenditures has only been examined by a handful of studies. One study found that increases in state-level child welfare expenditures are associated with fewer child abuse fatalities and incidences of child maltreatment (Malcolm, 2012). Another study failed to establish a relationship between state-level child welfare spending and foster care outcomes (Russell, 2015). Neither study examined the screen-out or substantiation decisions, however. Thus, it is an open question whether child welfare financing affects screen-out or substantiation rates.

3. Methods

The data consist of biennial, state-level observations for all fifty U.S. states from 2004 to 2014. For example, the poverty rate variable would include Alabama's poverty rate in 2004, Alabama's poverty rate for 2006, Alabama's poverty rate for 2008, etc. Pennsylvania was excluded because it has a two-tiered system that doesn't include some cases in public counts, so the panel includes 294 state-years (49 states with six observations per state). A biennial panel is used because data for child welfare expenditures are only collected every two years by a Child Trends study that is funded by the Annie E. Casey Foundation. The Child Trends study uses a survey to obtain data that show how each state funds its child welfare activities (DeVooght et al., 2014). The other variables were collected from different sources and combined with the child welfare expenditure data using Microsoft Excel. Data regarding the substantiation rate, screen-out rate, and referral rate were obtained from the National Child Abuse and Neglect Data System (NCANDS) as published in annual reports of the Children's Bureau (U.S. Department of Health & Human Services, 2016). The percentage of African-

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