

Creating a Child & Family Well-Being System: A Paradigm Shift from Mandated Reporting to Community Supporting



Safe & Sound
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Introduction

Under current California law, professionals who serve children and families—physicians, teachers, counselors, law enforcement, and other child serving professionals—are mandated to report to the appropriate government entity cases of suspected child abuse or neglect. That noted, the data shows that only a **small percentage** of these reports are confirmed as maltreatment, and Black, Native American and Latinx children and families in California are much more likely to be reported and become involved in the child welfare system.

In this brief, Safe & Sound—in partnership with other family- and community-serving organizations—outlines a path to reform our current system of mandated reporters to one of community supporters to keep families strong and together.

Safe & Sound is a children’s advocacy organization that has served San Francisco and the Greater Bay Area community for

nearly 50 years with a mission to prevent child maltreatment and reduce its devastating impact. Our work is grounded in strengthening protective factors for families and communities—parental resilience, knowledge of parenting, social and emotional competence of children, social connection, and concrete support in times of need—which are known to mitigate the risks of child abuse. Growing research shows the importance of ensuring equitable access to essential needs, social support and connection, maintaining the social contract, building upon individual protective factors, and realizing racial and social justice at the community level.¹

This brief was developed with funding from the California Department of Social Services/ Office of Child Abuse Prevention to inform community stakeholders and county comprehensive prevention planning teams about strategies to move to a new paradigm for child welfare. We also want to acknowledge the many partners and allies who have generously reviewed this brief and helped inform our recommendations.

[\(See Acknowledgements\)](#)



I. Why Safe & Sound?

Safe & Sound provides one-on-one services to families, community education, and advocacy to end child abuse and neglect. We have been honored to serve as the Child Abuse Prevention Council (CAPC) for San Francisco County since 1973. More recently, we have co-chaired the Marin County CAPC. We also serve as the lead partner for the San Francisco Children’s Advocacy Center, San Francisco Family Resource Center Alliance, and the San Francisco Family Support Network.

This issue brief is drawn from our nearly 50 years of experience in supporting children, parents, caregivers, and families living in vulnerable circumstances and serving as San Francisco’s CAPC and designated trainer for mandated reporters of suspected child abuse and neglect.

The proposed paradigm shift from mandated reporting to community supporting is not a new idea, but one that has been proposed and championed by advocates, social workers, researchers, philanthropists, pediatricians, educators, and others across the country who have been informed by deep listening to families with lived expertise in the child welfare system. As you consider the information and recommendations in this paper, we encourage you to dive deeper into the references and resources section provided for further context.

For this brief, we have augmented our experience with a review of key research ([See Appendix](#)) and offer data, definitions, perspectives, and recommendations to inspire and guide advocacy.

“We have trained mandated reporters in our community for many decades. In doing so, we have participated in a system that is itself inequitable and often harmful to the children it was intended to protect. We acknowledge our complicity, and are committed to partnering across the communities we serve to reform mandated reporting policies and practices. We will continue to learn and update our training to present the authentic history of the child welfare system in our communities, and inform and educate on the role of implicit and explicit bias in reporting.”

— Katie Albright, Chief Executive Officer, Safe & Sound

II. Why Now?

We are in the midst of a once-in-a-generation opportunity to reimagine the child welfare system based on a number of transformative new policies, newly available resources, and a significant shift in attitudes held by policymakers and the public.

Most notably is new federal policy—the [Family First Prevention Services Act \(FFPSA\)](#)—which was signed into law in February 2018 and is currently being implemented in states across the country, including California. This law allows for federal dollars to be used to support families in which children are at “imminent risk” of entry into foster care. And beyond these new but somewhat restrictive “secondary” prevention dollars, there are additional funding streams with more flexibility—for example, state block grants—that can fund primary prevention-related efforts. In California’s county-administered child welfare system, 49 out of the 58 counties and the Yurok and Karuk tribes are now engaged in comprehensive prevention

planning efforts (with plans due in January 2023), leveraging anticipated resources from FFPSA and other state funds, which are incorporating new state policies to create a vision of “child and family well-being networks.”²

Key to this pending policy and practice shift is the need to create “community pathways”—with no wrong doors, no shame or blame—to allow families to access services and support without fear of over-reporting to Child Protective Services (CPS) from mandated reporters when a child’s safety is not in question.

Finally, and most notably, moving from mandated reporters to community supporters has long been a demand (see [UpEnd](#)) from those who have been disproportionately impacted by the child protection system. As the data so clearly indicates, Black and Native American families are significantly overrepresented in foster care, in part, because of structural racism. Our child protection system is complicit in perpetuating such racism that compromises the well-being of children and families in historically oppressed and marginalized communities.

“FFPSA will bring California—and our country—significantly closer to implementing a child and family well-being system. This unprecedented shift in culture and practice will require public entities and organizations that touch the lives of children and families to embrace and implement a support mindset. Equipping communities with the ability to offer support is an essential link to successfully bringing FFPSA’s promising prevention policies into practice.”

