

PREPARED: May 20, 2010

▶ Disproportionate Entry into the Child Welfare Caseload in Santa Clara County: 2007 - 2009

Prepared for the Department of Family and Children's Services,
Santa Clara County, California

The SPHERE Institute
May 20, 2010



SPHERE Institute
601 Montgomery Street, Suite 400
San Francisco, CA 94111

INTRODUCTION

In June of 2009, The SPHERE Institute submitted a report to the Santa Clara County Department of Family and Children's Services for the County's Children of Color project. In part, SPHERE reported that:

- After substantiating allegations of physical abuse, DFCS is more likely to open cases for children of color than for otherwise similar white children
- Among referrals that include allegations of substantial risk, DFCS is more likely to substantiate such allegations for children of color than for otherwise similar white children.

At the request of the County, SPHERE has carried out further analysis of these findings. This document summarizes some of SPHERE's findings to date. In connection with case opening for physical abuse, the data suggest that:

1. After substantiating allegations of physical abuse, in the period 2007 – 2008, DFCS was more likely to open cases for children of color than for white children, even after holding measures of risk constant?
2. These between-group differences declined between 2007 – 2008 and 2009?
3. Between-group differences in the likelihood of case opening in 2007 – 2008 were concentrated in opening of voluntary cases?

In connection with the likelihood that DFCS will substantiate allegations of substantial risk, the data suggest that:

4. In 2007 – 2008, DFCS was more likely to substantiate allegations of substantial risk for children of color than for white children, even after holding measures of risk constant?
5. Between-group differences, however, were concentrated in referrals where there were no allegations other than substantial risk and in referrals where there were no substantiated allegations other than substantial risk?

These findings concern what one might refer to as *disproportionate entry* into the child welfare caseload. The decisions to substantiate allegations and open cases, and how social workers make such decisions, govern the likelihood that children will appear in the caseload of child welfare services in Santa Clara County. If social workers are more likely to substantiate allegations and open cases for children of color than for otherwise similar white children, then children of color will enter the caseload at disproportionately high rates.

We might also ask whether children of color *exit* the caseload at disproportionately low rates. To address this question, in the final section of this memo, we find that, on average, cases for African-American children, at least, tend to be longer than those for Asian, Hispanic and White children.

CASE OPENING AND SUBSTANTIATION

Table 1 and Table 2 present findings regarding case opening for physical abuse. The tables report findings for referrals that DFCS received in two periods: January 1, 2007 - December 31, 2008, and January 1 - December 31, 2009. The table reports differences between the likelihood that DFCS opened cases after substantiating physical abuse, between children of color and white children, as indicated in Column 1.

Columns 2 and 4 report numbers of referrals where DFCS substantiated physical abuse for the two periods. Columns 3 and 5 report the differences between the likelihood that DFCS opened cases for children of color versus otherwise similar white children. Positive numbers indicate that DFCS was more likely to open cases for children of color. Negative numbers indicate that DFCS was less likely to open cases for children of color. For example, Column 3 of the first row reports that DFCS was 15.3% more likely to open cases for African-American children.

We use regression-type methods to estimate between-group differences, holding constant factors associated with risk of physical abuse. In Table 1, these methods hold constant measures available in the Child Welfare Services Case Management System (CWS/CMS). In Table 2, we hold constant factors measured in CWS/CMS as well as measures available from the Comprehensive Assessment Tool (CAT). In both cases, SPHERE also employs a more sophisticated indicator of family low-income status than in the past—i.e. eligibility for CalWORKS in 40%, or more, of observed months. Note that the CAT sample is substantially smaller than the CWS/CMS sample, and that results from the two samples differ substantially. Occurrences of an asterisk indicate instances where a difference between children of color and white children is statistically significant.

