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Fifty Years of CAPTA, the Poverty It Never Named and the Urgency for Redesign

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Todd Sage [00:00:08] Welcome to the inSocialWork the podcast from the University of Buffalo School of Social Work. I'm today's host, Todd Sage. Today's episode is about a question that sits underneath almost every child welfare case in this country. When a family can't afford heat, housing, or a ride to the doctor, why do we still call that neglect? In 1974, Congress passed the Child Abuse Prevention and Treatment Act, also known in its short form as CAPTA, to protect children from serious harm. Fifty years later, neglect makes up about three-quarters of confirmed child maltreatment cases nationally. Much of that neglect looks and stems from poverty. My guest today is Dr. Mary McCarthy, who entered the field a year before CAPTA became law and has spent more than five decades working in and around the child welfare system. Together we look at how the law was built, how it was misapplied, who benefits from keeping it this way, and what citizen review panels in New York are recommending to change it. A quick note before we begin, this conversation touches on child abuse, foster care, and family separation. So now let's get into the interview with Dr. Mary McCarthy. Welcome everybody to the end social work podcast. And today I wanna start off by doing something a little bit different. I wanna kind of give you a scenario to kind of lead us into today's conversation. So for the scenario, I want you to imagine a mother in a mid city New York County who has three kids, a job that gives her 28 hours a week, which is very deliberate. And this is because if she had more hours, she'd be eligible for benefits. In November, her landlord stops. Fixing the furnace. She buys two separate space heaters and puts all three kids in one bedroom to keep them warm. In December, the youngest gets a cough and that will not clear and she misses two pediatric appointments because the bus route that goes to the clinic does not run on Saturdays and she cannot afford to lose a shift. The pediatric office calls the State Central Register, which is a New York phone hotline where all child welfare calls come into. The report reads inadequate housing, inadequate medical care, educational neglect for the two older children. Now, a caseworker has been assigned. This caseworker have 24 hours to make the initial contact, 60 days to make a determination, which in New York we call either indicated or unfounded. In between, a home visit has happened, face-to-face contact has happened with everybody that's named on the assessment. A safety assessment is conducted to include risk assessment. Collateral contacts are contacted at the school and at the medical office. And a documentation is used in a system that absorbs most of the available hours that this caseworker has to do their job. She does not have a furnace, she does not a bus, she does have rent and money, and the mother who has done nothing but ration the resources she has is now subject to this ongoing investigation by the child welfare system. So here's what I want you to sit with as part of that scenario. Nothing in that scenario is abuse. There's no physical harm. There's nothing that states that she had any neglect whatsoever that was not poverty driven. And every part of the machinery that

was just activated was built by a law written in 1974 to protect children from being physically abused. So how does a family like this get there? How does a statue written about physical end up processing 50 years later a caseload where three quarters of confirmed victims nationally are neglect cases and where neglect often means the family simply cannot afford the conditions the state expects them to provide. My guest today has been watching the system from the inside for over five decades and she has answers that are more uncomfortable than it's drafted into law. Mary McCarthy argues it was misapplied almost from the start. So, our guest today, Dr. Mary McCarthy, recently retired from the University of Albany School of Social Welfare after 38 years. During her time there, she directed the New York State Social Work Educators Consortium, which was a partnership between the State Office of Children and Family Services, the Deans in New York School of Social Work, and County Social Service District. She spent 25 years on the professionalization and stability of the child welfare workforce. She also was a co-principal investigator of the National Child Welfare Workforce Initiative, or informally known as NCWI, which was funded by the Federal Children's Bureau, which did the same work nationally with state and county and travel agencies. She is the past president of New York State Chapter of the NASW and served on the National NASW Board. Here's the part that matters most about her and this conversation. Mary started in the field in 1973 at the Huntington Family Center in central New York, a settlement house, and its children's program. Two years later, she became a caseworker for Onondaga County Social Services in their court unit. So she was doing community-based family work the year before CAPTA was signed into law, and she was do child protective work the year after. When she tells you what the system was supposed to do and what it did instead, She is not reconstructing it from literature. She was standing there at its implementation. She is also part of the Western Child Welfare Citizen Review Panel, a panel which I coach here and will talk about later on in our conversation today. New York is comprised of three of these citizen review panels, the Eastern, Western, and New York City. And we work collaboratively. This was one of the federal requirements under CAPTA. They are made up of volunteers, and they exist to look at how the state's child protective system is actually performing. So in the last section of our conversation today, we're gonna talk about some of the recommendations that the system review panels have historically made. So welcome, Mary, and I'm so happy to have you today.

