

# EXAMINING SDM® SYSTEM RESULTS BY RACE/ ETHNICITY

#### **CALIFORNIA DEPARTMENT OF SOCIAL SERVICES**

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#### **ABOUT EVIDENT CHANGE**

Evident Change promotes just and equitable social systems for individuals, families, and communities through research, public policy, and practice. For more information, call (800) 306-6223 or visit us online at EvidentChange.org and @Evident\_Change on Twitter.

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## A NOTE FROM EVIDENT CHANGE'S DIRECTOR OF EQUITY

The 2020 California Structured Decision Making<sup>®</sup> (SDM) Management Report, now available for your review, includes data specific to racial equity. As Evident Change and the agencies we partner with hold steadfast on our journey toward racial equity, we must demand systemwide transparency of data disaggregated by race/ethnicity and the experiences those data can illuminate. Evident Change is committed to fostering reflective, candid conversations on the SDM<sup>®</sup> model and its impact on decision making. I encourage you to engage deeply with this report and employ it as a tool toward improving system outcomes and serving all children and families effectively and equitably.

#### Amy McDonald Cipolla-Stickles

Director of Equity Evident Change

## HIGHLIGHTS

In the state of California, completion of the Structured Decision Making<sup>®</sup> (SDM) reunification reassessment varied by child race/ethnicity. Workers completed a reunification reassessment least often for American Indian/Alaskan Native (33.6%) and Asian/Pacific Islander (39.0%) children (Figure 1). Evident Change is concerned about the impact that these low completion rates could be having on these populations.

	L		
American Indian/Alaskan Native (n=283)	33.6%	66.4%	
Asian/Pacific Islander (n=544)	39.0%	61.0%	
Black/African American (n=4,043)	45.1%	54.9%	
Latinx/Hispanic (n=13,077)	46.8%	53.2%	
White (n=5,439)	41.2%	58.8%	
Unable to Determine/Missing (n=398)	45.0%	55.0%	
Completed Within Nine Months	Not Completed or Completed After Nine Months		

#### Timely SDM Reunification Reassessment Completion by Child Race/Ethnicity

Figure 1

The percentage of investigations resulting in child placement was higher for Black/African American and American Indian/Alaskan Native families compared with other races/ethnicities (not shown). Further, the alignment between initial safety decision and worker action was lowest for these groups (Figure 2).



Child Placement by Safety Decision by Investigated Family Race/Ethnicity



The SDM risk assessment appears to be functioning as intended. Across race/ethnicity, a higher proportion of children in families assessed as high or very high risk experienced a subsequent investigation within 12 months compared with children in families assessed as low or moderate risk (Figure 3). Although the assessment is functioning accurately, Evident Change believes a collaborative risk validation effort, with community stakeholder inclusion, could be conducted to improve assessment equity.



#### Figure 3 Subsequent Investigation by Initial SDM Risk Level and Child Race/Ethnicity

## PURPOSE

Just as our society grapples with the long-term effects of institutionalized racism and discrimination, so do our social systems. Even though there is awareness of this problem, the fact remains that due to the impact of privilege and oppression, the perspectives and priorities of people of color—and people in other groups who have been historically underrepresented in shaping the systems—are rarely translated into policy and practice. Our child welfare system, including decision-support tools such as the SDM model, must constantly be reexamined for opportunities to reduce and overcome bias to better serve everyone.

This report is an introductory look at how the SDM decision-support tools are currently functioning for children and families in different racial/ethnic groups in California. The report identifies areas for more thorough and continued examination and discussion on how to improve equity and equality for families involved with child welfare service (CWS) agencies across California.

While these data can highlight areas where assessments are working similarly or differently across subgroups, the data alone cannot tell *why* those similarities or differences exist. A close examination of *why* similarities or differences exist must embrace all aspects of the decision-making process and include directly affected stakeholders and other parties who care about just and effective outcomes.

The analyses presented in this report expand on select family or individual race/ethnicity results from the report SDM System in Child Welfare Services in California (California SDM) prepared for the California Department of Social Services (CDSS) in May 2021, which presents statewide SDM assessment results and corresponding case actions during 2020.