Table 1, Column 3 indicates that, in 2007-2008, after substantiating allegations of physical abuse, DFCS was 15.3% more likely to open cases for African-American children relative to white children. DFCS was similarly more likely to open cases for Asian and Hispanic children (13.2% and 13.8%, respectively). Moreover, for Asian and Hispanic children the differences were statistically significant. Note, however, that by 2009, all of these differences had fallen substantially and none was statistically significant. Indeed, by 2009, it appears that DFCS was *less* likely to open cases for Asian and Hispanic children than for white children, although none of the estimated differences for 2009 are statistically significant.

Table 1. Differences in the Likelihood of Case Opening for Physical Abuse: Children of Color (COC) vs. White Children, CWSCMS Sample				
	2007 - 2008		2009	
Case Opening	Referrals with Physical Abuse	Rate for COC - Rate for White Children	Referrals with Physical Abuse	Rate for COC - Rate for White Children
African American	51	15.3%	26	4.5%
Asian	111	13.2% *	32	-2.8%
Hispanic	471	13.8% *	175	-5.5%
White	121		42	
Total (N)	754		275	

Table 2 reports estimated between-group differences using data from CWS/CMS and the CAT. Combining the two data sets allowed SPHERE to control for a larger set of risk factors, but carried the disadvantage of substantially reducing the size of the sample. Because the sample of referrals where DFCS substantiated physical abuse was small, even apparently large differences between children of color and white children are not likely to be statistically significant.

Table 2. Differences in the Likelihood of Case Opening for Physical Abuse: Children of Color (COC) vs. White Children, CWSCMS + CAT Sample				
	2007 - 2008		2009	
Case Opening	Referrals with Physical Abuse	Children of Color vs. White	Referrals with Physical Abuse	Children of Color vs. White
African American	25	23.1% *	14	24.4%
Asian	71	25.3% *	21	3.4%
Hispanic	251	26.3% *	116	10.4%
White	75		26	
Total (N)	422		177	

In Table 2 we see that estimated between-group differences are uniformly larger. It remains, however, that these differences fall substantially between 2007 – 2008 and 2009 for all groups other than African-Americans.

Table 3 (Column 2) reports between-group differences in the overall likelihood that DFCS opened a case for physical abuse in 2007 - 2008. These are the same figures that appear in Column 3 of Table 1. Column 3 of Table 3 reports differences between children of color and white children in the likelihood that DFCS opened *voluntary cases*, while Column 4 report between-group differences in the likelihood that DFCS opened *involuntary cases*.

Table 3. Differences in the Likelihood that CWS Substantiates Substantial Risk: Children of Color Relative to White Children, 2007 - 2008					
Ethnicity	All Cases		Opening Voluntary Cases		Opening Involuntary Cases
African American	15.3% *		17.7% **		-0.6%
Asian	13.2% **		8.9%		6.1%
Hispanic	13.8% **		10.4% **		3.5%

In Table 3, we observe that between-group differences in case opening were concentrated in *voluntary* rather than involuntary cases. This helps to *locate* disproportionate case opening and, insofar, to help isolate its origins. We do not yet know why disproportionate case opening should occur primarily in connection with opening of voluntary cases.

Tables 4 and 5 present information regarding the likelihood that DFCS substantiates allegations of substantial risk

Table 4. Differences in the Likelihood that CWS Substantiates Substantial Risk: Children of Color Relative to White Children, 2007 - 2008					
Ethnicity	All Referrals with Allegations of SR		Referrals with No Other Allegations		Referrals with Other Allegations
African American	5.5% *		6.2% *		2.6%
Asian	-3.4%		-3.3%		-2.6%
Hispanic	8.8% *		7.8% *		9.8% *

Table 5. Differences in the Likelihood that CWS Substantiates Substantial Risk: Children of Color Relative to White Children, 2007 - 2008					
Ethnicity	All Referrals with Allegations of SR		Referrals with No Other Substantiated Allegations		Referrals with Other Substantiated Allegations
African American	5.5% *		5.1% *		-1.8%
Asian	-3.4%		-3.1%		-9.0%
Hispanic	8.8% *		8.0% *		3.0%

