



A study of maltreated children and their families in juvenile court: I. Court performance measures



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ABSTRACT

There is little empirical research on the families referred to court (juvenile, family or dependency court) for child maltreatment. To fill some of the gaps in this area, we reviewed publicly available court records of 88 cases referred to juvenile court for maltreatment in Hennepin County, MN between 2008 and 2012. In the current paper, we focused on the conduct of the court case, such as appointment of guardians ad litem, compliance with permanency deadlines, and the frequency and outcomes of protective supervision by the court. Children were on average 7.5 years old at the time of the petition. Presenting maltreatment types commonly included alcohol or substance abuse of the parents (to the extent that they could not take care of their children), failure to provide supervision, and exposure to domestic violence. African-American, Native American children and children of two or more races were over-represented, whereas white children were underrepresented in the sample. However, there were no significant ethnic/racial differences on any of the variables examined. Guardians ad litem were appointed for almost all children, and the judges' orders were consistent with the guardians' recommendations in the large majority of cases. Most of the children kept with, or reunified with, their parent(s) were placed under Protective Supervision of the court; however, about a third suffer again from maltreatment while under Protective Supervision. Permanency deadlines were followed or extended with reason for most of the cases. Nevertheless, a third of the children whose cases ended with family preservation were deemed to be still at risk for maltreatment at case dismissal. Finally, 15% of the cases returned to court with a new petition within the study period. These results suggest that although certain aspects of court procedure (e.g., appointment of guardians ad litem, permanency deadlines) have improved over time, there is still more to be done to ensure the safety of the children from maltreatment.

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1. Introduction

US Child Protective Services (CPS) received approximately 3.4 million referrals alleging child maltreatment in 2011 (US DHHS, 2011). When such reports are screened into CPS, a small proportion of these cases eventually become subjects of proceedings in dependency, family or juvenile court. Although there is a great deal of academic research on other aspects of the child welfare system and on foster children, there is little peer-reviewed research on the characteristics of families referred to court for maltreatment and on the court proceedings. In a literature review, Summers, Dobbin, and Gatowski (2008) identified 76 studies on juvenile/dependency courts published between 1997 and 2007. Only 17 of these studies were published in academic journals. Thus, there is a significant need for more empirical studies on this topic, and

the purpose of the current study was to conduct a review of case records of families referred to juvenile court for child maltreatment.

The current study was conducted on maltreatment cases in Hennepin County, which includes Minneapolis and is the most populated county in Minnesota (U.S. Census Bureau, 2012). In the next three sections, we provide a brief summary of court improvement projects in the nation and in MN, basic information about CPS and maltreatment cases in juvenile court in MN. We will then briefly summarize research at the national level on families referred to court for maltreatment.

1.1. Court improvement efforts

Although the juvenile court in Hennepin County makes some data on maltreatment cases accessible to the public, aggregate data on many aspects of the cases are not compiled by the court system. Thus, the public and county and state officials have to rely on anecdotal evidence about the operation of the court. There is little information on the characteristics of the families, whether the children are kept safe after court involvement, the extent to which permanency goals are

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met, and how the families' well-being needs are addressed. The Children's Justice Initiative is a statewide effort (<http://www.mncourts.gov/?page=148>) aimed at improvement of the judicial process for maltreated children and to improve outcomes for the children in MN. However, no data on the state's juvenile courts are presented at this site. The only report on MN's Court Improvement Project is dated 2005 and does not include information on many of the variables examined in the current study (Minnesota Supreme Court, 2005).

Lack of information about maltreatment cases in court is not limited to one county in MN. Conversations with Alicia Summers, Ph.D., senior research associate at the National Council of Juvenile and Family Court Judges (personal communication, 8/12/13) and Howard Davidson, J.D., Director of the Center for Children and Law of the American Bar Association (personal communication, 8/16/13) indicated that national-level data do not exist on the variables that were the focus of the current study.

National level data do exist on the Child and Family Services Review (CFSRs), periodic reviews by the Children's Bureau, USDHHS, of state performance on a number of outcomes for children in the child welfare system (<http://www.acf.hhs.gov/programs/cb/monitoring/child-family-services-reviews>). The first nationwide CFSR was conducted between 2000 and 2004, and the second round was conducted in 2007–2008. The second CFSR evaluated state performance on 23 items such as reunification, repeat maltreatment, and stability of foster care placement. The CFSRs have prompted courts to collect data on relevant items in collaboration with state child welfare agencies. Although the collection of these data is a significant step forward in terms of accountability, the reliability of the data is somewhat questionable. For instance, evaluation of the whole state of MN in 2008 was based on fewer than 20 cases for 7 of the 23 items (US DHHS, 2008a). The reliability and validity of CFSRs data have also been questioned by other researchers (e.g., Schuermann & Needell, 2009).

A State Court Improvement Program was instituted at the federal level in 1993, which directed states to assess their judicial processes for children in the child welfare system (<http://www.pal-tech.com/cip/history.cfm>, <http://www.acf.hhs.gov/programs/cb/resource/court-improvement-program>). To receive funding for court improvement, states were required to develop and implement strategic plans for court improvement and report annually on their progress to the Children's Bureau. The targets of improvement included safety, permanency, and well-being of the children, and other relevant items included in CFSRs. A 5-year national evaluation of the Court Improvement Program was authorized in 2004 (<http://www.pal-tech.com/cip/>). Court improvement efforts are still underway in many states, and reports on these efforts can be found online at the sites of national organizations (e.g., <http://www.ncsc.org/Topics/Children-Families-and-Elders/Dependency-Court/Resource-Guide.aspx>, <http://www.courtsandchildren.org/>, http://www.americanbar.org/groups/child_law/what_we_do/projects/rcj/courtimp.html, <http://apps.americanbar.org/abanet/child/home.cfm>) and at state court improvement sites.

Although it is very commendable that there is a national push toward collecting outcome measures on the courts serving maltreated children, finding data on these measures is harder, especially at the national level. For example, no data are presented yet on the results of the 5-year Court Improvement Program Evaluation on the USDHHS website (<http://www.pal-tech.com/cip/>). Summarizing the recommendations of a Pew Commission on Children in Foster Care, Outley (2006) notes that "tracking and analyzing caseloads is an unfamiliar task for numerous courts, leaving them ill-equipped to identify trends or spot problem areas in their efforts to help children reach permanence. Research by the Federal Government Accounting Office shows that the lack of efficient information systems for tracking case data is one of the fundamental problems contributing to the inability of dependency courts to make decisions within time frames that meet both the needs of children as well as the requirements of child welfare legislation" (p. 247). Outley concludes that performance measures need to be adopted by dependency

courts to improve accountability and enhance children's outcomes. Such measures are in fact being adopted, and the National Center for State Courts (<http://www.courtsandchildren.org/>) provides information on activities undertaken by different states, under guidance from the US Department of Health and Human Services, to collect data on standardized measures, such as safety, permanency, timeliness, due process, and well-being. However, there is still no consensus on appropriate well-being measures, and the site does not provide data on any of the other measures.

In summary, there is a 20-year history of nationwide efforts to improve the judicial process for maltreatment cases, and these efforts have significantly increased awareness of the need to collect standardized measures on the court's performance on a variety of outcomes related to children's safety, permanency, and well-being. Although data are still not available at a nationwide level for many of the court measures relevant to the current study, it is likely that these data will gradually become available over time.

1.2. Description of the process leading up to court involvement in Minnesota

Minnesota is one of 9 states in the US that has a state-supervised, county-administered child welfare system (Child Welfare Information Gateway, 2012b). According to a report of the Office of the Legislative Auditor, State of Minnesota (2012), 57% of the child welfare spending in 2010 came from counties, 27% came from the federal government, and only 10% came from the state. Although county child protection workers in Hennepin County (the most populous county in the state, which includes Minneapolis) screen maltreatment reports and conduct initial assessments of the families and some in-home services, most of the intervention services for child welfare clients (e.g., mental health, parenting education, substance abuse treatment) are contracted out, mostly to non-profit, non-governmental institutions. Privatization of child welfare services is a national trend. A 2001 report of public child welfare agencies by the US Department of Health and Human Services found that 58% of family preservation services, 42% of residential treatment and 52% of case management services were contracted out (USDHHS, 2008b). A more recent report notes that nonprofit agencies deliver more than half of all services for families in the US (McBeath, Briggs, & Aisenberg, 2009).

