



# Unsuccessful In-Home Child Welfare Service Plans Following a Maltreatment Investigation: Racial and Ethnic Differences

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# About the Alliance

In 2004, the Casey-CSSP Alliance for Racial Equity in Child Welfare was established to develop and implement a national, multiyear campaign to address racial disparities and reduce the disproportionate representation of children from certain racial or ethnic communities in the nation's child welfare system.

The Alliance includes the Annie E. Casey Foundation and its direct service agency, Casey Family Services, Casey Family Programs, the Jim Casey Youth Opportunities Initiative, the Marguerite Casey Foundation, the Center for the Study of Social Policy (CSSP), and parents and alumni of foster care. The Race Matters Consortium and Black Administrators in Child Welfare (BACW) are also partners in this work.

The efforts of the Alliance to reduce disparities and the disproportionate number of children and youth of color in the care of child welfare agencies are ultimately aimed at improving the outcomes for all children in care by:

- Learning what works to achieve race equity in child welfare services, in partnership with states and local communities
- Developing and disseminating new knowledge to the field
- Promoting effective federal and state policy through education about policy options
- Designing and implementing data collection, research, and evaluation methods that document evidence-based practices and strategies
- Ensuring that birth parents and foster youth and alumni are leaders in helping child welfare agencies achieve race equity in child welfare services and programs

**For more information, go to [www.cssp.org/major\\_initiatives/racialEquity.html](http://www.cssp.org/major_initiatives/racialEquity.html).**

# Executive Summary

## Introduction

Despite the fundamental mission of child welfare services to protect the safety of children, many children experience recurrent maltreatment—a sign of an unsuccessful child welfare service plan (CWS plan)—following a maltreatment investigation. Although African American children are not at greater risk of experiencing child maltreatment than white children, they are clearly overrepresented among the child welfare population, especially in foster care. Furthermore, child maltreatment reports for children of color are more likely to be substantiated than reports for white children.

In all communities, however, maltreatment (including recurrent maltreatment) often goes unidentified. Estimates of recurring maltreatment based solely on official measures such as re-reports or out-of-home placements are therefore likely an underestimation of recurrent maltreatment.

## Study Methods

This paper presents findings from the National Survey of Child and Adolescent Well-being (NSCAW), a landmark, longitudinal national probability study of investigated child maltreatment cases. NSCAW is funded by the Department of Health and Human Services and provides a wealth of data about the experiences of children entering the child welfare system between October 1999 and December 2000. This study reports on racial/ethnic differences in recurrent maltreatment, and the success or failure of the CWS plan over the 36 months following each index maltreatment investigation. An unsuccessful CWS plan is defined here as a new official maltreatment report or subsequent placement into out-of-home care. While most studies of racial disproportionality have focused on children who have been placed in foster care, the subset of NSCAW used for this study is 3,900 children who remained in home following the index investigation. This is an understudied, but at-risk, population of children.

## Findings by Study Aim

**Study Aim 1:** To examine variation in the rates of unsuccessful CWS plans and the response of the system (i.e., disposition and outcome of the investigation) following the subsequent new involvement with the child welfare system for different race/ethnicities.

Although the focus of this study is on recurrent maltreatment between the index investigation and 36-month follow-up, analysis of the baseline data revealed that, among all children investigated for maltreatment whose initial placement was to remain in their home, African American children were overrepresented among children investigated for child maltreatment, as well as among children having their maltreatment report substantiated.

Overall, a third of all children had unsuccessful CWS plans over 36 months. Although the rates of unsuccessful CWS plans were similar for children of all races/ethnicities, African American children were overrepresented among children whose initial placement was in-home and who experienced an unsuccessful CWS plan by the 36-month follow-up.

While substantiation of the baseline report increased the likelihood of an unsuccessful CWS plan for white children, rates of unsuccessful CWS plans for African American children were similar regardless of whether the baseline report was substantiated.

The proportion of children whose first re-report was substantiated was similar across race/ethnicities. In addition, involvement in the child welfare system prior to the index investigation was strongly associated with reinvolvement.

**Study Aim 2:** To examine variation in subsequent out-of-home placements for children of different races/ethnicities remaining in-home following the baseline investigation.

African American children were overrepresented among children who remained in-home following the baseline investigation and who had a later placement into out-of-home care. White and Hispanic children, however, were underrepresented.

As with unsuccessful CWS plans that resulted in either re-reports or placements into out-of-home care without a re-report, out-of-home placement was associated with substantiation of the baseline report for white children, but not African American or Hispanic children.

Regardless of racial and ethnic identity, child welfare involvement prior to the baseline investigation and having an open CWS case following the baseline investigation were associated with a later placement into out-of-home care among children remaining in-home at baseline.

**Study Aim 3:** To examine racial/ethnic differences in parenting behaviors following a maltreatment investigation, and to determine the relationship between racial and ethnic identity and the reporting of parenting behaviors which can be considered maltreatment.

Caregiver self-reporting of harmful parenting behaviors between baseline and 36 months revealed no differences in self-reported neglectful parenting practices for different race/ethnicities. The study did find differences by racial and ethnic identity for the self-reporting of severely violent parenting practices, however. Severe violence was self-reported more frequently among caregivers of African American children than caregivers of other races/ethnicities. When controlling for other case characteristics, we found that caregivers of African American children were more than twice as likely to use severe violence toward their children between baseline and 36 months compared to caregivers of white children.

Higher rates of self-reported severe violence did not place African American families at greater risk of having an unsuccessful CWS plan. African American children were roughly as likely to have unsuccessful service plans regardless of whether their caregivers self-reported using severe violence. In contrast, CWS plans were much more likely to fail when caregivers of white and Hispanic children reported using severe violence than when they did not report the use of severe violence.

Overall, the rates of caregiver self-reported severe violence that did not result in a re-report or subsequent placement into out-of-home care suggest that recurrent maltreatment occurs even among successful CWS plans (i.e., cases with no re-report or subsequent out-of-home placement). Recurrent maltreatment is, in essence, underreported, suggesting that rates based on official reports or placements into out-of-home care are likely an underestimation of recurrent maltreatment.

## Summary

The landmark study of NSCAW provided an opportunity to expand the current knowledge base through the availability of data related to recurrent maltreatment and success or failure of the CWS plans over 36 months. By examining racial disproportionality among the understudied (yet high-risk) population of children remaining in-home following the maltreatment investigation, this study determined patterns for unsuccessful CWS plans, placement into out-of-home-care, and recurrent maltreatment.

This national probability study confirms that African American children who initially remain in-home are disproportionately represented among the children who are investigated for child maltreatment, have an unsuccessful CWS plan, and are subsequently placed into out-of-home care. This study goes further, however, in helping to clarify whether some of the subsequent events are related to racial and ethnic identity or other factors.



# Unsuccessful In-Home Child Welfare Service Plans Following a Maltreatment Investigation: Racial and Ethnic Differences

The National Survey of Child and Adolescent Well-Being (NSCAW) provides a unique opportunity to examine the ongoing safety of children with an initial in-home placement following a maltreatment investigation. Although prior analysis of the NSCAW data has revealed important information about child safety following child welfare involvement, and has shown high rates of re-reports and undetected abuse, questions related to racial/ethnic differences remain unanswered. In most cases that come to the attention of child welfare services (about 89%), the child does not go into out-of-home care; therefore, the primary setting for receiving services is in the home of the biological parent or another permanent caregiver (e.g., custodial grandparent). Because the primary objective of child welfare services is the safety of the child through the reduction of maltreatment, recurrent maltreatment is a signal that the services provided, within the context of the strengths and needs of the family, were insufficient to reach this objective. However, the in-home child welfare service plan (CWS plan) can range from closing the case with no additional services to intensive in-home services. Recurrent maltreatment has been found to be frequent among families whose case was opened for receiving ongoing services since as early as the 1970s (e.g., Fluke, Yuan & Edwards, 1999; Herrenkohl et al., 1979; Lipien & Forthofer, 2004). Another concern is that many families involved with the child welfare system—even those with substantiated maltreatment—do not receive services following the maltreatment investigation (Inkelas & Halfon, 1997; U.S. Department of Health and Human Services, Administration for Children and Families [US DHHS, ACF], 2005b). If recurrent maltreatment, or an unsuccessful CWS plan, is associated with racial and ethnic identity, this would have important implications for understanding access to services and adequacy of services for children from different racial and ethnic backgrounds whose initial placement is in the home of origin.

Many children have child maltreatment re-reports following prior child welfare involvement—some experience multiple reports over many years. Additionally, some caregivers of children remaining in the home at baseline report the use of harmful parenting tactics that constitute maltreatment between baseline and 36 months. This maltreatment, however, does not always result in an official maltreatment re-report. In fact, prior research (Kohl & Barth, 2005) indicates that, where children age 0 to 2 remain at home after intake, nearly 90 percent of the maltreatment reported by caregivers at intake remains unreported to child welfare services in the following 18 months.

Prior analysis of unreported maltreatment, however, has not yet considered how the experiences of children of varying racial/ethnic backgrounds differ. This study augments previous work by incorporating the examination of racial disparity and disproportionality. Furthermore, the study window has been extended from 18 to 36 months following the baseline investigation.

Most studies of racial disproportionality focus on children who have been placed in foster care. This analysis, based on NSCAW data, markedly expands our knowledge of disproportionality and disparate treatment by focusing on children who remain in their homes following an investigation for child maltreatment. The author reminds us that the overwhelming majority of children in the child welfare system (about 89%) remain in their homes and are not placed in foster care. There have been very few studies of racial disproportionality on this child welfare subpopulation, however. Thus, this study makes a unique contribution by examining racial disproportionality and disparities based on a national probability sample of children who remain in their homes following a maltreatment investigation.

Examination of the relationship between racial and ethnic identity and the success of CWS plans among the subsample of children remaining in-home at baseline introduces potential selection bias. That is, since African American children are disproportionately placed into out-of-home care (US DHHS, ACF, 2005b), the subsample of African American children who remain in-home following the initial investigation may not be representative of all African American children undergoing maltreatment investigations.

### **Racial and Ethnic Identity and Child Welfare Services**

The discussion about racial disparity and disproportionality in child welfare services can be informed by the empirical literature on racial and ethnic identity and the following:

- Child maltreatment
- CWS involvement
- Recurrent maltreatment

The National Incidence Studies of Abuse and Neglect (NIS), which collected information about reported and unreported maltreatment from community based professionals, provide estimates of maltreatment, regardless of whether an official maltreatment report was made to a child protective services agency. These studies have consistently shown no racial/ethnic differences in the rate of maltreatment among the general population (Sedlak & Schultz, 2005b). African American children, according to NIS, are not at greater risk of experiencing child maltreatment than white children; yet African American children are clearly overrepresented among the child welfare population, especially in foster care (Morton, 1999; Sedlak & Schultz, 2005b). Moreover, child maltreatment reports for African American and Hispanic children are more likely to be substantiated than reports for white children (Eckenrode, Powers, Doris, Munsch, & Bolger, 1988; Rolock & Testa, 2005). In summary, although African American children do not appear to be at greater risk of experiencing maltreatment, they are more likely to have higher levels of involvement with the child welfare system (i.e., substantiated reports and placement into out-of-home). This study expands the current knowledge base by examining racial/ethnic differences in the rates of substantiation and placement into out-of-home care following new allegations of maltreatment among children who remained in-home at the time of the index investigation.

