

The Social Welfare Policy Landscape and Child Protective Services: Opportunities for and Barriers to Creating Systems Synergy

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Contemporary child welfare policies in the United States are well-suited for prevention of child abuse but fail to account for the relationship between family financial hardship and neglect, that is, the lack of safe and consistent care. We argue that rates of child neglect have been stagnant because of two failures: (1) lack of recognition of financial hardship as a causal mechanism of neglect and (2) federal policy that purposefully omits alleviation of financial hardship as a solution to the occurrence of neglect. Because U.S. antipoverty programs operate independently of one another, our siloed policy structure misses opportunities for the alleviation of child maltreatment and, worse, creates negative and unintended consequences in child welfare. We present a model for change: systems synergy for the promotion of safe and consistent care that makes reduction of child maltreatment the responsibility of every social service program in the United States.

Keywords: systems synergy; financial hardship; neglect; outcomes; safe and consistent care

At a conference in 2019, the keynote speaker shared a story from his early days as a Child Protective Services (CPS) case worker. His experiences are captured below and demonstrate the need for a new model; what we call systems synergy. This is what he shared:

In the mid-1990s, when I was a young case-worker, I responded to the home of a young family. There I saw dire neglect. A family of five was living in dirty and unsafe conditions. As was recommended by Child Protective Services

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(CPS), I initiated the process to remove the children from the home. The children were at school, and so I went to school and explained to one of the daughters, Brittany, that she would need to come with me to stay in a new place that was clean and safe.

Brittany did not want to go. She wanted her mother. She was scared of the unknown—even if it was clean and safe. I began to doubt myself: maybe I should have brought her mother along to explain . . . maybe Brittany would be less scared? But parent involvement was not part of CPS “best practice,” and so I did not think of this concession until it was too late.

Then I learned the family’s home was rented. And a new doubt came to my mind: should I have instead held the landlord responsible for the living conditions? Could I have been an advocate instead of an enforcer?

Finally, I learned of the father’s substance abuse illness and his trouble keeping a steady job. I initiated substance abuse treatment, but I was at a loss when it came to employment options for the father. I had followed agency protocols. My work was done, but yet, I’ve always felt like the system let Brittany and her family down.

The last 30 years have witnessed stark declines in child physical and sexual abuse rates. In contrast, child neglect, which composes 75 percent of child maltreatment reports, has remained steady and high (Finkelhor, Saito, and Jones 2016; U.S. Department of Health and Human Services 2020). Scholars, practitioners, and policy-makers face a conundrum: why are abuse rates declining while neglect rates remain seemingly intractable and high? Although they sometimes overlap, child neglect and child abuse are distinct from one another. Child neglect is an act of omission, or failure to act, that results in imminent harm. In contrast, child abuse is an act of commission—something that is done—that results in real or imminent harm to a child.

Making progress in the child welfare system first requires understanding the origins of current policies and practices. Our current response, which is well-suited for abuse prevention, fails to account for the relationship between financial hardship and neglect. This makes the system unresponsive to the underlying needs of neglect. Since any discussion of child maltreatment in the United States is inherently linked to the Child Abuse Prevention and Treatment Act of 1974 (CAPTA), and because CAPTA serves a number of functions that are important for how the problems of child abuse and neglect are addressed, we review this legislation’s history and its role in prevention, and we present a

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critique of CAPTA's design. We then explore the issue of child neglect, present a theory of how financial hardship can cause neglect, and discuss what is needed to prevent neglect.

We submit that the immobility of neglect rates has two root causes: (1) our collective failure to view financial hardship as a causal mechanism in neglect's perpetration and (2) our crafting of federal policy to purposefully omit the alleviation of financial hardship as a solution to the occurrence of neglect.

We then present our model for change: systems synergy. The United States has a number of financial hardship alleviation programs and policies, but in their current form no person can fully leverage their effectiveness. These programs operate independently, and this siloed structure has allowed for missed opportunities to significantly reduce financial hardship (and thereby reduce neglect) among low-income families. Furthermore, the siloed approach has also been harmful because it has helped to create negative and unintended consequences, especially as it relates to child welfare. Our model is motivated by Brittany's (a pseudonym) story, and her then-caseworker's reflection on how powerful a synergistic system could be for children, their families, communities, and the caseworkers who serve them.

A synergistic system would make reducing child maltreatment the responsibility of every social service program in the United States. In the current framework, this responsibility falls solely to CPS, but CPS is a response agency, not a preventive agency. Moreover, what is needed to prevent most forms of neglect is alleviation of financial hardship, and that will always be outside of CPS's scope. However, financial hardship alleviation is the goal of myriad social and antipoverty programs. Requiring programs external to CPS to consider child welfare in their program outcomes and decisions will ensure our policies and programs are promoting families' needs. Families will be better served, and hopefully diverted from CPS altogether; but when a family does come before CPS, many social safety net services will already be in place, making the job of CPS realistic.

As we present the necessary changes for implementing this synergistic strategy, we show that it is not only achievable but also the most pragmatic response available. It builds on systems that are currently in place, is efficiency enhancing, and, most importantly, provides a path forward for reducing child neglect in the United States.

Child Welfare in the United States

For much of our history, the United States has collectively held the belief that parents' treatment of children is a private, family matter. No federal legislation regarding child maltreatment was enacted until 1935 when the Social Security Act provided grants to states to create child welfare agencies, and no federal definition of maltreatment was adopted until the passage of CAPTA in 1974.

