

# Snapshot

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## Preventing child maltreatment

*A coordinated model of support for families*

### A LOOK AT THE NUMBERS

In 2007, an estimated 5.8 million children were referred to child protective service agencies across the United States. Of these, about 794,000 children were victims of abuse or neglect, or about 10 children per 1,000. In Minnesota, the rate is about 5 in 1,000 children.

#### Children in poverty are:

- 16 times more likely to be physically abused
- 18 times more likely to be sexually abused
- 44 times more likely to be neglected

Despite the fact rates have declined since 2003, child maltreatment remains a serious concern to both parents and policymakers alike. Children who suffer abuse or neglect may experience a range of social, emotional, cognitive, and physical consequences that can persist into later life and put them at risk for experiencing and/or perpetrating future acts of violence.

Neglect is the most common form of child maltreatment, accounting for 60 percent of victims nationally and 69 percent of victims in Minnesota. For some however, the impact is more immediate and tragic; an estimated 1,760 children in the U.S. died in 2007 as a result of abuse or neglect.

Since the passage of the Child Abuse Prevention and Treatment Act (CAPTA) in 1974, which provides federal funding to address this issue, agencies and advocates have vigorously worked to prevent child abuse and neglect. But the question of which strategies are most effective in reducing and preventing abuse and neglect remains. In 2007, parents accounted for nearly 80 percent of the perpetrators of child abuse and neglect. This statistic presents child advocates with an obvious target for prevention and intervention tactics. But which parents? And how?

### Child maltreatment and poverty

Research indicates that child maltreatment highly correlates with poverty. The most recent National Incidence Study found that children living in families with less than \$15,000 in annual income were 22 times more likely to experience abuse or neglect than children in families with annual incomes of \$30,000 or more.

A recent study conducted by the Chapin Hall Center for Children found that 42 percent of the families studied who were also enrolled in the federal cash assistance program TANF (Temporary Assistance for Needy Families), had a child maltreatment report in the five-year period following their enrollment. This included a high percentage of families who had no previous child welfare involvement.

Furthermore, research in the area of child welfare indicates that more than half of children who enter the foster care system live with families receiving economic assistance.

Issues related to a lack of financial resources also contribute to families' risk for child maltreatment. For example, having a larger family, lack of employment, and parental stress are all associated with involvement in child protective services. Also, financial stress can place families at higher risk for

## Effective practice: Integration of TANF and child welfare system

El Paso County, Colorado, is one example of a successful cross-agency collaboration. In the late 1990s, the county implemented a common system for child welfare and TANF, and redesigned its TANF program to meet families' economic needs, especially as they related to healthy child development. They coordinated TANF, child support, and community programs to access a broad range of services for families. In doing so, the county aimed to not only provide economic support and social services to families, but to enhance child well-being and keep children safe.

Results are impressive:

- One-third fewer foster care placements
- 40% reduction in institutional placements
- 50% decline in the number of abuse and neglect court filings.

child maltreatment, demonstrated by the higher levels of involvement in child welfare among families who receive economic assistance more frequently and for longer periods of time.

But, to be clear, living in poverty in and of itself does not predict child maltreatment. Issues related to mental or physical health, chemical dependency, and domestic violence are other common challenges. Child maltreatment is often only one issue of many in these children's lives.

At the same time, the evidence suggests there is considerable overlap between families in economic assistance programs and those in child welfare programs. Many of the parents involved in child protective service agencies are also receiving support through TANF. The similarities among these families offer a natural opportunity for increased and deliberate collaboration between these service areas and may be a long-term approach in the best interest of Minnesota.

### New Perspectives

The 1996 welfare program reforms that replaced Aid to Families with Dependent Children (AFDC) with TANF ushered in a new perspective on welfare. The legislation altered the focus from cash assistance and support to families, to employment for parents or caregivers. As a result, TANF agencies began addressing employment barriers such as transportation, child care, education, and other needs of working parents to help these parents secure and maintain employment.