Results from investigations examining the relationship between racial and ethnic identity and recurrent maltreatment have been mixed. In bivariate life table analysis, Fluke, Yuan, and Edwards (1999) found that African American children and white children had significantly different patterns of re-report—the patterns varied across the ten states included in their study, however (Illinois, Louisiana, Massachusetts, Missouri, North Carolina, New Jersey, Pennsylvania, Texas, Vermont and Washington). The time to re-report was shorter for white children than African American children in some states and longer for white children than African American children in other states. Fluke, Yuan, and Edwards did not, however, test to determine if the differences held when accounting for other case characteristics. A federal report including data from 23 states revealed that recurrent maltreatment, as measured by a second substantiated report within six months of a prior substantiated maltreatment report, was less likely among African American children (risk ratio = .78) compared to white children (US DHHS, ACF, 2005a). In a single state study, Lipien and Forthofer (2004) also found that, in Florida, African American children were less likely to experience recurrent maltreatment than white children. Wolock, Sherman, Feldman, and Metzger (2001) found no significant differences in the rates of recurrent maltreatment among children of different race/ethnicities, however.

Racial and ethnic identity alone does not appear to explain consistent findings of racial disproportionality in child welfare. In fact, the relationship between racial and ethnic identity and other factors may be a better explanation for this (Derezotes & Poertner, 2005). For example, the joint influences of race and poverty is more likely to contribute to the overrepresentation of African Americans in maltreatment reports than racial and ethnic identity alone. Maltreatment reports are more likely for low income families than for middle or upper income families. African American children are overrepresented among children whose parents happen to have lower incomes or who happen to be unemployed (Sedlak & Schultz, 2005b, p. 53). This is not to say that maltreatment is due to racial and ethnic identity and poverty; rather, that maltreatment reports are more likely. Additionally, maltreatment investigations are more likely for substance abusing African American caregivers who are substance abusers than for white caregivers who are substance abusers (Sedlak & Schultz, 2005a, p. 112). Therefore, poverty, employment status, and substance abuse were considered in addition to racial and ethnic identity in these analyses.

Because of the wealth of data on child, caregiver, family, and environmental characteristics afforded by NSCAW, current research is able to build on this earlier work by examining the relationship between racial and ethnic identity and child welfare services among a large, national probability sample, while also accounting for other correlates of racial and ethnic identity (e.g., poverty, caregiver employment status, and caregiver mental health and substance abuse). The large sample size of children allows for the analysis of multivariate models that simultaneously include several variables that may help to explain child maltreatment and its causes.

### **Self-Reports of Physical Abuse**

While official re-reports are the most common mechanism through which the frequency of recurrent maltreatment is measured, they do not capture the entirety of children's maltreatment experiences. Evidence suggests that not all maltreatment is brought to the attention of child welfare agencies. Findings from the third NIS indicate that only 28 percent of children with identified abuse had an official maltreatment investigation (Sedlak & Broadhurst, 1996). Researchers in the Carolinas found that relying on maternal reports of physical abuse resulted in an incidence rate of physical abuse that was 40 times greater than the rate of official reports for physical abuse (Theodore et al., 2005, p. 335). When comparing official re-reports to verified instances that did not result in abuse "charges," Herrenkohl and colleagues (1979) found that relying only on official reports resulted in a large underestimation of recurrent maltreatment: 25 percent had official re-reports, while 67 percent had verified incidents.

Culturally normative parenting practices vary across race/ethnicities. African American parents are more likely to use physical discipline than European American parents (Deater-Deckard, Dodge, Bates & Pettit, 1996; Lansford, Deater-Deckard, Dodge, Bates, & Pettit, 2004; Lau, Litrownik, Newton, Black & Everson, 2006). Furthermore, African American caregivers self-report using physical discipline with their children, as measured by the severe violence subscale of the Conflict Tactics Scale, Parent to Child version, at higher rates than white caregivers (Straus & Gelles, 1999; Straus, Hamby, Finkelhor, Moore, & Runyan, 1998). This study explores the relationship between culture and disciplinary practices in the child welfare population.

### **Overarching Aims and Research Questions**

This study examines the experiences of families of diverse racial or ethnic heritage in the child welfare system following a maltreatment investigation. This study is built on three aims. The first aim of this study is to examine variation (based on racial and ethnic identity) in the rates of unsuccessful CWS plans and the response of the system (i.e., disposition and outcome of the investigation) following subsequent reinvolvement with the child welfare system.

Specifically, this study answers the following research questions:

1. Are there differences in the reported cases investigated for child maltreatment based on racial and ethnic identity as well as rates of substantiation leading to study inclusion of children who remained in-home at baseline?
2. Are there racial and ethnic differences in the proportion of children in the child welfare population who remained in-home at baseline and who experienced an unsuccessful CWS plan between baseline and 36 months (i.e., had an official maltreatment re-report or became reinvolved with the child welfare system through a subsequent out-of-home placement)?

3. Are African American and Hispanic children overrepresented in the proportion of children with an unsuccessful CWS plan among children who remained in-home at baseline?
4. What is the relationship between racial and ethnic identity, substantiation of the baseline report, and success of the CWS plan among children who remained in-home at baseline?
5. What is the association between racial and ethnic identity and success of the CWS plan by 36 months when accounting for other case characteristics among children who remained in-home at baseline?
6. Are there racially or ethnically based differences in the disposition and the outcome of investigation of the first maltreatment re-report among children who remained in-home at baseline?

The second aim of this study is to examine variations in subsequent out-of-home placements for children of different races or ethnicities who remained in-home following the baseline investigation. Specifically, this study answers the following research questions:

1. Are there racial/ethnic differences in the proportion of children who remained in-home following the baseline investigation, but were later placed into out-of-home care?
2. What is the association between racial and ethnic identity and placement into out-of-home care at 36 months for children who remained in-home at baseline when accounting for other case characteristics?

The third aim of this study is to examine racial/ethnic differences in parenting behaviors following a maltreatment investigation, and to determine the relationship between racial and ethnic identity and the reporting of harmful parenting behaviors. The specific research questions that were answered are:

1. Among caregivers of children who remained in-home at baseline, are there racial and ethnic differences in the proportion of caregivers who self-reported maltreatment (i.e., severe violence and neglect) at baseline? At 36 months? Do racial and ethnic differences in parenting behaviors remain after controlling for other case characteristics?
2. Among children who remained in-home at baseline and whose parents self-reported maltreatment, are there racial/ethnic differences in the rates of unsuccessful CWS plans?

# Methods

## Study Design

NSCAW is a longitudinal national probability study of children entering the child welfare system. It draws on information from child welfare workers, caregivers, children, and teachers. The NSCAW sample included 5,504 children, age birth to 15, undergoing child maltreatment investigations between October, 1999 and December, 2000. NSCAW involved a stratified two-stage sample, with county child welfare agencies as the primary sampling units (PSUs). The secondary sampling units were children (and their families) chosen from a list of completed investigations at the sampled agencies. For families with multiple children, a single child was selected for study inclusion; therefore, there were an equal number of children and families represented in this study. The random sample of children within each agency was drawn from cases in which there was a complete investigation for child maltreatment. Inclusion was not limited to families substantiated for maltreatment or who received child welfare services following the index report. The sample also included families who were not substantiated or received no ongoing child welfare support.

The sample was selected from 92 PSUs located in 36 states. In most jurisdictions the geographic region associated with a PSU was a county. In some instances, however, the agency may have had jurisdiction over multiple counties or a portion of a single county (see NSCAW Research Group, 2002 for additional details). Data were collected at baseline (initial study interview) and at 12, 18, and 36 months following the baseline interviews.

## Sample

The analysis focuses on children and families of African American, white, and Hispanic/Latino heritage. (The report refers to the latter group as Hispanic.) An “other” category was also included in the survey. The racial/ethnic composition of the entire NSCAW sample is shown in Table 1.

A derived variable combined two separate questions that inquired about race and ethnicity. First, respondent’s were asked about the child’s racial identify (American Indian/Alaskan Native, Asian/Native Hawaiian/other Pacific Islander, black/African American, white, and other. Secondly, they were asked about ethnicity. Those classified as Hispanic based on the ethnicity variable (“Is the child of Hispanic origin? yes/no”) were assigned to the Hispanic category on the combined race/ethnicity variable. Due to the small sample size, children and families classified as American Indian/Alaskan native, Asian/Native Hawaiian/other Pacific Islander, and other were assigned to the non-Hispanic other category.

Table 1. Racial and Ethnic Identity of All Children in the NSCAW Study		
Characteristic	Sample Counts and Percentage	
	Unweighted N	Unweighted Percent
Race/ethnicity		
African American/Non-Hispanic	1767	32.1
White/Non-Hispanic	2364	43.0
Hispanic	956	17.4
Non-Hispanic Other	400	7.3
Unknown/Not Ascertained	17	0.3

Oversampling of infants was done to ensure there would be enough cases going through to permanency planning. In addition, oversampling was done for sexual abuse cases (to ensure that there would be adequate statistical power to analyze this kind of abuse alone) and cases receiving ongoing services after investigation (to ensure adequate power to understand the process of services) (Dowd et al., 2002).

When compared to the general population, African American children are overrepresented among children placed into out-of-home care following the initial maltreatment investigation. To place the results of the current study in context, the initial placement setting of all children in NSCAW are presented here. Over one-third (34.6 percent) of children placed into out-of-home care are African American, while 44.8 percent are white.

Table 2. Racial and Ethnic Identity and Initial Setting of All Children in the NSCAW Study								
	Setting							
	Total	In-Home			Out-of-Home			
		No CWS	CWS	TOTAL In-Home	Foster Care	Kinship Foster Care	Group Care	TOTAL Out-of-Home
Race/ethnicity	Percent (SE)							
African American/ Non-Hispanic	28.1 (2.5)	26.0 (2.6)	30.9 (3.1)	27.3 (2.6)	38.4 (5.6)	33.7 (4.3)	18.0 (5.9)	34.6 (3.8)
White/Non-Hispanic	46.9 (3.7)	47.9 (4.1)	45.4 (3.8)	47.2 (3.7)	38.9 (6.9)	47.7 (5.1)	61.9 (9.5)	44.8 (4.1)
Hispanic	18.0 (2.9)	19.3 (3.4)	16.6 (3.1)	18.6 (3.1)	14.9 (4.5)	13.1 (3.2)	12.0 (4.5)	14.0 (2.8)
Non-Hispanic Other	6.9 (0.8)	6.8 (1.0)	7.2 (1.3)	6.9 (0.8)	7.8 (2.2)	5.6 (1.8)	8.1 (3.9)	6.7 (1.4)
TOTAL	100.0	64.7 (1.6)	24.0 (1.5)	88.6 (1.2)	4.4 (0.6)	5.1 (0.6)	1.0 (0.2)	11.4 (1.2)

Source: US DHHS, ACF (2005b)

Note: Baseline weights were used in these analyses. All other weighted analyses in this report use the Wave 4 weights.

The sample for this research consists of children who remained in-home following the baseline maltreatment investigation (unweighted  $n = 3900$ ). Nearly half of the children in this study were white (48.3%,  $SE = 3.5$ ), 27.2% ( $SE = 2.9$ ) were African American, 18.0% ( $SE = 2.3$ ) were Hispanic and 6.5% ( $SE = 0.9$ ). (Wave 4 weights were used in these analyses.)

The sample size for each specific analysis may vary, however, due to substantive or methodological reasons (e.g. subpopulation under examination or whether there are missing data on variables to be included in the analysis).