## **METHODS FOR IDENTIFYING RACE/ETHNICITY**

For the purposes of this analysis, researchers used the primary ethnicity type and Hispanic origin recorded in the Child Welfare Services/Case Management System (CWS/CMS) for each child to define the race/ethnicity of referred families or children in cases.<sup>1</sup> Researchers used a method employed by University of California Berkeley California Child Welfare Indicators Project to consider both primary ethnicity and the Hispanic origin indicator. This method considers individuals Latinx/Hispanic when Hispanic origin is indicated, regardless of the recorded primary ethnicity type.<sup>2</sup>

Note that this approach is not without limitations; for example, if a child's client record indicates that they are of Hispanic origin, they will be classified as Latinx/Hispanic regardless of the primary ethnicity recorded. Therefore, certain races/ethnicities that commonly present in conjunction with the Hispanic origin indicator could potentially be underrepresented (e.g., American Indian/Alaskan Native). These limitations should be considered when interpreting results. Additionally, only the child's primary ethnicity type was considered for the analysis; secondary race/ethnicity information was not used.

Race/ethnicity was defined using two different methods, depending on whether the focus of the analysis was cases/clients or referrals/families.

<sup>&</sup>lt;sup>1</sup> Primary ethnicity type and Hispanic origin are the specific names of variables recorded in CWS/CMS. The Hispanic origin variable contains the information on a child's Latinx/Hispanic ethnicity.

<sup>&</sup>lt;sup>2</sup> https://ccwip.berkeley.edu/

#### **CASE-/CHILD-BASED ANALYSES**

For case-/child-based analyses, Evident Change used the primary ethnicity type and Hispanic origin code information combinations outlined in Table 1 to define race/ethnicity.

	TABLE 1				
CASE-/CHILD-BASED RACE/ETHNICITY DEFINITIONS					
RACE/ETHNICITY GROUP	PRIMARY ETHNICITY TYPE INCLUDED				
Asian/Pacific Islander	<ul> <li>Hispanic origin code is no or unknown A</li> <li>Asian Indian</li> <li>Cambodian</li> <li>Chinese</li> <li>Filipino</li> <li>Guamanian</li> <li>Hawaiian</li> <li>Japanese</li> <li>Korean</li> <li>Laotian</li> </ul>	AND primary ethnicity type is: • Other Asian/Pacific Islander • Hmong • Polynesian • Samoan • Vietnamese • Other Asian • Other Pacific Islander			
Black/African American	Hispanic origin code is no or unknown A • Black	AND primary ethnicity type is: • Ethiopian			
Latinx/Hispanic	<ul> <li>Hispanic origin code is yes AND/OR pr</li> <li>Hispanic</li> <li>Caribbean</li> <li>Central American</li> </ul>	rimary ethnicity type is: • Mexican • South American			
American Indian/Alaskan Native	Hispanic origin code is no or unknown A • Alaskan Native	AND primary ethnicity type is: • American Indian			
White	Hispanic origin code is no or unknown A • White • White – Armenian • White – Central American	AND primary ethnicity type is: • White – European • White – Middle Eastern • White – Romanian			
Unable to Determine/Missing	<ul> <li>Hispanic origin code is no or unknown A</li> <li>Unable to determine</li> <li>Decline to state</li> <li>Other race unknown</li> </ul>	<ul> <li>AND primary ethnicity type is:</li> <li>Invalid codes (such as 0)</li> <li>Children for whom ethnicity is not coded</li> </ul>			

#### **REFERRAL-/FAMILY-BASED ANALYSES**

For referral-/family-based analyses, the family's race/ethnicity was defined by examining the primary ethnicity type and Hispanic origin code recorded in CWS/CMS for all alleged child victims on the referral. Each child was first categorized by race/ethnicity as described in Table 1. For analysis purposes, the family's race/ethnicity was then assigned using the races/ethnicities of all children on the referral. When children on a single referral had races/ethnicities that differed from each other, the family was defined as having multiple races/ethnicities within the household.

## CONTEXT FOR EXAMINING RACE AND ETHNICITY

Evident Change has included in this report a population breakdown by race/ethnicity of all children under 18 in the State of California as of July 1, 2020, based on a dataset from the California Department of Finance. Population data can help set important context for understanding how racial/ethnic groups are represented through different points in the child welfare system. Population data are not intended to be compared directly with the decision-point data in this report for the following reasons.