Fig. 1 depicts a simplified picture of progression through Minnesota's child welfare system. When a child maltreatment report is screened into the child welfare system in MN, the family is referred either to Family Assessment Response (FAR), where the focus is on strengths-based and family-centered partnership to provide services, or Family Investigation Response (FIR), where the focus is on determining whether maltreatment occurred and deciding if CPS services are needed. Referral decisions are based on an initial determination of risk, with relatively low and moderate-risk cases receiving an FAR and relatively high-risk cases receiving FIR. In 2011, 69% of the families were routed to FAR and 29% to FIR in MN (MN DHS, 2012). The division between assessment and investigative responses is implemented in different ways in other states as well under various names, including "differential response," "dual track," and "multiple track" (Child Welfare Information Gateway, 2013).

Of the 29% families who were routed into the FIR in MN in 2011, maltreatment was determined for 58%. Some of the remaining 42% were deemed to need services, and some were not; however, these proportions are not publicly available. Of those for whom maltreatment was determined, 50% were deemed to not need services, and the case was closed. The remaining 50% were determined to need services, and a CHIPS (Children in Need of Protection or Services) petition was filed in juvenile court for an unknown proportion of these children (David Thompson, Child Safety and Permanency Division of MN Department of Human Services, personal communication, 9/6/12). In other states, these cases may be labeled as "Children in Need of Assistance," "Children in Need of Services," "Minors in Need of Assistance," or "dependency court cases." The decision of when to file a CHIPS petition is done on a

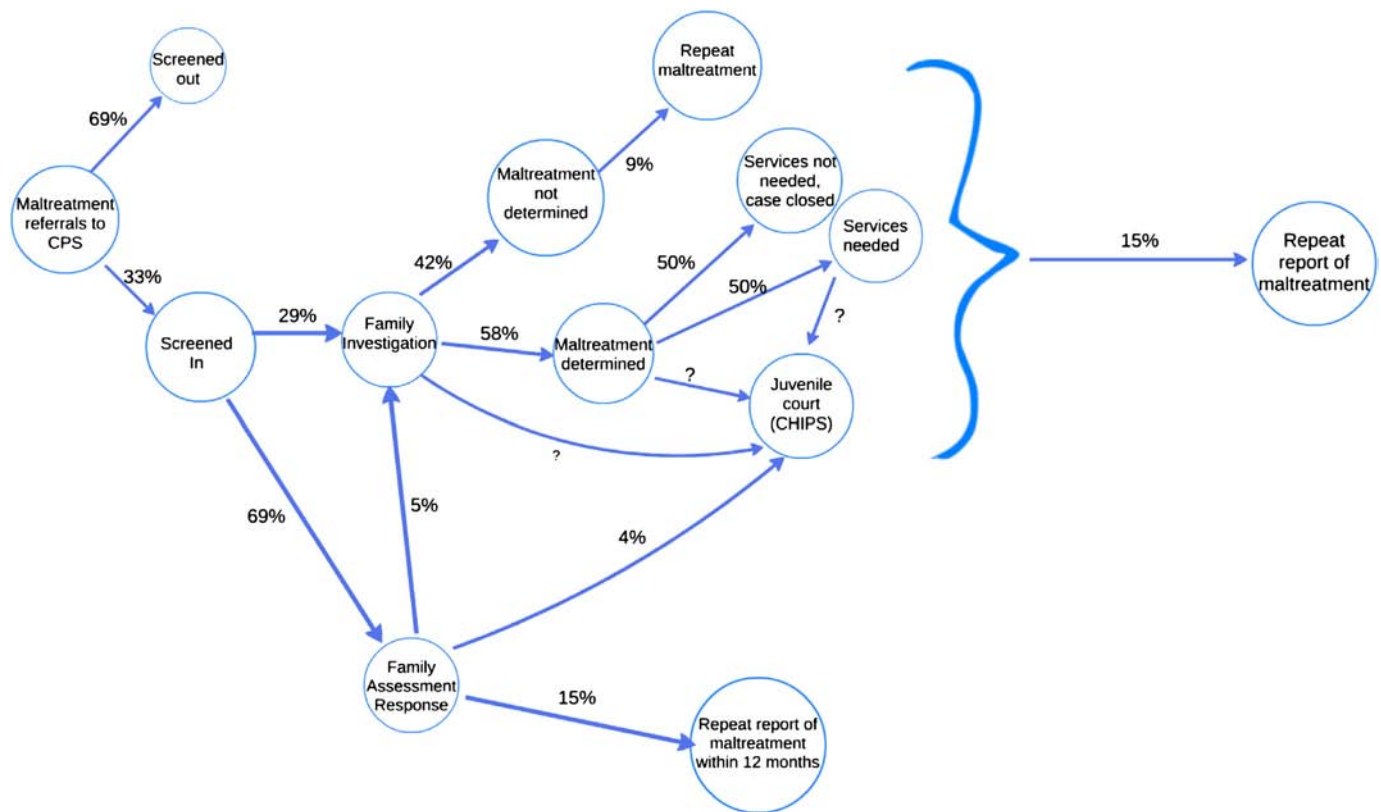


Fig. 1. Progression through Minnesota's child welfare system.

case-by-case basis by CPS and the county attorney. The criteria include whether the filing is necessary to protect the child or to enforce a case plan, whether the parent understands the danger to the child and can use services to mitigate this danger, and whether there is sufficient admissible evidence to prove the facts (Ann Ahlstrom, staff attorney and manager, Children's Justice Initiative, MN State Court, personal communication, 6/10/13).

1.3. CHIPS cases in Minnesota

Overall, a CHIPS case was opened for 37% of all FI cases, and approximately 4% of FAR cases in MN in 2011. Given that there were 5185 reports in the FIR and 12,243 reports in the FAR in 2011, we can estimate that there were approximately 2,400 CHIPS cases in MN in 2011. Although families with CHIPS cases represent a relatively small proportion of all children screened into the CPS system, these families probably represent the most severe instances of child maltreatment and consume a disproportionate amount of resources.

The stated goal of the court in CHIPS cases is to address the needs of the family rather than to take punitive action. After the CHIPS petition is filed by the CPS and county attorney, a preliminary case plan aimed at issues that led to the maltreatment is drawn up by CPS. Once the case is adjudicated (i.e., allegations of child maltreatment are found to be true), a mandatory case plan comes into effect. The goals of the court include ensuring that the caregiver complies with the case plan and that the case is resolved in a timely manner. Federal and state guidelines prioritize family preservation as the preferred outcome; however, alternative plans are considered at the same time in case family preservation does not work. The case usually ends with a permanency disposition for the child (e.g., family preservation, transfer of custody to a relative, adoption). However, the case may also end with a non-permanency disposition, for instance, when the youth ages out of the system.

According to MN Statute 260C.001 Subd. 2, "the paramount consideration in all proceedings concerning a child alleged or found to be in

need of protection or services is the health, safety, and best interests of the child." Best interests of the child are required to be considered in all states in court decisions regarding custody, placement or other important matters (Adoption and Safe Families Act, ASFA, PL 105-89, 1997; [Child Welfare Information Gateway, 2012a](#)).

1.4. Previous research on maltreatment cases in court

In the current article, we focused on several aspects of court proceedings.

1.4.1. Ethnic/racial disparities

It is well-established that the majority of the children in the child welfare system belong to minority groups (e.g., [Fluke, Yuan, Hedderson, & Curtis, 2003](#); [Hines, Lemon, Wyatt, & Merdinger, 2004](#)). In an unpublished study of CHIPS proceedings in Hennepin County, MN, conducted between 2008 and 2009 by WATCH, a court-monitoring agency formed of volunteers, results showed that the sample of female caregivers was made up of 28% whites, 44% African Americans, and 9% Native Americans ([Anderson, Coulter, & McNamara, 2010](#)). In a study by [Bishop et al. \(2000\)](#) that compared 200 cases brought before the Boston Juvenile Court in 1994 with 206 cases from 1985 to 1986, results showed that children from minority backgrounds made up 66% of the 1984–1985 sample and 69% of the 1994 sample. Finally, a review of St. Louis City's court improvement project for child maltreatment cases indicated that 86% of the children were African-American and 12% were whites ([Loman & Siegel, 2003](#)).