## Measures

*Re-report.* In our study, re-report was defined as new maltreatment allegations reported to a child welfare agency between the index investigation (i.e., the investigation that led to inclusion in the NSCAW study) and the 36-month follow-up, regardless of the case disposition following the subsequent investigation. Information about re-reports was obtained from the child welfare worker at 12, 18, and 36 months, but only if the case was currently open or had been opened at some point between interviews.<sup>1</sup> The worker was asked whether there had been any reports of abuse or neglect involving the child since the index investigation. Subsequently, the worker indicated whether the investigation of the re-report was completed. Families were only considered to have a re-report if the investigation had been completed. If the information on re-report was missing because the case did not meet requirements for conducting an interview (i.e., no new involvement with child welfare services), the re-report variable was coded as “no re-report.” Reports which came only one day after the index report were considered to be about the same incident of maltreatment and were not counted as a re-report. After each affirmative response about investigated re-reports, workers were then asked about additional re-reports.

*Substantiation.* Once it was ascertained that a re-report occurred, child welfare workers were asked to identify the case determination from the following categories: substantiated, indicated, neither substantiated nor indicated, high risk, medium risk, and low risk. Substantiation was the disposition when the allegation of maltreatment was supported by state law or state policy. Indication was the determination when there was reason to suspect maltreatment; however, it could not be substantiated under state law (U.S. DHHS, ACF, 2005a). Indicated cases do not meet the level of substantiation; therefore, they were coded unsubstantiated. In addition, a few agencies in NSCAW opt for a completely different coding system and instead use high, medium, or low risk for their case determination following the investigation. These codes were included in the current analyses by recoding high risk to substantiated and medium and low risk to unsubstantiated. It is the belief of the author that this results in a conservative count of substantiated re-reports.

*Services following re-reports.* For each new report, the child welfare worker was asked about services provided following the re-report. Possible responses were:

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<sup>1</sup> Due to an NSCAW study design issue related to how caseworker follow-up interviews were triggered, rates of re-report may be underestimated. In some instances there may have been a re-report that was not captured in a follow-up interview.

1. Child welfare agency involvement with the child's family ended (i.e., case closed to services)
2. Child left in-home and case opened to child welfare services
3. Child placed into out-of-home care

*Unsuccessful CWS plan.* A re-report was only one indicator of increased risk that resulted in a failed CWS plan. For reasons not discernable in the data, some children were placed into out-of-home care without an "official" maltreatment report. Therefore, an official maltreatment re-report or subsequent placement into out-of-home care are used here to indicate an unsuccessful CWS plan.

*Caregiver self-report of severe violence.* The Conflict Tactics Scale--Parent to Child version (CTS--PC) was used to assess caregiver report of severe violence at baseline, 18, and 36 months. Permanent caregivers of children remaining in-home following the baseline investigation reported their use of violent disciplinary tactics. This self-report measure was the severe violence subscale of the CTS--PC (Straus, Hamby, Finkelhor, Moore, & Runyan, 1998). The items on this subscale are:

1. Caregiver hit child with fist or kicked child
2. Caregiver grabbed child around neck and choked child
3. Caregiver beat child up
4. Caregiver burned or scalded child
5. Caregiver hit child on some other part of the body besides the bottom with a hard object
6. Caregiver threw or knocked down child
7. Caregiver threatened child with knife or gun

Each of these acts generally constitutes physical abuse. Because of the serious and potentially fatal consequences resulting from when an infant is shaken, for children age 0–2, the item "child was shaken" was included as severe violence.

*Caregiver self-report of neglect.* The study used the CTS--PC to measure caregiver self-reports of neglect at baseline, 18, and 36 months. The items on this scale are:

1. Caregiver had to leave child home alone, even when caregiver thought some adult should be with him/her
2. Caregiver was not able to make sure child got the food he/she needed
3. Caregiver was so drunk or high that caregiver was unable to care for child
4. Caregiver was not able to make sure child got to a doctor or hospital when he/she needed it
5. Caregiver was so caught up with problems that caregiver was not able to show or tell child that caregiver loved him/her

*Unreported maltreatment.* The study used severe violence identified on the CTS--PC to derive a variable that indicated whether or not maltreatment remained unreported. When the caregiver self-identified the use of severely violent parenting behaviors toward their child over the 36-month period, we coded unreported maltreatment as “yes” if there were no re-reports or placements into out-of-home care, and as “no” if there was at least one re-report or placement. A third category of “unknown” was also included. Although we focused exclusively on the self-report of severe violence, we did not limit unreported re-reports to physical abuse. We based this decision on the findings of others indicating that the maltreatment type of the index report is often different than the maltreatment type identified in re-reports. In fact, neglect is the more typical maltreatment type for re-reports even when physical abuse was identified at baseline (Jonson-Reid, Drake, Chung, & Way, 2003; Levy et al., 1995).

*Poverty.* We determined financial status at baseline using the federally defined poverty level. We calculated this measure based on procedures followed by the U.S. Census Bureau, which include both the family’s income level and the number of adults and children in the household (Dalaker, 2001). The poverty measure was used as a dichotomous variable in the analyses (at/below poverty threshold or above poverty threshold). The poverty level of the permanent home at baseline was used to construct this indicator.

*Other case characteristics.* The child welfare risk assessment inquired about risks in the family at the time of the maltreatment investigation (i.e., baseline) using a checklist of potential risks. Alcohol abuse, drug abuse, and mental health problems were indicated based on the child welfare worker’s assessment of their presence at baseline. The workers were asked if there was active alcohol abuse and/or active drug abuse, or serious mental health problems evident in the primary caregiver at the time of the investigation.

### **Data Analysis Approach**

All analyses are weighted. (Only the reported n’s are unweighted.) To examine relationships that were descriptive in nature, contingency tables with chi-square tests were used. Multivariate analysis, in the form of logistic regression analysis was used to model factors associated with multiple aspects of child safety (i.e., unsuccessful CWS plan, subsequent placement into out-of-home care, caregiver report of severely violent and neglectful parenting).

# Results

A comparison of the racial/ethnic distribution of this sample with the child population in the United States indicates that African American children were overrepresented among children investigated for child maltreatment among children who remained in-home at baseline. 2004 Kids Count data indicate that 15 percent of the child population are African American, 27 percent of children in NSCAW who remained at home were African American. (Since the children were in NSCAW, it follows that they had a baseline maltreatment investigation.) White children were underrepresented. Over half (59%) of the child population is white, but only 48% of children remaining in-home following the maltreatment report were white.

## Study Aim 1: Racial And Ethnic Identity And Success Of CWS Plan

### Racial and Ethnic Identity and Substantiation of Baseline Report Among Children Who Remained In-Home at Baseline

Prior to examining new allegations of maltreatment or subsequent placement into out-of-home care, we examined the relationship between racial and ethnic identity and case disposition (substantiated vs. unsubstantiated) following the baseline investigation (the investigation that lead to inclusion in the NSCAW).

*Are there racial/ethnic differences in baseline report and substantiation of the baseline report for **children who remained in-home at baseline**?*

Overall, one quarter (25.1%) of baseline reports were substantiated. Significant differences by racial and ethnic identity were not found (Table 3a).

Table 3a. Racial/Ethnic Disparities: Association between Racial and Ethnic Identity and Substantiation of Baseline Report (Row Percentage) for Children Who Remained In-Home at Baseline			
Race/ethnicity	Total % (SE)	Substantiation Status	
		Substantiated SE (%)	Unsubstantiated SE (%)
African American (non-Hispanic)	100.0	23.3 (2.7)	76.7 (2.7)
White (non-Hispanic)	100.0	27.7 (2.9)	73.3 (2.9)
Hispanic	100.0	26.0 (3.5)	74.0 (3.5)
Other	100.0	18.3 (4.1)	81.7 (4.1)
<b>Total</b>	100.0	25.1 (1.9)	74.9 (1.9)

We found no racial disparities in this comparison. Moreover, when compared to the distribution of children remaining in-home following the baseline maltreatment investigation, racial/ethnic disprop-

portionalities were not apparent (Table 3b). The proportion of children with substantiated maltreatment reports for each racial and ethnic identity was similar to the overall racial/ethnic distribution of children remaining in-home at baseline. When compared to the general population, however, African Americans were overrepresented; while only 15 percent of the child population is African American, 25 percent of children whose baseline report was substantiated were African American. In contrast, white children were underrepresented in baseline maltreatment reports—48 percent with a maltreatment investigation compared to 59 percent of the child population. Hispanic children find themselves in the child welfare system at a rate similar to their representation in the overall child population.

**Table 3b. Racial/Ethnic Disproportion: Association Between Racial and Ethnic Identity and Substantiation of Baseline Report (Row Percentage) for Children Who Remained In-Home at Baseline**

Race/ethnicity	Substantiation Status		In-home NSCAW Sample Distribution	Kid's Count: % of the Population <sup>a</sup>
	Substantiated % (SE)	Unsubstantiated % (SE)		
African American (non-Hispanic)	24.9 (4.3)	27.5 (3.0)	27.2	15.0
White (non-Hispanic)	51.4 (4.7)	47.4 (3.6)	48.3	59.0
Hispanic	18.9 (3.8)	18.0 (2.3)	18.0	19.0
Other	4.8 (0.8)	7.1 (1.2)	6.5	7.0
Total	100.0	100.0	100.0	100.0

**Racial and Ethnic Identity and Unsuccessful CWS Plans Among Children Who Remained In-Home at Baseline**

*Are there racial/ethnic differences in the proportion of children in the child welfare population who remained in-home at baseline and who experienced an unsuccessful CWS plan (i.e., had an official maltreatment re-report or became re-involved with the child welfare system through a subsequent out-of-home placement) between baseline and 36 months?*

Overall, 27.8 percent (SE = 1.8) of children remaining in-home at baseline had a re-report by 36 months. As noted above, a small proportion of children whose initial placement was in-home had an out-of-home placement without an official re-report. The reason for the placement is unknown; these children are more likely, however, to have a caregiver with mental illness or a substance abuse problem in order to have had a substantiated baseline report (but only 60% had a substantiated baseline report). These children are also more likely to have received child welfare services following the baseline report ( $p < .10$ ; but only 53% received services), and to have had a report prior to the one leading to NSCAW study inclusion. There are no significant differences by race; however, African American children are overrepresented (36%), while white and Hispanic children are underrepresented.

Using these data, we determined the proportion of children with an unsuccessful CWS plan (as determined by an official re-report or subsequent placement into out-of-home care). When considering the broader concept of unsuccessful CWS plan, 33.5 percent (SE = 2.0) had an unsuccessful CWS plan by 36 months. This means that over one-third of children who remained in-home at baseline had a re-report or subsequent placement into out-of-home care.

Re-reports were more likely for Hispanic children (36%) than for African American children (27%) or white children (25%) among all children who remained in-home at baseline (Table 4a). Rates of unsuccessful CWS plans did not vary significantly for children of different race/ethnicities.

Race/ethnicity	Re-report <sup>a</sup> % (SE)	Unsuccessful CWS plan <sup>b</sup> % (SE)
African American (non-Hispanic)	27.0 (4.2)	32.9 (3.9)
White (non-Hispanic)	24.6 (1.8)	30.8 (2.0)
Hispanic	35.5 (3.8)	39.6 (4.4)
Other	33.3 (7.5)	38.8 (7.8)
Total	27.8 (1.9)	33.5 (2.0)

<sup>a</sup> Unweighted n = 3894 (6 missing on race/ethnicity);  $\chi^2 = 7.1, p < .10$

<sup>b</sup> Unweighted n = 3894 (6 missing on race/ethnicity), non-significant

*Are African American and Hispanic children overrepresented in the proportion of children with an unsuccessful CWS plan among children who remained in-home at baseline?*

Considered from a different perspective, of all children with a re-report, 26.5 percent were African American, 42.7 percent were white, 23.0 percent were Hispanic, and 7.8 percent were of other race/ethnicities ( $p < .10$ ) (Table 4b). Children of color were clearly overrepresented when compared to the general population, while white children were underrepresented among children who remained in-home at baseline. As shown in the table, however, race/ethnic disproportion was not evident when compared to the in-home sample distribution. This suggests that the rate of race/ethnic disproportion evident at the time of the baseline investigation remained the same for subsequent involvement.