- The analysis unit (children versus families or child level versus referral level) may differ between the population data and the CWS information presented. For example, Figure 4 is a count of *children* under 18 in California at a certain point in time. Some of the analyses in this report are based on counting referrals or families, which may group children together.
- 2. Population data in Figure 4 are a count of unique children. In other words, each child in California is only counted *one time*. Depending on a child or family's frequency and level of CWS involvement during the reporting period, each child or family may be included more than once in the report cohort.
- 3. The population data include a "multiracial" category for individual children, while children are categorized by a single race/ethnicity in the SDM data.
- 4. The population data in Figure 4 represent a point in time. Some of the cohorts examined for this report overlap the same point in time, but others represent a population of children or families from an earlier time period (e.g., 2019).

While direct comparisons should not be made for most analyses in this report, understanding the racial/ethnic composition of the child population may help to identify potentially concerning patterns at each decision point and areas for further exploration. Only an in-depth disproportionality analysis should be used to understand whether disproportionality exists at each decision point.<sup>3</sup>



#### Figure 4 Race/Ethnicity of Children Under 18 in California<sup>4</sup>

<sup>&</sup>lt;sup>3</sup> For example, see https://www.childwelfare.gov/pubPDFs/racial\_disproportionality.pdf.

<sup>&</sup>lt;sup>4</sup> California Department of Finance. (2021). Projections [Data set].https://www.dof.ca.gov/Forecasting/Demographics/Projections

## **REFERRALS AND SDM HOTLINE TOOLS**

#### **REPORTS RECEIVED**

In 2020, counties across California received 335,450 referrals concerning child abuse or neglect. Figure 5 presents the race/ethnicity of families involved in these referrals.



#### Figure 5 Race/Ethnicity of Families Involved in Referrals

Analysis unit: Referrals received and recorded in CWS/CMS in 2020.

#### **SDM HOTLINE TOOLS**

The SDM hotline tools, which include screening and response priority sections, should be completed for all referrals recorded in CWS/CMS. The screening section helps workers decide whether referrals meet criteria to be assigned for an in-person response (i.e., investigation). If assigned, the response priority section helps determine the timeframe for the initial investigative contact with the family.

**Takeaway:** The SDM screening recommendation varied by family race/ethnicity. Referrals involving households with multiple races/ethnicities had the highest initial in-person response rate (76.9%).



Analysis unit: Referrals received and recorded in CWS/CMS in 2020 with completed hotline tools.

Across the state, workers completed the SDM hotline tools on 327,647 referrals.<sup>5</sup> The proportions of referrals assigned for an in-person response varied somewhat by family race/ethnicity. Referrals on families with multiple races/ethnicities received the highest in-person response rates. Screen-in rates were somewhat higher for Black/African American and Latinx/Hispanic families, while referrals on families with "unable to determine/missing" race/ethnicity information had the lowest in-person response rates (Figure 6).

<sup>&</sup>lt;sup>5</sup> Excludes 22 referrals with an error in the recorded initial screening decision.

**Takeaway:** Use of screening overrides varied slighty by race/ethnicity. Overrides were used least often (3.3%) for referrals on households with multiple races/ethnicities and most often (6.3%) for those on which race/ethnicity could not be determined or was missing.

## Figure 7



#### Screening Overrides by Referred Family Race/Ethnicity

Analysis unit: Referrals received and recorded in CWS/CMS in 2020 with completed hotline tools without preliminary screening items selected.

The SDM assessments are intended to support workers in making decisions, not to make decisions for workers. Therefore, workers are able to override the initial screening recommendation when, based on their clinical expertise, they believe a different decision is in the family's best interest. Workers applied overrides to the SDM screening recommendation in 4.8% of referrals (not shown). Across family race/ethnicity groups, override rates varied from 3.3% to 6.3%. Referrals for whom the family's race/ethnicity could not be determined received the highest frequency of overrides and referrals involving households with multiple races/ethnicities received the lowest rate. Workers used a larger proportion of overrides to an in-person response for American Indian/Alaskan Native (1.9%) and Black/African American (1.6%) families than for other groups. For all groups, overrides were used more frequently to change the screening recommendation to evaluate out (Figure 7).