— Dr. David Sanders, Ph.D., Executive Vice President of Systems Improvement, Casey Family Programs



“My daughter was born medically fragile. I had no support from my family. I didn’t know where to go for help. I didn’t know how to ask for help because I didn’t know what I needed. The domestic violence in our home got worse because of the stress of being parents of a child with significant needs. When the police called CPS, I had no idea that my child could be removed because I was a victim of domestic violence. How could they take her away? I believe my experience—and my daughter’s life—would have been different if we had support, if someone had explained the “failure to protect” laws. Even though my daughter was in foster care for less than a year, she continues to suffer from the experience.”

— Shelley Lopez, Parent and Advocate

III. Why Does This Matter?

Across our country, child abuse hotlines generally receive approximately 4.4 million referrals of alleged maltreatment each year.³ These referrals, the majority of which are reported based primarily on suspicion of neglect, impact 7.8 million children.⁴ More often than not general neglect cases are inextricably tied to poverty, including a lack of child care, housing, basic utilities, food, and medical and legal support. In addition, some neglect cases involve children at risk of maltreatment because of a lack of services, such as treatment for a caregiver’s behavioral health conditions or substance use, or services to protect a caregiver from domestic violence. These are all serious problems that are best addressed outside of the child welfare system.

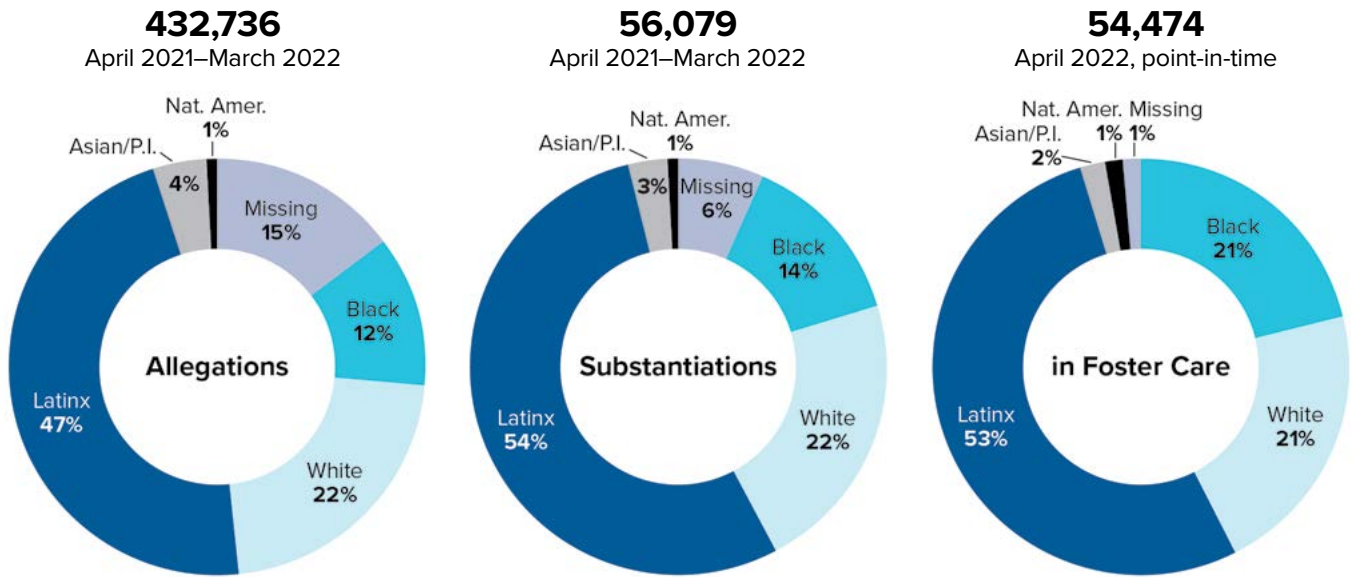
In California, **close to a half-million children per year are reported for maltreatment and only a small percentage of allegations are confirmed.** From April 2021 through

March 2022, 432,736 children were involved in reports or allegations of child maltreatment, of which 56,079 (13%) were substantiated (confirmed maltreatment after an investigation by a county’s child welfare agency). Nearly 50% of allegations were classified as “General Neglect.”⁵

The significant number of allegations versus substantiations also has a greater negative impact on communities of color, specifically Black communities. Black children are the most overrepresented population in the child welfare system. Between January and December 2021, Black children made up 5.4% of California’s population.⁶ However, as shown in the charts below provided by the [California Child Welfare Co-Investment Partnership](#) and based on Child Welfare Services/Case Management System (CWS/CMS) data, Black children accounted for 12% of allegations, 14% of substantiations, and 21% of the 54,474 children in foster care.