Of all children with an unsuccessful CWS plan, 26.8 percent were African American, 44.4 percent were white, 21.2 percent were Hispanic, and 7.5 percent are of other race/ethnicities. These proportions are very similar to those with an “official” re-report.

**Table 4b. Racial Disproportion: Association Between Re-report/Unsuccessful Child Welfare Services by 36 Months and Racial and Ethnic Identity (Column Percentage) for Children Who Remained In-Home at Baseline**

Race/ethnicity	Re-report <sup>a</sup> % SE	Unsuccessful CWS plan <sup>b</sup> % (SE)	Kid's Count	In-home Sample Distribution
African American (non-Hispanic)	26.5 (4.0)	26.8 (3.6)	15.0	27.2
White (non-Hispanic)	42.7 (4.4)	44.4 (4.0)	59.0	48.3
Hispanic	23.0 (3.2)	21.2 (2.8)	19.0	18.0
Other	7.8 (2.0)	7.5 (1.7)	7.0	6.5
<b>Total</b>	<b>100.0</b>	<b>99.9<sup>c</sup></b>	<b>100.0</b>	<b>100.0</b>

<sup>a</sup> Unweighted n = 3894 (6 missing on race/ethnicity);  $\chi^2 = 7.1, p < .10$

<sup>b</sup> Unweighted n = 3894, non-significant

<sup>c</sup> Total does not equal 100.0 due to rounding.

<sup>d</sup> Based on children 0–18 years old, 2004; In Kids Count, 2% are of mixed race/ethnicities. These have been included as Other; however, in NSCAW these children may be included in the African American or Hispanic category. Source: [www.aecf.org/kidscount/](http://www.aecf.org/kidscount/)

*What is the relationship between racial and ethnic identity, substantiation of the baseline report and success of the CWS plan among children who remained in-home at baseline?*

The relationship between substantiation of the baseline report and re-report did not vary by racial and ethnic identity (Table 5). Therefore, for each race, the rates of re-report were similar for children with substantiated and unsubstantiated baseline reports.

Racial and ethnic identity, however, was a factor in whether a child with a substantiated baseline report was more likely to experience an unsuccessful CWS plan between baseline and 36 months. Among white children, a much higher proportion of children with a substantiated baseline report had an unsuccessful service plan (41%) compared to children with an unsubstantiated baseline report (27%). This same relationship held true for children of other racial/ethnic backgrounds; but substantiation of the baseline report was not associated with the success or failure of the CWS plan for African American and Hispanic children.

Table 5. Re-report/Unsuccessful Child Welfare Services for Children Who Remained In-Home at Baseline (BL) With or Without a Substantiated Baseline Report				
Race/ethnicity	Re-report % (SE)		Unsuccessful CWS plan % (SE)	
	Sub. BL report	Unsub. BL Report	Sub. BL report	Unsub. BL Report
African American (non-Hispanic)	21.4 (4.1)	29.9 (5.3)	33.7 (4.1)	33.9 (5.1)
White (non-Hispanic)	24.6 (2.5)	24.6 (2.3)	41.1 (4.2)	27.4 (2.3) <sup>a</sup>
Hispanic	39.4 (6.2)	33.1 (5.3)	44.4 (6.8)	37.9 (6.1)
Other	47.8 (7.4)	30.9 (9.1)	66.0 (6.6)	33.3 (9.8) <sup>b</sup>
Total	27.7 (1.9)	28.0 (2.5)	41.1 (2.5)	31.3 (2.7) <sup>c</sup>

Note: Sub. = Substantiated, Unsub. = Unsubstantiated

<sup>a</sup> ( $\chi^2 = 7.4, p < .01$ )

<sup>b</sup> ( $\chi^2 = 6.9, p < .05$ )

<sup>c</sup> ( $\chi^2 = 6.4, p < .05$ )

In order to include the children (approximately 5%) who remained in-home at baseline, but who later went into out-of-home care without having a re-report, the multivariate analyses used the “success of the CWS plan” variable. Prior to estimating a logistic regression model of success of the CWS plan, we took two preliminary steps.

First, the relationships between racial and ethnic identity and case characteristics that may be associated with the success or failure of the CWS plan were analyzed (see Table 6). Case characteristics included factors with empirical evidence suggesting a possible relationship with CWS plan success. This table presents the proportions of each race and ethnicity with the stated case characteristic.

Case characteristics that were significantly associated with racial and ethnic identity are:

- *Caregiver mental health problem.* Fewer caregivers of Hispanic children had a child welfare system—identified mental health problem than any other race or ethnicity—7 percent vs. 16 to 18 percent.
- *Caregiver substance abuse.* Fewer caregivers of Hispanic children had a substance abuse problem—5 percent vs. 12 to 14 percent.
- *Poverty.* Fewer white children were living below the federally defined poverty level than any other race or ethnicity.
- *Caregiver(s) employment.* Fewer caregivers of African American children (73%) and Hispanic children (72%) were employed than caregivers of white children (81%).
- *TANF.* Fewer families of white children received TANF (8.2%) than families of African American children (23%) and Hispanic children (22%).
- *Urbanicity.* Fewer white children lived in urban areas (63%) than African American (84%) and Hispanic (96%) children.

**Table 6. The Association Between Racial and Ethnic Identity and Case Characteristics to be Included in the Multivariate Analyses for Children Who Remained In-Home at Baseline**

Case Characteristics	Total % (SE)	African American % (SE)	White % (SE)	Hispanic % (SE)	Other% (SE)	p-value $\chi^2$ test
<b>Child In-home Service Setting</b>						<b>NS</b>
No Services	72.3 (1.8)	69.0 (3.3)	72.9 (2.5)	75.6 (3.2)	72.2 (5.5)	
With Services	27.7 (1.8)	31.0 (3.3)	27.1 (2.5)	24.4 (3.2)	27.8 (5.5)	
<b>Child Age</b>						<b>&lt; .10</b>
0 – 2	18.3 (1.1)	18.2 (1.8)	18.6 (1.7)	17.9 (2.7)	18.4 (5.0)	
3 – 5	20.6 (1.2)	21.7 (2.5)	20.4 (1.7)	23.8 (5.3)	8.9 (2.6)	
6 – 10	36.7 (1.5)	34.0 (2.7)	38.2 (1.9)	36.7 (4.9)	51.3 (6.7)	
11 and older	24.4 (1.4)	26.1 (2.9)	24.9 (2.1)	21.6 (2.9)	21.4 (4.0)	
<b>Child Gender</b>						<b>NS</b>
Male	49.9 (2.1)	51.1 (3.0)	50.3 (3.1)	43.8 (5.2)	58.3 (6.7)	
Female	50.1 (2.1)	48.9 (3.1)	49.7 (3.1)	56.2 (5.2)	41.7 (6.7)	
<b>Child Maltreatment Type</b>						<b>&lt; .10</b>
Physical Abuse	28.0 (1.6)	23.1 (2.8)	28.7 (2.2)	33.0 (3.8)	28.9 (5.6)	
Sexual Abuse	12.0 (1.6)	8.0 (1.9)	13.0 (2.3)	13.2 (3.4)	17.8 (8.1)	
Neglect: Failure to Provide	20.1 (1.6)	23.7 (2.9)	21.0 (2.3)	12.6 (2.4)	20.9 (7.0)	
Neglect: Failure to Supervise	29.7 (2.0)	36.3 (2.7)	27.2 (2.6)	28.4 (5.6)	24.8 (5.1)	
Other	10.2 (1.4)	9.0 (2.4)	10.2 (2.1)	12.8 (2.8)	7.6 (2.8)	
Maltreatment reports prior to baseline <sup>a</sup>	51.3 (2.0)	50.4 (3.0)	52.4 (2.4)	49.0 (4.3)	53.2 (6.7)	<b>NS</b>
Substantiation status of BL report	25.1 (1.9)	23.3 (2.7)	26.7 (2.9)	26.0 (3.5)	18.3 (4.1)	<b>NS</b>
<b>Child Behavior Checklist</b>						<b>NS</b>
Normal	57.6 (2.3)	56.6 (3.5)	55.6 (3.2)	65.5 (4.8)	54.6 (8.9)	
Borderline	9.2 (1.3)	10.2 (2.1)	10.6 (2.2)	5.3 (2.2)	5.2 (2.3)	
Clinical	33.3 (2.1)	33.2 (3.4)	33.9 (2.8)	29.1 (3.8)	40.1 (8.8)	
Domestic violence (CWW identified)	13.3 (1.1)	12.0 (1.9)	14.8 (2.0)	12.0 (2.2)	10.2 (3.1)	<b>NS</b>
Any domestic violence on CTS (caregiver report)	31.1 (1.6)	29.5 (2.9)	32.7 (2.1)	27.7 (3.2)	35.8 (9.0)	<b>NS</b>
Major depression (reported on CIDI)	23.3 (1.5)	21.6 (2.7)	24.9 (1.9)	19.9 (3.9)	27.9 (6.3)	<b>NS</b>
Mental health problem for primary caregiver (identified by CWW)	14.0 (1.5)	16.6 (2.4)	14.5 (2.2)	7.3 (1.7)	18.5 (4.2)	<b>&lt; .05</b>
Substance abuse by primary caregiver	12.7 (1.2)	12.4 (1.9)	15.4 (1.9)	5.6 (1.4)	14.4 (3.8)	<b>&lt; .001</b>
<b>Poverty</b>						<b>&lt; .001</b>
At/below poverty line	51.0 (1.8)	62.9 (2.9)	40.9 (2.3)	58.3 (3.4)	57.1 (8.1)	
Above poverty line	49.0 (1.8)	37.1 (2.9)	59.1 (2.3)	41.7 (3.4)	42.9 (8.1)	
Employment of parent(s)	76.0 (1.4)	72.7 (2.7)	80.8 (1.4)	71.9 (3.6)	65.9 (6.7)	<b>&lt; .05</b>
Receipt of TANF	15.4 (12.5)	23.3 (3.2)	8.2 (1.5)	22.3 (4.3)	16.3 (6.5)	<b>&lt; .001</b>
<b>Urbanicity</b>						
Urban	75.9 (5.5)	84.1 (6.3)	63.0 (7.7)	96.0 (2.1)	81.0 (5.7)	<b>&lt; .01</b>
Non-urban	24.1 (5.5)	15.9 (6.3)	37.0 (7.7)	4.0 (2.1)	19.0 (5.7)	
<b>County Poverty Level</b>						
Non-poor	44.4 (6.1)	36.4 (7.6)	49.1 (6.4)	41.8 (11.0)	50.9 (9.6)	<b>NS</b>
Poor	55.6 (6.1)	63.6 (7.6)	50.9 (6.4)	58.2 (11.0)	49.1 (9.6)	

<sup>a</sup>For dichotomous variables only the affirmative responses are presented.

\*p < .05, \*\*p < .01, \*\*\*p < .001

For our second step, we considered the relationships between success of the CWS plan and case characteristics that may be associated with an unsuccessful CWS plan. Although this does not directly inform the relationship between racial and ethnic identity and success of the CWS plan, failure to consider case characteristics that are important contributors to unsuccessful service plans may result in inaccurate estimates. Therefore, we conducted preliminary analysis to determine which variables might be important to control for in the multivariate analyses.