However, when factors associated with child maltreatment (e.g., socioeconomic status, geographic location, health factors) are taken into account, the racial disparities in entry into the child welfare system tend to be reduced (e.g., [Ards, Myers, Malkis, Sugrue, & Zhou, 2003](#)) or disappear (e.g., [Drake & Jonson-Reid, 2011](#); [Drake, Lee, & Jonson-Reid, 2009](#); [Putnam-Hornstein, Needell, King, & Johnson-Motoyama, 2013](#)). Nevertheless, there are still concerns regarding disparities in services ordered

or received (e.g., Cheng & Lo, 2012; Garland & Besinger, 1997; Leslie et al., 2003).

In the current study, we examined the racial/ethnic composition of the sample and differences among racial/ethnic groups on variables related to court processes. However, we were not able to control for relevant variables, such as socioeconomic status, as this information was not available in the court records.

1.4.2. Guardians ad litem (GALs)

GALs represent the best interests of the children in court; therefore, their presence is crucial for the children. In 1974, the federal CAPTA act made it a requirement for states to have a guardian ad litem represent the interests of the children in court to be eligible to receive federal funds (Erickson, 2000). According to MN Statute 260C.163, Subd. 5, “the court shall appoint a guardian ad litem to protect the interests of the minor.... In every proceeding alleging a child’s need for protection or services.” Nevertheless, it has taken several decades to fulfill this requirement for all children. A report on Minnesota’s Court Improvement Project (Minnesota Supreme Court, 2005) indicates that the proportion of children involved in child protection who were appointed a guardian ad litem increased from 54% in 1997 to 71% in 2000 and to 99% in 2005.

Different states have different qualifications and models for GALs. GALs can be lawyers, paid staff, or volunteers. Volunteer GALs are also called court-appointed special advocates (CASAs). In Minnesota, GALs can be trained volunteers or paid staff appointed by the juvenile court. Requirements include an undergraduate degree in related areas, or “an equivalent combination of training, education, and experience” ([http://www.mncourts.gov/Documents/0/Public/Guardian_Ad_Litem/Program_Requirements_and_Guidelines_\(Non-statutory\).pdf](http://www.mncourts.gov/Documents/0/Public/Guardian_Ad_Litem/Program_Requirements_and_Guidelines_(Non-statutory).pdf)). Although the national CASA organization reports that 36% of maltreatment cases in court in the US are appointed a volunteer GAL from the organization, it does not keep track of how many children are appointed a GAL from other sources (Theresa Carleton, Communications Associate, National CASA Association, personal communication, 8/12/13).

A study of CHIPS proceedings in Hennepin County, MN, was conducted between 2008 and 2009 by WATCH, a court-monitoring agency formed of volunteers (Anderson et al., 2010). The observers found that the GAL’s recommendations differed from that of the county attorney in only 6 of 129 cases. In each of these cases, the judge ruled in favor of the GAL’s recommendation.

In the current study, we examined not only whether GALs were appointed but also whether their recommendations were followed by the judge.

1.4.3. Protective supervision

Protective Supervision is usually a transitional step after Protective Custody and before the dismissal of the case. It is ordered by the judge when the children are deemed safe to live at home, but there is still a need for court-ordered services. If a child is placed under Protective Supervision, the social worker sees the family at least once a month and helps facilitate the court-ordered recommendations. When a child is under Protective Supervision, the requirements for the county and the family are the same as Protective Custody because the children are still adjudicated as Children in Need of Protection of Services. According to MN Statute 260C.201, Subd. 1, the court may “place the child under the protective supervision of the responsible social services agency or child-placing agency in the home of a parent of the child under conditions prescribed by the court directed to the correction of the child’s need for protection or services.”

We have been able to find only one peer-reviewed study on protective supervision in the research literature. This was a qualitative study conducted in MN (Wattenberg, Troy, & Beuch, 2011). The authors note that “In Minnesota, the precise proportion of the case load that is under Protective Supervision is unknown” (p. 347). As a result, they conducted interviews with stakeholders, including staff of the MN Department of Human Services, child protection supervisors, front-line

child protection workers, county attorneys, public defenders, judges, and GALs. The findings indicated that little guidance was provided to the interviewees on the concept of Protective Supervision and the concept and practice were not well understood.

In the current study, we examined whether Protective Supervision was ordered, and if it was, whether child maltreatment continued to occur under Protective Supervision and how the case ended.

1.4.4. Duration of the case

In Hennepin County, the determination of when a CHIPS petition will be appropriate after a child maltreatment report is made on a case by case basis by CPS and the county attorney (Ann Ahlstrom, personal communication, 6/10/13). As there are no data on how long this process usually lasts, we collected data on the time between the initial report and the current CHIPS petition.

A great deal of attention has been paid to permanency deadlines after concerns arose about “foster care drift” in the 1970s and 1980s (D’Andrade & Berrick, 2006; Erickson, 2000). This was evident, for example, in the study by Bishop et al. (2000) that examined cases in Boston. They found that the time between arraignment (held within 1–2 days of the filing of the initial Care and Protection petition) and disposition (dismissal or permanent removal of the child from parental custody) was 1.4 years in 1985–1986 and 1.6 years in 1994. They note that for the 1994 sample, “nearly two-thirds (61.5%) of the cases took longer in court than the 15 months required by the 1992 law” (p. 604). As a result of such concerns, the federal ASFA emphasized that cases should be resolved as quickly as possible (Erickson, 2000).

Minnesota statutes regarding permanency deadlines specify that the duration of court-ordered out-of-home placement should not exceed 6 months for children younger than 8 years of age, and 12 months for older children (MN Statute 260C.503). These guidelines refer to the total duration spent out of home over a 5-year period. Thus, if a 5-year-old child is ordered out of the home for 4 months on one occasion and for 3 months on another occasion a year later, the permanency deadline would have been exceeded. Deadlines can be extended by judges, and the extension durations are the same as the initial durations (i.e., 6 months for younger and 12 months for older children). Under the federal ASFA of 1997 (P.L. 105-89), for children who may be reunified with their families, a permanency hearing needs to be held within 12 months of the child’s coming under the court’s jurisdiction, or within 14 months of the child’s being placed in out-of-home care, whichever comes first. If a child has been in foster care for 15 out of the last 22 months, a petition must be filed to terminate the parent’s rights unless the child is living with a relative or the termination would not be in his/her best interests.

National data are not available on durations of court cases for maltreated children. However, a recent study of maltreatment cases in Wisconsin shows that the emphasis on timely resolution of cases has been somewhat effective. In this unpublished report prepared for the WI Supreme Court (Zeller & Hornby, 2005), results showed that compliance with deadlines improved from 2001 to 2003. However, the researchers still found delays in the proceedings that were of some concern. For example, plea hearings, where parents are informed of the maltreatment allegations and are asked to enter pleas regarding these allegations, are supposed to be held within 30 days of the filing of a CHIPS petition. However, compliance with plea hearing deadlines ranged from 70 to 98%, and average compliance with deadlines for permanency planning hearings was still at 75% in 2003.

Thus, in the current study, we examined the duration of the case from the filing of the CHIPS petition to the end of the case. We also investigated whether permanency deadlines for out-of-home placements were being followed.

1.4.5. Risk of maltreatment at the end of the case

There are no statistics available in Hennepin County, MN, on what proportion of children who go through a CHIPS case are maltreated

again. The only studies we could find in the research literature on recidivism rates in maltreatment cases in court are mentioned by Bishop et al. (2000). Follow-up studies of child maltreatment cases opened in Boston in 1985–1986 showed that 29% of these cases that ended with family preservation were reported for maltreatment again, and 17% of the cases that ended with family preservation returned to court.

There is reason to be concerned about recidivism in MN; on the second round of Child and Family Service Reviews (CFSRs), MN ranked 8th on “reunification, guardianship, or permanent placement with relatives,” but 29th on foster care re-entries. In addition, according to 2012 statistics from the MN Department of Human Services, MN is much above average in terms of timely reunification (75% vs. 86%), but much worse than average on foster care re-entries (10% vs. 26%) (MN Department of Human Services, 2013).

The current study was not a longitudinal study. However, we coded whether any of the presenting maltreatment types were still unresolved at the end of the case, and whether any cases were re-opened within the study period.