“I care deeply about my students. If a child is falling asleep in class or going to extreme measures to get more food at school, I try to talk to them to see how I can help. Sometimes I’m just not sure how to get them enough support without involving child protective services because I don’t have connections to the resources that these children and their families need.”

— Kimberly Brown, Teacher, Dr. Charles R. Drew College Preparatory Academy



Percentages are rounded up to whole numbers.

Because of a complexity of factors, Black, Native American, and Latinx families are significantly more likely to encounter systemic and structural barriers and to be reported to child abuse hotlines. Once a report is made, these families are also significantly more likely to be investigated for abuse and neglect and have their children

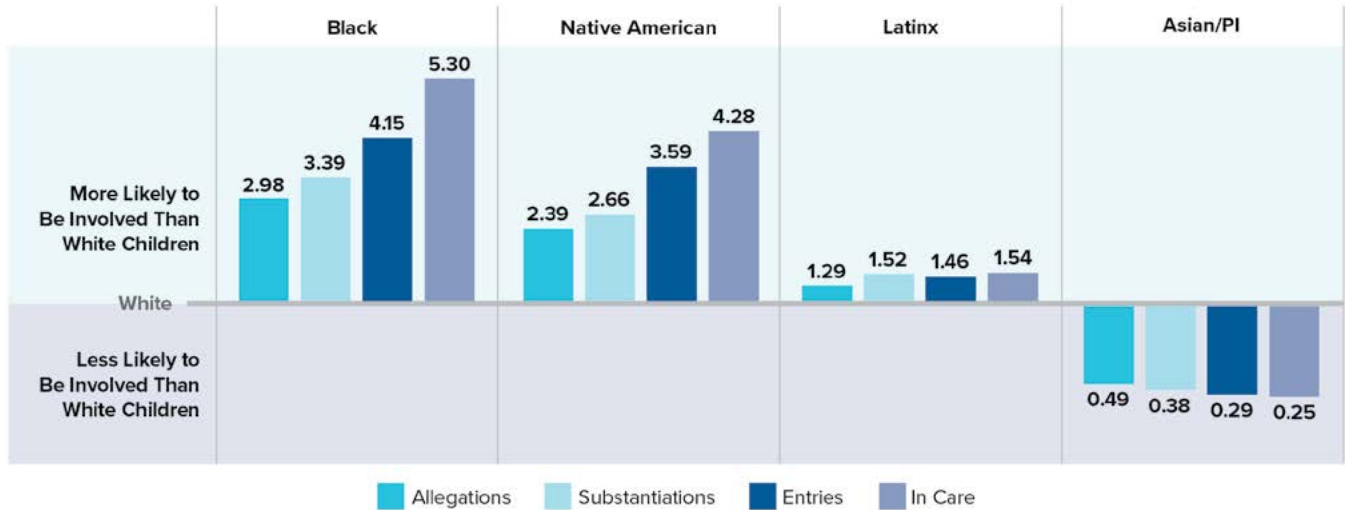
separated from them and placed in foster care. The data illustrate that the system is heavily biased in terms of race. One-third of all children in the United States are subject to an investigation of child abuse by the time they turn 18, with a vastly disproportionate 53% of these children being Black.⁷

“When we discuss the data, people are shocked. Black and Native American children and families are touched by the child welfare system at significantly higher rates than other groups. Understanding this disproportionality helps us examine our own biases and start to think about how we can be part of the change instead of part of the problem.”

— Jessica Mateu-Newsome, Program Director, Family and Children’s Services, San Francisco Human Services Agency

Racial Disparity Indices, January – December 2021 (General Population)

Baseline California Data Trends: Ethnic Group Disparity Compared with White Children Along Child Welfare Continuum