In Tables 4 and 5, we see that DFCS is more likely to substantiate allegations of substantial risk for children of color in referrals where there are i) no allegations of other types, and ii) no substantiated allegations of other types. The second of these results, in particular, is consistent with the view that social workers substantiate substantial risk in referrals where they are unable to substantiate any other type of allegation but perceive a family to be in need of services. To direct services to families in such referrals, social workers need to substantiate an allegation of some kind, and the least negative such allegation is substantial risk. Note, however, that this does not explain why social workers are more likely to do this in referrals for children of color.

TIME TO EXIT FROM THE CASELOAD

Social workers' decisions to substantiate allegations and open cases partly determine whether children of color enter the child welfare caseload at higher rates than otherwise similar white children. Social workers' decisions to *close cases* help determine whether children of color spend longer periods in the caseload than otherwise similar white children. We refer to this as the phenomenon of *disproportionate exit* from the child welfare caseload.

It is an ambition of the Children of Color project to determine whether social workers tend to close cases earlier for white children than for children of color, holding risk constant. The project has not yet explored this question, but it has generated descriptive statistics suggesting that cases for African-American children tend to have longer durations than cases for children of other ethnicities.

In Figure 1, we present data regarding the number of months that cases remain open for children in Santa Clara County, for the period between 2007 and 2009. Lines in the figure represent the share of children whose cases remain open after a specified number of months, as recorded along the bottom of the graph. Note that data in the graph *do not* control for risk factors, so the figure does not compare children of color with otherwise similar white children. Rather, the figure merely presents the shares of children that remain in the caseload after fixed numbers of months.

