Taking CAPTA to the Next Level: 
Recommendations for Transformational Systems Change to Prevent Child Abuse and Neglect

The National Child Abuse Coalition supports a public health approach to child abuse and neglect, as part of a reformed and updated Child Abuse Prevention and Treatment Act (CAPTA) that reflects the entire continuum of supports to families, starting with primary prevention strategies at the heart of Title II and extending into the identification and treatment of abuse and neglect in Title I. We envision an overhaul of CAPTA that supports a system aimed at empowering families and communities so they can provide a healthy, safe home for their children, so that foster care is a system of last resort.

As noted by the Associate Commissioner of the Children’s Bureau at HHS, Jerry Milner: “Tweaking what we have in place won’t solve the problems….we need to change the focus of child welfare to primary prevention of maltreatment and unnecessary removal of children from their families. We can only break the cycle of family disruption and maltreatment by addressing the root causes of those situations.” ¹ The reauthorization of CAPTA provides Congress a prime opportunity to do just that.

The National Child Abuse Coalition, a collection of over twenty-five national organizations committed to the prevention and treatment of child abuse and neglect, respectfully offers recommendations to Congress for CAPTA reauthorization to help states support strong and healthy communities, reduce child maltreatment, and more effectively respond in cases of abuse and neglect.

Our policy recommendations are guided by the following principles:

- **Healthy families are the key to child abuse and neglect prevention and resilient children:** Healthy and strong families and communities are fundamental to ensuring children are healthy and reach their full potential. While it is important to maintain a strong child protective services system that keeps children safe and, when necessary, removes them from their families, our nation will be better served by a new commitment to support families in ways that prevent abuse and neglect before they occur. Creating a robust community system of support for all families would reduce the number of families who reach the point of needing the attention of child protective services.

- **Prevention should be community-based:** Any successful approach should focus on the specific needs of individual communities. There are common challenges across families, but each community has unique strengths it can draw on to ensure its programs and services are responsive to community needs and culturally relevant. Any policy approach to address child abuse and neglect prevention should provide sufficient flexibility and accountability to build the service array that will work for that individual community. Federal efforts should help to empower communities in building unique, comprehensive continuum of supports to families. The Centers for Disease Control’s Essential for Childhood Framework is a helpful resource when considering what a community-based approach should look like.

• **Child and family safety are not just the child welfare system's responsibility:** We must reconceptualize child protection so that individuals, the private sector, and child- and family-serving systems see safeguarding and shepherding vulnerable children as not just the job of an already struggling parent or overburdened system, but of a robust, community-based system of support.

• **Prevention and treatment efforts must help families heal from trauma:** Trauma, adverse childhood experiences, and toxic stress are key contributors to child welfare system involvement and the intergenerational nature of system involvement. To meet the needs of families and children who are at risk of or have experienced abuse and neglect, services must be trauma-informed and address trauma experienced by parents and other caregivers as well as children. A community system would bring together key stakeholders to infuse an understanding of trauma into child and family services and link with treatment providers, including those addressing substance use and mental health needs.

• **Research and data are central to a public health approach:** Significant expansion of research and evaluation is needed to help communities build systems that improve outcomes for children and families. In line with a public health approach to prevention, federal policy can help build the field’s understanding of what works to improve outcomes for children and families, before, during, and after they touch the child welfare system. This must include investments in developing and implementing more evidence-based interventions that can prevent child maltreatment before it occurs.

• **Significant additional resources are necessary for CAPTA to be effective:** The objectives of CAPTA and a strong public health approach to child maltreatment prevention, as recommended by the CDC and HHS, cannot be achieved using the current funding provided in CAPTA. More money is critical to ensure that states can carry out the mandates currently required in CAPTA while also moving towards a new vision of child welfare that supports families and prevents child abuse and neglect. Any new requirements must include significant funding increases. By driving prevention efforts toward building community-level frameworks to create the context for healthy children and strong families, CAPTA could both be a catalyst for, and a partner to, other policy areas that come at the wellbeing of children and families from different angles (e.g., early childhood development, youth development, broad parenting support). We urge Congress to provide significant new resources to a reformed CAPTA to support a new vision of child welfare that truly supports families and effectively prevents child abuse and neglect.

**Policy Recommendations**

1. **Substantially increase funding for both titles in CAPTA**

An updated CAPTA must include significant funding increases in order to provide states and communities the resources to drive community-based solutions. We recommend that Congress authorize and appropriate $500 million for Title I and $500 million for Title II in the first year of reauthorization, ramping up to $1 billion for each title over 5 years.
Substantial resources for Title I are necessary for states to implement the systems and protections Congress has long mandated through this law. This is why the Congressionally-commissioned National Commission to End Child Abuse and Neglect Fatalities (CECANF) recognized the fundamental role CAPTA plays in our national system to support families and keep children safe and how its chronic underfunding has compromised child safety. In 2016, the Commission recommended CAPTA Title I appropriations increase to $1 billion each year.