Takeaway: Referrals involving Black/African American and Asian/Pacific Islander families had the highest 24-hour response priority rates (32.2% and 31.3%, respectively).



Figure 8

Analysis unit: Referrals received with an initial and final recommendation for an in-person response.

Referrals with an initial and final recommendation for an in-person response (of which there were 187,745 in 2020) are eligible for the response priority section and are assigned either a 24-hour or 10-day response time.<sup>6</sup> The proportion of in-person response referrals with a 24-hour response time assigned varied by family race/ethnicity groups. Black/African American, Asian/Pacific Islander, and multiracial families experienced the highest proportion of 24-hour responses (32.2%, 31.3%, and 29.9%, respectively). Referrals of families for whom race/ethnicity could not be determined or was missing received the lowest (22.0%) proportion of 24-hour response times (Figure 8).

<sup>&</sup>lt;sup>6</sup> Excludes 18 screened-in referrals with a complete response priority section but no recorded initial response priority and eight referrals that were screened in due to response priority errors.

**Takeaway**: Referrals involving Black/African American and Asian/Pacific Islander families received the highest proportion of response priority overrides (10.6% and 10.3%, respectively). The impact of overrides differed for referrals on American Indian/Alaskan Native families; over half of the overrides for these families hastened the response time (i.e., from 10 days to 24 hours) while for families in all other race/ethnicity groups, over half of overrides slowed the response time.



#### Figure 9 Response Priority Overrides by Referred Family Race/Ethnicity

Analysis unit: Referrals received with an initial and final recommendation for an in-person response.

Workers applied overrides to the SDM response priority recommendation in 9.3% of referrals (not shown). Across race/ethnicity, override rates varied from 7.2% to 10.6% and occurred more frequently for referrals of Black/African American and Asian/Pacific Islander families and less frequently for referrals of American Indian/Alaskan Native families and those with "unable to determine/missing" race/ethnicity. For most groups, overrides more frequently lengthened the response time from 24 hours to 10 days. However, for American Indian/Alaskan Native families, workers used overrides slightly more often to hasten the response time to 24 hours (Figure 9).

#### **OPPORTUNITIES**

Division 31 regulations state that workers should try to collect race/ethnicity information at the time of the referral. CDSS could consider providing counties with detailed guidance, both with this expectation and with strategies for consistent data collection at the time of referral.

CDSS could consider examining what is contributing to the differences in in-person response rates by race/ethnicity. This could include an examination of variance in in-person response across smaller geographic areas or examining selection of hotline tool items by family race/ethnicity. CDSS may want to consider other factors that may contribute to this variance, including socioeconomic status and the potential of implicit bias on the part of hotline workers. In addition, CDSS could consider examining workers' documented rationale for overrides to better understand variation in override use by family race/ethnicity.

## INVESTIGATIONS AND THE SDM SAFETY ASSESSMENT

#### **INVESTIGATIONS AND PLACEMENTS**

In 2020, California counties investigated 174,491 referrals; 14,138 (8%) resulted in at least one child entering foster care.

**Takeaway:** Compared with the population of families referred to CWS (Figure 5), a larger proportion of referrals received on households with multiple races/ethnicities were screened in and investigated than on other race/ethnicity groups (Figure 10).



#### Figure 10 Race/Ethnicity of Investigated Families

Takeaway: Compared to the proportion of families in each race/ethnicity group who were involved in CWS investigations (Figure 10), a larger proportion of investigations conducted on Black/African American and American Indian/Alaskan Native families resulted in out-of-home child placement (Figure 11).



#### Figure 11

#### SDM SAFETY ASSESSMENT

The SDM safety assessment must be completed for any referral on a non-substitute care provider that was assigned an in-person response to evaluate whether immediate danger of serious harm is present for any child during the investigation.

**Takeaway:** Identification of safety threats varied across race/ethnicity of families investigated and ranged from 24.2% (American Indian/Alaskan Native) to 15.1% (unable to determine/missing).



Analysis unit: Investigated referrals with an SDM safety assessment completed on an allegation household.