1.5. Study goals

To obtain empirical evidence about court proceedings in maltreatment cases, we conducted a review of 88 cases. The goals of this descriptive, exploratory study were to (1) examine the extent of prior CPS involvement of the families, and (2) obtain information about the safety, permanency, and well-being of the children from initial contact with CPS to the end of the court case.

The results will be presented in three papers. In a companion paper, we review the CPS histories of the families and living arrangements of the children (Lawler, Gehrman, & Karatekin, submitted for publication). A second paper concentrates on the content of, and compliance with, case plans (Karatekin, Gehrman, & Lawler, submitted for publication). In the current paper, we focus primarily on the conduct of the court case, such as appointment of guardians ad litem, compliance with permanency deadlines, and the frequency and outcomes of protective supervision by the court.

2. Method

2.1. Court cases

The 88 cases included in the current study were selected from cases that were open in juvenile court in Hennepin County, MN, between 2008 and 2012. The county has a population of 1,152,425, comprising 22% of the state's population. We were not able to obtain information from the District Court regarding the number of unique cases during this period. However, we were informed that there was a total of 2281 open CHIPS cases between 2008 and 2012; the total number of unique cases is likely lower. To our knowledge, there are no publicly available data on the characteristics of the general population of CHIPS cases in this county; therefore, we cannot ascertain how representative our sample was of the general population of cases. Please note that child maltreatment cases are handled in juvenile court in Hennepin County; the cases in the study do not refer to juvenile delinquency cases.

Case selection was mostly random; however, we excluded cases where the mother had only one newborn child with no siblings in order to better examine previous CPS involvement of the families¹.

¹ The court clerk who was in charge of providing 23 of the cases during the last year of the study decided, for reasons unbeknownst to the researchers, that she was not supposed to give us cases where the presenting problem was physical or sexual abuse. Unfortunately, we learned about this after all the data had been coded. When we compared these 23 cases with the remaining 65, we found that cases where physical abuse was a presenting problem decreased from 25% to 9% under the new clerk, and cases sexual abuse was a presenting problem decreased from 4% to 0%. Thus, this study may underestimate the true prevalence of physical and sexual abuse in this population.

The cases included publicly available records; reports from service providers were generally unavailable. Thus, the records we relied on for coding included CHIPS petitions, petitions for Termination of Parental Rights (TPR) and Transfer of Legal Custody (TLC), judges' orders, pre-hearing and guardian ad litem reports, and court notifications.

2.2. Coding

The coding scheme was developed for the current study based on a review of a subset of the records. Maltreatment codes are included in the Appendix A and were based on the definitions provided by the Minnesota Department of Human Services (2007). Coding of maltreatment was based on narrative descriptions in the court records. Consequently, we could only code type, but not frequency, severity, or duration of maltreatment, as this information was often unavailable in the records. Definitions of other codes will be included in the appropriate sections under Results.

Coders included the three authors, three law students, and five undergraduate students. Each coder was trained on at least four cases. Cases were double coded independently. Coders then met in pairs to discuss their ratings and resolve discrepancies.

2.3. Data analyses

Descriptive statistics are presented where appropriate. For statistical analyses, data were visually inspected for outliers, and log transformed when the assumption of normality was violated. For analyses on caregivers, we conducted t tests, chi-square tests or univariate ANOVAs. For analyses on the children, we took the non-independence of observations into account. Thus, when the response variable was dichotomous, we used a logistic regression mixed effects model. However, if there was not enough within-family variability in the response variable, we selected a random child from each family and used logistic regression. When the response variable was continuous, we used linear mixed effects models. Age was used as a covariate where appropriate. Tukey tests were used for all post-hoc analyses.

Analyses of caregiver race were conducted on whites, African American and Native American mothers only, as sample sizes were not large enough for other groups. Similarly, analyses of the children's race were based only on whites, African-American, Native American children, and children of two or more races.

3. Results

3.1. Demographics

The mother was listed as a party to the court case in all 88 cases, and the father was a party to the case in 96% of the cases. A total of 234 children (48% male) were listed as participants to the case. The primary caregivers had 29 other children with prior CPS involvement. The median number of children with CPS involvement per family was 3 (range: 1–9). The number of CPS-involved children did not differ as a function of caregiver race. Children with prior CPS involvement who were not participants to the current case were not included in the remaining analyses.

Children were on average approximately 7.5 years old at the time of the CHIPS petition (range: 0 to 17.10 years). There was no effect of gender or race/ethnicity on age.

Racial/ethnic distribution of the mothers was: 49% African American, 21% white, 17% Native American, 6% children of two or more races, 3% Asian, 3% Unknown, and 1% Hispanic. The racial/ethnic distribution of CHIPS participants varied significantly from the distribution of the county as a whole, $X^2(5) = 982.05, p < .001$.

As shown in Fig. 2, the racial/ethnic distribution of the children was very different from the distribution in Hennepin County. Native Americans were the most disproportionately represented group, and

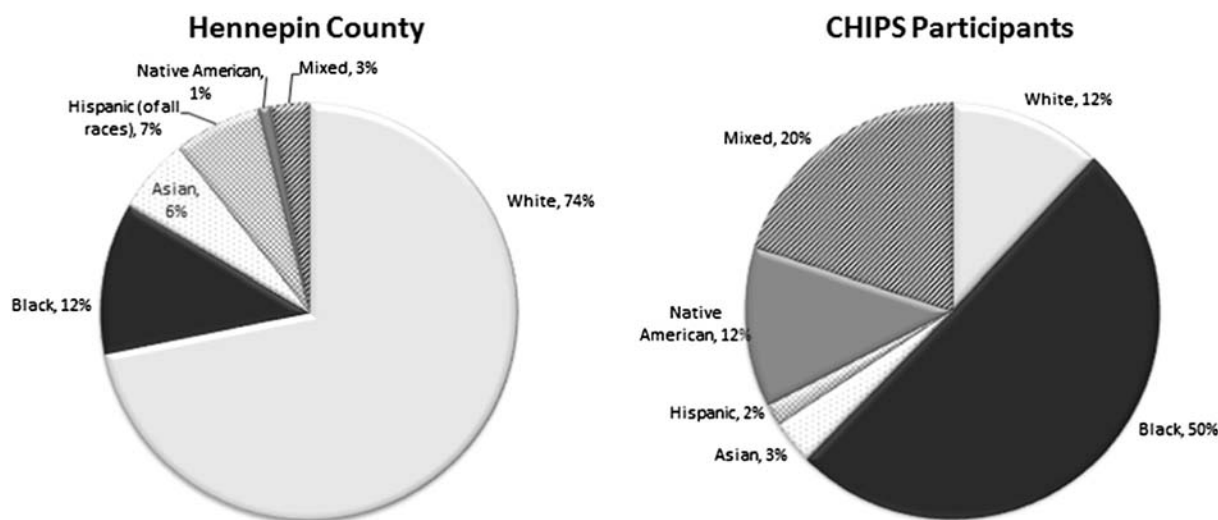


Fig. 2. Pie charts of ethnic distribution of the study participants versus the ethnic distribution of the population in Hennepin County, MN.

the Indian Child Welfare Act (ICWA)² was applicable for 21% of the children. African Americans and children of children of two or more races were also overrepresented, whereas white, Hispanic and Asian children were underrepresented.

3.2. Fathers

The father was involved in the case in at least some capacity for 59% of the children, located but not involved at all for 29%, and could not be located for 12%. We defined “involvement” very broadly, from being present at the hearings to having a case plan or living with the child. We could not differentiate between different types of involvement, as court records were not detailed enough.

We used the labels mentioned in the court records to categorize the fathers as “Adjudicated” (for 59% of the children), “Alleged” (13%), “Presumed” (15%), and “Legal” or “Father” (10%). No information was provided about the status of the father of 3% of the children. “Adjudicated” indicates that the man was determined as the father by the court and has the same legal rights as a biological father. An “alleged” father is a man alleged by the mother to be the biological father but whose paternity has not been established. A “presumed” father is presumed by law to be the father of the child (MN Statute 257.55 Subd. 1).

There was an effect of father status on involvement in the case, $X^2(3) = 10.715, p = .013$. Alleged fathers were significantly less likely to be involved in the case than the other three types of fathers ($p < .05$), who did not differ from each other.