The Community-Based Child Abuse Prevention grants (often referred to as CB-CAP), included in Title II of CAPTA, are already helping to support community-based approaches to child abuse and neglect prevention in all fifty states. These grants are carried out by robust public-private partnerships that use federal funding to leverage greater state and local public and private funds and are designed to meet the specific needs of individual communities. Expanding this program would be transformational for communities and families and could increase leverage to bring other community programs and partners to the table to prevent child abuse and neglect. Title II supports locally-driven and community-based services that strengthen families, improve child well-being, and prevent child abuse and neglect. Robust funding for locally-driven services are essential to building healthy and thriving communities.

2. Strengthen Title II to build robust state and local systems that enhance coordination, quality, availability, and access to core services that strengthen families, improve child well-being, and prevent child abuse and neglect.

Title II of CAPTA is unique in that it is focused on efforts that support families and prevent child and abuse before it occurs – supporting states and community-driven solutions that strengthen families to be strong and successful, so they never come to the attention of the child welfare system.

The Coalition urges Congress to refocus the Title II program on the goal of building a “prevention system” that would provide family support and strengthening services to prevent the cascading and compounding challenges that result in crises and place children at risk of maltreatment. This focus would allow communities to be able to support parents and families before they ever get to a crisis point or before a child is harmed. Such a transformation will need robust funding to succeed.

The Coalition recommends Congress amend Title II to refocus on implementing a public health approach to child abuse and neglect prevention by building comprehensive and coordinated systems of support for families with community-based and statewide prevention programs, services, and strategies that help families meet the needs of their children and help communities best provide safe, stable, and nurturing environments for children and their families.

To do this, the Coalition recommends Title II promote:

- **Systems building:** Congress must go beyond funding individual programs and focus on helping states build coordinated, inclusive, and robust systems and networks of supportive resources for children and families that build protective factors linked with the prevention of child abuse and neglect, including: knowledge of parenting and healthy child development, parental resilience, social connections, concrete support in times of need and social, and emotional development of children.

- **Increased availability of services:** Congress must ensure equitable access to a comprehensive continuum of quality family strengthening services, initiatives, and activities that are provided in
a coordinated systemic manner. While the goal is to serve all families in the community, the Coalition recommends reauthorization seek to ensure communities engage in outreach that also target families with high-risk factors.

- **Increased accessibility to services**: To help families before a crisis point where the child protection system becomes involved, communities need to provide families with multiple strategic and welcoming access points within communities to help families identify their needs and connect them to the services and supports that are relevant to their diverse needs and interests. The availability of services is crucial, but services must also be accessible to families including those who must overcome transportation, perceived stigma, and other barriers that prevent families from accessing services.

- **Meaningful parent engagement**: The Coalition recommends the state lead agency and local systems partner with parents in planning, implementation, oversight, and evaluation of systems of support to help ensure that the funds expended and the work conducted, are most relevant and valuable to those who need and use them.

- **Funding leveraging**: The state lead agency is encouraged to maximize funding through leveraging other state and local, public and private sources to carry out the purposes of this Title and provide leadership in developing the state system.

By bolstering Title II with a renewed focus on enhancing and building state and local systems of family strengthening programs, expanding the availability and access to quality services, building approaches that are informed with the expertise of parents, and bringing promising, effective ideas to scale with adequate funding, Congress will drive much better outcomes for children and families.

3. **Take steps to strengthen CAPTA by restructuring the “use of funds” in Section 106 to further emphasize a primary prevention approach and help states and communities build a more cohesive system to child abuse and neglect prevention and treatment**

Section 106(a) allows for a wide range of uses of funds but does not put forth a clear vision of how states and communities should be reforming and integrating their systems to design better community-based solutions. Congress should use CAPTA Title I to promote a full continuum of child abuse prevention and treatment and prevention by revamping the Use of Funds provisions to encourage states and localities to:

- Build community-level systems of support for parents and families through preventive services.
- Create community networks of child and family services to empower communities to build collaboration and linkages at the systems and case levels, both outside of and within the child welfare system (including public health, primary care, child advocacy, mental health, substance abuse treatment, domestic violence, responsible fatherhood, disability services, early intervention and special education, public housing, juvenile justice, early childhood education, elementary and secondary education). These linkages are necessary for effective case management and family problem-solving, and they could also help create the community-based infrastructure for the later stage and complementary prevention services under the Family First Prevention Services Act (FFPSA).
- Create sound approaches in CPS cases to ensure safety and respond to family needs, including best practices for rapid response systems, innovative approaches to assessing family needs, use of family teaming, channeling child and families to the appropriate level of care, and connecting them with services.
• Effectively address the needs of underserved populations, including infants and toddlers, children with disabilities, homeless children and youth, tribal communities, LGBTQ children, rural and isolated populations, etc.

