

# National Survey of Child and Adolescent Well-Being

## No. 9: Does Substantiation of Child Maltreatment Relate to Child Well-Being and Service Receipt?



Findings from the NSCAW Study

# research brief



Child welfare system (CWS) agencies across the country investigate thousands of reports of child maltreatment yearly and typically *substantiate* allegations of maltreatment when they believe there is sufficient evidence that it occurred. Substantiation can be a first step toward providing child and family services; however, research suggests that children in unsubstantiated cases may also be harmed or at risk and consequently may need services. Most states allow for service delivery in unsubstantiated, as well as substantiated, cases. But we do not know how often the children in these cases are perceived to need services and receive them, either from CWS or other service providers.

In this research brief, we examine the well-being of children in substantiated and unsubstantiated maltreatment cases. It provides information about their access to child welfare, mental health, and special education services. It addresses the following questions:

- Does the well-being of children in substantiated maltreatment cases differ from the well-being of children in unsubstantiated cases?
- Do caseworkers' perceptions of children's service needs in substantiated maltreatment cases differ from their perceptions of children's service needs in unsubstantiated cases?
- Do children in substantiated and unsubstantiated cases receive the child welfare, mental health, and education services that they need?

### Substantiation and Its Consequences

Substantiation represents child protective services' official decision that a child has been maltreated. Substantiation decisions are based on caseworker assessments of harm to the child and evidence to support a case of child maltreatment. In some states caseworkers can designate maltreatment status as *indicated* when they consider that enough evidence exists to support that a child has been maltreated but not enough exists to support a formal substantiation.<sup>1,2</sup>

The CWS can provide some services directly (e.g., case management, family support) or may refer families to other non-CWS services. In most states an unsubstantiated allegation does not usually bar a child and family from receiving CWS services. In 2001, 39 states reported that they allowed CWS service in unsubstantiated cases, while 8 reported that they did not.<sup>3</sup> In light of great needs and scarce resources, however, substantiated cases might take priority over unsubstantiated cases for service receipt or referral to either CWS or non-CWS services. The substantiation process could also affect service utilization by influencing caseworkers' and caregivers' judgments: if CWS workers find insufficient evidence to support maltreatment and therefore do not substantiate a case, they might also decide CWS services or other referrals are not needed.<sup>4</sup> If a maltreatment case is not substantiated, parents also may be less inclined to work with CWS or seek other services.

### National Sample of Cases Involving Allegations of Maltreatment

Using data from the National Survey of Child and Adolescent Well-Being (NSCAW), we examine the relationship between substantiation and child well-being and service receipt. NSCAW is a national longitudinal study of the well-being of more than 5,500 children aged 14 or younger who were involved in child maltreatment investigations by the CWS in 1999 and 2000.<sup>5</sup>

The target population for this research brief includes the 4,514 children who were involved in investigations in which a substantiation determination was made (for a variety of reasons, some cases within the entire NSCAW sample were not evaluated by caseworkers for a substantiation decision). Substantiation data were gathered from the caseworker at the NSCAW baseline interview conducted 4 to 5 months after the completion of the investigation. Caseworkers responded on the basis of their experience with the case, as well as their review of case records. The data presented here are drawn from these caseworker interviews, together with interviews and assessments of the children and their

caregivers at baseline and at follow-ups approximately 18 and 36 months after the investigation.

### Sample Characteristics

This sample includes those children for whom a substantiation decision—whether *substantiated*, *unsubstantiated*, or *indicated*—was made. Among these cases, 29.7% were determined to be substantiated cases of maltreatment. A small number of cases (8.2%) were neither substantiated nor unsubstantiated, but rather had a disposition of *indicated*. Most of these children were between 6 and 10 years of age (36.7%) or older than 11 (24.8%).<sup>6</sup> Slightly more than half of the children were female (50.7%). The children were most often reported to be Caucasian (46.0%); 27.9% reported their race/ethnicity as Black, 19.5% as Hispanic, and 7.0% as “Other.” For 21.9% of the children, their most serious type of reported maltreatment was physical abuse. Physical neglect was the next most commonly reported as the most serious maltreatment type (20.3%), followed by supervisory neglect (21.2%), emotional abuse (15.5%), and sexual abuse (10.1%).