Among children remaining in-home following the baseline investigation, the proportions of children with the stated case characteristic for those who had successful and unsuccessful CWS plans are presented in Table 7.

Case characteristics that were significantly associated with an unsuccessful CWS plan were:

- *Receipt of child welfare services following baseline investigation.* An unsuccessful CWS plan was more likely for children whose families were open to CWS at baseline (40%) than for children whose families were not open to services (27%).
- *Maltreatment reports prior to baseline.* An unsuccessful CWS plan was much more likely when the child had a history of reports prior to the investigated report that lead to study inclusion (45%) than for children without this history (22%).
- *Substantiation of baseline report.* An unsuccessful CWS plan was more likely for children with a substantiated baseline report (41%) than for children with an unsubstantiated baseline report (31%).
- *Mental health problem of caregiver.* An unsuccessful CWS plan was more likely for children whose caregiver had a mental health problem (47%) than for children whose caregiver did not have a mental health problem (32%).
- *Caregiver substance abuse.* An unsuccessful CWS plan was more likely when the system identified a caregiver substance abuse problem (50%) than when no substance abuse problem was identified (32%).
- *Poverty.* An unsuccessful CWS plan was more likely for children living in poverty (37%) than for children living above the federal poverty threshold (30%).

**Table 7. Associations Between Success of CWS Plan by 36 months and Case Characteristics to Be Considered for the Multivariate Model**

Case Characteristics	CWS plan		p-value $\chi$ test
	Unsuccessful % (SE)	Successful % (SE)	
<b>Child In-home Service Setting</b>			<b>&lt; .01</b>
No Services	27.2 (2.3)	72.8 (2.3)	
With Services	40.0 (3.0)	60.0 (3.0)	
<b>Child Age</b>			<b>NS</b>
0 – 2	31.6 (2.9)	68.4 (2.)	
3 – 5	40.4 (3.8)	59.6 (3.8)	
6 – 10	32.0 (3.3)	68.0 (3.3)	
11 and older	31.1 (3.5)	68.9 (3.5)	
<b>Child Gender</b>			<b>NS</b>
Male	34.8 (2.9)	65.2 (2.9)	
Female	32.1 (2.1)	67.9 (2.1)	
<b>Child Maltreatment Type</b>			<b>NS</b>
Physical Abuse	30.2 (2.8)	69.8 (2.8)	
Sexual Abuse	29.8 (4.5)	70.2 (4.5)	
Neglect: Failure to Provide	37.0 (4.1)	63.0 (4.1)	
Neglect: Failure to Supervise	35.8 (3.6)	64.2 (3.6)	
Other	37.0 (5.7)	63.0 (5.7)	
<b>Maltreatment reports prior to baseline</b>			<b>&lt; .001</b>
Yes	44.6 (2.7)	55.4 (2.7)	
No	22.2 (2.4)	77.8 (2.4)	
<b>Substantiation of BL report</b>			<b>&lt; .05</b>
Yes	41.1 (2.5)	58.9 (2.5)	
No	31.3 (2.7)	68.7 (2.7)	
<b>Domestic violence (CWW identified)</b>			<b>NS</b>
Yes	33.4 (4.2)	67.6 (4.2)	
No	33.2 (2.2)	66.9 (2.2)	
<b>Mental health problem for primary caregiver (identified by CWW)</b>			<b>&lt; .01</b>
Yes	47.1 (4.2)	52.9 (4.2)	
No	31.9 (2.2)	68.2 (2.2)	
<b>Substance abuse by primary caregiver</b>			<b>&lt; .001</b>
Yes	49.8 (4.1)	50.2 (4.1)	
No	31.5 (2.3)	68.5 (2.3)	
<b>Poverty</b>			<b>&lt; .05</b>
At/below poverty line	36.7 (2.5)	63.3 (2.5)	
Above poverty line	29.7 (2.8)	70.3 (2.8)	
<b>TANF</b>			<b>&lt; .10</b>
Yes	40.8 (4.8)	59.2 (4.8)	
No	32.0 (2.0)	68.0 (2.0)	
<b>Urbanicity</b>			<b>NS</b>
Urban	34.8 (2.4)	65.2 (2.4)	
Non-urban	29.1 (2.9)	70.9 (2.9)	
<b>County Poverty Level</b>			<b>NS</b>
Non-poor	32.0 (3.1)	68.0 (3.1)	
Poor	34.6 (2.6)	65.4 (2.6)	

\*p < .05, \*\*p < .01, \*\*\*p < .001

## Predictors of an Unsuccessful CWS plan<sup>2</sup>

*What is the association between racial and ethnic identity and success of the CWS plan by 36 months when accounting for other case characteristics among children who remained in-home at baseline?*

When controlling for other case characteristics, racial and ethnic identity was not a significant predictor of an unsuccessful CWS plan (see Table 8, Step 1). An unsuccessful CWS plan was more likely, however, when the caregiver had a mental health problem (OR = 7.3) or the family lived in poverty (OR = 1.5). Moreover, an unsuccessful CWS plan was more likely in urban areas than in nonurban areas (OR = 0.6).

Because of their significant contribution to an unsuccessful CWS plan, when prior maltreatment, substantiation of baseline investigation, and receipt of child welfare services following the baseline investigation were added to the model, the earlier results changed somewhat (see Table 8, Step 2). The relationships between success of a CWS plan and caregiver's mental health, poverty and urbanicity of the community weakened (from significantly associated,  $p < .05$ , to being marginally significant,  $p < .10$ ). When families had a maltreatment report prior to baseline, they were more than twice as likely (OR = 2.4) to have an unsuccessful CWS plan compared to families with no reports prior to baseline.

We did not show the results of the model, which included the interaction terms (race/ethnicity and (a) caregiver's mental health, (b) substance abuse, (c) poverty and (d) employment status, and (e) receipt of TANF), because none of the interactions were significant. That is, we found no difference in the effects of substance abuse, poverty, employment, or receipt of TANF across racial/ethnic groups.

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2 Multivariate Model Building Strategy. Case characteristics to be included in the logistic regression analysis were selected based on the significance of their relationships with race/ethnicity (Table 6) or with the success of the CWS plan (Table 7). Although maltreatment reports prior to baseline, substantiation of the baseline investigation, and receipt of child welfare services following the baseline investigation were not significantly related to race/ethnicity, they were associated with the success of the CWS plan in the preliminary analyses and have previously been shown to be important predictors of recurrent maltreatment (e.g., English et al., 1999; Fluke, Yuan, & Edwards, 1999). To determine the contribution of other case characteristics, success of the CWS plan was first modeled excluding these three variables (i.e., maltreatment reports prior to baseline, substantiation of the baseline investigation, and receipt of child welfare services following the baseline investigation) from the analysis (step 1). The identical model with these three variables included was then analyzed (step 2). Finally, a model which examined the interaction effect for race/ethnicity and (a) caregiver's mental health, (b) substance abuse, (c) poverty and (d) employment status, and (e) receipt of TANF was run. These interactions were analyzed given their significant bivariate relationships with race/ethnicity.

**Table 8. Logistic Regression Modeling an Unsuccessful CWS plan Within 36 Months for Children Who Remained In-Home at Baseline**

Independent Variables	Step 1			Step 2		
	F	OR	CI	F	OR	CI
Model minus intercept (df)	3.5 (12)***	—	—	6.2 (15)***	—	—
Child Age in Years	0.0	1.0	0.9, 1.0	0.3	1.0	0.9, 1.0
Child gender	1.0	—	—	1.1	—	—
Male	—	1.2	0.8, 1.8	—	1.2	0.8, 1.7
Female	Reference Group			Reference Group		
Child Race/ethnicity	1.0	—	—	1.5	—	—
African American	—	0.9	0.6, 1.3	—	0.9	0.6, 1.3
White	Reference Group			Reference Group		
Hispanic	—	1.4	0.9, 2.2	—	1.5	0.9, 2.4
Other	—	—	—	—	1.3	0.5, 3.4
Domestic violence (CWW report) <sup>a</sup>	0.6	0.8	0.5, 1.3	0.8	0.8	0.5, 1.3
Substance abuse (CWW report)	3.4 <sup>^</sup>	1.5	1.0, 2.3	0.8	1.2	0.8, 1.9
Mental health problem (CWW report)	7.3**	1.8	1.2, 2.7	3.1 <sup>^</sup>	1.4	1.0, 2.1
Poverty rate	4.7*	—	—	3.2 <sup>^</sup>	—	—
At/below poverty level	—	1.5	1.0, 2.3	—	1.4	1.0, 2.0
Above poverty level	Reference Group			Reference Group		
Employment	0.1	0.9	0.6, 1.4	0.2	0.9	0.6, 1.4
TANF	0.1	1.1	0.6, 1.8	0.1	1.1	0.6, 1.8
Urbanicity	4.6*	—	—	3.4 <sup>^</sup>	—	—
Urban	Reference Group			Reference Group		
Non-urban	—	0.6	0.4, 0.9	—	0.7	0.5, 1.0
Maltreatment reports prior to baseline	N/A	—	—	18.2***	2.4	1.6, 3.7
Disposition of Baseline Investigation	N/A	—	—	0.2	—	—
Substantiated	—	—	—	—	1.1	0.7, 1.7
Unsubstantiated	—	—	—	Reference Group		
Child In-home Service Setting	N/A	—	—	3.2 <sup>^</sup>	—	—
No Services	—	—	—	Reference Group		
With Services	—	—	—	—	1.5	0.9, 2.4
Pseudo R <sup>2</sup>	.04			.08		

<sup>a</sup> The reference group is no for dichotomous variables.

<sup>^</sup>p < .10, \*p < .05, \*\*p < .01, \*\*\*p < .001

N = 2614

### Disposition and Outcome of the First Re-report

Next, we considered the disposition of the first re-report investigation. (Because data on disposition and outcome of the re-report were not available for children placed into out-of-home care without a re-report, we excluded those children from these analyses.)

*Are there racial/ethnic differences in the disposition and outcomes of investigations of the first maltreatment re-report among children who remained in their initial in-home placement?*

Of all children who had a re-report, 29.4 percent had that re-report substantiated (Table 9). We found no significant differences by racial and ethnic identity, indicating that the proportion of children whose re-report was substantiated was similar across races (e.g., 29.4 percent of African American children and 28.3 percent of white children had their first re-report substantiated).

Table 9. Disposition of the First Re-report Investigation		
Race/ethnicity	Substantiated	Unsubstantiated
African American (non-Hispanic)	29.4 (8.7)	70.6 (8.7)
White (non-Hispanic)	28.3 (4.8)	71.7 (4.8)
Hispanic	32.2 (6.4)	67.8 (6.4)
Other	25.0 (9.9)	75.0 (9.9)
Total	29.2 (3.5)	70.8 (3.5)

Note: Those children placed into out-of-home care without a new report were excluded from this analysis.

As shown in Table 10, the case was closed following more than half (59.7%) of the first re-reports. Although the frequency of out-of-home placement was less for Hispanic children (8.8%) and children of other race/ethnicities (8.4%) than for African American children (18.1%) and white children (14.6%), the relationship between racial and ethnic identity and case outcome was not significant.

Table 10. Association Between Racial and Ethnic Identity and Outcome of the First Re-report Investigation			
Race/ethnicity	Closed	In-home CWS	Out-of-home placement
African American (non-Hispanic)	54.1 (8.7)	27.8 (6.4)	18.1 (6.7)
White (non-Hispanic)	57.2 (5.8)	28.3 (4.2)	14.6 (3.2)
Hispanic	68.5 (8.1)	22.8 (7.0)	8.8 (4.5)
Other	65.2 (7.4)	26.4 (7.2)	8.4 (3.6)
Total	59.7 (4.1)	27.7 (2.9)	13.6 (2.3)

CWS=child welfare services

Note: Those children placed into out-of-home care without a new report were excluded from this analysis.