• Raise community and caseworker awareness about, and provide approaches to address, the needs of young children, their parents, and families in the child welfare system, including the importance of attachment and stable relationships, the developmental impact of maltreatment and the need for ongoing developmental monitoring and access to early intervention and early childhood education services, and supporting the mental health of birth parents to support child mental health needs.

• Improve and increase the supply of the workforce through better training and practice for personnel involved in protection, prevention, identification, and treatment of child maltreatment, including cross-disciplinary training.

• Create data systems that enable real time case tracking on plans, service provision, case-related meetings, and can be used for continuous quality improvement and evaluation.

4. Encourage state reform by streamlining and updating the Title I state plan to improve transparency and accountability in long-required state practices and state systems

The Coalition strongly recommends Congress move away from relying only on “assurances” in the CAPTA state plan. This structure has allowed states to disregard many of the key requirements Congress wrote into law. As a result, key Congressional reforms and priorities have been ignored or weakly implemented. The Coalition believes that changing this status quo is essential for better prevention, intervention, and treatment of child abuse and neglect.

Therefore, the Coalition urges Congress to require the state plans under Section 106(b) to also include descriptions of State efforts to effectively address the some of the requirements in the law. This reform would bring transparency and accountability that has been completely lacking in CAPTA and has permitted decades of Congressional reforms to go largely unanswered.

In addition, the Coalition urges Congress to push States to develop a strategic plan for community-based prevention-focused approaches designed to strengthen and support families to prevent child abuse and neglect. CAPTA needs to better prioritize steps that communities can take to strengthen and support families instead of intervening only after a child has been harmed.

The Coalition also urges the Congress to moves states toward addressing discrimination and bias in its child protection systems through Section 106(b).

Please note that in regard to Section 106(b)(2)(B)(xiii), the Coalition is not taking a position on whether CAPTA should mandate legal representation for children in child maltreatment cases. We would be pleased to connect you to Coalition members who have taken a position.

Also in regard to Section 106(b)(2)(B)(xiii), the Coalition recommends CAPTA be updated to conform to changes made in the Fostering Connections Act to ensure that children and youth continue to get representation required by law.
5. Build the evidence base and help states and communities implement evidence-based prevention systems

Congress can also help to build the evidence base for community-level prevention by funding research that provides information about evidence-based and evidence-informed programs that support families and reduce child maltreatment. This must also include a strong technical assistance component to work with localities interested in building, implementing, or adapting programs to serve their communities. Funding for these activities would support the development of further evidence-based interventions to prevent child maltreatment and more effectively intervene with trauma informed services.

The Coalition recommends Sections 104 and 105 be streamlined to focus on a smaller number of pressing issues in the field. Specifically, the Coalition recommends these sections focus on: (1) building and disseminating best practices on prevention so that child and family well-being is strengthened before a family ever reaches a crisis stage; (2) promoting best practices for families with complex needs, such as domestic violence, substance abuse, mental health issues, and children and parents with high ACEs; and; (3) reducing racial disparities in child welfare systems and the systems that routinely interact with child welfare, such as law enforcement, education, and health systems. In addition – because, as in any field – the workforce is essential to effective services, the Coalition recommends additional demonstration grants to improve the child welfare and prevention workforce.

This more intensive focus will allow better progress in building and implementing evidence-based services and systems as opposed to a long and less targeted approach to technical assistance, research, demonstration grants, and general grants.

6. Reduce child fatalities and near fatalities from child abuse and neglect by implementing some key recommendations from the Commission to End Child Abuse and Neglect Fatalities

Ending child abuse and neglect fatalities cannot be addressed in CAPTA alone. But there are four critical steps that should be taken in CAPTA reauthorization.

First, the Coalition recommends there be a standard national definition for child abuse and neglect fatalities and near fatalities. Poor data at the state and local levels has interfered with states being able to evaluate their own efforts and institute meaningful reforms. Without good data, state efforts to reduce fatalities and near fatalities will always be significantly hampered. Once this definition is implemented, this state data should be added to the state annual data reports in Section 106(d).

Second, the Coalition recommends that Title I state plans be amended to require States to describe how they will use their data on child fatalities and near fatalities from child abuse to prevent future occurrences. This will create better transparency and allow Congress, states, and stakeholders to better understand what is being done to reduce deaths and near deaths.