### Child Well-Being

If substantiation is a valid indicator of maltreatment, children in unsubstantiated cases of maltreatment might fare better than those in substantiated cases. There is ample evidence that maltreatment affects children’s well-being. To explore this connection further, children with substantiated, indicated, and unsubstantiated maltreatment cases were compared on several measures of well-being. These measures assessed a variety of factors, including language skills, emotional or behavioral problems, cognitive deficits, daily-living skills, social skills, delinquency, and substance abuse. Consistent with some previous research, children with substantiated, indicated, and unsubstantiated maltreatment cases differed little across these various indicators of well-being.<sup>7,8</sup> On average, all children in the target population fared worse than typical children.<sup>9</sup> They differed little from each other, however, on the basis of substantiation status.

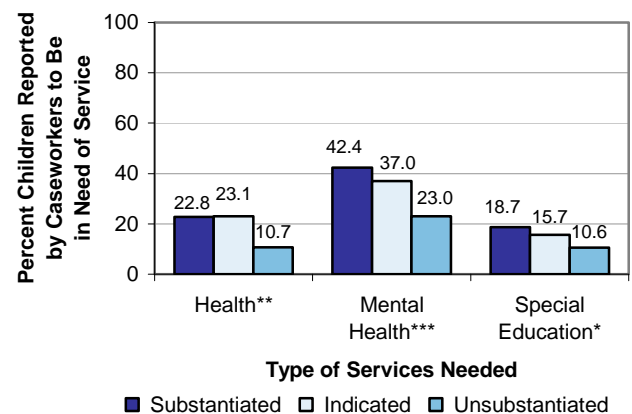
Several children showed relatively high levels of behavior problems or cognitive and language delays; however, children with substantiated, indicated, or unsubstantiated cases did not significantly differ from each other. For example, 23.2% of children with substantiated cases of maltreatment showed evidence of behavior problems.<sup>10</sup> Meanwhile, a similar proportion of children with indicated cases and unsubstantiated

cases also showed similar evidence of behavior problems (30.4% and 17.7%, respectively). Similarly, no differences were observed in an examination of cognitive or language delays by substantiation status.<sup>11</sup> An approximately equal percentage of children in substantiated (28.0%), indicated (38.2%), and unsubstantiated (30.9%) cases showed risks for cognitive or language delay.

### Caseworker Perceptions of Service Needs

Since children in substantiated and unsubstantiated cases had similar scores on well-being measures, do they have equivalent service needs? What do caseworkers think? Consistent with their decisions about substantiation, caseworkers reported that children with substantiated cases of maltreatment needed more services for health problems (22.8%), emotional or behavior problems (42.2%), and special education (18.7%) than those with unsubstantiated cases (10.7%, 23.0%, and 10.6%, respectively; Figure 1). So, despite all target population children’s similar scores on standardized measures of well-being, caseworkers perceived children in substantiated cases as having greater service needs than those in unsubstantiated cases.

**Figure 1. Caseworker reports of child service needs by substantiation status.**



Note: The significance values in this figure represent omnibus effects.

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

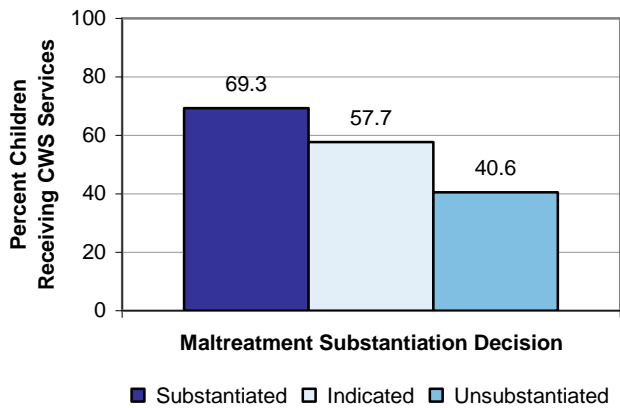
### CWS Service Delivery or Referral

Children in substantiated, indicated, and unsubstantiated maltreatment cases differed from one another in how often services were provided to, or arranged for, their families. According to the investigative caseworker, children in substantiated cases were more likely to be provided services or have them arranged by the caseworker (77.4%) than children in indicated (57.7%) or unsubstantiated cases (30.4%).