### **Summary of Racial and Ethnic Identity and Unsuccessful CWS Plan Among Children Who Remained In-Home at Baseline**

- Among children who remained in-home at baseline, African American children are overrepresented among children investigated for child maltreatment, having that maltreatment report substantiated, and experiencing an unsuccessful CWS plan.
- One-third of the children in the study experience an unsuccessful CWS plan over 36 months. The rates of unsuccessful CWS plans are similar for children of all race/ethnicities, however.
- A smaller proportion of white children among the child welfare population live below the poverty line than children of any other race or ethnicity.
- The rate of caregiver substance abuse and mental health problems is lower for Hispanics than for African Americans or whites.
- Among this national probability sample of children remaining in-home following a maltreatment investigation, racial and ethnic identity is not associated with the outcome of the re-report.
- Although determining how substantiation of the baseline report results in an unsuccessful CWS plan is beyond the scope of this study, these findings do suggest that a substantiated maltreatment report at baseline serves a different function for African American and Hispanic children than for white children. While substantiation increases the likelihood of an unsuccessful CWS plan for white children, rates of unsuccessful CWS plans for African American children were similar regardless of whether the baseline report was substantiated.
- Regardless of racial and ethnic identity, prior child welfare involvement is most strongly associated with an unsuccessful CWS plan (re-report or subsequent placement into out-of-home care).

## Study Aim 2: Racial And Ethnic Identity And Subsequent Out-of-home Placement

*Are there racial/ethnic differences in the relationship between substantiation and later placement into out-of-home care for children who remained in-home following the baseline maltreatment investigation?*

When we include all children, regardless of whether there was a re-report, 13.0 percent of children who remained in-home at baseline had a subsequent out-of-home placement (Table 11a). While the association between racial and ethnic identity and out-of-home placement for children who remained in home at baseline was not significant, another important association was found. For some races/ethnicities, substantiation of the baseline report was associated with a subsequent placement into out-of-home care for children who initially remained in the home. While placement, on an overall basis, was more likely for children with a substantiated baseline investigation (21.5%) than for children whose baseline investigation was unsubstantiated (10.1%), substantiation of the baseline report only had a significant relationship with placement into out-of-home care for white children and children classified in the “other” category who initially remained in-home. Substantiation status was not related to subsequent out-of-home placement for African American or Hispanic children who initially remained in-home.

Race/ethnicity	OOH % (SE)		
	Total	Substantiated BL report	Unsubstantiated BL Report
<b>African American (non-Hispanic)</b>	16.7 (2.8)	22.1 (3.8)	15.1 (3.3)
<b>White (non-Hispanic)<sup>a</sup></b>	12.1 (1.6)	23.6 (4.1)	7.9 (1.4)
<b>Hispanic</b>	10.3 (2.7)	12.4 (3.6)	9.6 (3.3)
<b>Other<sup>b</sup></b>	11.2 (2.4)	33.2 (7.5)	6.3 (1.8)
<b>Total<sup>c</sup></b>	13.0 (1.1)	21.5 (2.4)	10.1 (1.3)

<sup>a</sup> ( $\chi^2 = 12.6, p < .001$ )

<sup>b</sup> ( $\chi^2 = 12.2, p < .001$ )

<sup>c</sup> ( $\chi^2 = 19.4, p < .001$ )

*Are African American and Hispanic children overrepresented in the proportion of children who have subsequent placement into out-of-home care?*

Here, the study found racial/ethnic disproportions (Table 11b). Of children who started in-home and were placed into out-of-home care, 35.4 percent were African American, 43.9 percent were white, 15.0 percent were Hispanic, and 5.7 percent were classified as being of other races/ethnicities. When compared to the Kids Count numbers, African American children were overrepresented and white children were underrepresented. Furthermore, when compared to the distribution of children who remained in-home following the baseline maltreatment investigation, African American children were later disproportionately placed into out-of-home care—35.4 percent of African American children were placed into care compared to the in-home sample distribution of 27.2 percent.

**Table 11b. Racial/Ethnic Disproportionality: The Association Between Racial and Ethnic Identity and Out-of-Home Placement for Children Who Remained In-Home at Baseline (Column Percentage)**

Race/Ethnicity	Out-of-Home Placement <sup>a</sup> % (SE)	Kids Count: % of the Population <sup>b</sup>	In-Home Sample Distribution
African American (non-Hispanic)	35.4 (5.2)	15.0	27.2
White (non-Hispanic)	43.9 (5.2)	59.0	48.3
Hispanic	15.0 (3.2)	19.0	18.0
Other	5.7 (1.2)	7.0	6.5
Total	100.0	100.0	100.0

<sup>a</sup> Unweighted n = 3894 (6 missing on race/ethnicity)

<sup>b</sup> Based on children 0-18 years old, 2004; In Kids Count, 2% are of mixed race/ethnicities. These have been included in the “other” category; in NSCAW, however, these children may be included in the African American or Hispanic category. Source: [www.aecf.org/kidscount/](http://www.aecf.org/kidscount/)

*What is the association between racial and ethnic identity and placement into out-of-home care at 36 months for children who remained in-home at baseline when accounting for other case characteristics?*

When controlling for other case characteristics, racial and ethnic identity was not a significant contributor for placement into out-of-home care among children who remained in-home following the baseline investigation (Table 12). Only having a maltreatment report prior to baseline (OR = 2.9) was significantly associated with out-of-home placement. A second model was run which included the interactions between race/ethnicity and (a) substance abuse, and (b) caregiver mental health issues. The interactions were not significant; consequently, the results are not presented here.

**Table 12. Logistic Regression Modeling Out-of-Home Placement Within 36 Months for Children Who Remained In-Home at Baseline**

Independent Variables	F	OR	CI
Model minus intercept (df)	3.2 (15)***		
Child Age in Years	1.1	1.0	0.9, 1.0
Child gender	0.7		
Male	—	1.2	0.8, 1.9
Female	Reference Group		
Child Race/ethnicity	0.5	—	—
African American	—	1.3	0.7, 2.5
White	Reference Group		
Hispanic	—	0.8	0.3, 1.7
Other	—	0.8	0.4, 1.7
Domestic violence (CWW report) <sup>a</sup>	0.1	0.9	0.5, 1.8
Substance abuse (CWW report)	1.3	1.4	0.8, 2.5
Mental health problem (CWW report)	0.2	1.1	0.7, 1.9
Poverty rate	1.8	—	—
At/below poverty level	—	1.5	0.8, 2.6
Above poverty level	Reference Group		
Employment	0.2	0.9	0.5, 1.5
TANF	0.1	0.9	0.5, 1.7
Urbanicity	1.5	—	—
Urban	Reference Group		
Non-urban	—	0.7	0.4, 1.3
Maltreatment reports prior to baseline	17.1***	2.9	1.7, 4.7
Disposition of Baseline Investigation	2.1	—	—
Substantiated	—	1.4	0.9, 2.3
Unsubstantiated	Reference Group		
Child In-home Service Setting	3.3 <sup>^</sup>	—	—
No Services	Reference Group		
With Services	—	1.6	1.0, 2.8

N = 2614; Pseudo R<sup>2</sup> = .05

<sup>a</sup> The reference group is no for dichotomous variables.

<sup>^</sup>p < .10, \*p < .05, \*\*p < .01, \*\*\*p < .001

### **Summary of Racial and Ethnic Identity and Subsequent Placement into Out-of-home Care**

- Among children remaining in-home following the baseline investigation, African American children are overrepresented among those who have a later placement into out-of-home care, while white children are underrepresented.
- Among children remaining in-home following the baseline investigation, subsequent out-of-home placement is associated with substantiation of the baseline report for white children, but not for African American and Hispanic children.
- Regardless of racial and ethnic identity, later placement into out-of-home care is more likely for children and families with CWS involvement prior to and subsequent to the baseline investigation.

## Study Aim 3: Racial And Ethnic Identity And Caregiver Self-reported Maltreatment

In addition to re-reports, this study examined a second measure of recurrent maltreatment among children remaining in-home at baseline: caregiver self-report of severely violent and neglectful parenting practices. First, the baseline estimates of caregiver reported maltreatment were determined, followed by the examination of caregiver self-report of the use of severe violence and neglect between baseline and at 36 months.

*What proportion of caregivers self-report maltreatment at baseline, among caregivers of children remaining in-home at baseline? Are there racial and ethnic differences?*

Overall, 11.1 percent of caregivers reported using severe violence toward their child (Table 13). Significantly more caregivers of African American children reported severe violence (18.1%) compared to caregivers of white children (5.6%). While 39.0 percent of all caregivers reported neglectful parenting, no differences were found when testing for differences across race/ethnicities.

Table 13. The Association Between Racial and Ethnic Identity and Caregiver Self-Report of Maltreatment on Conflict Tactics Scale--Parent to Child Version at Baseline						
Maltreatment measured on CTS--PC	Total	Race/ethnicity				p-value ( $\chi^2$ test)
		African American % (SE)	White % (SE)	Hispanic % (SE)	Other% (SE)	
Severe violence (n = 3149)	11.1 (1.2)	18.1 (2.3)	5.6 (1.0)	15.7 (4.9)	10.6 (3.3)	< .001
Neglect (n = 3150)	39.0 (1.7)	43.2 (3.6)	35.0 (2.4)	40.9 (4.5)	45.6 (7.0)	NS

**Note:** Only the affirmative responses are shown on this table.

Next, we analyzed caregiver self-reports of severe violence and neglect between baseline and 36 months. We included a third category (unknown) in this analysis, because, if the child was placed into out-of-home care during this time period, caregiver interviews were not completed with the permanent caregiver.

Rates of “unknown” responses are similar across races/ethnicities (Table 14).The proportion of caregivers of African American children who self-reported using severe violence between baseline and 36 months (18.9%) was more than double that of caregivers of white children (9%), however. The proportion of caregivers of Hispanic children who reported using severe violence was also high (14.9%). It must be noted here that caregivers may be reluctant to divulge information about their parenting practices (Knight et al., 2000), so parental self-report of their behaviors could result in lower bound estimates of the actual behavior (Straus, Gelles, Steinmetz, 1980). Although NSCAW took steps to increase the disclosure of sensitive topics through the use of an audio computer-assisted self-interview (ACASI), severe violence and neglect may be underreported by caregivers.

**Table 14. The Association Between Caregiver Self-Report of Maltreatment on the Conflict Tactics Scale--Parent to Child Version over 36 Months and Racial and Ethnic Identity**

Maltreatment measured on CTS--PC	Total	Race/ethnicity				p-value ( $\chi^2$ test)
		African American % (SE)	White % (SE)	Hispanic % (SE)	Other % (SE)	
<b>Severe violence (n = 3149)</b>						<b>&lt; .001</b>
Yes	12.6 (1.3)	18.9 (2.3)	9.0 (1.5)	14.9 (3.6)	6.7 (2.4)	—
No	67.4 (1.5)	59.2 (2.9)	71.0 (1.9)	68.4 (4.1)	72.1 (4.9)	—
Unknown	20.0 (1.1)	21.8 (1.9)	20.0 (1.9)	16.7 (2.5)	21.2 (4.6)	—
<b>Neglect (n = 3894)</b>						<b>&lt; .10</b>
Yes	38.9 (1.9)	43.9 (3.3)	35.8 (2.6)	36.7 (4.8)	47.3 (6.7)	—
No	44.4 (1.8)	37.6 (3.5)	47.5 (2.3)	48.6 (5.0)	38.0 (7.5)	—
Unknown	16.7 (1.0)	18.5 (2.1)	16.7 (1.6)	14.8 (2.2)	14.7 (4.3)	—

*Does variation in parenting behaviors by racial and ethnic identity remain after controlling for other case characteristics among caregivers of children remaining in-home at baseline?*

When we control for other case characteristics, we find that racial and ethnic identity was significantly associated with use of severely violent parenting behaviors between baseline and 36 months (Table 15). Caregivers of African American children were over twice as likely (OR = 2.3) to report using severe violence toward their child in the 36 months following the baseline maltreatment investigation. The caregiver having a mental health problem was associated with twice the odds of using severe violence (OR = 2.2). In addition, caregiver self-report of severe violence at 36-months was only half as frequent (OR = 0.5) in nonurban communities compared with urban communities. Unexpectedly, the identification of physical abuse as the most serious maltreatment type associated with the baseline maltreatment investigation was not related to later caregiver use of severe violence between baseline and 36 months.