In 1962, Kempe and colleagues published a groundbreaking report describing the extent and consequences of what they termed “battered-child syndrome.” This work differed significantly from prior approaches by placing a focus on the medical determination of maltreatment and its psychopathological origins. In addition, the authors highlighted that maltreatment was not restricted to low-income families, but that it also occurred among “people with good education and stable financial and social backgrounds [and that] . . . it would appear that in these cases, too, there is a defect in character structure which allows aggressive impulses to be expressed freely” (p. 145).

Child abuse versus child neglect

Common across both the medical and sociological child maltreatment literatures is a conflation—or overlooking—of the distinction between child abuse and child neglect (Dubowitz 1999). One strain of research argues that both child abuse and child neglect are the result of poor parenting, which can be addressed by interventions designed to improve parenting skills (Waldfogel 2010). A second line of research contends that both are caused by psychopathology and can be addressed through mental health services (Wolfe 1999). More complex theories rely on social stress explanations (Elder 1974; Garbarino 1976), which examine the interaction between individuals and their contexts (Cicchetti and Rizley 1981), or ecological models, which account for the multiple nested spheres in which families live (Belsky 1980). Although social-ecological models point to the need for interventions that are external to the family, child welfare interventions have continued to focus on family behaviors rather than family circumstances.

Poverty or low socioeconomic status is a risk factor for child neglect (Berger 2004; Garbarino 1982). A growing literature has sought to identify the causal effect of poverty on child neglect. Researchers have taken up a number of innovative methods—leveraging plausibly exogenous variation in neighborhoods, macro-policy, and business cycles—to demonstrate that poverty may be causally linked to child neglect (Berger et al. 2017; Raissian and Bullinger 2017; Paxson and Waldfogel 2003; Klevens et al. 2015; Lindo, Schaller, and Hansen 2018; Raissian 2015; Schenck-Fontaine, Gassman-Pines, and Hill 2017).

If the causes of neglect and abuse differ, then the effective treatment or prevention of neglect may be fundamentally different than for abuse. Neglect is an act of *omission*, or the failure to provide for a child’s basic needs and safety, and is often unintentional.¹ This type of maltreatment contrasts with abuse, which is an act of *commission*. Physical and sexual abuse are entirely a result of parental or caretaker behaviors that (usually) occur intermittently. The inverse of abuse is to not engage in abusive acts, often replacing this behavior with more positive behavior and/or removal of the perpetrator from the setting. In cases of abuse, it is appropriate to provide the family with psychosocial interventions. However, the inverse of neglect is more complex; it is to provide safe, consistent supervision and constantly provide for children’s basic needs (hereafter SCC for safe and consistent care).

While financial hardship and neglect do not share a deterministic relationship, empirical evidence points to a probabilistic causal relationship—meaning as financial hardship increases, the likelihood of neglect occurring increases; and the increase appears to be explained by financial hardship, itself, rather than other, related factors. Moreover, financial hardship remains one of the few preventative factors that is unaddressed in the current policy context. Rates of child neglect have remained steadily high, perhaps because neglect is fundamentally different than abuse—stemming primarily from poverty rather than parenting behaviors—and is resistant to prevention efforts focused on parenting modifications (Bullinger et al. 2019). There are numerous parenting or parent behavioral training programs that are offered to and sometimes mandated for families at risk of maltreatment or CPS-involved families; however, thus far, the evidence that parent behavioral training programs reduce neglect is slim. An exception is SafeCare, which undertakes parent education in participants' homes and has a particular focus on home safety, and which has shown significant reductions in neglect (Chaffin et al. 2012). Preventing neglect is likely the result of a complex combination of circumstances, environment, and parent capacity that allows a parent or family to *provide SCC all of the time*. Preventing neglect involves preventing or reducing family financial hardship, and systems that address this underlying mechanism of neglect are required to prevent neglect.

CAPTA: Its focus and history

The articles by Testa and Kelly (this volume) and Haskins (this volume) provide a comprehensive history of child welfare policy in the United States. To complement, we focus on important policy developments that lead to the siloed nature of our current child welfare system. By the 1970s, policy-makers and the public recognized that child maltreatment was a serious and widespread problem, and this growing recognition initiated the creation of CAPTA. However, as Barbara Nelson (1984) wrote in her history of CAPTA, Democrats feared that President Nixon might veto CAPTA, as he had the Comprehensive Child Development Act, if it were viewed as being too closely connected to poverty. Senator Mondale (Democrat from Minnesota, sponsor of the legislation, and later President Carter's vice president), for example, made great efforts to make clear that maltreatment could happen to anyone, regardless of social class. In testimony by David Gil, a professor at Brandeis University and a pioneer in child maltreatment research, Senator Mondale pressed to frame the problem broadly:

Mr. Gil: . . . As I have said on another occasion, the factors that lead to abuse among the well-to-do are the same that also lead to abuse among the poor. The poor have in addition many more factors.

Sen. Mondale: I know you are going to get to that. But this is not a poverty problem; it is a national problem.

Mr. Gil: That is correct.

Notably, the act ambitiously encapsulated two very different forms of maltreatment—abuse and neglect—without acknowledging or planning for different causal mechanisms. And to create this broad reach, the act had to decouple poverty from child maltreatment. The result was the creation of a child welfare system that was parallel to, but siloed from, existing social welfare programs; one that was, by design, focused solely on the psychopathological antecedents of maltreatment. The effect was a framework that was very good at responding to abuse but that did not meet the needs of children suffering from neglect. As Nelson writes in her history (1984), John T. Allen, the chairman of the American Academy of Pediatrics' Subcommittee on Child Abuse, noted the following in his testimony:

Dr. Allen: What we are really talking about, whether we want to admit it or not, is . . . the physically abused child.