Father involvement was not related to gender or race/ethnicity of the children. Father involvement was also not related to case duration, whether the case ended with family preservation or TLC, number of presenting types of maltreatment, and the number of unresolved maltreatment types at the end of cases that ended with family preservation.

² The Indian Child Welfare Act of 1978 (P.L. 95-608) is a federal law aimed at keeping Native American children with their families and applies to all Native American children once they are removed from their homes. The law gives exclusive jurisdiction to tribes for Native American children who live on tribal land, and places additional case processing requirements on the courts for children who do not (the current study did not include any analysis of court documents from tribal jurisdictions, and only one child in the sample was placed under tribal jurisdiction when the case was dismissed from the county). These additional requirements include notifying the children’s parents/custodians as well as his/her tribe prior to the proceedings, and giving the parents as well as the tribe the right to intervene in any cases involving foster care or termination of parental rights. In placement decisions, priority is given to the child’s extended family, tribal members, and other Native Americans.

3.3. Conduct of the Court Case

3.3.1. Time between initial report and CHIPS petition

The median time between the initial report that eventually led to the CHIPS petition and the petition itself was 7 days (range = 0 to 181 days).

3.3.2. Presenting maltreatment types

The median number of presenting maltreatment types was 3 (range = 0–7). As can be seen in Fig. 3, the most common presenting problems were prior maltreatment, alcohol or other chemical dependency, and failure to provide supervision¹. It should be noted prior maltreatment does not refer to any kind of involvement with CPS. Based on the Minnesota Department of Human Services (2007), we coded prior maltreatment as a presenting problem only when the caregiver had prior maltreatment findings (i.e., substantiated or determined maltreatment) with the target child or other children; or had a TPR with another child, or was the subject of involuntary transfer of permanent legal custody of another child (please see Appendix A). Although prior maltreatment is not maltreatment per se, this criterion is used by DHS in determining the level of risk in a case.

The number of presenting types of maltreatment did not vary as a function of gender, age at the time of presentation or the time of first CPS involvement, or race/ethnicity.

Children with prior CPS involvement had significantly more types of maltreatment at presentation (Median = 3.0, range = 0–7) than children without prior involvement (Median = 2.0, range = 0–6), after controlling for current age, $F(1, 145) = 9.99, p = .002$. In addition, the longer the time that elapsed between initial CPS contact and the current CHIPS petition, the more the types of maltreatment the children presented with, again controlling for age, $F(1, 142) = 15.644, p < .001$.

3.3.3. Guardians ad litem (GALs)

In the current sample, a guardian ad litem was appointed for all but two children. The information was unclear in one case, and the court case was dismissed shortly after the CHIPS petition in the other.

We also coded whether the GAL’s recommendations were followed by the judges as 1 (recommendations were followed completely or for the most part; the ones that were not followed were not very significant in terms of the child’s safety or well-being), 2 (recommendations were not followed at all, or there were significant recommendations that were not followed that were relevant to the child’s safety or well-being), 3 (unclear), or 4 (no recommendations by GAL evident in the court records). By these criteria, the GAL’s recommendations were followed for 52% of the total sample of children, and not followed for

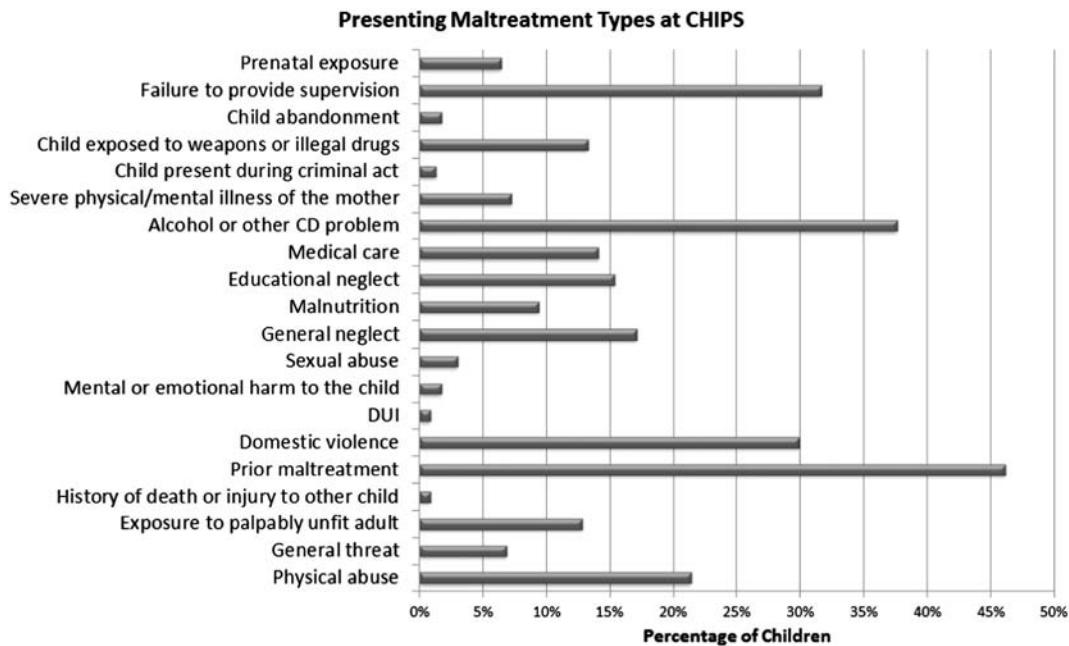


Fig. 3. Presenting types of maltreatment. Please note that a child can have more than one type of maltreatment.

7%. There was no recommendation by the GAL noted in the court records for 36% of the children, and we could not code this item based on the information in the court records for 6%.

3.3.4. Initial placement

Judges ordered 35% of the children to remain at home and 65% to be placed out of home (excluding emergency holds). Out-of-home placements could include placement with kin, nonrelative foster care, residential treatment, etc. These initial placements were ordered at emergency protective care hearings, which are required to be held within 72 h of a child's being removed involuntarily from home (MN Statute 260C.178 Subd. 1). CHIPS petitions are filed at or before the emergency protective care hearings. There was a trend for children ordered out of home (median age = 77 months, range = 0–210) to be younger than those ordered to remain at home (median age = 105 months, range = 0–219), $X^2(1) = 3.620, p = .057$. There was no effect of gender, child race/ethnicity, prior CPS involvement (controlling for current age), or age at first CPS involvement on the initial placement decision.

Since there was no independent confirmation about the mothers' mental health and substance abuse status, we used items on the case plans as a proxy for these conditions. Children whose parents were ordered to receive mental health treatment were approximately 5 times more likely to be placed out of home than other children, $X^2(1) = 11.32, p < .001$. Similarly, children whose parents were ordered to receive substance abuse treatment were approximately 4 times more likely to be placed out of home than other children, $X^2(1) = 8.359, p = .004$.

3.3.5. Protective supervision

In the current study, 93% of the children ordered to stay at home or be reunified with their caregiver(s) were placed under Protective Supervision. However, based on our review of the narrative information in the court records, we found that 36% of these children were subjected to further maltreatment while under Protective Supervision. As can be seen in Fig. 4, the most common type of maltreatment under Protective Supervision was neglect, followed by substance abuse, general threat to the child, and failure to provide supervision. For instance, in one case where the presenting problems included physical abuse by the mother, the child was reunified with her under Protective Supervision only to be

physically abused again. In another case, the children suffered from educational neglect, failure to provide medical care, failure to provide supervision, and substance abuse by the mother, all while under Protective Supervision.

Maltreatment occurred under Protective Supervision for 52 children; for these children, the case ended with family preservation for 40%, transfer of legal custody to a relative for 21%, and TPR for 2%. The cases of the remaining children were still open.

Maltreatment during Protective Supervision was not related to child gender, race/ethnicity, current age or age at first CPS involvement, prior CPS involvement, or time between first CPS involvement and current case. It was also not related to substance abuse by the mother as a presenting problem.

3.3.6. Permanency deadlines

We coded whether permanency deadlines were followed; however, to accommodate minor scheduling issues of the court staff and families, we coded the deadline as having been followed if the requirements were met within a short period of the deadline (2 weeks for children younger than 8 years of age and 1 month for older children). If the child was still out of home but a petition was filed for TPR or TLC before the deadline, we coded this as "deadline followed." We also coded whether the deadline was extended by the court with reason. For example, the deadline was considered as "extended with reason" if the judge noted in an order that the permanency deadline was extended because the mother was making progress on her case plan and reunification appeared likely.