**Table 15. Logistic Regression Modeling Caregiver Self-Report of Severe Violence or Neglect Within 36 Months for Children Who Remained In-Home at Baseline**

Independent Variables	Severe Violence			Neglect		
	F	OR	CI	F	OR	CI
Model minus intercept (df)	4.7 (14)***	—	—	9.6(13)***	—	—
Child Age in Years	3.1^	1.1	1.0, 1.1	64.3***	1.2	1.1, 1.2
Child gender	2.5	—	—	0.5	—	—
Male	—	1.6	0.9, 2.8	—	0.9	0.6, 1.3
Female	Reference Group			Reference Group		
Child Race/ethnicity	4.4**	—	—	1.1	—	—
African American <sup>a</sup>	—	2.3	1.2, 4.4	—	1.3	0.9, 2.1
White	Reference Group			Reference Group		
Hispanic	—	2.0	0.7, 6.0	—	1.0	0.6, 1.7
Other	—	0.6	0.2, 1.8	—	1.7	0.8, 3.6
Child In-home Service Setting	0.3	1.2	0.7, 1.9	0.4	—	—
No Services	Reference Group			Reference Group		
With Services	—	—	—	...	1.1	0.8, 1.6
Physical abuse at baseline <sup>a</sup>	0.6	1.3	0.7, 2.8	NA	—	—
Neglect (FTP or FTS) at baseline	NA	—	—	4.5*	1.4	1.0, 2.0
Maltreatment reports prior to baseline	1.2	0.7	0.4, 1.4	0.1	1.1	0.7, 1.6
CBCL Score	2.0	1.0	1.0, 1.0	NA	—	—
Domestic violence (CWW report)	0.7	1.4	0.7, 2.9	0.2	1.1	0.7, 1.9
Substance abuse (CWW report)	2.3	1.9	0.8, 4.5	1.1	1.3	0.8, 2.2
Mental health problem (CWW report)	4.9*	2.2	1.1, 4.3	3.9^	1.5	1.0, 2.1
Poverty rate	0.2	—	—	0.0	—	—
At/below Poverty Level	—	1.2	0.6, 2.3	—	1.0	0.7, 1.5
Above Poverty Level	Reference Group			Reference Group		
Urbanicity	5.5*	—	—	3.5^	—	—
Urban	Reference Group			Reference Group		
Non-urban	—	0.5	0.3, 0.9	—	0.7	0.5, 1.0

<sup>a</sup> The reference group is no for dichotomous variables. An affirmative response on physical abuse at baseline indicates that physical abuse was identified as the most serious maltreatment type of the baseline maltreatment report.

^p < .10, \*p < .05, \*\*p < .01, \*\*\*p < .001

Severe violence: n = 1443, pseudo R2 = .06

Neglect: n = 2111, pseudo R2 = .11. Note, that also ran model with race/ethnicity interactions (substance abuse and mental health) but neither of the interactions were significant.

*Are there racial/ethnic differences in the rates of unsuccessful CWS plans among children who remained in-home at baseline and whose parents self-reported maltreatment?*

The relationship between the success of CWS plans and caregiver self-report of severe violence varied by racial and ethnic identity (Table 16). The proportion of children with an unsuccessful CWS plan was fairly similar for African American children with and without caregiver-reported physical abuse (25.7% vs. 24.4%; see highlighted cells). An unsuccessful CWS plan was somewhat more likely for white children with caregiver self-reported physical abuse (34.6%) than for white children without caregiver-reported physical abuse (26.3%). Just over half (50.3%) of Hispanic children whose caregivers reported physical abuse had an unsuccessful CWS plan, compared to 34.3% of Hispanic children whose caregivers did not report physical abuse.

The inclusion of the unknown category complicates the interpretation of the significant chi-square tests. For each race and ethnic group, a substantially higher proportion of children with unknown data about caregiver self-reported severe violence had an unsuccessful CWS plan. For 56.4 percent of children with a subsequent out-of-home placement, caregiver self-report of severe violence is unknown (not shown in table). However, because of its relationship to out-of-home placement—an important component of the unsuccessful CWS plan measure—exclusion of this category would have resulted in inaccurate estimates.

<b>Table 16. The Association between Racial and Ethnic Identity and Unreported Physical Abuse at 36 Months (Row Percentage) for Children Who Remained In-Home at Baseline</b>						
Race/ethnicity	Caregiver Self-Reported Physical Abuse					
	Yes		No		Unknown	
	Unsuccessful CWS plan % (SE)	Successful CWS plan % (SE)	Unsuccessful CWS plan % (SE)	Successful CWS plan % (SE)	Unsuccessful CWS plan % (SE)	Successful CWS plan % (SE)
<b>African American (n = 1191)<sup>a</sup></b>	<b>25.7 (7.3)</b>	74.3 (7.3)	<b>24.4 (4.2)</b>	75.6 (4.2)	62.4 (5.6)	37.6 (5.6)
<b>White (n = 1766)<sup>b</sup></b>	<b>34.6 (5.6)</b>	65.4 (5.9)	<b>26.3 (2.2)</b>	73.7 (2.20)	45.1 (5.6)	54.9 (5.6)
<b>Hispanic (n = 676)<sup>c</sup></b>	<b>50.3 (12.7)</b>	49.7 (12.7)	<b>34.3 (5.2)</b>	65.7 (5.2)	51.3 (8.4)	48.7 (8.4)
<b>Other (n = 260)<sup>d</sup></b>	43.4 (17.3)	56.6 (17.3)	27.7 (7.5)	72.3 (7.5)	74.9 (9.1)	25.1 (9.1)
<b>Total (n = 3893)<sup>e</sup></b>	34.6 (5.3)	65.4 (5.3)	27.4 (2.20)	72.6 (2.2)	53.2 (4.1)	<b>46.8 (4.1)</b>

<sup>a</sup>  $\chi^2 = 23.4$   $p < .001$

<sup>b</sup>  $\chi^2 = 11.0$ ,  $p < .01$

<sup>c</sup> Non-significant

<sup>c</sup>  $\chi^2 = 11.1$ ,  $p < .01$

<sup>d</sup>  $\chi^2 = 36.6$ ,  $p < .001$

### **Summary of Racial and Ethnic Identity and Caregiver Self-Reported Maltreatment**

- Neglectful parenting practices are similar across different race/ethnicities.
- Severe violence is self-reported as a parenting tactic more often among caregivers of African American children than caregivers of other race/ethnicities at both baseline and 36 months.
- When controlling for other case characteristics, caregivers of African American children are more than twice as likely to use severe violence toward their children between baseline and 36 months compared to caregivers of white children. As discussed above, it is possible that white caregivers underreported their use of severe violence toward their children.
- A higher proportion of Hispanic children and white children whose caregivers report using severe violence have an unsuccessful CWS plan compared to African American children.

## Implications for Policy and Practice

Findings from this national probability study confirm that African American children are disproportionately overrepresented among the children who are investigated for child maltreatment—even among children who remained at home following the investigation. This study goes further, however, in helping to clarify whether some of the subsequent events are related to racial and ethnic identity or other factors.

Racial and ethnic identity, in and of itself, is not significantly related to the success or failure of the CWS plan following a maltreatment investigation for children who remained in-home at baseline. Rates of unsuccessful CWS plans are similar across racial/ethnic groups. Furthermore, the interactions between racial and ethnic identity, poverty, substance abuse, and caregiver mental health problems were not associated with the success of a CWS plan. This suggests that the case dynamics that cause the failure of a service plan are not substantially dependent on the racial or ethnic identity of the child and family. Experiencing an unsuccessful CWS plan is, however, associated with case characteristics (e.g., parental mental health problems, living in poverty, living in urban areas, and a history of maltreatment reports) that are, largely, common across racial/ethnic groups. Thus, the failure of a CWS plan for an African American child, resulting in a greater likelihood of placement into foster care, appears to be explained, in part, by the family's disproportionately higher involvement with such family stressors as mental health problems, poverty, and living in urban areas, rather than the family's race. Conversely, although African American caregivers have higher levels of involvement with substance abuse, TANF, and lower employment, these factors did not predict an unsuccessful CWS plan.

We do note that there are some study limitations. The subsample of African American children who remain in-home following the initial investigation may not be representative of all African American children undergoing maltreatment investigations, because African American children are disproportionately placed into out-of-home care. An additional limitation is that some families may have had multiple reports prior to the index investigation. For many families, the investigation leading to inclusion in NSCAW is their first maltreatment report; for others it may be their second, fifth, or tenth.

Despite these potential limitations, this study demonstrates that at a national level disproportional placement into out-of-home care not only occurs at the time of the index investigation, but following subsequent maltreatment investigations as well. African American children who initially remained in home are also disproportionately placed into out-of-home care at later time points. This is in contrast to the finding that the racial/ethnic distribution of children with an unsuccessful CWS plan is similar for all children. Although the pattern of re-reporting of children is similar across all races and ethnicities; placement patterns differ. The proportion of children having an out-of-home placement is similar to the in-home sample distributions for both white and Hispanic children; however, a higher proportion of African American children whose initial placement is in-home are later placed into out-of-home care. Efforts are needed to better identify the factors contributing to placement of African American children and to develop and implement child welfare policies and practices that seek to overcome this disproportionality.

The fact that substantiation serves a different role for African American and white children warrants further exploration. Scholars have demonstrated that substantiation of a particular report is often not a good indicator of the seriousness of the report or the likelihood of continued and serious problems in parenting (Drake, Jonson-Reid, Way & Chung, 2002; English, Marshall, Coghlan, Brummel, & Orme, 2002). Although overall substantiation is not strongly related to an increased likelihood of a re-report (Kohl & Barth, 2005), this earlier analysis did not consider racial/ethnic differences. The findings of this study suggest the presence of racial/ethnic variation in the relationship between substantiation and an unsuccessful CWS plan. Substantiation may be one potential indicator of an increased likelihood for continued parenting problems among caregivers of white children, but not among caregivers of children of color.

Another potential limitation is the data's inability to establish the extent to which white or Hispanic parents underreported the use of severe violence. The data also could not verify the extent to which African American parents self-describe their parenting as more severe than that of parents of other racial/ethnic groups. Among community-based samples, the use of physical discipline including severe violence is more common among African American families (see, e.g., Deater-Deckard et al., 1996; Straus & Gelles, 1999; Straus et al., 1998). Findings from this study have shown this to be true among the child welfare population as well, a population that is arguably more vulnerable than community-based samples.

