

Child maltreatment reports in San Francisco before and during the COVID-19 pandemic

Background

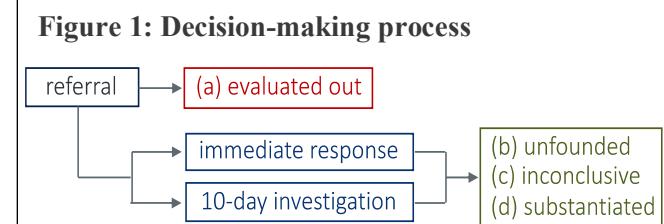
- Educational personnel are the #1 source of alleged child maltreatment referrals in the US¹
- School closures and social distancing during the COVID-19 pandemic have:
 - Incurred a heavy loss of in-person interaction²
 - Increased multiple risk factors for child maltreatment - individual parental factors (substance abuse), family factors (parenting stress), and community factors (unemployment rates)^{3, 4, 5, 6}

Objective: Assess changes in child maltreatment reports to prepare child protective services, schools, and the behavioral health system to meet the current and future needs of alleged maltreatment victims

Hypothesis: We will find that rates of suspected child maltreatment reports decreased during the pandemic, with the largest proportional decrease in school-based reports

What We Did

- Sample: Referrals submitted to San Francisco's Family and Children's Services (FCS) from Jan 1, 2017 to Dec 31, 2020
- Analysis: T-tests to compare average number of reports between time periods



What We Found

- Average monthly number of referrals **decreased** between **14-40%** during the pandemic (April-December 2020), with the biggest drop in April, and smallest differences during the summer months
- Significantly fewer pandemic referrals were evaluated out (not investigated) or found to be unfounded; no significant change in monthly average of substantiated reports
- Significant ~30% decrease in the average number of reports for Asian/PI, Black, Latinx, and White.
- Significant decreases for General Neglect, Physical Abuse, At Risk/Sibling Abused, and Sexual Abuse, but no significant change for Severe Neglect, Caretaker Absence/Incapacity, Exploitation, or Emotional Abuse



Figure 2: Average Monthly Referrals By Reporter Type

PRE (n = 14,516) POST (n = 2,745)

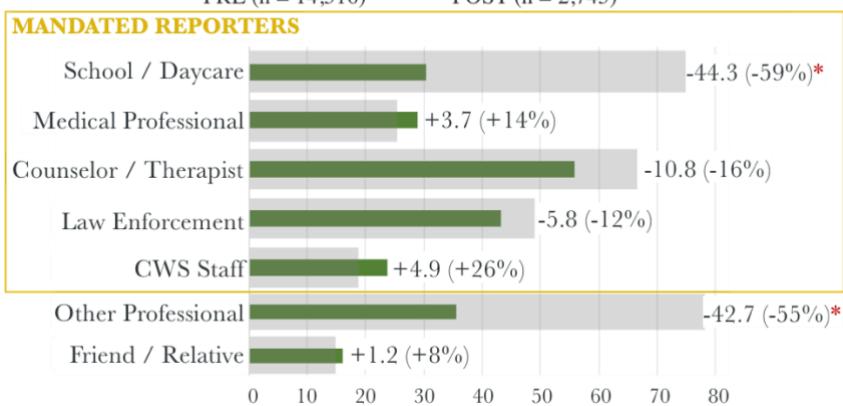


Figure 3: Average Monthly Referrals By Investigation Conclusion

PRE (n = 24,416) POST (n = 4,517)



What This May Mean, What Is Next?

- Patterns identified in the study are likely relevant to other settings
- Actual child maltreatment rates during the COVID pandemic are unknown, but as schools start in person, reporting should be expected to significantly rise again
- We plan to explore (1) interactions between outcomes and demographic factors; (2) factors driving referral changes

1. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Child Maltreatment 2018. 2020. Available from <https://www.acf.hhs.gov/cb/research-data-technology>.

2. Baron EJ, Goldstein EG, Wallace CT. Suffering in Silence: How COVID-19 School Closures Inhibit the Reporting of Child Maltreatment. 2020 July. Journal of Public Economics, Forthcoming. Available at SSRN: <https://ssrn.com/abstract=3601399> or <http://dx.doi.org/10.2139/ssrn.3601399>.

3. Institute of Medicine and National Research Council. New directions in child abuse and neglect research. Washington, DC: The National Academies Press. 2013. Retrieved from <http://www.iom.edu/Reports/2013/New-Directions-in-Child-Abuse-and-Neglect-Research.aspx>

4. Dubowitz H, Kim J, Black MM, et al. Identifying children at high risk for a child maltreatment report. Child Abuse & Neglect. 2011 Feb;35(2):96-104. DOI: 10.1016/j.chab.2010.09.003.

5. Brown SM, Doom JR, Lechuga-Peña S, Watamura SE, Koppels T. Stress and parenting during the global COVID-19 pandemic. Child Abuse Neglect. 2020 Aug;104699. doi:10.1016/j.chab.2020.104699.

6. Lawson M, PielMH, Simon M. Child Maltreatment during the COVID-19 Pandemic: Consequences of Parental Job Loss on Psychological and Physical Abuse Towards Children. Child Abuse Negl. 2020 Sep;104709. doi:10.1016/j.chab.2020.104709.