Mary McCarthy [00:06:15] Thanks, Todd. I'm really glad to be here as well. I think this is a very important conversation and I'm glad that this podcast will really help get more of this information out to the community in Western New York and across the country. So, the 1st thing I want to do is is talk about the question. What was that original reporting law intended to do? So its original intent was to protect children from serious harm and abuse. Serious harm, I wanna emphasize that word. How was it constructed? It provided financial grants to states to establish child protection programs. It established the National Center for Child Abuse and Neglect, NCAN, which was overseeing the whole implementation across the country. It set minimum standards so they created a federal definition for child abuse and neglect that they handed to all states. And then it also funded research training and started to build a clearinghouse for information sharing. So I think its original intention in those pillars could form the basis for a strong system, but not the system that we have today. So how did those initial reforms become misapplied? So first, states were free to operationalize the definitions, including for neglect. They were also free to decide who was mandated to file a report. There was no penalty for failure. There was a no penalty for false reporting. But there were criminal and civil penalties for failing to report. Definitions of neglect were very vague and open to interpretation. There was substantial training of professionals on their duty to report, reminding them that there were penalties for failing report. And the number of that the approach and the data that was really being measured

was how many children were seen, how many were removed, and nothing about whether the system improved the lives of children and families. What was happening at that time is the organizing logic behind all of this was parents were responsible for raising their own children. And that's really been built into the identity of our country from the beginning. We do not have a social support network. We have a social surveillance network and where you have to apply to receive support and services. The assumption of the child abuse and neglect literature at the time were that parents were deviant. Parents who abused their children were deviant and that takes us back to Ray Helfer and Dr. Kemp's original war cycle, the world of abnormal rearing, that they're theories in their book was the center of the way we approached this. They also assumed that this behavior of abuse was passed on generationally to subsequent generations, but what we overlooked was we were removing these children from these parents that were creating generational abuse and putting them in institutions. Instead, traumatizing them, separating them from their families and siblings, and within those institutions, substantial neglect and abuse was found to be happening many years later. So we really overlooked that institutional treatment of children led to intergenerational cycle of abuse. We also had a... Great over-reliance on removal, as opposed to poverty alleviation, housing assistance, and medical care. When a parent could not find resources, children were removed rather than resourced. And I want to remind you of who was in the federal government, leading the federal governor at this time. Richard Nixon was the president at the time this bill was signed, and then Gerald Ford and Jimmy Carter. So the work of Johnson on the war against poverty was never really woven into the child abuse and neglect system. The original intent was not met because we had a country built on these assumptions. Individuals were supposed to themselves overcome historical poverty, violence and resource scarcity. And the federal funds were to run a protection system. It was not organized. To be a family support system. So it was organized around investigating people and determinations. Listen to that language, investigation and determination, not how can I come and really provide support and services to you. There was also a very low bar of evidence for making that determination of abuse or neglect. And there was consistent denial in spite of the evidence at federal and state systems that poverty drives most neglect despite the evidence.