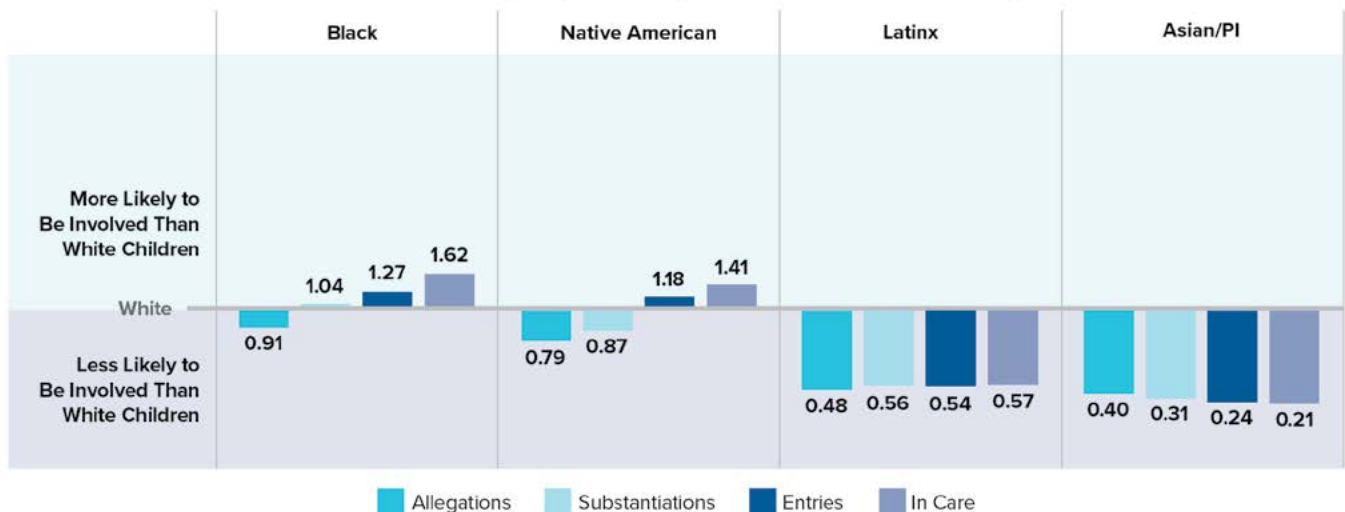


The important additional information shown below takes the data a step further by applying a “poverty population estimate” to attempt to control for the impact of poverty on child welfare involvement. Specifically, these data examine rates of system contact for children estimated to be living in poverty by applying American Community Survey (ACS)

multipliers.⁸ When family poverty levels are taken into account, low-income Black, Latinx, and Native American children are less likely to be reported to child welfare than low-income White children. However, once Black or Native American children come to the attention of child welfare agencies, they are substantially more likely to enter and remain in foster care.

Racial Disparity Indices, January – December 2021 (With the “Poverty Population Estimate”)

Baseline California Data Trends: Ethnic Group Disparity Compared with White Children Along Child Welfare Continuum



A child's removal from their caregiver is itself a traumatic experience that can have a life-long impact. According to the science of Adverse Childhood Experiences (ACEs) separation from a caregiver due to foster care or immigration is an [adverse experience](#) and is included in the [PEARLS](#) screening tool currently being administered by pediatricians across California. Research

shows that the toxic stress many children in foster care experience can later manifest in psychosocial and health problems as adults. The risk factors associated with foster care, such as parental separation and multiple placements, often counteract many protective factors that can ameliorate the effects of childhood adversities.⁹



IV. What It Means to Move from Mandated Reporting to Community Supporting

The [Child Abuse and Neglect Reporting Act \(CANRA\)](#), California Penal Code Section 11164 and follows, requires a mandated reporter, working in any of 49 defined roles in California, to report anytime they, in their professional capacity or within the scope of their employment, have knowledge of or have observed a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect. A mandated reporter's failure to report an incident of known or reasonably suspected child abuse or neglect is a misdemeanor punishable by up to 6 months of confinement in a county jail, a fine of \$1,000, and/or the loss of professional licensures and credentials. Under existing law, employers are strongly encouraged to provide their employees who are mandated reporters with

training in identification and reporting of child abuse and neglect.¹⁰

The professional and ethical responsibilities of many mandated reporters (e.g., psychologists, pediatricians, social workers, and child care providers) are primarily to support children and families. When a question of mandated reporting arises, however, these responsibilities can become undermined by legal obligations that may, in reality, have significant negative effects on children and their families. Fulfilling the legal obligation can increase the focus on reporting and may create over-surveillance of families, potentially affecting a family's relationship with the professional by eroding trust and therefore limiting the family's interest in seeking future support.

“...policymakers and advocacy groups that are singularly focused on increasing surveillance in the name of safety do not see the collateral damage it causes to real people that care about their children and children themselves. Damage includes unnecessary separation, trauma, the inclusion of names on registry lists that will forever limit employment opportunities and economic mobility, and countless other indignities and ongoing threats to the well-being of children and parents.”¹¹

— Jerry Milner and David Kelly of Family Integrity & Justice Works

“Current laws and policies on mandated reporting, together with a lack of access to community-based supports for all families, may inhibit teachers, health care professionals, and other mandated reporters from engaging in creative problem-solving and helping to build family strengths and protective factors.”

— Judge Martha Matthews, California Superior Court, Los Angeles County

The mandate to report is intended to protect children but, at the same time, can restrict attempts to help. Once mandated reporters are focused on carrying out their legal obligations and avoiding the penalties they may face if they do not, they may find it more difficult to center the family's needs and strengths and to fully consider supports that could help improve the circumstances that led to the suspicion of abuse or neglect. This structural problem thereby obscures one of the very things that may be most protective for children: the existing strengths of the caregiving systems within which they live.