Third, the Coalition recommends the rules about disclosure in Section 106(b)(2)(B)(x) be strengthened to reflect the HHS child welfare policy manual’s explanation of public data reporting requirements related to child fatalities and near fatalities. States should be clear that fatality disclosure is an obligation in most circumstances (note that there are a limited number of important exceptions). States often do not follow key disclosure rules about fatalities which makes it difficult for communities to hold their local governments appropriately accountable for fatalities and near fatalities from child abuse and neglect.
Fourth, the Coalition recommends the importance of rapid response investigations for cases involving children under the age of three be emphasized in state use of funds. Infants and toddlers are at the highest risk of an abuse or neglect fatality and require special attention.

7. Take steps to reduce the incidence of sexual abuse within institutional contexts

In recent years and months public attention has been focused on incidents of child and adolescent sexual abuse that were enabled by the inaction or indifference of a major institution that failed to act to protect these victims. This reality calls for national leaders to act in a new and more assertive way.

CAPTA already sets certain requirements to deal with child sexual abuse on an individual basis, and it should be strengthened by requiring states to ensure that mandated reporters receive profession- and institution-specific training on the proper procedures.

An approach that stretches beyond CAPTA is critical. We call on Congress to act through a range of federal statutes and programs, and threaten the loss of federal program funding, financial penalties and/or the loss of non-profit status to organizations who engage in institutional child sexual abuse. We define institutional (for-profit and non-profit organizations, including church, university, school, association, sports entities) child sexual abuse as organizations or companies engaged in systematic child sexual abuse.

8. Spur local innovation in the field through new competitive grants focused on supporting families and prevention of child abuse and neglect

Congress can advance innovation in the field by creating a new competitive grant component in CAPTA designed to build multidisciplinary systems of care to strengthen families and prevent child maltreatment. Such a program could be modeled after the Project Launch program, which is aimed at promoting innovation in improving the life outcomes for children and families. This would entail grants through funding models that require collaboration at the local level. States, local government entities, or community organizations could be grantees of the program.

At the heart of this approach would be an emphasis on leveraging and linking multidisciplinary, community-based, evidence-based and evidence-informed services to prevent child maltreatment. Partners would include a range of systems supporting children and families including child welfare, cash assistance, Medicaid, domestic violence, mental health, substance abuse, disabilities, early intervention and special education, public housing, and early childhood agencies, all of whom provide services to families in a way that is as routine as health exams. Metrics for success should include reduction in maltreatment, as well as health and early education indicators and other metrics related to child and family well-being. In addition, metrics must be aligned to hold multiple systems accountable for results.

These grants should also include a strong evaluation component so that their results could inform the field; other communities, states and policymakers could learn from their experiences, gather best practices and lessons learned, and ultimately replicate successful innovations.
A possible framework of activities to build the *essentials for childhood*, as put forth by the CDC:

1. Bringing community leaders and parents together around a shared goal of creating communities that support stable, nurturing families:
   a. Public awareness of consequences, costs, and strategies.
   b. Partnering with other sectors to move toward solutions.

2. Gather the data needed to identify existing services and gaps, and create or connect data systems to support actions and monitor progress.

3. Build community norms based on the central place of parents (and other caregivers, particularly grandparents) in children’s lives and an acknowledgement of the great stress today’s parents experience.
   a. Get down to the neighborhood level with actions to promote safety, child-friendly spaces, family interaction, connections, and support
   b. Develop parent leadership and buy-in; implement strategies with the realities of daily life in mind
   c. Broad-based parent support strategies: widespread availability of parent information and guidance as a matter of course (Family Connects, primary care-based developmental specialists)
   d. Specialized parent/child supports, including home visiting evidence-based parenting programs, multi-generational mental health therapies, and discipline methods.

4. Identify and promote policies that strengthen families and promote healthy, resilient children by creating a lens for policy decisions of conditions that support safe, stable nurturing relationships and environments. Such policies would involve partnerships across sectors and could focus on:
   a. Engaging in parent-focused efforts such as those in #3.
   b. Addressing policies that penalize low-income families through unfair business practices or reduction in housing availability.
   c. Wage and benefit policies, including Paid Family Leave or Sick Days.
   d. Expanding the early childhood landscape, including addressing the location of high-quality child care programs, the expansion of Early Head Start, especially for children experiencing maltreatment.
   e. Providing health insurance for children and adults, access to health services, creating access to substance abuse and mental health services.
   f. Expanding education (particularly high school completion), training, employment and job creation efforts.

5. Promote data collection and continuous quality improvement, rigorous evaluation, long-term outcome frames.