Todd Sage [00:11:42] And I should add my my piece in here as well. You know being a prior child welfare worker and doing this work for 14 years, you know Obviously not as early on as you Everything you just stated is absolutely true. The system is funded in a way that supports counties and states Motives to remove children because that's where the funding comes from and there's no funding for really preventative services But I also want to put the statutory piece to next what you just described, because there's something almost perverse in it. Starting with the federal definition of what CAPTA is. CAPTA stands for the Child Abuse and Neglect Prevention Act. And it's a single compound term. It never defines neglect on its own. It's the federal floor and it's deliberately narrow. It's a minimum standard. And the expectation was the states would build on it. And the law has not been reauthorized since 2010. And so the gap is not an open question being debated in Congress. It is a settled feature of its architecture. Now in New York, where we're from, we do have a definition that piggybacks on top of the CAPTA definition. And it's defined in New york family court act one zero one two section F. And it reads, what we've been arguing for is should say. And so really what we have is a practice implementation issue here. The New York law reads, a child is neglected when a parent fails to supply adequate food, clothing, shelter, education, or medical care, and the statute defines this as being financially able to do so or after financial resources have been offered for the family to do. And so this qualifier has been a New York law since 1970, which states poverty alone is not neglect. And so it's written into New York Law and it's written into many other states laws as well. So the problem is not to definite that the definition is silent. The problem is

that we build a response system that activates within 24 hours and has to reach the determination within 60 days. And it brings people into a system that processes material deprivation as neglect anyway, no matter what the statute says. And there is another New York specific piece. We do not screen these calls for risk at the point of report the way a lot of other states do. New York has a unique system which we call a central registry system where the state of New York has one hotline that brings in all the calls for the whole state. And because of that, a lot of the calls aren't screened at that central point. They are sent out to the county to do what we've described above in our conversation already, which is a investigation. And that word's an important word, because when somebody goes out and does an investigation, it defaults that there's already something wrong. And so it's really left up to the counties to now take on that obligation, that risk. And actually go knock on the door and say, we have a report that came in. And so the simple fact is a majority of these poverty calls aren't screened out. They are sent to the counties for investigation and an investigation is initiated. And so we're not utilizing the floor that was put in place by the law. And so there's a series of unintended consequences. Can you tell us more about the unintended consequences, Mary?

Mary McCarthy [00:15:22] Yeah, I'd love to. Let's just think about Tata's really set the framework so well. So what's the downstream effect of this initial investigation process and determination process? So first of all, we have unnecessary intrusion into families because it is an investigation. So this is a child welfare system that instead of focusing on child and family welfare, investigates you. It also has very limited services that are available, mental health services, healthcare services, free clinics, housing opportunities, housing vouchers, the kinds of things that families might actually need to be able to build their lives. We also depended on foster care for many, many years as the first place where children would go. And I think we saw a huge blossoming nationally in the total number of children that were placed in foster care. And because that number was so large, they weren't necessarily living with families. There weren't enough families to care for them. They were put in group home settings and institutional settings. And we know now through detailed investigations into many of those settings that much poor care was the least noxious thing that happened to these children. Many of them were physically, seriously physically abused, traumatized, locked in cells. I mean, left as damaged adults because the care, the child welfare system was incapable. Being responsible for the number of children that were removed from their families. And what do we know about those kids? They left foster care at 18 because that was what the law said, here you're 18, here's your bag, be gone. They weren't necessarily educated. They had no access to community college or job training. Many of them went right into homelessness. They had no families anymore that could take them in. They have no caring adults to wrap around them. How many children do you know at the age of 18 can be put out on the street and be completely self-sufficient? It's impossible. So we see them in the incarceration system, in the homelessness population, in people with very severe mental illness challenges, and also in hospitals because they're dying from diseases that are related to trauma. So we have to ask ourselves the question, what would it look like for government to actually support poor families, thinking about healthcare, housing, and food assistance? Can we do that without investigating them? Actually, no. Many of those families that are investigating get top priority for housing vouchers or top priority. So... We have to stream people in to the child welfare system, where many of them can be removed, in order to actually help them. So what we really see are negative and traumatic outcomes across the board for both the parents and the children. And we still have not asked whether the system as it's currently designed is producing them.