Senator Mondale: I am glad you made that point. Unless you do that, you get into the question of sort of basic social health, which is beyond the reach of legislation that we can possibly do.

The framers of CAPTA were faced with challenges—many stemming from the political economy of the time—and they made the necessary trade-offs to pass the legislation. The bill made no effort to separate prevention of child neglect, which was viewed as being too closely linked to poverty, and it paved a road toward deep linkages with the mental health services fields. Because CAPTA funding was tied to the psychopathological origins of child maltreatment, funds flowed toward these services. The National Academies reports that a majority of interventions funded through CAPTA focus on changing parents and the home environment, improving cognitive-behavioral skills, or altering the psychodynamic interplay in relationships and family systems (National Research Council 1993).

What has this legislative structure meant for the prevention of child maltreatment in the ensuing 45 years? The child welfare system has been successful at reducing the forms of child maltreatment that it set out to reduce, namely abuse. That financial hardship was separated from the act is particularly problematic because it leaves CPS with no mechanisms to respond to a core cause of neglect. In this sense, siloed systems effectively capture families in a CPS system that is not designed to respond to their needs.

Understanding the Underlying Causes of Neglect and the Potential of Systems Synergy

The vignette at the beginning of this article summarizes how the misdiagnosis of the underlying driver of neglect has led to inappropriate and ineffective treatment of neglect. The sole assignment of neglect to CPS perpetuates the misidentification of the underlying problem. While a complete understanding of all

potential causes and relevant mechanisms leading to neglect would be beneficial, children and families cannot, and should not have to, wait for such a discovery before policy solutions are offered.

Research has demonstrated that poverty plays an important role in the etiology of child maltreatment. In particular, neglect occurs far more frequently in resource-poor families and communities (Bullinger et al. 2019; Slack et al. 2003). At the individual level, research has found that poverty and low income are associated with increased risk for child neglect (Berger 2004) and child maltreatment overall (Pelton 1994, 2015; Sedlak et al. 2010). Similarly, extensive evidence has linked community-level indicators of poverty to increased risk for child maltreatment (Coulton et al. 1995; Drake and Pandey 1996). This work indicates that social disorganization, resource availability, and concentrated poverty all contribute to child abuse and neglect. Finally, a growing body of research has sought to leverage variation in policies—such as the Earned Income Tax Credit (Berger et al. 2017), the minimum wage (Raissian and Bullinger 2017), and child support enforcement (Cancian, Yang, and Slack 2013)—to examine the impact of economic hardship on child maltreatment.

This research suggests that macrosystem policies have a role in causing and preventing maltreatment. Recent attention has tried to refocus maltreatment prevention efforts on this broader context (Bullinger et al. 2019). This growing literature provides compelling evidence that poverty is causally linked to child maltreatment. If we accept that poverty, at least in some way, is a causal factor in the perpetration of neglect, we can begin to reduce neglect (and its consequences) long before the exact mechanisms are understood.

We do not know exactly how financial resources serve as a protective factor among families, but understanding the mechanism is not required to begin the necessary policy work. Moreover, public health history is replete with examples of scientists knowing through scientific observation that A causes B, but not knowing precisely why such a relationship exists. A classic example is John Snow's investigation of the cholera outbreak in Soho, London, in 1854. Through observation he learned that people drinking water from the Broad Street pump had higher cholera infection rates, but he did not know what about the water was dangerous. Nevertheless, Snow convinced officials to discontinue water supply from the Broad Street pump, and after that was done, the cholera outbreak stopped (Hempel 2007). Snow only knew that ingestion was clearly leading to illness and that it must be stopped. In the same way, we know financial hardship creates the conditions for neglect, and as a society, we are obligated to respond.

In examining the potentially relevant factors in the macrosystem, the critical role of systems, policies, and programs outside of CPS becomes clearer. Housing policy, food policy, employment opportunities, and transportation all factor into the macrosystem. According to ecological theory (Belsky 1980), a more robustly supportive macrosystem, which comes about through intentional public policy decisions, would create a different context for communities, families, and individuals in their efforts to provide and achieve SCC.

Moving from neglect to SCC

Providing SCC is highly dependent on the environments, contexts, and resources under which caretakers operate. This context of care varies widely and, as Belsky's (1980) model implies, is largely shaped by the resources available to a family unit. Financial hardship—which might include insufficient income or poverty, transportation limitations making employment and social service engagement challenging, and unsafe and/or unstable housing—is key and, often, an external component in the family's ability to provide SCC for children. As these resources are external to the family unit, they have not been traditionally taken into account in interventions occurring under the CAPTA model.

We propose expanding the definition and focus of primary prevention, especially as it relates to neglect. Traditional primary maltreatment prevention has focused on expanding the accessibility of targeted programs more closely related to parenting (including promoting child health and development); see Jones Harden et al. (this volume) for a full discussion. But these expansions will only be effective if (1) they address the actual cause of the neglect, and (2) programs are able to identify and engage with the “right” families. With respect to the first, expansion of traditional primary prevention has been an effective strategy for abuse reduction, but currently there are not effective interventions for neglect that can simply be expanded (Macmillan et al. 2009).