Moreover, factors such as using social services, receiving economic benefits, and living in public housing subject families to an extra layer of contact with mandated reporters, leading to over surveillance of these families.¹² Public professionals are far more likely to report maltreatment than private professionals who serve more resourced families. Resourced parents avoid the home inspections, drug testing, and psychological evaluations that the government imposes on low-income parents.¹³

“The child welfare system has historically been rooted in fear: fear of the rare tragic cases of severe abuse that are missed, and the consequences to the children and professionals involved. We must resolve the dilemma of keeping children safe and supported without magnifying the feeling of threat, fear, and surveillance often associated with mandated reporting.”

— Kimberly Giardina, DSW, MSW, Director Child Welfare Services, County of San Diego Health & Human Services Agency



“The child welfare system is designed to detect and punish neglect on the part of poor parents and to ignore most middle-class and wealthy parents’ failings. Although the meaning of child maltreatment shifted from a social to a medical model, it retained its focus on poor families. The system continues to concentrate on the effects of childhood poverty, but it treats the damage as a symptom of parental rather than societal deficits.”¹⁴

— Dorothy Roberts, *Shattered Bonds*

V. Recommendations for Reforming Mandated Reporting to Allow for Community Supporting

A. EMBRACE A NEW FRAME

This proposed paradigm shift requires **revising the overall framing of our societal response**. When there is concern that a child's environmental and living conditions may have a negative impact on their health and well-being, how might we move from report to support? In the current frame of mandating reporting, the threshold for making a report to child welfare is knowing or reasonably suspecting that a child has been a victim of abuse or neglect. Failure to report even "reasonable suspicion" is a misdemeanor. This low threshold, particularly when linked to the overly broad and often poverty-linked category of neglect, casts an extremely wide net for mandated reporting, even when there is little question of risk for a child's safety.

In a reframing in which we prioritize the best outcomes for a child, we first ask whether there is truly a substantial risk of harm to the

child, and if not, we turn to questions about supporting the child within their caregiving system to address the mandated reporter's concerns about the child's environment or living conditions. When we look at the caregiving system as a whole, the key assessment and decision-making questions are:

"Does this family have the resources to provide the care and protection they want to provide?"

"What strengths exist within this caregiving system?"

"What are this family's priorities for their child, and how can we support them in a culturally appropriate and humble way?"

This frame provides a different starting place than the historically fear-based approach, while leaving in place the possibility of referral to CPS in the case of an imminent threat to the child's health and well-being.

"We want educators, clinicians, and case managers to have more room to offer support and collaborate with families to build strengths rather than send them into a fear-based system of surveillance that may not result in greater safety for the child. When the risk of imminent danger to a child is low, we must be able to engage in offering sincere support with integrity, and without the shadow of fear that accompanies the obligation to report."

— Dr. Malcolm Gaines, Senior Clinical Projects Director, Safe & Sound

“Changes in mandated reporting statutes are a necessary and foundational step to addressing long-standing policies and practices that target low-income families and Black, Native American, and Latinx families, pushing them into the realm of child welfare. Mandated reporting laws often result in a reliance on child welfare to respond to family need that should instead be addressed through investments in community and public systems that support a family’s true needs, keeping families together and communities strong.”

— Jenny Pearlman, Associate Director Strategic Partnerships & Policy, Safe & Sound

B. ADVANCE LEGAL AND LEGISLATIVE REFORMS

In the legal and legislative arena, moving from mandated reporting to community supporting requires **a revision of the laws and regulations that address the historically fear-based system that penalizes families.**

These proposed reforms open the possibility of a system centered on keeping families together through support and building on their strengths. Suggested revisions to the current statutory system include:

Raise the legal threshold for reporting.

This might include addressing the “reasonable suspicion” standard for the mandate to report or ensuring that a reporter is only mandated to report when there is a substantial or imminent risk of harm.

Ensure that the evidentiary standards for family separation are high and that any such evidence must be weighed against the risks that family separation poses.

An example of this is recent statutory changes in Washington State that provide “[t]he existence of community

or family poverty, isolation, single parenthood, age of the parent, crowded or inadequate housing, substance abuse, prenatal drug or alcohol exposure, mental illness, disability or special needs of the parent or child, or nonconforming social behavior does not by itself constitute imminent physical harm,”¹⁵ which is required to justify removal of a child from their family. Additional training, of course, would be required to ensure understanding and awareness of new evidentiary standards.

Narrow the legal definition of neglect,

including removing poverty-based neglect from the purview of what mandated reporters are required to report. This would allow “helping” professions to provide support rather than making a child abuse report that places a family in the child welfare data system. Toward this end, pending California legislation, [AB 2085](#) (Holden), proposes statutory changes to the definition of general neglect to exclude a family’s “economic disadvantage” and to heighten

the standard to a “substantial risk of suffering serious physical harm or illness.”

Require greater information and disaggregation of data related to neglect. To better understand whether mandated reporters’ reporting of neglect or CPS’s finding of neglect is strongly aligned with a substantial or imminent risk of harm to a child, it is important to have more information about both the reasons for the finding or concern of neglect and the demographics of the children with reports or substantiations of neglect. For instance, valuable, additional information about an allegation or substantiation of neglect would be whether this was based on a caregiver’s substance use, domestic violence or something closely associated with poverty. Also, if CPS had a system for publicly reporting neglect data and the demographics of children with this report or finding, communities would have increased awareness regarding the disproportionate impact of such reports on families of color.