Not all children with substantiated cases of maltreatment either received CWS services or were referred for services after case investigation. Meanwhile, one third of those in unsubstantiated cases did receive services or service referrals after investigation.

Children in substantiated, indicated, and unsubstantiated maltreatment cases also differed from one another with respect to continuation of CWS service use 12 months after the index maltreatment investigation (Figure 2). A substantial majority of children from all substantiated and indicated cases still received CWS services 12 months after investigation (69.3% and 57.7%, respectively). Slightly fewer than half the children whose cases were neither substantiated nor indicated received services at 12 months (40.6%). Children with unsubstantiated maltreatment cases continued to receive fewer services than those with substantiated and indicated cases at both 18 months and 36 months after the index CWS investigation.

**Figure 2. Children receiving child welfare system (CWS) services one year after investigation, by substantiation status.**



Note: The significance values in this figure represent omnibus effects.  $p < .0001$ .

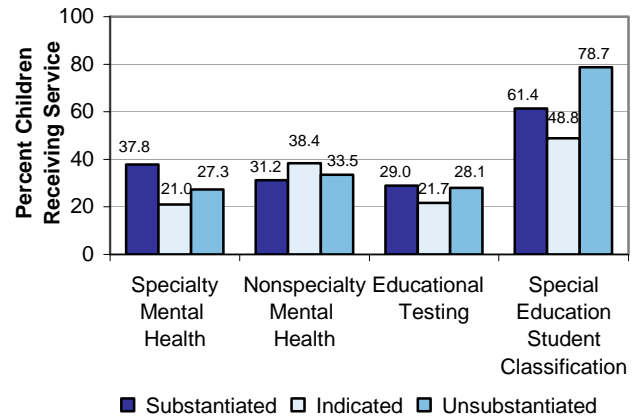
**Mental Health and Special Education Services**

One year after the index maltreatment investigation, caseworkers were asked whether they had referred a child for any of a variety of services and whether the child had received these services. For those children judged to be in need of mental health services, caseworkers were as likely in unsubstantiated cases as in substantiated cases to report that a formal assessment for emotional or behavior problems had been conducted.<sup>12</sup> Caseworkers also reported similarly referring children in need of mental health services across substantiated, indicated, or unsubstantiated cases to counseling for an emotional, behavioral, or attention problem. Substantiation status made no difference in

how often caseworkers referred for identification of learning or developmental disability children showing possible needs for special education services.<sup>13</sup> Nor did substantiation status affect the degree to which children were reported by caseworkers to have received special education services.

In addition to caseworkers’ reporting referrals, caregivers reported their children’s receipt of mental health and special education services during the 12 months after the index investigation. Among those children judged to be in need of mental health or special education services, there were no differences in mental health or special education service receipt based upon substantiation status. Generally speaking, about the same percentages of children received these services, whether they were in unsubstantiated, substantiated, or indicated maltreatment cases. Figure 3 shows the percentage of children across substantiation categories who received different types of mental health and special education services according to caregiver report. It should be noted that only a minority of children with a need for services received them. Although ascertaining need for social services from standardized measures has limitations, these results suggest a service gap for children, regardless of case substantiation status.

**Figure 3. Children needing mental health services and special education services who received them, one year after child welfare system investigation.**



Note: There are no significant differences represented in this figure.