The second prerequisite is identifying and engaging the at-risk families. As a result of the state of the research and the complex nature of providing SCC, it has been difficult, even with recent advances, to accurately identify who is at risk of neglect. Efforts to correctly identify high-risk families fail to identify many families who will be reported for maltreatment (Putnam-Hornstein and Needell 2011; Goldhaber-Fiebert and Prince 2019). These challenges suggest that a broad (or more universal) approach that encompasses all families that experience significant financial hardship is more likely to substantially reduce neglect than a targeted approach that focuses on only the highest-risk families. Adopting a broad-based approach will require a concerted and coordinated effort across public sector service systems. Policy-makers and program leaders will need to embrace their role in developing systems synergy to promote SCC.

An emerging body of research suggests that neglect rates are responsive to macro-level conditions. We draw on this evidence to propose an integrated policy framework to support families and protect children. If neglect, or even some forms of neglect, is, at least in part, caused by poverty, then poverty alleviation programs have a role to play in helping families to provide SCC, that is, to prevent neglect. In this vision, “neglect prevention” would no longer be the sole responsibility of CPS, but rather it would also be the responsibility of agencies such as the U.S. Departments of Housing and Urban Development, Health and Human Services, Agriculture, and so on. This approach would leverage the existing programs and the workforce of public agencies to increase families' access to the social services for which they are eligible. Refocusing social services will be challenging, but it would create a social landscape that allows families to safely care for their children.

Why other social policies may be counterproductive

Currently, in the United States, social services are often delivered through agencies that are typically charged with changing a distinct set of outcomes. Moreover, agencies may be bound by a jurisdiction or need to act within certain policy parameters. These constraints have not only created siloed policies; they have made siloed service delivery an entrenched feature of social policies. Programs and services may have ambitious goals, but the way in which they achieve them is limited. For example, the child welfare system focuses on the prevention and, especially, treatment of child abuse and neglect, but CPS can only intervene in the family unit—and not in the family's broader context—to address maltreatment. Temporary Assistance for Needy Families (TANF) seeks to promote economic self-sufficiency, but its main policy lever is to move clients off caseloads and into employment. The goal of the Supplemental Nutrition Assistant Program (formerly Food Stamps) is to reduce hunger, and it does so by offering food subsidies. Medicaid seeks to improve health and, while providing health insurance allows access to medical treatment, its focus is on treating illness.

While each of these programs has laudable goals, when pursued in isolation these programs overlook families' multifaceted and complex realities and may not fully promote the well-being of children or the family unit. This may also reduce the efficacy of their societal impact. When developed and executed in isolation, policies may achieve their core function and may indeed improve outcomes in a particular domain, but due to tunnel vision, they may inadvertently create greater complexity or problems in other domains.

Narrowly focused policies often force families into “no-win” situations. For example, when the Personal Responsibility and Work Opportunities Reconciliation Act (PRWORA) first authorized TANF, a major legislative goal was to move program participants—predominantly low-income single mothers—from welfare to work. However, what was not considered was what families need when a parent, especially a single parent, enters the labor force. Failure to account for the needs of children meant that the policy overlooked potential effects on child maltreatment and foster care entrance, and TANF program workers were not held accountable for negative outcomes outside of the federally stated self-sufficiency measures. Indeed, one of the negative consequences of TANF was increased demands on the child welfare system in the form of more CPS caseloads and children entering foster care and staying longer (Paxson and Waldfogel 2003; Slack et al. 2003; Wells and Guo 2006).

There are other examples of a siloed approach leading to unintended consequences. Employment programs that focus exclusively on job training and employment without considering issues related to transportation or child care are likely to help one problem (employment), but also create another (child care). The Moving to Opportunity (MTO) experiment is another example. Although this program offered families housing vouchers to move to better neighborhoods, many families did not take the opportunity because moving would mean losing their social support system.

Similarly, stated goals of social policies vis-à-vis child well-being outcomes and programmatic decisions do not always align. For example, although the child support system often claims to be focused on providing economic support for children, there are several program features that focus the program on cost recovery, rather than aiding families (Cancian, Yang, and Slack 2013). Mothers on TANF and Medicaid must cooperate with child support enforcement to receive benefits, regardless of whether they believe it to be in their best interests. They must also assign their rights to collected child support to the state, meaning that child support payments go to TANF coffers rather than families. Indeed, evidence has shown that custodial families' receipt of all the child support they are owed, rather than states keeping a portion to offset TANF expenses, reduces child maltreatment (Cancian, Yang, and Slack 2013). The child support enforcement program is just one, among many, social policy examples of siloed policies.

In contrast, Head Start takes a "whole family" approach. Although the program's primary goal is providing quality early care and education, it is also deeply concerned with social-emotional development and parental well-being. As a result, parents with children in Head Start have the ability to enroll in GED classes and receive employment services and parenting classes. In addition, Head Start recognizes the importance of meeting families' financial, food, and housing related needs for children to thrive, and it provides key linkages to other social welfare programs as a result. While Head Start services do not have perfect take-up rates, nor capacity to serve all eligible families, the program's engagement with factors contributing to a family's financial hardship provide an example of synergistic, or nonsiloed, program offerings.

We advance a model that recognizes the relationship between financial hardship and neglect and enlists antipoverty policies and programs as part of the solution. As it stands now, each program defines its own goals and creates a government at odds with itself, certainly with its children and families. This internal strife could be greatly reduced if systems worked synergistically with CPS, rather than the current practice of child welfare ambivalence.