Todd Sage [00:18:56] Absolutely. And it's an interesting dynamic, you know, for my child welfare workers out there listening today, we all have had exposures to families actually

showing up to our office, willing to hand over their kids as a way to access services. And so we have a very backward systems in many ways, as you described, where the only way to get access to address some of these poverty concerns. Is to walk through the front door of this system that was never meant to work this way. Let me push on that from a different direction. There's now a reasonably consistent finding, not just in New York, but in other states, that when we give families money, that the neglect reports go down. Examples are like state earned income tax credits, expansions of the minimum wage. Expanded child tax credits in 2021, emergency rental assistance during the COVID pandemic, all showed that money flowing into these systems makes reports of neglect go down. And so my question is, if transferring cash reduces neglect reports, what exactly have we been calling neglect this whole time? And there's some data that we can look at to really talk to us about this too. In 2024, child maltreatment, the federal government report released last January put 74% of the over 532,000 victims nationally into this neglect category. Physical abuse only accounted for 18%, sexual abuse for 9%. And so CAPTA, which was designed to really address that physical and sexual abuse, the harm to children, has really turned into this thing where up to 74% of the calls are related to neglect. Now, which percentage of that is actually related to poverty? I think you and I would argue the majority of that percentage is. The harder version of this number is the one that we use if anyone pushes back. The prior year's data, 64% of victims experienced neglect only with no abuse finding attached at all. So when a report comes into the central registry or the hotline. And there's somebody's describing the concerns on the family. You can have multiple concerns come in at the same time. There could be allegations of physical harm. There could allegations of emotional harm. There can be allegations of neglect related to poverty. And so that 64% number clearly states that the only presenting issue was one of neglect, that there was no subcategory that was really related that CAPTA was meant to capture. So the 74% figure counts children who may appear in more than one category neglect, which is why the percentages sum up past 100. 64% is the floor and it's a number that we know should not be there. Physical abuse and sexual abuse rates have declined substantially over the last 30 years, but neglect has barely moved. We continue to use this category as a catchall for addressing many of the family's needs when they come to the tension of child welfare. When states increase minimum wage, we know that that's directly associated with fewer neglect reports and fewer removals, which is a strange result for a condition that we described as a parenting deficit. And so this thing that we bring in front of the courts, the scene that workers check the box and say neglect has happened, that's poverty related, really we're saying that it's a parenting deficit, which is the furthest thing from the truth. So if everything we've described so far is diagnosable, we can really point at the data and say it's happening. Most of the people listening to this could have written the diagnosis themselves. So I want to spend some real time on a question that actually matters, which is why a system this widely understood is misaligned and has stayed essentially the same for the past 30 years. And I don't mean that rhetorically, who benefits from the current design and why would they? Why would they not want to give it up and change the system? What are your thoughts about that part of the system, Mary?

Mary McCarthy [00:23:11] This is an example of practice made permanent, not perfect. And I think once you get a system going, it becomes very hard. There are many people that are benefiting from keeping it as it is, as opposed to really changing it. So here we have a highly regimented and intrusive system where reporting requirements drive entry into the system. And that's the front door. Paperwork limits time with families. There are these investigation guidelines. So in New York, you only have 60 days to complete the investigation, get it off your desk and move it on to the next part of the system. And actually now under reporting requirements for systems, you get dinged if you don't meet that 60 day timeline for completing your investigation. So what does that do? 60 days, it