That the use of severe violence continues for a substantial group of caregivers of African American children following a maltreatment investigation is indeed cause for concern; it does not, however, appear to place them at greater risk for an unsuccessful CWS plan. Severe violence as a parenting tactic is not related to the failure of the CWS plan for African American children. In contrast, the continued use of severe violence by caregivers is associated with higher rates of unsuccessful CWS plans for white and Hispanic children.

Although the focus of this study is on safety-related outcomes, the work of others related to parenting behaviors and child behavioral outcomes may inform this discussion. Deater-Deckard et al. (1996) and Lansford et al. (2004) have shown racial differences in youth behavioral outcomes following physical discipline, with fewer problems evident among African American youth. They posit that physical discipline is culturally normative behavior in the African American community and is perceived differently by African American youth compared to white youth, subsequently resulting in differential outcomes. The sense that physical discipline is normative among some race/ethnicities may explain some of the different responses to the use of physical discipline as a parenting tactic—even when severe violence is involved. The context in which physical discipline may occur in child welfare-involved families (e.g., chaotic home environment, substance abuse, mental illness, or domestic violence) is likely different than that of community-based families (i.e., families not involved with the child welfare system); therefore, youth outcomes may be quite different among the child welfare population.

Parenting interventions that address the use of physical discipline and potential abuse are needed for all families, regardless of their racial and ethnic identity and regardless of the maltreatment type identified as most serious at the time of the baseline investigation. These findings also show that a maltreatment report of physical abuse is not associated with later use of severe violence—some caregivers use severe violence, regardless of the maltreatment type which initially brought them to the attention of the child welfare system.

One final point: culturally competent evidence-based parenting practices are needed to specifically target parents whose children remain in the home, which includes the vast majority of families investigated for child maltreatment. Parenting interventions shown to be effective among the general population, clinical samples, or substitute care providers (e.g., foster parents) can be adapted for this important subpopulation of child welfare.

# References

- Dalaker, J. & U.S. Census Bureau (2001). "Current population reports, Series P60-214." *Poverty in the United States: 2000*.
- Deater-Deckard, K., Dodge, K. A., Bates, J. E., & Pettit, G. S. (1996). Physical discipline among African American and European American mothers: Links to externalizing behaviors. *Developmental Psychology, 32*, 1065-1072.
- Derezotes, D. M. & Poertner, J. (2005). Factors contributing to the overrepresentation of African American children in the child welfare system. In D. M. Derezotes, J. Poertner, & M. F. Testa [Eds.]. *Race Matters in Child Welfare: The Overrepresentation of African American Children in the System*, pp. 1-23. Washington DC: CWLA Press.
- Dowd, K., Kinsey, S., Wheelless, S., Thissen, R., Richardson, J., Suresh, R. et al. (2002). *National Survey of Child and Adolescent Well-Being (NSCAW): Combined waves 1-3 data file user's manual restricted release version*. National Data Archive on Child Abuse and Neglect: Ithaca, NY.
- Drake, B., Jonson-Reid, M., Way, I., & Chung, S. (2002). *Child maltreatment recurrence: Comparing substantiated and unsubstantiated cases at the child, family and perpetrator levels*. St. Louis, MO: Washington University.
- Eckenrode, J., Powers, J., Doris, J., Munsch, J. & Bolger, Niall (1988). Substantiation of child abuse and neglect reports. *Journal of Consulting and Clinical Psychology, 56*, 9-16.
- English, D. J., Marshall, D. B., Brummel, S., & Orme, M. (1999). Characteristics of repeated referrals to child protective services in Washington state. *Child Maltreatment, 4*, 297-307.
- English, D. J., Marshall, D. B., Coghlan, L., Brummel, S., & Orme, M. (2002). Causes and consequences of the substantiation decision in Washington State Child Protective Services. *Children & Youth Services Review, 24*, 817-851.
- Fluke, J. D., Yuan, Y. Y., & Edwards, M. (1999). Recurrence of maltreatment: An application of the National Child Abuse and Neglect Data System (NCANDS). *Child Abuse & Neglect, 23*, 633-650.
- Herrenkohl, R. C., Herrenkohl, E. C., Egolf, B. & Seech, M. (1979). The repetition of child abuse: How frequently does it occur? *Child Abuse & Neglect, 3*, 67-72.
- Jonson-Reid, M., Drake, B., Chung, S., & Way, I. (2003). Cross-type recidivism among child maltreatment victims and perpetrators. *Child Abuse & Neglect, 27*, 899-917.
- Knight, E. D., Runyan, D. K., Dubowitz, H., Brandfor, C., Kotch, J., Litrownik, A. et al. (2000). Methodological and ethical challenges associated with child self-report of maltreatment: Solutions implemented by the LongSCAN Consortium. *Journal of Interpersonal Violence, 15*, 760-775.
- Kohl, P. L. & Barth, R. P. (2005, July). Child maltreatment recurrence among children remaining in-home: Re-reports, caregiver and youth self-report, and underreporting. Paper presented at the Child Protection Conference: Using Research to Improve Policy and Practice. Washington, DC.
- Lansford, J. E., Deater-Deckard, K., Dodge, K. A., Bates, J. E., & Pettit, G. S. (2004). Ethnic differences in the link between physical discipline and later adolescent externalizing behaviors. *Journal of Child Psychology and Psychiatry, 45*, 801-812.
- Lau, A. S., Litrownik, A. J., Newron, R. R., Black, M. M., & Everson, M. D. (2006). Factors affecting the link between physical discipline and child externalizing problems in Black and White families. *Journal of Community Psychology, 34*, 89-103.

- Levy, H. B., Markovic, J., Chaudhry, U., Ahart, S., & Torres, H. (1995). Reabuse rates in a sample of children followed for 5 years after discharge from a child abuse inpatient assessment program. *Child Abuse & Neglect, 19*, 1363-1377.
- Lipien, L. & Forthofer, M. S. (2004). An event history analysis of recurrent child maltreatment reports in Florida. *Child Abuse & Neglect, 28*, 947-966.
- Morton, T. D. (1999). The increasing colorization of American's child welfare system: The overrepresentation of African-American children. *Policy & Practice, 23-30*.
- NSCAW Research Group (2002). Methodological lessons from the National Survey of Child and Adolescent Well-Being: The first three years of the USA's first national probability study of children and families investigated for abuse and neglect. *Children and Youth Services Review, 24*, 513-541.
- Rolock, N. & Testa, M. F. (2005). Indicated child abuse and neglect reports: Is the investigation process racially biased? In D. M. Derezotes, J. Poertner, & M. F. Testa [Eds.]. *Race Matters in Child Welfare: The Overrepresentation of African American Children in the System*, pp. 119-130. Washington DC: CWLA Press.
- Sedlak, A. J. & Broadhurst, D. D. (1996). *Executive summary of the third national incidence study of child abuse and neglect*. Washington DC: US Government Printing Office.
- Sedlak, A. J. & Schultz, D. (2005a). Racial differences in CPS Investigation of Abused and Neglected Children. In D. M. Derezotes, J. Poertner, & M. F. Testa [Eds.]. *Race Matters in Child Welfare: The Overrepresentation of African American Children in the System*, pp. 97-117. Washington DC: CWLA Press.
- Sedlak, A. J. & Schultz, D. (2005b). Race differences in risk of maltreatment in the general child population. In D. M. Derezotes, J. Poertner, & M. F. Testa [Eds.]. *Race Matters in Child Welfare: The Overrepresentation of African American Children in the System*, pp. 47-61. Washington DC: CWLA Press.
- Straus, M. A., & Gelles, R. (Eds). (1990). *Physical violence in American families: Risk factors and adaptations to violence in 8,145 families*. New Brunswick, NJ: Transaction Publishers.
- Straus, M. A., Gelles, R. J., & Steinmetz, S. K. (1980). *Behind closed doors: Violence in the American Family*. Garden City, NY: Anchor Books.
- Straus, M. A., Hamby, S. L., Finkelhor, D., Moore, D. W., & Runyan, D. (1998). Identification of child maltreatment with the Parent-Child Conflict Tactics Scales: Development and psychometric data for a national sample of American parents. *Child Abuse & Neglect, 22*, 249-270.
- Theodore, A. D., Chang, J. J., Runyan, D. K., Hunter, W. M., Bangdiwala, S. I., & Agans, R. (2005). [Electronic version] Epidemiologic features of the physical and sexual maltreatment of children in the Carolinas. *Pediatrics, 115*, e331-e337.
- U.S. Department of Health and Human Services, Administration on Children, Youth, and Families (2005a). *Child Maltreatment 2003*. Washington DC: U.S. Government Printing Office.
- U.S. Department of Health and Human Services, Administration for Children, Youth, and Families (2005b). *National Survey of Child and Adolescent Well-Being: Children Involved with the Child Welfare Services (Baseline Report)*. Washington DC: Author.
- Wolock, I., Sherman, P., Feldman, L. H., & Metzger, B. (2001). Child abuse and neglect referral patterns: A longitudinal study. *Children and Youth Services Review, 23*, 21-47.



# Casey-CSSP Alliance for Racial Equity in Child Welfare



**CSSP** is a nonprofit public policy organization that develops and promotes policies and practices that support and strengthen families and help communities to produce equal opportunities and better futures for all children. We work in partnership with federal, state and local government, and communities and neighborhoods—from politicians who can craft legislation, state administrators who can set and implement policy and practice, and networks of peers, community leaders, parents and youth to find workable solutions to complex problems.



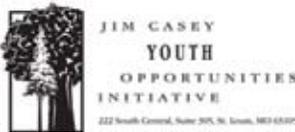
**Casey Family Programs** is the largest national foundation whose sole mission is to provide and improve—and ultimately prevent the need for—foster care. The foundation draws on its 40 years of experience and expert research and analysis to improve the lives of children and youth in foster care in two important ways: by providing direct services and support to foster families and promoting improvements in child welfare practice and policy. The Seattle-based foundation was established in 1966 by UPS founder Jim Casey and currently has an endowment of \$2 billion.

[www.casey.org](http://www.casey.org)



The **Marguerite Casey Foundation** was created by Casey Family Programs in 2001 to help expand Casey's outreach and further enhance its 37-year record of leadership in child welfare. Based in Seattle, the Marguerite Casey Foundation is a private, independent grant-making foundation dedicated to helping low-income families strengthen their voice and mobilize their communities.

[www.caseygrants.org](http://www.caseygrants.org)



**Jim Casey Youth Opportunities Initiative** was created in 2001 by Casey Family Programs and the Annie E. Casey Foundation. Based in St. Louis, the Initiative is a major national effort to help youth in foster care make successful transitions to adulthood.

[www.jimcaseyouth.org](http://www.jimcaseyouth.org)



The Annie E. Casey Foundation

The **Annie E. Casey Foundation** is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. It was established in 1948 by Jim Casey, one of the founders of United Parcel Service, and his siblings, who named the Foundation in honor of their mother. The primary mission of the Foundation is to foster public policies, human-service reforms, and community supports that more effectively meet the needs of today's vulnerable children and families. In pursuit of this goal, the Foundation makes grants that help states, cities, and neighborhoods fashion more innovative, cost-effective responses to these needs.

[www.aecf.org](http://www.aecf.org)



**Casey Family Services** was established by United Parcel Service founder Jim Casey in 1976 as a source for high-quality, long-term foster care. Casey Family Services today offers a broad range of programs for vulnerable children and families throughout the Northeast and in Baltimore, Maryland. The direct service agency of the Annie E. Casey Foundation, Casey Family Services operates from administrative headquarters in New Haven, Connecticut, and eight program divisions in Connecticut, Maine, Maryland, Massachusetts, New Hampshire, Rhode Island, and Vermont.

[www.caseyfamilyservices.org](http://www.caseyfamilyservices.org)