Set limits for when mandated reporters can be held liable for “supporting, not reporting.” For example, it may be possible to immunize some classes of mandated reporters from the mandate to report to CPS when there is a concern of neglect

if they act as *community* supporters and take action to refer a caregiver to a Family Resource Center (FRC) or other community-based family support program.

Delete the catch-all provision included in the identification of who is a mandated reporter. California’s reporting statute includes this very broad category of who is a mandated reporter. Specifically, California Penal Code Section 11165.7(a) (8) includes “[a]n administrator, board member, or employee of a public or private organization whose duties require direct contact and supervision of children, including a foster family agency.” This overly broad, catch-all provision means that someone with very little knowledge about or expertise in child maltreatment could be considered a mandated reporter such as an organization’s accountant, who talks with children and their families in the waiting room on their way to their desk.

C. IMPLEMENT POLICY AND PRACTICE REFORMS

To make this shift from mandated reporting to supporting will require that we put into place **policies and practices that assist the community in responding with services and support**, with a sufficient level of assurance that concerns about the child’s health and

Note: There is legal precedent to carve out different rules for specific mandated reporters in several pieces of the Child Abuse and Neglect Reporting Act (CANRA), including California Penal Code Section 11166(d), which removes the mandate to report for priests who acquire the information in confession. There are also distinctions in classes, such as acknowledging that a dentist has a deeper knowledge of specific signs of abuse than an IT person. The precedent to sunset a piece of mandated reporting is in Section 11169(b), where as of January 1, 2012, police no longer were required to file a report in addition to a CPS report.

well-being will be addressed. The following are some proposed reforms:

Center, and fully fund, community organizations such as FRCs and other community organizations that provide family support, School Based Health Centers, and Federally Qualified Health Centers as places families can turn to for help to access needed resources and create pathways to strengthen families and communities. These provide families with access to services to meet their needs before a crisis occurs.

Incorporate Group Decision Making Models in Organizations to Reduce Bias and Risk¹⁶

Plan of Safe Care is a model used in hospitals that could be adapted for other entities serving children and families. A Plan of Safe Care document organizes a family's supports and strengths including connections with family, community, and care providers. A Plan of Safe Care could be used by

mandated reporters to help determine whether a CPS referral is necessary to address substantial risk or if a variety of supports for the family is sufficient to mitigate such risk.

This approach could be supplemented with the creation of space for providers from multiple disciplines to come together to discuss concerns about a family before a CPS referral is made. The various disciplines would have an opportunity to contribute, identify family strengths, safety concerns, and systemic factors that may be contributing to the decision—including racism and stigma regarding substance use disorder. At Zuckerberg San Francisco General Hospital (ZSFG), there is a practice called **Child Protective Services (CPS) Time-Out**, which allows a mandated reporter to pull together professionals from different disciplines, such as outpatient providers (e.g., prenatal care team) and social service partners, to meet before reporting to CPS.

“Before and after school program staff typically live in, and are from, the same communities as the families who benefit from these programs. Their relationship with the families is not transactional, which is what most families experience from the systems that are meant to support them. Doing the work to see, know, and support kids and families takes time and intentionality. This is the hard work that these families need and deserve. We call it ‘leading with love.’”

— Michael Funk, Director, Expanded Learning Division,
California Department of Education

“Making a CPS report as a health care provider is like a black box where no communication comes back out from the system. This is a missed opportunity for collaboration between child welfare and health care providers. We are written out of the equation once a report is made, which drives a wedge between the provider and the family.”

— Dr. Claire Gibson, MD, Neonatology Specialist,
University of California San Francisco

Use Peer Advocates and Partners to develop a peer support model. The peer support model is an asset-based program focusing on strengths, not deficits. These programs focus on building trust, respect, empathy, and love. *This model would help build relationships with neighbors, offer emotional support, make connections to community resources, and advocate to expand community resources that can reduce family stress before it builds and lead to healthier, thriving families. Trained networks of peers with credible life experience will: increase the likelihood that parents in emerging crises safely get support without unnecessary state intervention; and increase the flourishing of relationships that reduce stress, trauma, and isolation and strengthen healing, care, connectedness, and joy.*¹⁷

Augment Mandated Reporter Training to include strategies to build a system that supports families first. Examples include:

- During trainings, be explicit about the disproportionate impact of child welfare on Black, Native American, and Latinx children as well as the impact of implicit bias in decision-making.
- Clearly state that a mandated reporter considering whether to make a report

for neglect should assess whether a family's situation poses a risk of substantial or imminent harm to a child versus a desperate need for resources and support. While it is not the role of mandated reporters to investigate, we need to remind mandated reporters to ask themselves some key questions such as, “What is the impact of the caregiver's action or inaction on the child?” and “Is the child in danger of being harmed?”