really limits a worker's ability to focus on engagement and relationship building in the poor community. Everybody knows who a child welfare worker is when they come calling. And that's their biggest fear, right? So the child welfare system over the decades of misdirection has become, strikes terror into the hearts of parents. In poor communities. We also have the impact on workers, right? People come into this job because they really want to help people, but the relentless pace, the intense demand for paperwork, the very inconsistent caseloads. If I have a unit of seven CPS workers and two of them leave because they can't take the work anymore, it takes three months often to hire a new worker. So all the workers in that unit absorbed those caseloads. It is historically been true that workers have carried caseload of up to 100 families. I know for a fact in Western New York that during times of crisis, the caseloas have been 60 to 80 families per worker. No worker. Can be helping that many families simultaneously, so the burden is really on the worker. Also, when they're going into cases that are not founded, that are true neglect and there's no abuse or evidence of abuse, they unfound the case. Three months later, another report comes in, they go back out to the same family. About 7% of all the cases that are reported to the State Central Registry are repeat reports that are designed to harass a particular parent. They're in a divorce situation, their neighbor's pissed off at them, and they just keep calling and calling. And those workers have to go out and do another investigation. We also have large workforces in these systems and they have priorities. The bosses don't wanna give up that money or that workforce. And the other thing is that all the other ancillary systems, education, healthcare, juvenile delinquency, police departments. We've all become reliant on reporting families to the child welfare system, because they have no choice. They're the emergency room for children and families. So like an ER can't turn away a patient, no matter what time they show up at their door, child welfare cannot turn away or report from the community and must be the point of entry. So everybody's invested in maintaining this system as opposed to really building a community-based system of care. We also have federal regulation with state implementation, which means there's no consistency across states, no basis for system-wide evaluation. Now, some states are more data-driven than others, but they may lack resources for that system- wide change. There's also the state and federal contracting and procurement systems. So now I want to put in a new data system, or I want have a different case recording system. You really have to go through the procurement process, which can last a year to two years in order to change any of your internal processes. The other part is right now, the way these systems are designed is. What's being recorded is activity. So how many families did I see? How many days did I go out? How many collateral contacts did I reach out to? It's not talking about what the outcome was of that. It might say I referred the family to mental health services. But it doesn't say how long did it take for the family to get there and whether that was the right service for them. So all we really track is who's coming into the system and who's going out. We don't really look at outcomes or impacts. We do have evidence that people that enter this field really enter to help families. And one of the biggest reasons they leave is because they feel that this is not a system that helps people.

Todd Sage [00:29:07] Absolutely. And as I hear you talk, it makes me think about some of my own practice and about how we truly are just tracking documentation versus outcomes. And it's not just the child welfare workforce itself. This spills over into the family courts as well. Something unique about Oregon when I worked out in Oregon was the child well for workforces. We wrote our own court reports, we wrote our own case plan. And if I wrote in to one of my recommendations in my court report to the court, an outcome versus a participation in an activity, that would be rejected by the parent's attorney and the judge because nobody is really looking at outcomes. It's, did you go to a parenting class? Not did that parenting class improve your parenting functioning and now your family's functioning

better and is safer. And so The real question is, and it's something we're going to kind of move into as we continue to talk here, is this question of data? What are we gathering? What are monitoring? And do we really know what's happening within these systems? So a concrete example of this, when we talk about data and it is a program that I know both you and I are happiest here and that we support is New York is now running a warm line that's called HAIRS. And it stands for Help, Empower, Advocate, Reassure, and Support. And it's operated to the state's Human Service Center Call Center, and it does something the child welfare system historically hasn't done. If a parent, caregiver, community member, anyone can call and get connected to simple things like food, clothing, housing, medical care, behavioral health care, parent education, child care. And it doesn't involve a formal report. There's no investigation, there's no case, but one thing that's not made clear is we're diverting resources into a system, and we're not gathering any data to know does it do simple things like prevent child neglect and maltreatment. We think this is a great policy, it is a good policy. The revised mandate reporter training points people towards this as they shift away from. The typical when in doubt, call your state child abuse hotline. You know your point that you made in our opening today about how mandated reporter training is very clear about the punishments for not calling. And it doesn't matter which state you've done it in. I've practiced in three different states and so I've had to do mandated reporting training in these three different states and every state will make sure that if you're a licensed professional And most states, it's pretty much any licensed professional that works with the community at large. And so we're talking about child welfare workers, doctors, nurses, teachers, you know, some states even include clergy. And so, we have this large body of mandated reporters that are made very clear, when in doubt, call your state hotline. We now in New York have the here's family line. And here's what I cannot tell you about it, is we know how many calls it takes. And so that's a number, that's the measurement point. But we cannot find published anywhere or get an answer from the state about whether even one of those calls has prevented a report and investigation or removal. And then there's a second thing that kind of bothers me with this process. When a call comes into the abuse hotline and it does not meet the threshold for registering as a report, in the CPS manual, there's clear distinction of what should happen if a call does meet a threshold. It is reported to law enforcement. There is a referral made. But when the opposite is true and a call doesn't meet the threshold, there isn't that same policy in place that says, hey, we need to connect you with the here's line so that we can do some preventative services and support your family in a way that doesn't involve the formal child welfare system. And so we built the door to services. And as far as I can tell, we did not build a hallway from the hotline into this service center that's been created. And it's important that the two of those are connected. There is a current bill in the New York for our New York listeners that's making its way through. It's assembly bill a 1030 sponsored by have a scene And it adds a new section to the Social Service Law directing OCFS, the Office of Child and Family Services, to publish annually on its website specific data points about calls to the State Central Registry and to the Hears Line. It currently cleared the Children and Families Committee unanimously and is sitting in the Ways and Means Committee. Why this isn't a glorious piece of legislation is something that's getting lots of media attention. It can be and it is one of the most useful things that I feel is on the table right now and it's worth our listening listeners knowing that it exists and we're stuck and to advocate for. What are your thoughts about kind of where that process is and that bill, Mary?