Across the state, workers completed 151,456 SDM safety assessments on investigations. Overall, workers identified safety threats (resulting in a safety decision of "safe with plan" or "unsafe") in 29,379 (19.4%) investigations (not shown). Workers indicated the presence of safety threats at similar proportions, and close to the overall statewide percentage, for investigations conducted on Latinx/Hispanic (19.3%) and White (20.0%) families; slightly more often for Black/African American (21.6%) families and households with multiple races/ethnicities (22.6%); and most often for American Indian/Alaskan Native families (24.2%; Figure 12).

A safety decision of "unsafe" means the worker has determined that placement is the only intervention available to keep the child safe. To examine how often initial safety decisions corresponded to actual child placements, Evident Change identified the first foster care entry that began between three days prior to the referral received date and the end of the investigation—or, if the investigation was still open, February 15, 2021 (the date the information for this report was collected from CWS/CMS and WebSDM).

**Takeaway:** Within each safety decision (safe, safe with plan, unsafe), child placement into foster care varied. For investigations initially assessed as safe with plan or safe, investigations involving American Indian/Alaskan Native families experienced the highest proportion of child placement.

Figure 13

Child Placement and Safety Decision by Investigated Family Race/Ethnicity



Analysis unit: Investigated referrals with an SDM safety assessment completed on an allegation household.

Overall, 85.9% of families on investigations initially assessed as unsafe had a child enter foster care during the investigation (not shown). The proportion of unsafe investigated families who had a child enter foster care varied by race/ethnicity (74.9–89.3%); proportions were highest for households with multiple races/ethnicities and lowest for families in the "unable to determine/missing" race/ethnicity category. For investigations initially assessed as safe with plan or safe, the highest frequency of placements was for the American Indian/Alaskan Native group (17.1% and 4.2%, respectively), while investigations conducted on American Indian/Alaskan Native families initially assessed as unsafe resulted in one of the lowest frequencies of placement (80.2%). Additionally, investigations involving Black/African American families or households with multiple races/ethnicities and initially assessed as safe with plan or safe resulted in slightly more placements than the remaining race/ethnicity groups (Latinx/Hispanic, White, Asian/Pacific Islander, and unable to determine/missing; Figure 13).

#### **OPPORTUNITIES**

Given the higher proportion of investigations resulting in child placement in foster care for Black/African American and American Indian/Alaskan Native families, CDSS could consider training investigators to understanding family norms; engagement strategies when culture, race, and ethnicity differ between the worker and the family; and consistent, accurate use of SDM definitions for these groups in particular.

Workers identified safety threats for a larger proportion of investigations involving American Indian/Alaskan Native families, Black/African American families, and households with multiple races/ethnicities. CDSS and Evident Change could partner to examine which safety threats are more often selected for these families compared with other race/ethnicity groups. In addition, Evident Change could assist in selecting a sample of investigations for case reading to examine safety threat identification for these groups. This could assist in determining whether the SDM definitions and thresholds, worker perception, or a combination is contributing to the variation in safety threat identification.

Within each safety decision, out-of-home child placement varied by family race/ethnicity. Adherence to the initial safety decision was lowest for American Indian/Alaskan Native and Black/African American families (i.e., compared with other race/ethnicity groups, a lower proportion of unsafe and higher proportions of safe with plan and safe investigations resulted in placement). A comparison of how often families have a child enter foster care by safety threat and by family race/ethnicity could provide more information about the variation in placement decisions. In addition, CDSS could partner with counties with the highest proportions of American Indian/Alaskan Native families to ensure they understand high-fidelity safety assessment use.

## CHILDREN INVOLVED IN INVESTIGATIONS AND THE SDM RISK ASSESSMENT

#### **CHILDREN INVOLVED IN INVESTIGATIONS**

In 2019, workers across California counties conducted investigations involving 323,258 children.<sup>7</sup>

<sup>&</sup>lt;sup>7</sup> Children in an active case at the time of their 2019 investigation were not included in this analysis.

**Takeaway:** Of children involved in investigations, 12.1% were Black/African American (Figure 14) while 5.8% of the California child population is Black, non-Hispanic (Figure 4). In addition, 0.8% were American Indian/Alaskan Native compared to 0.4% of the state child population. About 4% of children involved in investigations were Asian/Pacific Islander while the state child population is 12.8% Asian, Non-Hispanic and 0.4% Native Hawaiian/Pacific Islander, Non-Hispanic.