- For teachers and school social workers specifically, mandated reporter training should be offered in-person and tailored to the local community so there can be a focus on referring to local resources available for family support.
- In developing their trainings, trainers should reach out to their county child welfare agency and determine whether its policy and practice would allow for a reporter to call for a consultation without providing an identification to learn if the concern rises to the level of a mandated report. Counties' practices may vary throughout the state; therefore, advance partnership with the child welfare agency is important to clarify in advance.



“If I had a wish, I would like to eliminate the use of online training modules and go back to in-person/zoom training for teachers and school social workers. We could reinforce that most school-based general neglect reports should be referrals to community resources, not reports to CPS, as long as the caregiver’s action or inaction is not creating a risk of substantial harm to the child. This format would also allow us to build connections with school sites so they understand that they can reach out and ask about resources to support families before reporting. This would be another step to allow us to build a pathway to family support and prevention.”

— Will Roy, Associate Director of Community Education & Partnerships, Safe & Sound

D. INCREASE ACCESS TO SUPPORTS AND SERVICES

A key challenge to reforming the role of mandated reporters and allowing them to become community supporters is how to **ensure families are connected to services and support in a trauma-informed manner**, without involving child welfare, and without burdening families with multiple assessments and long waiting lists. In addition, the complexity of social services, both private and public, may be challenging for many families to actually connect and secure support. Recommendations include:

Invest in Basic Supports

Transitioning to systemically supporting families will require that we “implement a continuum of services that combine universal supports with early intervention strategies”¹⁸ that promote the well-being of all families and address inequities grounded in structural racism. An exciting new research review from Chapin Hall at the University of Chicago shows that increased investment in essential family needs results in reduced involvement with child welfare. For example, researchers¹⁹ found that for every \$1 increase in the minimum wage, there was a nearly 10% reduction in neglect reports. Additional studies²⁰ show that for each additional \$1,000 states spent on benefit programs per person living in poverty, there was an associated reduction in child maltreatment: a 4.3% reduction in reporting, a 4.0% reduction in substantiations, a 2.1% reduction in foster care placements, and a 7.7% reduction in child fatalities.

Create Trauma-Informed Linkages Between and Among Child- and Family-Serving Entities

One significant barrier to families’ ability to access necessary supports and services is the lack of coordination among multiple child- and family-serving entities, e.g., pediatric healthcare, early childhood education, K–12 schools, public benefits, and Family Resource Centers. It is necessary to create a two-generation family and child well-being system by strengthening referral and service coordination among family-serving agencies through intentional linkages among systems—both government and community based—and engaging in policy and advocacy work to influence public agencies to create an integrated system of care that prioritizes family well-being and prevention before a family is in crisis. Both Family Helplines and Family Navigators are key to developing an integrated system of care that centers on family experience and incorporates a family’s strengths and knowledge of their own needs.

Invest in Technology Solutions

The recent experience of the [ACEs Aware](#) initiative, in which pediatricians who screened for ACEs wanted options to support patients and families, led to a partnership with a technology platform that allows for “closed loop” referrals for services and support. A case study from the ACEs Aware [RoadMap](#) (page 63) which highlights [UniteUS](#) demonstrates the promise of using technology to “support the supporters” as well as families. In addition to closed loop referrals based on the consistently updated inventory of services and supports, the platform allows for care coordination across providers, gap analysis and accountability for outcomes.

In addition to UniteUs, another promising technology solution to facilitate mandated supporting is [One Degree](#), a technology-driven non-profit committed to helping low-income families access the resources they need to achieve social and economic mobility and improve their lives. Families can use their Common App to apply for CalFresh, Medi-Cal, and the San Francisco Recreation and Parks Scholarships all in one online application.

E. ENGAGE COMMUNITIES, TRIBES AND OTHER STAKEHOLDERS TO GUIDE REFORM

Many California communities are currently engaged in Comprehensive Prevention Planning with guidance/requirements provided by California Department of Social Services (CDSS) as outlined by [AB153](#) and supported by the State Block grant.

This comprehensive planning is intended to be informed by Tribes as well as a broad representation of other stakeholders, including educators, pediatricians, public health and family and parent advocates drawn from community members who have experienced the consequences of involvement with the child welfare system. It is essential that we build and amplify the voices of impacted parents, caregivers, and young people as we work to envision and implement **a framework for child well-being rooted in community success and not family punishment.**²¹

A partnership among a wide variety of stakeholders can best advise policy makers and administrators about the challenges faced by families as well as help establish stronger community ties.

As these planning efforts move forward, we offer these **key questions to guide discussions** on how to optimize our efforts to support families with what they need to thrive instead of turning to child welfare for solutions.