Mary McCarthy [00:33:59] Yeah, so I know there are a lot of align child welfare advocacy groups that are advocating in favor of it. And I think now that right now it's the budget making process from the governor's office. But as the legislature comes back into session

in the fall. This is definitely a high priority place for the advocacy community to put pressure on the legislature to get this pack.

Todd Sage [00:34:27] So earlier on, I talked about how both Mary and I are sitting on the citizen review panels and that's part of CAPTA. Every state has some form of citizen review panel. And so now I just wanna kind of turn it back over to you, Mary, so that you can kind of go over some of the history of the recommendations, what we're currently recommending and why we're recommending what we are recommending. And this is important because you've been on the panel since it's been embodied way back under CAPTA and so you have a very unique perspective that you can bring to this conversation related to kind of the function of the panels, the history of the panel, and which recommendations have gotten traction over the years and which recommendations haven't and why we're recommending what we're recommending currently.

Mary McCarthy [00:35:12] I have been on the panel for 15 years. I haven't been on it quite as long as some of the others. It wasn't from the very inception, but pretty close to the inception of the panels. I think over the years, we've seen a big difference in who sits in the leadership role at the Office of Children and Family Services related to how our recommendations get embedded into the work of OCFS. Our focus has really tried to be on services for kids and families, so we've been huge supporters of the Family Partnerships Program for New York that provides aids for pregnant and parenting mothers. The Nurse-Family Partnerships, there's really two different programs. One requires nurses, the other has trained aides. We've been very supportive of increasing the funding for that and making sure that's available statewide. We've then big supporters of any prevention bills that have come along that would redirect funding from protective services to upfront services, primary services. We've also seen... An erosion in the match that counties have to put up for these funding streams. So that's been a big concern of ours that New York is one of the few states that taxes counties. I want to say, if they're implementing even any kind of service, the county has to put it up. I think now almost 40 percent of the money and the state puts up 60 percent. So for poorer counties or counties that have tax restrictions, this has been very difficult for them to kind of fully enforce, fully stand up really good prevention services even when they know they're needed. And it's particularly true in rural counties. Over the years, we've tried to focus on what can really help at the local district level to make a difference in the lives of children and family services and how can we support local district commissioners? In building the strongest locally-based child welfare system and support system that they can possibly do. And one of the things we feel is greatly lacking is data transparency. As Todd has said, how do we really know the outcomes for the things that are happening? What categories is data being? Maintained and how do those different categories interrelate to each other, intersect with each other, so we can ask some more complex questions and kind of drill down to case level or age level or worker unit level. So data transparency is a huge recommendation across all the panels. As Todd has been saying, we want to know about outcomes, not volume. And we've been pushing that hard. And I think OCFS recognizes that. They'd like to have a new data system than the one they have. That could take four or five years to actually come to fruition. So what can we do with the data that we have now that's more focused on public facing outcomes? And I that takes us back to the have a seatbelt that Todd mentioned. Those are specific. Impacts that they have to report on on a monthly basis from the State Central Registry. And this is now funded under Title IV-E federally. Parents have a right to a lawyer if they've been reported for abuse or maltreatment. So far we give kids lawyers, but we have not supported parents' rights to legal representation. But 4E money can be used to pay attorneys for parents. Some counties have no commitment to that or are struggling to be committed to that because they know it'll be harder for them to