#### SDM RISK ASSESSMENT

The SDM risk assessment is an actuarial tool that, when completed with fidelity, classifies families based on their likelihood of experiencing subsequent CWS involvement. The assessment is constructed to highlight the groups of families investigated by CWS agencies that are most likely to experience subsequent system involvement (a new CWS investigation, substantiation, or placement). To understand the risk assessment's functioning, Evident Change staff examined recurrence by risk level for a sample of children recorded as alleged victims on investigations conducted by California CWS agencies in 2019. This group of children on investigations from an earlier timeframe provides a comparison of 12-month subsequent maltreatment investigations across risk levels.

**Takeaway:** American Indian/Alaskan Native children experienced the highest rate of subsequent investigation while Asian/Pacific Islander children and those for whom race/ethnicity was missing or could not be determined experienced the lowest rates of subsequent investigation.



Figure 15 Subsequent Investigation by Child Race/Ethnicity

Analysis unit: Children involved in a 2019 investigation with a completed risk assessment.

In 2019, 270,019 children (i.e., alleged victims) were involved in investigations that had completed risk assessments. Base rates represent the outcome rate for all individuals in a group. The base rates of subsequent investigation within 12 months for children involved in investigations in 2019 was 22.3% and differed by child race/ethnicity. Asian/Pacific Islander children and children for whom race/ethnicity could not be determined or was missing experienced the lowest rates of subsequent investigations (14.8% and 10.2%, respectively), and American Indian/Alaskan Native children experienced the highest rate (33.7%; Figure 15).

**Takeaway:** Children in families assessed as high or very high risk were most often American Indian/Alaskan Native (37.4%) or Black/African American (33.6%). Children in families assessed as high or very high risk were least often Asian/Pacific Islander (10.8%) or in the "unable to determine/missing" race/ethnicity category (10.5%).



Figure 16 Initial SDM Risk Level (Before Overrides) by Child Race/Ethnicity

Analysis unit: Children involved in a 2019 investigation with a completed risk assessment.

Overall, 67,249 (24.9%) children were in families assessed as high or very high risk (not shown). Latinx/Hispanic children and White children were in families assessed as high or very high risk at similar rates to the overall group (27.5% and 24.2%, respectively). Asian/Pacific Islander children (10.8%) and children for whom race/ethnicity information could not be determined or was missing (10.5%) were in families assessed as high or very high risk less often. American Indian/Alaskan Native (37.4%) and Black/African American children (33.6%) were in families assessed as high or very high risk more often (Figure 16).

The SDM risk assessment is designed to identify groups of families most likely to return to the child welfare system. Therefore, when certain race/ethnicity groups experience subsequent system involvement more often, families in these groups are likely to be identified as high or very high risk more often as well. For example, Asian/Pacific Islander children and children for whom race/ethnicity could not be determined or was missing were involved in a subsequent investigation within 12 months least often and were also in families assessed as high or very high risk least often. Similarly, families of American Indian/Alaskan Native children experienced a new investigation within 12 months most often and were in families assessed as high or very high risk most often. Although Black/African American children experienced subsequent maltreatment allegation rates similar to those of Latinx/Hispanic and White children, a larger proportion of Black/African American children, a larger proportion of Black/African American children were in families classified as high or very high risk.

**Takeaway:** With respect to predictive validity, the risk assessment functions similarly for Latinx/Hispanic, White, Black/African American, and Asian/Pacific Islander children. Children in families assessed as high or very high risk and for whom race/ethnicity could not be determined or was missing experienced substantially lower rates of subsequent maltreatment investigations.

Figure 17 Subsequent Investigation by Initial SDM Risk Level and Child Race/Ethnicity



Analysis unit: Children involved in a 2019 investigation with a completed risk assessment.