- How can we critically assess and navigate situations in which support for families might be needed? Are there measurements and structured tools we can use before reporting, such as:
 - a) Protective Factors assessments
 - b) Basic Needs screening tools
 - c) Structured Decision-Making (SDM) rubrics
- What resources are available for parents and families to get the support they need to thrive?
- Are there people who can focus exclusively on supporting, listening, and ensuring families receive supports and services?
- How can schools and other child- and family-serving organizations find additional ways to support families, i.e., through partnerships and linkages with community agencies, without turning to child welfare when they are not sure how else to support a family?

Conclusion

The following are some actions to further this paradigm shift from mandated reporting to community supporting:

- Participate in [state and local planning efforts](#).
- Become involved in your county's Child Abuse Prevention Council (CAPC) that is responsible for advocating, educating, raising awareness and developing programming on child abuse prevention, including mandated reporter training, throughout California.
- Share this brief with your colleagues.
- Get to know the family-serving, community organizations near you and figure out ways to connect families to them.
- Dive deeper into the resources and references. ([See Appendix](#))
- Advocate for the legislative, legal, policy, and practice reforms outlined in the recommendations.
- Learn more and share your perspective with us at CommunityAction@safeandsound.org.

“The shift from mandated reporter to a community of supporters can’t happen without complete transparency. Transparency about how our own implicit biases lead to harm. Transparency about who is harmed, and how. Transparency about what happens to a family once they are reported. The shift is possible, but the system has been insular for so long, it must open up to the community so we can all heal and co-create a solution.”

— Jada Curry, Community Organizer, member of the BIPOC Family Justice Summit Organizing Committee, and author of the 2021 Summit Report

Endnotes

1. For more information about protective factors, see the work of the Center for the Study of Social Policy at [cssp.org](https://www.cssp.org).
2. California Office of Child Abuse Prevention (OCAP), <https://www.cdss.ca.gov/inforesources/ocap>
3. U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau (2021). Child Maltreatment 2019. Available from <https://www.acf.hhs.gov/cb/research-data-technology/statistics-research/child-maltreatment>
4. *Ibid.*
5. CCWIP reports retrieved from University of California at Berkeley California Child Welfare Indicators Project website: <https://ccwip.berkeley.edu>
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Appendix 1: Resource/Reference List

PUBLICATIONS

[Do No Harm, Rebuilding Trust & Keeping Families Together](#), Heather Briscoe, MD, Snehal Murthy, MS, and Simone Vais, MD, discuss the impacts of racial and economic bias, the harm in the removal of newborns in the setting of substance use, and the community and strength-based approaches that can be leveraged while advocating for change in a very entrenched system.

[Family Integrity & Justice Quarterly \(Spring 2022\)](#) extensively explores the calls for system abolition and mandated supporters, as well as the historical context of child welfare laws and family policing that have grown out of racial and class biases.

[San Francisco BIPOC Family Justice Summit Report](#). Generations of San Francisco's Black and Indigenous People of Color (BIPOC) families have fought for a family-oriented, equitable support system built on the principles of keeping families together. Recognizing the need for systemic change, a collective of organizers and community participants gathered for the San Francisco Black and Indigenous People of Color (BIPOC) Family Justice Summit in Fall 2020. This report provides recommendations and actions for specific groups with power to spark necessary change to dismantle the current Family Regulation System. During the Summit, BIPOC families shared their experiences, educated other participants, and provided key takeaways for readers of this report.

ORGANIZATIONS

[JMacForFamilies](#) is calling for large-scale systemic change, advocating to “abolish the current punitive child welfare system and

strengthen the communities and systems of support to keep families together.” In 2020, after a collective of students found the mandated reporter training at the Columbia School of social work to be unacceptable, they partnered with social work professors and community organizations to rewrite the training. The work incorporates the importance of “critically analyzing themes of power, race, oppression, & privilege” while seeking to implement alternative responses to mandated reporting that are “liberatory, harm reducing, decolonial, and center families.” They have created useful teaching modules for [Family Defense and Mandated Supporters](#). The group is committed to building an equitable culture in which all people have the right to peace and protection against violence and surveillance in whatever family structures they form. **Distinguishing Neglect From Need: Tool for Mandated Supporters** This reference includes a detailed table comparing “Misunderstood Categories of Neglect” with “Actual Needs.” It is an example of the kind of information and documentation that mandated supporters would need in order to respond to observations of children that might at first look like abuse or, in this case, neglect, but are actually manifestations of systemic harm that a family is enduring.

[UpEnd](#) is working at the policy level to shift power and support communities as first responders. They are advocating for “Increased funding to communities and grassroots agencies that provide services and support to families in holistic ways and offer concrete financial help when needed. Families should be able to identify and receive the support they need and not feel pressured or mandated to participate in interventions that are not helpful or undermine their autonomy.”

Appendix 2: Acknowledgements

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- Greater Bay Area Child Abuse Prevention Council Coalition

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