take some of these families to actually pursue an investigation and a report. So what does that say to you about this child welfare system, right? That we don't want parents to know what their rights are. I think that's a huge towel, uh, about where we are. And the final one is doing more when a report is made to screen out reports that are neglect only or poverty based neglect that 64% of poverty only cases. Could be screened out at the front door. Workers would not have the caseloads they have. We would not be intruding on families. We will not be doing the kind of surveillance that we've been doing in New York. Now, so where is New York on that? Our colleague, Nora McCarthy, who runs The New York City Family Policy Project has done a lot of research on this and. Knows there are several states that have redesigned their whole call-in center, so that now they actually have a very reliable screening process that's working for them. She's recommended that New York hire those consultants, $2 million, that's a pittance in the OCFS budget to help them do that redesign. I think New York has historically been afraid of missing a child and that child dies and what are the consequences for that and not wanting to feel like they're responsible so they put it on the counties. I think we should all understand we're not perfect, we're human. There are going to be cases where we miss knowing the signals of a child but do we build a whole system of surveillance around that single child. It hasn't worked. Kids still die. We have about 1,500 kids a year, but let me tell you something. The number of children dying in America has not gone up in 20 or 30 years. We are catching many, many of the most serious cases. And so building a system that says we have to throw everybody in the net and sift it out of the net instead of saying, no, you don't even need to come into this system to begin with. By screening things out, I think is really huge. So these are the four major recommendations, data transparency, outcome rather than volume measures, commitment to parents' rights, better screening at the front door of the register.

Todd Sage [00:42:02] Yeah, and it's really important recommendations that have been made. And it's important for folks to know that are listening to this in other states. Again, like every state has a citizen oversight panel and they love to hear from their community and the constituents about how the system is or isn't working for them. And so this is another avenue for you to have some communication with and to help shape the system that you'd like to see in your community as well. There has been some... Uplifting things at the federal level that, depending on how states actually implement this, the Families First Act is one of those acts. There's the January 2025 federal Title IV-B reauthorization that did something new. It's allowed funds to be spent on concrete support. So many times if a state or a county was going to address poverty related issues there was no federal dollars really to match that to help support that that did have to come out of local funding. And that's one of the reasons that historically poverty has been addressed through the formal investigation process versus county stepping in and addressing it with other ways. So finally, we have some some monies that are coming down. The money has always been available for services, but now I can go to these material conditions themselves. So an example is paying a utility bill so the power can stay on during the middle of the winter. Actually purchasing durable medical equipment that maybe Medicare isn't wanting to cover for the family. These are things that a lot of times families struggle with to meet basic needs that now there's this mechanism. The question we want answered is whether New York is using it, right? Going back to the data question once again, and if they are using it to what extent? And what have the outcomes been for the families that they've been able to utilize it for? I personally have not been able find anything published on this within the New York system. Nationally, the pattern on related prevention funding is not encouraging, and because there is matching funding like Mary has talked about. So there is a federal-state match, and then there's typically a state and local county match that needs to happen related to these funding streams. And so as we talk about counties that are more