Systems Synergy: How a New Approach to Policies Could Support Systems Collaboration

What does a synergistic model look like? We argue for a child-centered approach like that illustrated in Figure 1. By requiring child outcomes to be considered in all domains of service provision, families and children are better served; this model ensures that children's full range of needs are more likely to be addressed. The model also requires agencies to anticipate the impacts of their service provision, to understand its consequences, both intended and unintended, and holds agencies accountable for their core mission outcomes alongside promoting SCC. There are two key components of this approach. The first is a shift in policy focus and development where children's holistic needs are considered as the primary concerns of policies; a related, but slightly different, issue is that the unintended

consequences for children would become a central concern. The end result is that if policies, and consequently agencies and programs implementing these policies, are accountable for unintended consequences for children, they will have an incentive to increase families' access to and uptake of other social programs, which would increase family resource and stability, allowing more children to experience SCC and thus reduce neglect.²

Table 1 demonstrates the targeted focus of several federal programs and their potential effects on families' resources. By enhancing one of these domains, these programs may alleviate child maltreatment. However, these programs may also detract from other aspects of families' lives, potentially threatening children's well-being in other ways.

Federal Antipoverty Programs or Policies That Could Better Affect SCC

Table 1 illuminates several things. The first is that a range of social programs contributes to SCC. Second, programs typically affect family resources in one of two ways: by changing the parents' "money" or by changing the "time" a parent has available. Money broadly refers to economic resources, such as food stamps, housing subsidies, and childcare subsidies. If a program allows parents more leisure time, parent-child interactions may increase. Alternatively, programs like Head Start or public schools, may reduce parental childcare time commitments. This would give parents more time for employment or a respite from providing care. Time and money seem to be the two core resources a family needs at the micro-level. Programs that increase both time and money are optimal; there are no trade-offs for families to make when accepting this assistance. However, programs that increase one resource (money, for example), while decreasing the other (time, for example) may lead to unintended and negative consequences for families and children. These programs must recognize their potential for and seek to mitigate harm. This kind of internal program reflection with an outward look to SCC is both novel and necessary.

Table 1 also shows total federal spending, program's classification as entitlement or capped, and annual caseloads of these programs. It is clear that millions of people, of which the majority are likely families with children, receive billions of dollars in benefits each year through services and programs designed to relieve and prevent financial hardship. This is a testament to our national desire to alleviate suffering. At the same time, by implementing each program in a siloed fashion, opportunities to leverage dollars more effectively are lost. These federal dollars, and the extensive state and local dollars that accompany them, could be used to achieve their primary legislative function *and*—in an environment of systems synergy—be used to more thoughtfully support SCC, which is already central to their intended purpose.

A potentially important feature of systems synergy is universality. An example of one service sector more fully integrating the delivery of other services into

TABLE 1
Federal Antipoverty Programs or Policies That Could Better Affect SCC

Federal Policy or Program	Program's Targeted Outcome	Average Predicted Effect on Families' Resources		Potential for Unintended Consequences	Total Federal Spending	Entitlement vs. Capped	# of People Assisted
		Money	Time				
Cash assistance							
Temporary Assistance for Needy Families (TANF)	Self-sufficiency	↔	↓	X	\$16.5B (2019)	Capped	1.2 million families (2018)
Earned Income Tax Credit (EITC)	Employment	↑	—		\$63B (2019)	Entitlement	22.1 million (2018)
Child Tax Credit (CTC)	Income support for parents	↑	—		\$49B (2017)	Entitlement	16.3 million (2018)
Unemployment Insurance (UI)	Short-term economic relief	↑	↑		\$31.29B (2019-2020)	Entitlement	1,766,000 (2019)
Social Security Disability Insurance (SSDI)	Income support for disabled	↑	↑		\$144B (2018)	Entitlement	9.9 million (2018)
Medical assistance							
Medicaid/Children's Health Insurance Program (CHIP)	Affordable health-care	↑	—		\$15.6B (2016)	Entitlement	9.6 million (2018)
Health Center Program (HCP)	Healthcare access	↑	—		\$10.154B	Capped	25 million (2019)
Food support							
Supplemental Nutrition Assistance Program (SNAP)	Hunger and malnutrition	↑	—		\$68B (2018)	Entitlement	40 million (2018)
National School Lunch Program (NSLP)	Health and nutrition	↑	↑		\$13.8B (2018)	Entitlement	29.7 million (2019)
Women, Infants, and Children (WIC)	Food and nutrition education	↑	—		\$5.3B (2018)	Capped	6.9 million (2018)

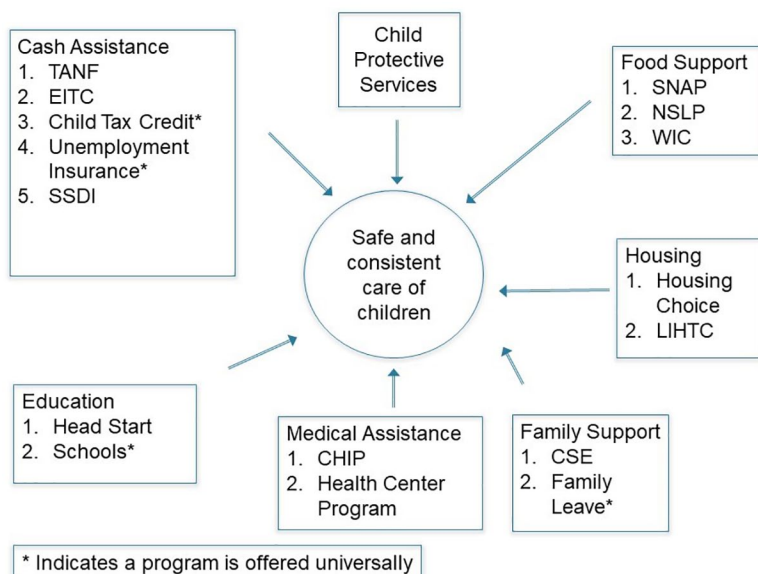
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TABLE 1 (CONTINUED)