These were often the same barriers child welfare agencies were addressing with the parents in their programs, as many barriers to employment are the same as those that interfere with effective parenting.

For both TANF agencies and child welfare programs to provide similar support services to many of the same families was inefficient. It also led to competing and sometimes conflicting demands for parents. Those involved in both systems had to balance the work or education requirements imposed by their TANF agency with mandated court appointments or other services needed to maintain or regain custody of their children.

As a result, a number of states began exploring ways to intentionally link services provided by economic support and child welfare programs, and to enhance cross-agency collaboration.

### Minnesota pilots coordinated system of support

In Minnesota, an effort to link services is now underway with the pilot program, MFIP Family Connections, a collaboration of the Minnesota Family Investment Program (MFIP) and Child Welfare Services developed by the Minnesota Department of Human Services. MFIP is Minnesota's welfare reform program for low-income families with children. MFIP Family Connections strives to improve family functioning and enhance child well-being for those families. It is a voluntary program that connects eligible individuals receiving economic support through MFIP with community-based organizations to provide strengths-based services.

The pilot program, which is developing systems to coordinate case planning and service delivery, was implemented in October 2007 in eight counties across Minnesota: Beltrami, Cass, Crow Wing, Dakota, Olmsted, Polk, Ramsey, and Sherburne. During the three-year pilot, the MFIP Family Connections program expects to serve approximately 1,900 families.

An evaluation of this statewide initiative is underway. It assesses the impact of early intervention services on low-income families with young children with regard to the prevention of child maltreatment, and examines how well participating agencies develop systems for integrating and coordinating planning and services. Preliminary results suggest the program is addressing many identified basic needs of families, and that families are meeting their goals and are satisfied with the services provided. Subsequent evaluation reports will provide additional information about program impact, including outcomes related to child maltreatment and other indicators of child well-being.

## Implementing coordinated systems

Given the connections between the TANF and child welfare systems, and lessons learned from coordination efforts underway, there are several important issues agency staff and policymakers should consider prior to and during implementation of a coordinated system of support for families:

- **Garnering initial support at the ground level.** How can workers be encouraged to approach a fairly significant shift in the way business is done with an attitude of openness and a willingness to partner? What opportunities exist at the front-end of implementation to facilitate staff buy-in, investment, and trust?
- **Cross-training and teaming opportunities for staff.** How can cross-agency staff get to know one another and learn more about each other's roles and responsibilities? What opportunities exist to team across agencies and coordinate case plans? Are there geographical challenges that need to be

addressed? What opportunities exist for co-location of staff and services?

- **Facilitating an atmosphere of information-sharing.** Are there policy issues within agencies related to client confidentiality that need to be addressed or adapted to permit an exchange of information across agency staff? What concerns exist among staff about disclosure or mandated reporting that might impede information sharing?
- **Embedding infrastructure.** What type of infrastructure is needed to facilitate communication and collaboration between agency staff? Are there technological challenges that need to be overcome? Can information systems interface and are they accessible to all staff?
- **Blending or leveraging funding streams.** What federal, state, and/or county funds are involved, and how can they be used most effectively? Are there opportunities to maximize existing funding streams or tap into others?
- **Collecting relevant outcome information about families to assess success.** What do evaluation data tell us about the extent to which system coordination is happening? What does it look like and how does it happen? And what is the impact on families, both from an economic standpoint as well as the health and well-being of parents and their children? Are there programmatic course corrections that need to occur in order to streamline the coordination efforts and ensure positive impacts on families?





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Although the prospect of such large-scale collaboration may appear daunting, the potential impact on families from such coordination is significant. Even small incremental changes in which staff begin to reach out across agencies and consider opportunities for teaming to address client needs may be a feasible first step. In the end, a coordinated and comprehensive system of support may provide an authentic opportunity to prevent child maltreatment.

## Resources

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