rural areas that may not have the tax base to support fully funding preventative services, many times it's a deliberate choice to simply not stand up a service that we know will actually prevent abuse and neglect. And that's something that we as a system need to think hard about, that we, as a systems, need to determine how do we support counties that don't have the tax base for more robust services. So we ask that question, not as a criticism, but just a way to notice the shape of it. There's now a federal authority to hand families the things they actually need instead of investigating them for not having it. And I cannot tell you from the public sources that are out there, whether or not we're using it and we're usin' it in the way it was supposed to be used. So I wanna name why these recommendations are shaped the way they are. Nothing on the list requires reauthorization to CAPTA. CAPTA's here, it's been the guiding principle. We don't need new appropriations of any size. What we need is this data transparency. We need data systems that are able to gather meaningful data so that we can measure outcomes. And we need to figure out what are the services that are actually the biggest bang for the dollars being spent. Because every service comes with that precondition that it's gonna have a cost associated with it. You cannot make a case for a redesign to a legislator that has never been shown what the current design is producing. And that's a question when we, as a citizenry board group, we as researchers, when we take things to the legislative bodies, they want to know what's working, what's the cost of what's working and where should we be spending our money? We currently have a system that can't answer none of those questions. The only questions we can answer is how many families we've had contact with, how many were indicated, how many were unfounded. And what's kind of the overall cost of running and maintaining this system. So I wanna close today with some questions for you, the audience. And I want you to think about this. And if you're inclined, feel free to write to us with what you think about. And this is really for my folks that are in the child welfare community or child welfare adjacent community. I wanna ask you, if you were to think about the system you're currently working in or the systems that you collaborate with that are child welfare related. What is one outcome measure you wish the system collected that it does not? What's that one burning question that you would like to be able to answer that there's just not a data point to answer it for you? The second question I wanna leave you with is in your agency, what definition to neglect are workers actually operating from? The statute, a regulation, are they using a risk assessment tool, a combination of those things, or is it simply a behavior that's passed down from peer to peer or supervision from supervisor to worker. Many times when we know workforce issues arise, there's this institutional knowledge that just gets handed down versus actually knowing what does policy and procedures say we're supposed to do? Where's the funding stream to prevent things from getting to a point where we're moving children? The third question is, if you had real access to concrete supports at the moment of a hotline call, Which of your current cases would have never been opened? Which of you current cases could have just been dealt with without your involvement, without formal input into a formal system, potentially court involvement? For our educators out there, our field instructors, our professors, our trainers that go into these organizations and train, what are we teaching our learners about the difference between deprivation and danger and neglect? And, more importantly, how are we teaching it? And of course, I got one final question for you, Mary. Just kind of pondering about the future, thinking forward. If we were to picture a social worker in 2075 reading about how we got here and what we've done, what do you think they would say they're having the hardest time understanding about the system that we created?

Mary McCarthy [00:48:24] Yeah, the first thing that comes to mind is how in the world did so many well-intentioned people believe the fiction that families should and could be self-reliant? The U.S. Really stands alone as a wealthy country globally that lacks services to

address basic needs and instead makes people prove they need help or health care. How do we believe that fiction?

Todd Sage [00:48:55] Yeah, much of the wealth in the United States is very concentrated with what we like to call the top 1%, right? And so we do know that as a country, we struggle with poverty related issues. We struggle with communities that have been devastated by outsourcing of work and changing in our economy. And so it is one of those those things with somebody looking back and knowing that that wealth is concentrated and it's not spread equally amongst our population. They really questioned, why did we design a system the way we did? So Mary, I wanna thank you for spending the time with us today. It's been a great conversation. I encourage our listeners to continue this conversation amongst yourselves because this is a system that needs to be continually talked about, it needs to continually looked at. And we're encouraged to have you have spent this time with us to just learn a little bit more about how. The child welfare system came to be, and our viewpoints on this. So thank you, and until next time, take care.

Mary McCarthy [00:50:00] Bye.

Todd Sage [00:50:09] I want to thank you for joining us today for this interview with Dr. Mary McCarthy. If you take one thing from this episode, let it be the changes Mary and I talked about, because they don't require Congress to write CAPTA. The four recommendations from the New York City Review's panels were around dated transparency, measuring outcomes instead of volume, a real commitment to current rights and legal representation. Better screening at the front door of the child welfare system so families whose only issue is poverty get help instead of an investigation. Those are choices states and counties can make right now, today. I also want to leave you with a question from the end of our conversation, especially if you work in or alongside the child-welfare system. What is one outcome measure you wish this system collected? What definition of neglect are workers in your agency actually using for their assessment? If you had concrete supports at the moment of a hotline call, which of your cases would have never been opened? And for our educators and trainers out there that listen to today's episode, what are we teaching about the differences between deprivation and actual danger? Every state has a citizen review panel, and they want to hear from the communities they serve. Look up your panel in your state and tell them what you're seeing in and around the child welfare system. We'd also love to hear your answers too. And you can reach us below at the Contact Us Now site. Thank you to Mary and for her time and her decades of dedication to this work. And thank you for listening to the In Social Work podcast. Until next time, take care.