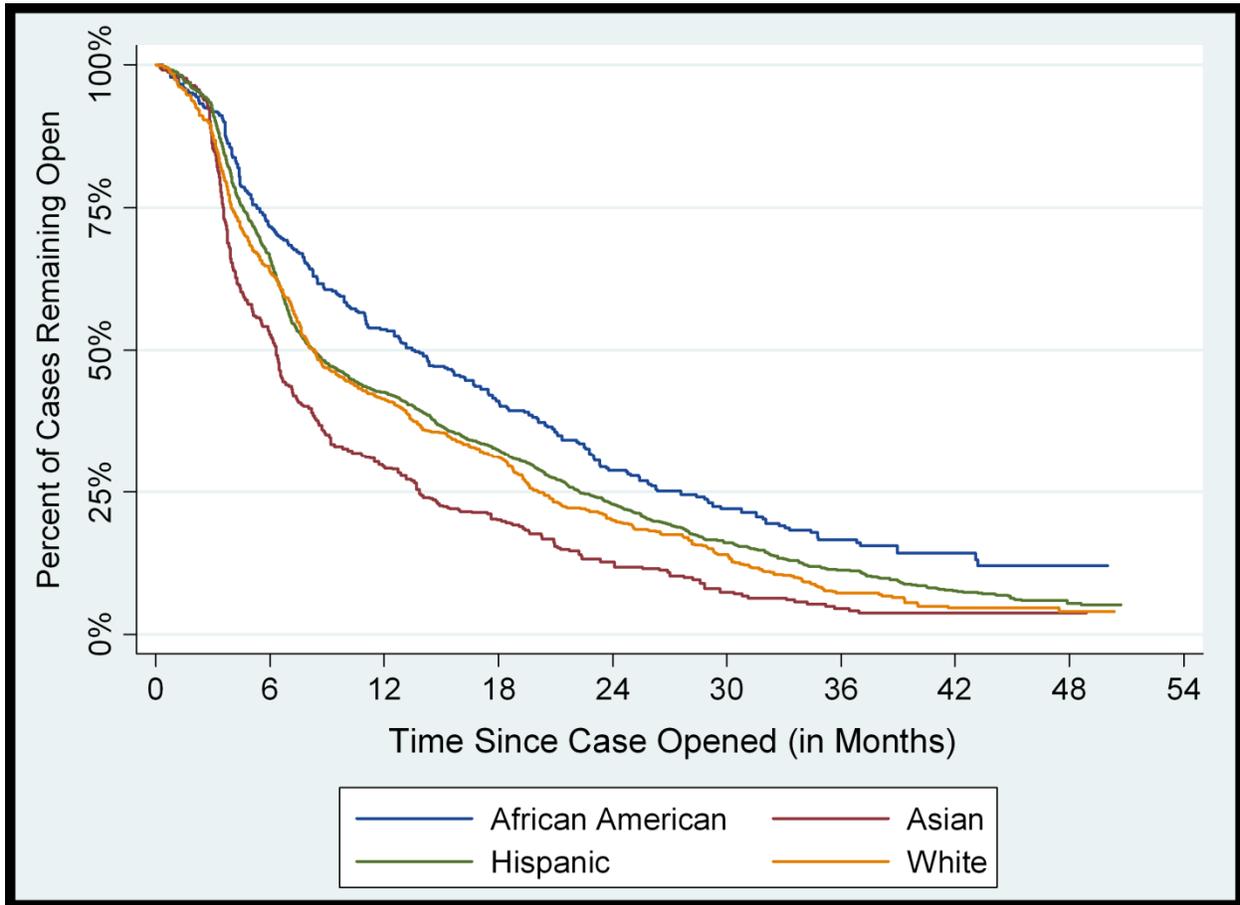
For example,

- The point representing zero months since case opening represents the starting point for all children's cases. So at zero months, 100% of children's cases remain open.
- After approximately 6 months, roughly 75% of cases for African-American children remain open, while much lower percentages remain open for children of other ethnicities

Indeed, in the figure, we see that:

- Cases for African-American children tend to last longer than for children of other ethnicities. For any length of time that we choose, a greater share of cases remains open for African-American children.
- In general, cases for Hispanic children remain open longer than cases for white children—i.e. the line representing time to exit for Hispanic children generally lies above the line for white children.
- Asian children exit the caseload more quickly than any other group.

Figure 1. Share of Cases Remaining Open at Six-Month Intervals, by Ethnicity: 2007 - 2009



PROPOSED CONTINUING WORK ON DISPROPORTIONALITY

In connection with disproportionate case opening for physical abuse, SPHERE will extend its analysis in at least the following respects.

- **Verify and explain the apparent decline in case opening in 2009.** Case opening may have occurred in one of two primary ways: i) social workers may systematically have weighted some risk factors more heavily than they had for white children, or more lightly for children of color; ii) social workers may have simply refrained from opening cases for children of color that they would have opened in the past, or begun to open cases for white children that they would not have in the past. The analysis will seek to determine which of these accounts is correct.
- **Identify factors that social workers consider in opening cases and how they weight them.** In particular, to identify the sources of disproportionality, SPHERE will identify the interaction between ethnicity and risk factors—for example, by determining whether family low-income status has a greater effect on case opening for children of color than for white children.
- **Specifically identify the role of SES.** In its recent work, SPHERE has used a more sophisticated indicator of family low-income status—i.e. eligibility for CalWORKS. It remains to exploit this new information fully.
- **Explain why substantiation of substantial risk appears to be concentrated in referrals where there are no other substantiated allegations.** It appears that social workers are more likely to substantiate substantial risk where there are no other substantiated allegations. It remains to say why this is true.
- **Test the hypothesis that children of color remain in the caseload for longer durations, after controlling for risk factors.** In Figure 1, we observe that African-American children, at least, tend to have cases that remain open longer than cases for children of other ethnicities. It remains to test the hypothesis that children of color remain in the caseload *than otherwise similar white children*—i.e. after holding risk factors constant.