Federal Policy or Program	Program's Targeted Outcome	Average Predicted Effect on Families' Resources	Potential for Unintended Consequences	Total Federal Spending	Entitlement vs. Capped	# of People Assisted
Housing programs						
Housing Choice Voucher Program	Safe and affordable housing	↑	—	\$23.9B (2020)	Capped	5 million (2017)
Low-Income Housing Tax Credit (LIHTC)	Development of affordable housing	↑	—	\$9B (2019)	Capped	2.97 million units (2018)
Energy and utilities assistance						
Low-Income Home Energy Assistance Program (LIHEAP)	Energy burden	↑	—	\$3.69B (2019)	Capped	7.7 million families (2016)
Education programs						
Head Start	Emotional, social, health & psychological needs	↑	↑	\$9.127 billion (2018)	Capped	873,019 children (2019)
Public Education	Education	↑	↑	\$79 billion (2014)	Entitlement	56.6 million (2019)
Family support						
Child Support Enforcement (CSE)	Reduced public expenditures; stronger families	↔	—	\$5.9B (2018)	Entitlement	14.7 million (2018)
Family Leave (Unpaid)	Work and family balance	↓	↑	NA	Entitlement	20 million (2017)

NOTE: The numbers in this table were culled from the following sources: Administration for Children and Families, Center for American Progress, Center on Budget and Policy Priorities, Congressional Research Service, Health Resources and Services Administration, Medicaid and CHIP Payment Access Commission, National Center for Education Statistics, National Low Income Housing Coalition, Tax Policy Center, United States Department of Agriculture Economic Research Service, and Urban Institute.

FIGURE 1
All Programs Seek to Achieve Safe and Consistent Care (SCC) of Children



their programming is universal free meals in schools. Childhood hunger inhibits development and learning. Although nutrition is beyond the traditional scope of educational services, schools are realizing the power of providing meals to all children—not just children from low-income households—and it is paying off. For example, many New York City public schools have implemented a universal free meals program to their students in the past decade. Research has found this program to improve academic test scores in both English language arts and mathematics (Schwartz and Rothbart 2019). Importantly, these improvements were present for children from both high- and low-income households, demonstrating the power of universal eligibility.

Our model’s core tenant is that services from Table 1 work together to achieve SCC; this is visually depicted in Figure 1. Lack of SCC caused by financial hardship is too big for CPS to tackle alone, and caseworkers do not have the necessary resources to do so. However, financial hardship cannot be ignored. If we combine the efforts of our federal antipoverty programs,³ alleviating financial hardship becomes achievable. Importantly, although the U.S. safety net has shifted its orientation in the past two decades toward working families, our model is not just about income supports. Instead it highlights the roles of time and resources, including access to child-care, transportation, housing, and food, among others. These factors can certainly be enhanced with more money, but do not necessarily require it from safety net programs. Instead of increasing the administrative burden for each of these programs, we are simply arguing that there is room for more take up among those who are eligible. Many people will not know if they are eligible unless they are told.

What would service integration that prevents unintended consequences look like? Imagine if the PRWORA had expanded its outcomes to include moving recipients (or single mothers) off of welfare *in a way that promotes SCC for children*. Caseworkers might have been tasked with helping mothers obtain childcare assistance and after school care, or strategizing about how to ensure critical medical appointments were not missed due to the mother's new employment hours, for example. This type of systems synergy is not just about alleviating current financial hardships among families but about improving long-term child outcomes. Recent research shows that children experiencing both poverty and neglect are at higher risk of adverse outcomes than children experiencing poverty alone (Font and Maguire-Jack 2020). In other words, focusing on the needs of the whole family and recognizing how changing one facet of family life may affect another is important, especially because, historically, this point has not been emphasized.

The role of CPS in systems synergy

Successful systems synergy will mean that over time, cases of neglect that come to the attention of CPS will likely be ones that have connections to psychopathology, substance use disorders, or significant parenting-related problems. However, systems synergy will aid these families as well. Under the current approach, many families are unable to benefit from traditional CPS programs because material hardship has made their lives too unstable to fully participate in services (Lewis et al. 2020). Support in the form of time and money will clearly aid families receiving traditional CPS interventions related to mental health or parenting skills.

Nevertheless, some families will likely make primary contact with CPS for financial hardship–related neglect. Here, systems synergy may provide a form of an economic differential response, allowing CPS workers to link families to services that will address the actual core problems they face rather than providing them mismatched services through the child welfare system. In many ways, this is a form of enhanced differential or alternative response (see Berger and Slack, this volume, for a discussion of differential/alternative response programs). Differential response typically focuses on CPS partnerships with nonprofit agencies to provide services to families who are at low risk, rather than involving them in the formal CPS system or creating a new system (Lindsey 1994; Waldfogel 1998). Our proposal extends the existing service framework by creating synergies with social welfare agencies. Unlike a differential response, our proposal allows families to have increased access to services for basic needs without contact with CPS. Notably, the reauthorization of CAPTA in 2010 includes a broad definition of differential response, making such implementation accomplishable.