According to our coding scheme, permanency deadlines were followed for 61% of the children extended for 29%, and not followed for 3%. We could not find enough information in the court records to code this item for 8% of the children.

There was no relation between whether the deadline was followed or extended and child gender, race/ethnicity, age at current petition, prior CPS involvement, time between first CPS involvement and the current petition, or whether the child was initially ordered to stay at home or placed out of home.

3.3.7. Duration of the case

Duration of the case was calculated for cases that ended in permanency (i.e., family preservation, TLC or adoption). Median duration

Maltreatment Types That Occurred Under Protective Supervision

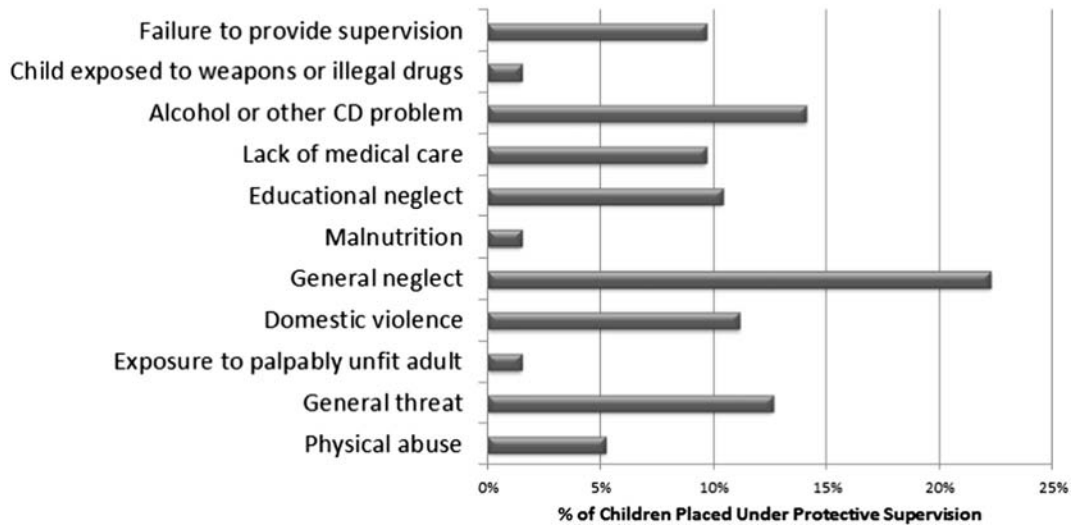


Fig. 4. Types of maltreatment under Protective Supervision.

was 7.6 months (range: 0 to 39 months) for children 8 and younger, and 6.5 months for children over 8 years of age (range: 0 to 40 months). There were three outliers with unusually long cases in the younger group. Even when these outliers were excluded, results showed that the younger the child at the time of the current CHIPS petition, $F(1, 141) = 4.853$, $cpb = .029$, the longer the case took.

Duration of cases ending in permanency was not significantly related to gender, race/ethnicity, the number of maltreatment types at presentation.

3.3.8. Permanency disposition of the case

As can be seen in Table 1, close to half of the cases ended with family preservation, and approximately a third were still open when the case was handed to us. Close to a fifth of the cases ended with TLC, and only one case ended with adoption.

Children whose cases ended with family preservation did not differ from children whose cases ended with TLC in gender, race/ethnicity, age at the time of the CHIPS petition or first CPS involvement, or prior CPS involvement, substance abuse as a presenting problem, or duration between initial CPS involvement and the current CHIPS case.

3.3.9. Unresolved maltreatment at the end of the case

We coded whether any of the presenting maltreatment types were unresolved by the end of the case. For example, we coded the situation as unresolved if there was any indication in the court records that the mother was still abusing substances, or that she might still be seeing the same person who led to the presenting domestic violence incident without having gone through any counseling to address domestic violence. If the maltreatment type was unresolved, but if the child was

not placed with the maltreating parent, we did not code it as unresolved maltreatment. Close to a third (29%) of the children whose cases ended with family preservation were coded as having at least one unresolved maltreatment type at the end of the case. As can be seen in Fig. 5, the most common situation resulted from unresolved substance abuse by the caregiver. Children were also deemed to be at risk for further exposure to domestic violence and failure to be supervised. In one case involving domestic violence, for instance, there was a note in the court records that the mother may have gotten back together with her child's biological father who abused her. In another case, the children were allowed to be left unsupervised with the father, who had only recently become sober and had a history of domestic violence.

The number of unresolved maltreatment types at the end of the case was not related to gender, race/ethnicity, age at CHIPS petition or at first CPS involvement, or time between initial CPS involvement and current CHIPS petition.

3.4. Recidivism

Eighty of 88 cases were opened more than 6 months prior to the end of the study period; 15% of these cases were referred for another CHIPS petition within the study period (one of these cases were opened twice more). In 9 of these 12 cases, the child was living with the primary caregiver at the end of the first case; the case was dismissed and another petition was filed later. In the remaining 3 cases, the mother gave birth to a baby exposed to drugs while the first CHIPS case was ongoing.

Given the small sample sizes, it is difficult to make generalizations about these cases. However, it is noteworthy that in 11 of the 12 cases, the caregiver's case plan included mental health treatment.

It is likely that 15% is an underestimate of the true recidivism rate, as these were cases that were reported, screened in, routed to the Family Investigation track, then to a CHIPS petition, in the same county, within the study period.

3.5. Fatality rate

None of the participants to the CHIPS cases under study were reported dead. However, child fatalities were reported in the histories of three cases. One child had died in Hennepin County while under Protective Supervision of the court. However, according to the report, Hennepin County CPS "did not have a preponderance of evidence to make a

Table 1
Permanency disposition of the cases.

Permanency disposition	N (% of children)
Reunification/family preservation	106 (45%)
Transfer of Parental Rights	4 (2%)
Permanent Transfer of Legal Custody to a relative or other parent	39 (17%)
Temporary Transfer of Custody to County, to be followed by adoption	1 (0.4%)
Pending	82 (35%)
Other	2 (1%)

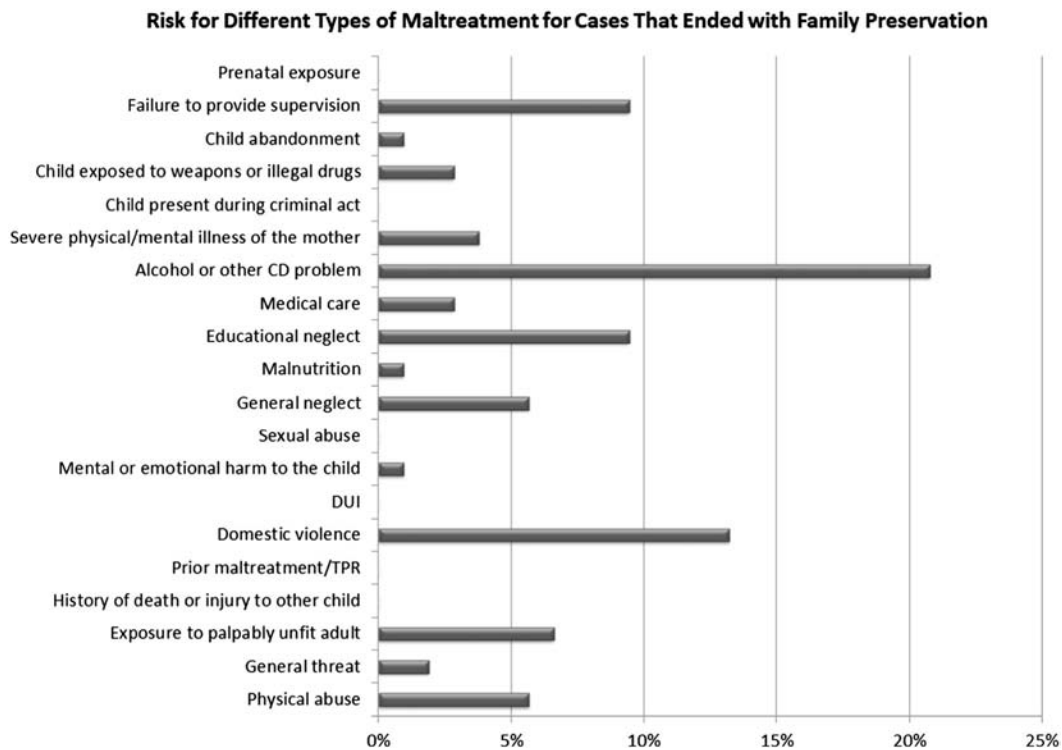


Fig. 5. Risk for different maltreatment types for cases that ended with family preservation.

finding of maltreatment.” A second death also occurred during an active CHIPS case in Hennepin County. The child was returned to the mother under Protective Supervision. After reports to the court by the social worker and the guardian ad litem that the child and the mother were doing well, the child suffered brain damage and died shortly thereafter. An investigation revealed that the mother was giving her children a bath while under the influence of alcohol, and the child was deprived of oxygen for several minutes during this bath. The mother was arrested. Finally, the mother in a third case claimed that one of her children was beaten to death by the father at age two, and another of her children died in utero as a result of another beating by the child’s father. These alleged incidents happened in another state; social workers did not find documentation of these deaths and considered the mother to “be an unreliable historian.”