**Key Findings**

- Children in substantiated and unsubstantiated maltreatment cases appear to have similar social, behavioral, and emotional needs.
- When compared with needs among children in unsubstantiated cases, needs among children with substantiated maltreatment cases are perceived by caseworkers to be greater. However, for those children in need of such services, caseworkers do

not report providing different numbers of referrals for mental health or special education services by substantiation status.

- Children with substantiated cases of maltreatment receive more CWS services after investigation than those with unsubstantiated cases. Not all children in substantiated cases receive services. Although some children with unsubstantiated maltreatment cases receive CWS services, most do not.
- Substantiation status does not appear to affect access to mental health or special education services, according to either caregiver or caseworker report.
- Regardless of substantiation status, children investigated for maltreatment appear to be at risk for unmet mental health and special education needs.

### What Do These Findings Mean?

Across a variety of well-being measures, children with substantiated cases of maltreatment do not appear to fare more poorly than children in unsubstantiated cases; therefore, children in unsubstantiated maltreatment cases may have as many social service needs as those in substantiated cases. These findings support state allowances for CWS services in unsubstantiated maltreatment cases.

Although the children themselves did not differ to a marked degree in standardized assessments of need, caseworkers perceived greater social service needs among those with substantiated cases than among those with unsubstantiated cases. There may be a number of reasons caseworkers have perceived greater service needs among children with substantiated maltreatment. For instance, it may be that caseworkers were required to conduct a more thorough assessment of a substantiated maltreatment case than of an unsubstantiated one. This more thorough assessment would lead them to have more in-depth knowledge about the service needs of children in substantiated maltreatment cases. Alternatively, knowing with increased assurance that maltreatment had occurred, caseworkers might have perceived greater service needs among substantiated cases by inferring the potentially negative future impact of maltreatment on child well-being. Although further investigation of such reasons is beyond the scope of this research brief, these findings point to the importance of understanding caseworker perceptions and decision-making processes, as well as their impact on child well-being and service utilization.

In addition to being more likely to have their needs perceived, children in substantiated cases were more likely to receive CWS services after investigation. However, CWS service delivery after the investigation did not always follow from a substantiation decision. Twelve months after the index maltreatment investigation, CWS services were *not* provided in 30.7% of substantiated cases, while a sizable minority (40.6%) of children with unsubstantiated cases still received CWS services. Service delivery for children whose cases were unsubstantiated could be due to a variety of factors, including re-reports for child maltreatment, prior involvement with the CWS, or the CWS's decision to provide services without a substantiation decision. Future research should attempt to better understand the reasons that some children in substantiated or unsubstantiated maltreatment cases receive services and others do not.

There were no differences in mental health and special education service receipt among children in substantiated, indicated, and unsubstantiated cases. These findings were true according to caseworker report of service receipt and referral, as well as caregiver report of service use. Meanwhile, levels of mental health and special education service use among those children deemed to be in need of such services were quite low. Several factors could explain these findings. A caregiver or caseworker's decision to initiate mental health or special education services for a child is likely affected by a variety of factors that might include the child's functioning, the cost of treatment, service availability, or the stigma associated with seeking services. Consequently, in light of these other factors, the outcome of a CWS investigation may have little effect on service receipt.

High levels of unmet social service needs for children have been noted across the country and are not unique to a child welfare population.<sup>14</sup> Although this brief finds no impact of substantiation status, studying the influence of other types of potential barriers to mental health and special education service utilization among children who have been maltreated is important (though beyond the scope of this research brief). These results do suggest that children involved in CWS investigations have substantial unmet mental health and special education needs that likely merit further attention, regardless of the maltreatment investigation outcome.