Brittany's alternative ending

To examine how this new system might affect children and families, let us first imagine how the opening vignette might have been different with system-level synergies. There were several opportunities for intervention, outside of CPS,

that, because they were outside of traditional practice, left the CPS response disruptive to Brittany and her family.

First, Brittany resided in a community that was plagued by poverty and responsible for a high number of referrals. Social service agencies, which exist outside of CPS, should have been offering a range of community supports, advocacy, and family supports, and enhanced public assistance that could have benefited the neighborhood and Brittany's family.

The family rented their dwelling. Why were property codes not better enforced? If some of the home's squalor came from structural deficits, then the local government should have stepped in to enforce standards, striving for the outcome that all children in their jurisdiction live in safe housing.

While Brittany's story predates TANF welfare reform, lessons are still applicable. Opportunities for job training, both for the mother and father, as well as substance use interventions, were missed. At the time, only incarcerated or severely addicted persons were offered substance use treatment through Medicaid, but Brittany's father needed this service. Help to integrate childcare into the family's needs were also missed. Could more robust and free afterschool activities have relieved Brittany's family of stress (an opportunity to increase financial and time resources for the family)? What else could have been done if more government agencies were considering Brittany and her family's well-being as a required outcome of their service provision?

If these interventions had happened, the caseworker, if still needed, would have had a better foundation on which to begin his work. Instead, he was tasked with intervening in a family with no supports and little hope of achieving kin care. In a more stable setting and with different institutional practices, temporary housing could have been offered to the family to maintain the family unit—likely a much more cost-effective alternative compared to removing the child. In an emergency situation, CPS cannot be expected to work miracles. Had the education, housing, medical, code enforcement, CPS, or any combination of systems been working together, Brittany might have never been removed.

A synergistic system offers CPS two things: (1) a set of supports to reduce the likelihood that they are ever called, making them the last rather than first responder; and (2) when CPS is called, caseworkers will have a stronger foundation on which to add, not start, family-centered services.

COVID-19 response: A partial systems synergy for children

Between February and March 2020, states and the federal government were forced to enact emergency public health measures to prevent the spread of the novel coronavirus (COVID-19). The scale and swift implementation of safety measures, which included strict social distancing, universal and prolonged school cancellations, and mass industry and business closures, were unprecedented. These sudden shifts combined financial hardship and isolation, likely placing children and families in dangerous situations.

The COVID-19 response has provided both examples of and missed opportunities for systems synergies that would promote child and family well-being.

Examples of systems synergy include Congress's federal stimulus package, which included a \$500 per child credit. When schools implemented distance learning, decision-makers considered what critical services children needed. Food delivery systems and electronic learning devices for low-income children were coordinated. In both of these examples, child and family well-being were considered as outcomes and goals. This is the policy mindset shift we are advocating for, and the COVID-19 response demonstrates that such considerations can be made in our current policy landscape.

Of course, the COVID-19 response has not been perfect; we do not dispute that children may be at higher risk of maltreatment, with fewer opportunities for it to be identified, and parents have experienced extraordinary strain in the absence of their usual supports for child care. However, if child and family well-being were a central focus or consideration in the policy response to this crisis, certain problems might have been mitigated. For example, should the magnitude of unemployment insurance benefits differ based on family size? Can social safety net intake or guidelines be modified to ease administrative burdens during this time? How can childcare be provided for essential workers, so that children are not placed in precarious situations while their parents perform necessary services and earn a paycheck? Our proposal is straightforward: whenever decision-makers craft, renew, or modify a policy or procedure, they should ask, "How does this benefit or harm children and families?" and then reconsider the policy accordingly.

Achieving Systems Synergy: How Do We Get There?

Make maltreatment visible in policy development and analysis

This piece is the most critical because it will drive action and innovation in the other areas. All social service agencies and programs contribute to the promotion of SCC. This process should be visible. Incorporating accountability for SCC into programs would increase the sense of shared responsibility and make it easier to assess the impact of more distal policies on maltreatment. The impact on SCC should then be assessed as part of the standard assessment of the cost and impact of all policies. An adverse impact on children should be considered a cost of the program. Conversely, programs that reduce maltreatment should be correspondingly credited with that positive externality. For example, just as many proposed policies are assessed for their potential impacts on the environment or employment rates, the protection of children should be a required outcome, as well. Perhaps the reason that positive and negative externalities of policies on children have not been accounted for is that the outcomes are distal and potentially difficult to assess. While true, this challenge has been addressed in other contexts. The environmental sustainability movement provides an example. By emphasizing the effect that individuals' decisions have on climate change, this movement has effectively brought a distal outcome to the forefront for many. However, the ultimate goal of the environmental movement is—as it should be for child welfare

advocates—to create policy that affects not only individuals but systems writ large. We view this as incremental improvement to programs and expect the return on this change to be quite large.

Information and advocacy

The literature on the effects of macro-level factors on child maltreatment is in its infancy. Part of the reason for the scant evidence base is the lack of data integration. The ability to link data across agencies will vastly increase our understanding of the effects of antipoverty programs on child neglect, identify the maltreatment-related efficacy of programs outside of CPS, help to understand the role of rationed services (such as housing), and allow for easier collaboration across agencies. In particular, linked data will help researchers to better understand the issue, identify possible solutions, and track the efficacy of program approaches.