Despite differing base rates, family risk classifications related similarly to subsequent investigations across race/ethnicity groups with some exceptions. For example, a similar proportion of Latinx/Hispanic, Black/African American, and White children in families classified as high or very high risk experienced a new investigation within 12 months (from 34.3% to 35.9%), while the proportion for American Indian/Alaskan Native children in families assessed as high or very high risk was even higher (42.9%). The outcome rate for American Indian/Alaskan Native children in low/moderate risk families (28.2%) was somewhat higher than for children of other races/ethnicities in families classified as low/moderate risk (9.0–21.4%) and very close to the subsequent investigation rate for Asian/Pacific Islander children in families assessed as high or very high risk (30.1%; Figure 17). This demonstrates the difficulty in creating a single risk assessment when subgroups experience such different outcomes: the proportion of American Indian/Alaskan Native children experiencing a subsequent investigation was double that of Asian/Pacific Islander children (33.7% and 14.8%, Figure 15).

Subsequent investigation rate by risk level differed for children for whom race/ethnicity could not be determined or was missing. The percentage of these children in families assessed as high or very high risk (20.4%) was equal to or lower than the percentage of White (20.4%), Black/African American (21.4%), and American Indian/Alaskan Native (28.2%) children in families assessed as low or moderate risk (Figure 17). Of children in the "unable to determine/missing" race/ethnicity group, 24,167 (77.0%) had no primary ethnicity type recorded; 2,926 (9.3%) were "unable to determine"; and 4,293 (13.7%) were "declines to state" (not shown).

#### **OPPORTUNITIES**

Across races/ethnicities, the risk assessment is accurately identifying groups of families more likely to experience subsequent system involvement. For every race/ethnicity group, a larger proportion of children in families classified as high or very high risk experienced a subsequent investigation within 12 months than children in families classified as low or moderate risk. This pattern was consistent for subsequent substantiated allegation within 12 months (not shown).

While the assessment is functioning accurately within individual race/ethnicity groups, findings suggest that risk assessment functioning could be improved for certain race/ethnicity groups to improve equitable performance. Most notably, given that the subsequent investigation rate was similar between families with children who were Black/African American, Latinx/Hispanic, and White (26.3%, 23.8%, and 24.0%, respectively), a similar proportion would be expected to be classified as high or very high risk. However, a larger proportion of Black/African American children in this analysis were in families classified as high or very high risk (33.6%) than Latinx/Hispanic (27.5%) and White (24.2%) children. This analysis was not distinct on families, so larger family groups could be over-represented in these data; if family size is correlated with race/ethnicity classification, that could affect outcome rates by race/ethnicity group. A risk validation could examine these findings further and explore risk assessment modifications to improve functioning for Black/African American Indian/Alaskan Native families.

When CDSS elects to move forward with validation, Evident Change highly recommends including community stakeholders to participate in the validation process. Agency and community perspectives can help when navigating the complexities of refining an assessment intended to function similarly across diverse counties and subgroups with differing base rates (i.e., American Indian/Alaskan Native and Asian/Pacific Islander). This collaborative approach can also help to illuminate when data available for constructing the revised assessment are susceptible to institutional and implicit biases.

Given the large variation in subsequent investigation rate by race/ethnicity, Evident Change also recommends continuous quality improvement activities (which could include a case reading) on referrals and screening practices across counties.

## OUT-OF-HOME CASES AND SDM REUNIFICATION REASSESSMENT

In 2019, California counties initiated family reunification (FR) services for 23,784 placements episodes.<sup>8</sup>

### Figure 18 Race/Ethnicity of Children in Out-of-Home Cases



The SDM reunification reassessment should be completed for children in placement with a goal of returning home prior to each status review hearing and/or Division 31-required review (at least once every six months). The reunification reassessment recommendation guides a worker's decision about the permanency plan: terminate FR services, continue FR services, or return a child to the family of origin. FR services should be terminated only when the permanency plan recommendation is either to terminate FR services or return home. This analysis examined whether workers completed a reunification reassessment within six or nine months of a child's FR services starting. Child placements lasting less than eight days were excluded from the analysis; probate guardianship, the Kinship Guardianship Assistance Payment program, and Interstate Compact on the Placement of Children placements were also excluded. Placements of children in FR services for less than nine months as of the extract date (February 15, 2021) were excluded as well.

<sup>&</sup>lt;sup>8</sup> There were 149 children who experienced multiple entries into foster care with FR services in 2019. These children are included multiple times, once per entry.