4. Discussion

This study contributed to the research literature by providing empirical data on child maltreatment cases in juvenile court. The typical family in these cases had 3 children who had been involved with CPS, and the typical child was approximately 7.5 years old at the time of the CHIPS petition. It took approximately a week between the initial complaint and the filing of the CHIPS petition, although this duration varied quite a bit across cases. Presenting maltreatment types commonly included alcohol or substance abuse of the parents (to the extent that they could not take care of their children), failure to provide supervision, and exposure to domestic violence.

In the rest of the Discussion section, we will summarize the results on ethnic/racial disparities, fathers, guardians ad litem, protective supervision, permanency deadlines and case duration, and unresolved maltreatment types at the end of the case.

4.1. Ethnic/racial disparities

Results for ethnic/racial disparities were mixed. On the one hand, the racial/ethnic composition of the children differed substantially from

that of the general population in the county. On the other hand, we found no ethnic/racial differences on any of the other court-related variables we examined. Although the lack of significant differences could be due to relatively small sample sizes, these results are consistent with other studies showing that disparities do not accumulate once children are in the system (Morton, Ocasio, & Simmel, 2011).

A report of the Hennepin County Child Protection Citizen’s Review Panel (2011) also found racial disparities in children who were screened in by CPS. The panel reports that 45% of the intake group consisted of African American children, 19% consisted of children of two or more races children, and 4% consisted of Native American children. In our sample, 50% of the children were African American, 20% were of children of two or more races, and 12% were Native American. Thus, it seems that once screened into the system, the disproportionality does not increase for African American children and children of two or more races children as they progress toward a CHIPS petition, but it does increase for Native American children.

Clearly, more research is needed on racial disparities in the child welfare system. There is relatively little research on disparities concerning Native Americans in the child welfare system, although government data show that Native Americans are disproportionately represented in the foster care system in certain states, especially Minnesota (Summers, Wood, & Donovan, 2013), and there has been research on predictors of out-of-home care for Native Americans versus other children (Carter, 2010) and on possible racial bias in out-of-home placement of Native American children (Carter, 2009, 2010). However, none of the previous studies examining disparities in services (e.g., Cheng & Lo, 2012; Garland & Besinger, 1997; Leslie et al., 2003) included Native Americans as a group.

4.2. Fathers

Previous studies have shown that the presence of a father in child welfare cases lead to more permanent placements with a parent (Burrus, Green, Worcel, Finigan, & Furrer, 2012), and father involvement is related to shorter stays in foster care and greater likelihood of being reunited with

parents or kin after foster care (Coakley, 2013). Although the father was involved with the case in some capacity for 59% of the children in the current study, father involvement did not make any difference on the variables we examined. Since we could not differentiate among types of father involvement, our results do not allow us to make clear inferences.

4.3. Guardians ad litem

Some of the results indicated that court reform movements in recent years have led to tangible gains. For example, a GAL was appointed for almost all children. In addition, the judges' orders were consistent with the GAL's recommendations in the large majority of cases.

There is relatively little research on GALs. A study in Kansas showed that permanency outcomes did not differ depending on whether a CASA was appointed or not; however, children with CASAs had fewer placements and court continuances while in care and received more services than children without CASAs (Litzelfelner, 2000). The volunteer court-monitoring organization in Minneapolis, WATCH, concluded from their qualitative observations of maltreatment cases that GALs rarely presented a point of view different from that of the county attorney, rarely spoke up in court, and made fairly general statements when they did speak up (Anderson et al., 2010). The report also includes anecdotal evidence that some GALs made their recommendations without meeting with the children or that their recommendations were based too much on personal opinion and too little on objective evidence. Another report on Missouri's child maltreatment cases (Loman & Siegel, 2003) found that volunteer GALs were more likely to be present at family support team meetings and to have their reports cited in disposition and review hearings than contracted private attorneys serving as GALs. In addition, cases represented by private attorney GALs were dismissed earlier and were more likely to be re-reported for maltreatment than cases with volunteer GALs.

Thus, future studies should investigate the factors that contribute to the effectiveness of GALs in representing the children, whether their performance varies as a function of their educational and professional background, how vociferous they are in representing the interests of the children, and how well they are able to negotiate with other stakeholders in the court.

4.4. Protective supervision

Previous research had shown that the concept of Protective Supervision was poorly defined and ill understood (Wattenberg et al., 2011). Our results reinforce this conclusion by showing that a third of the children continue to be maltreated while under Protective Supervision. This proportion is likely to be an underestimate, as we were relying on court records to determine the presence of maltreatment. Similarly, Loman (2006) also found that in a third of 227 CPS cases in three Missouri counties, children were exposed to further physical or verbal abuse while the case was still open.

The data do not allow us to determine the reasons for the failure of Protective Supervision. It could be that it is poorly defined or ill understood (Wattenberg et al., 2011). It could be that social workers do not have the resources to adequately monitor the families, or it could be that the services ordered by the court for these families are not effective in preventing child maltreatment. In any case, results make it clear Protective Supervision is not very effective in preventing further child maltreatment, and that much more attention needs to be paid to the process and definition of Protective Supervision. At a minimum, courts should keep track of the numbers of children placed under Protective Supervision and instances of maltreatment recorded while the children are under Protective Supervision.

Ideally, to prevent such maltreatment from occurring in the first place, the judges could arrange more frequent hearings and request evidence for behavioral change before the case is closed. These recommendations are not new. In 1995, the National Council of Juvenile and

Family Court Judges, the nation's oldest judicial membership organization, also encouraged frequent review of child maltreatment cases, both before permanency is achieved, and after permanency to ensure the safety of the children and the stability of the outcomes (National Council of Juvenile and Family Court Judges, 1995). It might also be helpful to arrange mentors or home visitors to keep in at least weekly contact with the children and families. Although more intense services in the short run might be expensive, they are likely to be cost effective in the long run (we are grateful to Anthony Loman for most of the suggestions in this paragraph; personal communication, 9/6/13).

4.5. Permanency deadlines

On the other hand, a positive finding of the study was that permanency deadlines were followed for the most part for out-of-home placements and that the cases did not usually drag on unnecessarily. A typical case took 7.6 months for children 8 and younger and 6.5 months for older children. When judges extended permanency deadlines, they did so with reason.

When we compare our results to those of Bishop et al. (2000), the reduction in case duration is the most obvious improvement between cases opened in Boston in the 1980s and 1990s and those opened in Minneapolis between 2008 and 2012. Thus, when there are clear, quantifiable goals for the court and a concerted push to achieve these goals, such as the ASFA enacted in 1997 (which mandated timelines for dependency cases for all courts in the US), significant improvements can be achieved in the court process. However, as noted in the next section, this improvement in case duration may come at a cost.

4.6. Risk of maltreatment at the end of the case

Unfortunately, timeliness in court cases does not necessarily lead to an improvement in the quality of the decisions (Zeller & Hornby, 2005). Although there has been a significant improvement in terms of case duration over the years, a price of this improvement may be that cases are closed prematurely, leading to continued maltreatment of the children. We coded close to a third of the children as having unresolved maltreatment types at case dismissal. For example, court records suggested that the substance abuse and domestic violence issues of the families had not been addressed adequately. There was also not enough evidence in some court records that the mother's ability to supervise her children had improved by the end of the case.