Linked data would allow administrators to track the impact of policy changes in a given agency on children and families. For example, does a change in housing policy increase family homelessness, or neglect reports, or adverse educational outcomes for children as a result of a disrupted school year? It would also allow for more granular analyses of the effects of service limits and rationing on individual families.

Predictive modeling with linked data, which in child welfare has thus far been focused on assessment of risk at the point of contact with CPS (see Drake and colleagues, this volume), could also be applied more broadly to understand why certain factors are associated with maltreatment risk, and the differences across families with similar risk profiles that are and are not reported for neglect. This data enhancement could inform programming possibilities or alternative early intervention approaches. For example, frequent address changes of a high-risk family could suggest a need for stable housing. The elevated risk of a family member going to jail or prison might indicate a loss of income for a family and the need for additional financial support. At the service level, integrated data might also be useful in identifying eligibility for other income-support programs in which families are not currently enrolled. A small number of states and state-university partnerships have begun to take up this task. For example, programs in Rhode Island, Michigan, and Georgia have created integrated data systems to evaluate the effectiveness of particular policies, redirect resources to areas of need, and increase participation in programs and services.

There is substantial evidence that financial hardship has a negative effect on families' ability to provide SCC, but this research must be better disseminated and translated to policy-makers, decision-makers, and program providers. To do so, CPS can first advocate at all levels for other social service and welfare programs, and these other programs must highlight their impacts on supporting SCC. Second, researchers and public agencies should enhance their collaboration efforts to get the word out about data-driven findings.

Incentives for innovation and accountability

We acknowledge that systems synergy may not be an easy task across all policy domains. One way to facilitate the process is to provide incentives for adopting this model. An incentive system awarding federal funds to states that develop successful cross-system efforts to reduce child neglect would encourage innovation. States could be laboratories potentially producing different models for effective collaboration. Tested and effective strategies could be incentivized for lagging or later-adopting states.

President Obama's "race to the top" provides a roadmap for such a process. Race to the top provided nearly \$4 billion in funding to states in an effort to spur innovation in education policy. In particular, it focused on developing data systems and rigorous interventions. A race to the top in child maltreatment prevention might encourage states to integrate data systems, develop innovations for merging siloed social welfare policies, and prioritize child neglect prevention as a primary outcome across government agencies.

Limitations

Our proposal does not come without necessary trade-offs and possible drawbacks. We do not know the costs of creating systems synergy. The process will necessarily involve training not only for CPS workers, but also for a host of administrators and providers across social welfare agencies. Similarly, it may be that other social welfare programs are insufficiently funded, have lower benefit levels than needed, or are not universally available. In this case, it may be that even systems synergy cannot provide the resources necessary for families to provide SCC. However, it may also be that the process increases take-up of these programs and that, when combined, they have complementary effects that magnify their power to reduce neglect. Although there are potential obstacles, we should draw on the record of the public health interventions described here and take action, even if the outcome is uncertain.

We have yet to test the scope of the solutions proposed here. One study has provided a glimpse into this idea. Project GAIN (Getting Access to Income Now) provided families with closed CPS cases support in obtaining access to programs such as TANF, housing, and transportation benefits (Slack et al., forthcoming). Results from this research, however, have shown that the program did not significantly reduce reports of child maltreatment. One potential explanation for GAIN's lack of success is that the support remained below the threshold of an adequate amount and duration of support. In other words, the program offered pennies when families needed dollars. Additionally, this intervention differs from our recommendation insofar as it does not link child welfare and social welfare agencies to a common goal or better integrate these siloed systems—rather families were referred to economic support workers after already having been reported to CPS. We propose that synergy in this manner will prioritize prevention of child neglect and provide added benefits.

Similar to Project GAIN in the context of families and economic stability, there may be a threshold effect. In other words, there is a minimum level of resources that will prevent the family from tipping into crisis and allow them to adequately provide SCC. Services and programs that provide a small amount of relief—either in finances, time, or stress—may not provide for incremental improvements. Even with systems synergy, these programs may be insufficient to get a family over the threshold of economic stability that allows them to provide SCC, which could limit the efficacy of this model.

CPS provides services to families that are in dire situations. Other programs do not always serve this role. To the extent that resources would get diverted from CPS to adopt this model, families in the most severe situations could be undertreated. Furthermore, there could be substantial trade-offs, since, at least at the state level, most budgets need to be balanced. Nonetheless, neglect rates have remained steady for decades; a new direction might be the innovative change that is needed.

Notes

1. In this work, we focus on supervisory and physical neglect. Berger and Slack (this volume) provide an in-depth discussion of the types of child neglect.

2. In many ways, a child allowance would likely be the most efficient strategy to reduce neglect. For example, simulations produced by the National Academy of Sciences (NAS) show that a child tax credit of \$3,000 per child per year would reduce deep child poverty by 50 percent. Since research has shown that much smaller income boosts (e.g., \$100–\$1,500 per year) help to reduce maltreatment, \$3,000 could go much further for families. Nonetheless, the feasibility of a child allowance of this magnitude in contemporary times seems unlikely.

3. While we focus on federal services, this model should also be applied at state and local levels. Many federal policies are implemented at the state level; this extension is natural and necessary.

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