## Notes

- <sup>1</sup> DePanfilis, D., & Salus, M. K. (2003). *Child protective services: A guide for caseworkers*. U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. Washington, DC: Children's Bureau.
- <sup>2</sup> More information on the nature of substantiation is given in the forthcoming NSCAW brief: U.S. Department of Health and Human Services, Administration of Children and Families. (in press). *Caseworker judgments and substantiation: Research brief*. Washington, DC: Author.
- <sup>3</sup> Walter R. McDonald & Associates. (2003). *National study of child protective services systems and reform efforts*. Denver, CO: Author.
- <sup>4</sup> U.S. Department of Health and Human Services, Administration of Children and Families. (in press). *Caseworker judgments and substantiation: Research brief*. Washington, DC: Author.
- <sup>5</sup> For more information on NSCAW methodology, see 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 sample of children and families investigated for abuse and neglect. *Children and Youth Services Review*, 24, 513-543. See also U.S. Department of Health and Human Services, Administration for Children and Families. (2005). *National Survey of Child and Adolescent Well-Being (NSCAW): CPS sample component, Wave 1 data analysis report*. Washington, DC: Author.
- <sup>6</sup> All percentages described in this research brief represent weighted percentages. Some groups were oversampled to provide sufficient numbers for separate analysis (e.g., children who were sexually abused), so weighted percentages are used to provide the most accurate national estimates.
- <sup>7</sup> Hussey, J. M., Marshall, J. M., English, D. J., Knight, E. D., Lau, A. S., Dubowitz, H., et al. (2005). Defining maltreatment according to substantiation: Distinction without a difference? *Child Abuse & Neglect*, 29, 479-492.
- <sup>8</sup> Orthogonal contrasts within a weighted ordinary least squares regression model allowed us to test whether substantiated cases were significantly different from unsubstantiated cases.
- <sup>9</sup> U.S. Department of Health and Human Services, Administration for Children and Families. (2005). *National Survey of Child and Adolescent Well-Being (NSCAW): CPS sample component, Wave 1 data analysis report*. Washington, DC: Author.
- <sup>10</sup> Child behavior problems were measured by way of caregiver report on the Child Behavior Checklist (or CBCL; Achenbach, 1991) and teacher report on the Teacher Reform Form (TRF). Evidence of a behavior problem was defined as children with standardized *t*-scores at baseline exceeding 64 on either the Total Problems, Internalizing, or Externalizing scales or either the CBCL or TRF.
- <sup>11</sup> Child cognitive or language delay was measured with the Total Cognitive Domain of the Battelle Developmental Inventory (BDI), the Composite Score of the Kaufman Brief Intelligence Test (K-BIT), or the Total Language Scale on the Preschool Language Scale (PLS). Evidence of cognitive or language delay was defined as a score at baseline more than 2 standard deviations below the mean on the BDI Total Cognitive Domain, the Composite Score of the K-BIT, or the Total Language Scale on the PLS.
- <sup>12</sup> "Need for mental health services" was determined by caregiver report on the Child Behavior Checklist (Achenbach, 1991) or teacher report on the Teacher Report Form. Children with standardized *t*-scores exceeding 64 on either the Total Problems, Internalizing, or Externalizing scales at baseline or Wave 2 were considered to be in need of mental health services.
- <sup>13</sup> "Need for special education services" was determined when a child was deemed to have a behavioral health need (see "need for mental health services," n. 12) or if he or she scored more than 2 standard deviations below the mean at baseline on the Total Cognitive Domain of the Battelle Developmental Inventory, the Composite Score of the Kaufman Brief Intelligence Test, or the Total Language Scale on the Preschool Language Scale.
- <sup>14</sup> Kataoka, S. H., Zhang, L., & Wells, K. B. (2002). Unmet need for mental health care among U.S. children: Variation by ethnicity and insurance status. *American Journal of Psychiatry*, 159(9), 1548-1555.

## National Survey of Child and Adolescent Well-Being Research Brief

Available at: National Data Archive on Child Abuse and Neglect (NDACAN), Cornell University, ndacan@cornell.edu

Administration for Children and Families (ACF, OPRE)  
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This is the ninth in a series of NSCAW research briefs focused on children who have come in contact with the child welfare system. Additional research briefs focus on the characteristics of children in foster care, the provision of services to children and their families, the prevalence of special health care needs, use of early intervention services, and caseworker judgment in the substantiation process.