Although we had not planned to do a longitudinal study, we found that 15% of the cases (likely an underestimate of true recidivism rate) returned to court during the study court. The data suggested a relationship between the mental health needs of the mother and the risk of recidivism. In the study by Bishop et al. (2000), 17% of cases opened in Boston in 1985–1986 ending in family preservation returned to court during the follow-up period. Therefore, based on a comparison of these two studies, it is hard to discern much progress in this area in the last 30 years.

The court is under pressure to abide by certain timelines, and the county and the state are under pressure to achieve family preservation. However, federal policies favoring family preservation have not been effective in protective children in the U.S. (D'Andrade & Berrick, 2006; Erickson, 2000). Our results also suggest that although family preservation may be a worthy goal, enough resources are not being allocated to the families to make it work. The current results show that children with prior CPS involvement presented with more types of maltreatment at the time of the CHIPS petition than children without prior involvement, and the longer the time between initial CPS contact and the CHIPS petition, the more types of maltreatment that were experienced by the children at the time of the CHIPS petition. These data indicate that the intervention of the CPS was not effective in preventing further maltreatment in these cases. Another study that specifically examined whether CPS investigation for child maltreatment improved outcomes for

children also found no relation between a CPS investigation and improvement in risk factors for maltreatment (Campbell, Cook, LaFleur, & Keenan, 2010). As a result of ineffective interventions by CPS and the court, children continue to be placed at risk for further maltreatment when the case is closed.

To avoid this outcome, more effective interventions are needed at every stage of the process, including post-reunification services. In addition, there could be more nuanced deadlines to improve the safety of the children and to prevent premature termination of the cases. For instance, if there could be a way for the court to partially dismiss the case but continue to periodically monitor the family while they are receiving post-reunification services, some of the continued maltreatment we have observed in this study could be prevented. There should also be a greater effort to create alternatives to family preservation that would both keep the children safe and avoid severing their bonds completely with their parents, such as kinship or family care and open adoptions (Biehal, 2007; Grant et al., 2011). We did not examine the backgrounds of judges and other members of the court; however, a previous study of judges active in dependency court showed that less than half had received any child welfare training (Outley, 2006). Thus, better training of the judges and other members of the court on risk and protective factors for child maltreatment could be beneficial. In addition, there should be active efforts to take research on risk factors into account before dismissing any cases. In a study of maltreatment recurrence after reunification, for example, Fuller (2005) found that many of the risk factors predicting maltreatment recurrence were not included in safety assessment instruments. Thus, it is commendable that the Minnesota Department of Human Services is making an effort to reduce the likelihood of re-entry into foster care after reunification through better assessment of risk factors (David Thompson, Child Safety and Permanency Division of MN Department of Human Services, personal communication, 7/1/13). Although implementation of this assessment instrument will not happen for a year, it is nevertheless a step in the right direction.

4.7. Limitations

The study was limited to the largest county in one Midwestern state. Because there is so little research on child maltreatment cases in juvenile court, it is hard to gauge how representative our results are. However, our findings were quite similar in many ways to those of Bishop et al. (2000) in Boston in the 1980s and 1990s.

The sample size was relatively small, especially for analyses of racial/ethnic differences. In addition, because some of the cases were still open, we did not have much statistical power for analyses of the relation between different variables and case disposition.

We were also limited by the availability of data in the publicly accessible court records. A previous study found a large discrepancy between self-reported child maltreatment of juvenile delinquents and their court records (Swahn et al., 2006); therefore, it is likely that the true extent of child maltreatment is underestimated in the current study as well.

4.8. Conclusion

Although some aspects of the child welfare system are well-researched and well-understood, there are pockets of the system that remain in the shadows. Maltreatment cases opened in juvenile courts is one such area. At least in Hennepin County, neither the county nor the state is compiling data on the details of these cases. It's not even clear how many unique CHIPS cases are opened in Hennepin County every year. There is no information on the current state of maltreatment cases in juvenile or dependency courts on the Children's Bureau's website. There is also very little academic research on these types of cases published in peer-reviewed journals. Yet, the cases that come to juvenile or dependency courts probably represent some of the most severe cases in the system and can be very informative in highlighting certain aspects of the system that need improvement. The court process

itself also needs to be scrutinized more carefully through data more accessible to the public. Court improvement projects under the federal court improvement program initiated two decades ago (Summers et al., 2008; Waldfoegel, 2000) seem to have lost momentum, at least in Minnesota. The last report on Minnesota's court performance in child protection cases was published in 2005 (Minnesota Supreme Court, 2005). As a result, there is very little research to guide the judges and other members of the court on how to conduct the cases. Yet, there is as much need for evidence-based handling of these cases as there is for evidence-based treatments.

As noted in the introduction, the goal of the court in child maltreatment cases "is the health, safety, and best interests of the child." This goal cannot be achieved in the absence of data and much-needed systemic and court reforms.

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Appendix A. Maltreatment codes

Abuse

1. Physical abuse meaning any non-accidental physical injury inflicted by a person responsible for the child's care such as hitting, burning, shaking a baby, and similar violence. Physical abuse also includes injuries that cannot reasonably be explained by the child's history.
2. Threatened injury, as indicated by, for example:
 - a) Caregiver exposes the child to 'palpably unfit' adult (someone other than caregiver). Palpably unfit: one who has had a Termination of Parental Rights or was the subject of involuntary transfer of permanent legal custody to a relative, or an untreated sex offender or other person known to be dangerous.
 - b) Caregiver has history of unexplained death or serious non-accidental injury to other child
 - c) Caregiver has prior maltreatment findings; or has had a Termination of Parental Rights or was the subject of involuntary transfer of permanent legal custody of another child.
 - d) Children witness to domestic violence, or caregiver involved in other significant ongoing of domestic violence
 - e) Child present during episode of Driving Under the Influence.
3. Mental or emotional harm to the child (need evidence of both a and b)
 - a. Parental behaviors that may be considered when determining whether or not a situation constitutes mental or emotional harm for example:
 - i. Rejecting — the adult refuses to acknowledge a child's worth, and the legitimacy of their needs
 - ii. Isolating — the adult cuts a child off from normal social experiences, prevents them from forming friendships, and makes a child believe that they are alone in the world
 - iii. Terrorizing — the adult verbally assaults a child, creates a climate of fear, bullies, or frightens them

- iv. Corrupting — the adult “mis-socializes” a child, stimulates them to engage in destructive antisocial behaviors, and causes the child to be unfit for normal social experiences.
 - b. This may be indicated by ‘a substantial and observable effect in the child’s behavior, emotional response, or cognition that is not within the normal range for the child’s age and stage of development, with due regard to the child’s culture’, (for example suicidal ideation/behavior, depression, or reports by school personnel of significant negative changes such as threats to students/teachers, psychological decompensation, etc.)
4. Sexual abuse (by caregiver).

Neglect

5. Neglect defined as ‘failure by a person responsible for a child’s care to supply a child with necessary food, clothing, shelter (including a home free of excessive trash, debris, or hazards), health, medical, or other care required for the child’s physical or mental health when reasonably able to do’. Examples include:
 - a. Malnutrition of child or other children in the household
 - b. Failure to ensure education
 - c. Failure to seek medical care
 - d. Alcohol or other chemical dependency problem to a degree that caretaker can’t provide the above.
 - e. Physical or mental illness sufficient to require emergency room visits or inpatient psychiatric hospitalization, with no or incomplete follow-through on treatment
6. Failure to protect a child from other conditions or actions that present serious endangerment such as:
 - a. A child is present and/or participates with parents or caretakers in committing criminal act (parent arrested for act)
 - b. Child exposed to weapons or illegal drugs.
7. Child Abandonment: the parent has had no contact with the child for a period of 6 months, or child has been deserted by a parent under circumstances that show intent not to return to care for the child
8. Failure to provide necessary supervision or child care: Examples include: A child left alone who is unable to provide for their own basic needs or needs of another child, a child left unsupervised in a dangerous situations such as in the bathtub.
9. Prenatal exposure to controlled substances or habitual alcohol use (if this is coded, it supersedes 5d, in the case they both apply, only prenatal exposure should be coded).

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