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 US.¹
- 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

**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

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