**Takeaway:** Timely reunification reassessment completion varied by child race/ethnicity. Workers completed a reunification reassessment on time least often for American Indian/Alaskan Native (33.6%) and Asian/Pacific Islander (39.0%) children.

	I		
American Indian/Alaskan Native (n=283)	33.6%	66.4%	
Asian/Pacific Islander (n=544)	39.0%	61.0%	
Black/African American (n=4,043)	45.1%	54.9%	
Latinx/Hispanic (n=13,077)	46.8%	53.2%	
White (n=5,439)	41.2%	58.8%	
Unable to Determine/Missing (n=398)	45.0%	55.0%	
Completed Within Nine Months	Not Completed or Completed After Nine Months		

#### Figure 19

Timely Reunification Reassessment Completion by Child Race/Ethnicity

Analysis unit: Placement episodes beginning in 2019 receiving FR services.

Workers completed a reunification reassessment within the first nine months of FR services for 44.9% of placement episodes (not shown). Completion of the reunification reassessment within the first nine months of FR services varied by child race/ethnicity. Workers completed a reunification reassessment least often for American Indian/Alaskan Native (33.6%) and Asian/Pacific Islander (39.0%) children and most often for Latinx/Hispanic children (46.8%; Figure 19).

#### **OPPORTUNITIES**

CDSS could consider requiring reunification reassessment completion in policy. Until CDSS requires this, Evident Change expects to see variation by race/ethnicity as a result of county practice and implicit bias.

In 2019, reunification reassessment completion within the first nine months of FR services varied from 0-88% across California counties. CDSS may wish to examine variation at the county level and by race/ethnicity across counties. For example, is the variation isolated to a smaller subset of counties? By

identifying counties with high timely completion overall and low variance by race/ethnicity, CDSS could then assist other counties with improving their completion practices.

CDSS and Evident Change could partner to compare case characteristics possibly related to reunification reassessment completion (e.g., voluntary status, length of case) by race/ethnicity to understand what factors may be related to completion variation.

## IN-HOME CASES AND SDM RISK REASSESSMENT USE

In 2019, 18,021 cases were initiated that began in FM services (Figure 20).<sup>9</sup>



#### Figure 20 Race/Ethnicity of Children With In-Home Cases

The SDM risk reassessment should be completed for all open cases in which all children remain in the home and all cases in which all children have returned home and are in FM services. The assessment should be completed prior to each Division 31-required review, which occurs at least once every six months. The risk

<sup>&</sup>lt;sup>9</sup> A total of 62 children experienced the initiation of multiple FM cases in 2019. These children are included multiple times, once per case.

reassessment recommendation guides a worker's decision of whether to keep the case open or to close the case. When the risk reassessment level is low or moderate, the recommendation is to close the case as long as there are no unresolved safety threats. When the risk reassessment level is high or very high, the recommendation is to keep the case open. This analysis examined whether children received a completed risk reassessment within six or nine months of their FM services starting.

Takeaway: Risk reassessment completion varied by child race/ethnicity. American Indian/Alaskan Native (55.5%) and Black/African American (61.2%) children experienced risk reassessment least often.



Figure 21

Completed Within Nine Months

Not Completed or Completed After Nine Months

Analysis unit: In-home (FM service) cases beginning in 2019.

Overall, workers completed a risk reassessment within the first nine months of FM services for 12,398 (68.8%) cases (not shown). By child race/ethnicity, workers completed a timely risk reassessment least often for American Indian/Alaskan Native (55.5%) and Black/African American (61.2%) children and most often for Asian/Pacific Islander (73.4%) children (Figure 21).

#### **OPPORTUNITY**

CDSS could consider requiring risk reassessment completion in policy. Until CDSS requires this, Evident Change expects to see variation by race/ethnicity as a result of county practice and implicit bias.

In 2019, risk reassessment completion within the first nine months of FM services varied from 0–98% across California counties. CDSS may wish to examine this variation at the county level and by race/ethnicity across counties. For example, is the variation isolated to a smaller subset of counties? By identifying counties with high timely completion overall and low variance by race/ethnicity, CDSS could then assist other counties with improving their completion practices.

CDSS and Evident Change could partner to compare case characteristics possibly related to risk reassessment completion (e.g., voluntary status, length of case) by race/ethnicity to understand what factors may be related to completion variance.