



Bipartisan Policy Center

Poverty and Child Neglect: What Do We Know?

April 2025

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Report prepared for the Bipartisan Policy Center

ACKNOWLEDGMENTS

We are grateful to Emily Wielk of the Bipartisan Policy Center for her excellent research assistance.

DISCLAIMER

This paper underwent an extensive and thorough peer review process. Three anonymous reviewers, representing expertise in the field and diverse viewpoints, provided helpful feedback. We are grateful for their input.

Executive Summary

The overrepresentation of children and families from low-income backgrounds in the child welfare system has been well documented. Although economic scarcity is associated with all maltreatment types, the majority of children from poor backgrounds enter the child welfare system due to child neglect. Poverty, like maltreatment, is a complex phenomenon that interacts with multiple related factors to affect parenting capacity, parent functioning, family ability to invest financially in their children's experiences, positive and negative adult behaviors, and neighborhood conditions, and is situated in historical, structural, and policy contexts. The goal of this review is to assess how economic scarcity may be linked to children's entry into the child welfare system, with a particular focus on child neglect. A corollary goal is to disentangle when, how, and why child neglect may be attributable to factors beyond poverty, including neglectful parenting, parental challenges due to substance abuse, intimate partner (domestic) violence, mental health conditions, and poverty-related risks.

Epidemiology. The overwhelming majority of children (74.3%) enter the child welfare system due to neglect. Further, many families involved with the child welfare system exhibit risk factors that are related to neglect (e.g., drug or alcohol abuse, intimate partner violence). An abundance of studies documents racial disparities in the child welfare service delivery system. Although it is estimated that more than half of African American children are subject to a child protection investigation over their childhoods, national data suggest that Black children are not more likely to experience neglect than children of other races. However, existing data cannot provide reliable estimates of "true" underlying rates of child neglect among the population as a whole, or racial and ethnic subgroups therein.

Definitional Issues. Child neglect has typically been characterized as an act of omission, consisting of "inadequate provision of basic necessities such as food, clothing, shelter, supervision, education, and medical care and, in some cases, a failure to meet children's emotional or psychological needs," as opposed to child abuse, which is described as an act of commission. Parents are defined as neglectful if they fail to meet children's basic needs, to provide adequate supervision, or to protect children from harm, including exposing their children to environmental, medical, educational, or supervisory neglect. Parental "intent" is often not considered as a condition for maltreatment or neglect. Notably, there is no scientific consensus on the definition of child neglect, legal definitions vary by state, and definitions are relatively broad and vague, thus requiring subjective interpretation and application.

Parenting in the Context of Poverty. Although many children reared in impoverished circumstances experience positive parenting, a preponderance of evidence documents socioeconomic status (SES) differences in parenting processes. For example, substantial research has documented that parents from lower-income backgrounds have lower perceptions of their children's capacities, values that prioritize obedience, and less knowledge about child development and development promoting practices. There is also substantial research that suggests parents in poverty are more likely to exhibit authoritarian parenting styles, which entail high levels of control. Finally, research has documented compromised parenting practices and behaviors on the part of impoverished parents, such as less time spent with children, less demonstration of warmth and sensitivity, greater intrusiveness and control, and less stimulation of their children's cognitive and language development. These SES differences in parenting are thought to reflect differences in parental opportunities and constraints, stress, and cognitive load. Notably, extant evidence highlights factors that may protect parents from exhibiting negative parenting, such as more adaptive mindsets, active, problem-oriented coping strategies, and social support.

Neglectful Parenting. Although limited research has explicitly addressed parenting processes among maltreating families, there is some evidence on parenting processes in the context of child neglect. Compared to non-maltreating parents, parents who are neglectful are less involved with their children, exhibit less parental warmth and more harsh parenting, display less empathy toward their children, are more likely to view their children as problems, have less proficient caretaking skills, and know less about child development than non-neglectful parents. From the perspective of social information processing theory, studies have documented neurocognitive and social cognitive difficulties among neglectful parents, such as unrealistic expectations of children, attributions of hostile intent to children's actions, and cognitive limitations, such as poor problem-solving skills, compromised executive functioning, and cognitive inflexibility. A small body of research has attempted to identify parenting behaviors of neglectful parents independently from the influence of SES thereon, and has documented less parental warmth, greater physical discipline use, less parenting knowledge about child development, and overall lower quality parenting behaviors.

Neglect and Caregiver Risk. Neglected children tend to experience a multitude of caregiver risks beyond poverty, even though these risk factors are also found at higher levels among families from impoverished backgrounds. These risks should be considered in the context of other protective and risk factors, such as family structure, social support, neighborhood conditions, and structural factors. Parental substance abuse is a major risk factor for child welfare involvement and has a pernicious impact on parenting and subsequent child outcomes. Research has documented an association between substance use

and child maltreatment, including child neglect specifically. Although the evidence is equivocal, in a number of studies, intimate partner violence has also been associated with child neglect and impaired parenting more generally. Finally, there is an abundance of literature linking mental health challenges with higher levels of negative parenting behaviors, including maltreatment. Parental depression and trauma symptoms are particularly strongly associated with neglectful parenting.

Economic Resources, Child Maltreatment, and Child Protective Services (CPS) Involvement. A large research literature has established that low-income status and poverty are strong and consistent correlates of child maltreatment and CPS involvement, particularly with respect to child neglect. Moreover, a growing body of research has established a causal effect of income on child maltreatment and CPS involvement. These studies provide rigorous evidence that income is causally (probabilistically) related to CPS investigations, substantiations, and foster care placements, as well as other indicators of child maltreatment (e.g., potentially abusive and neglectful behaviors, child mortality).

Low income, poverty, and material hardship may be related to child maltreatment both directly and indirectly. When limited household resources prevent parents from accessing goods and services at levels that provide for their children above some minimum threshold of “adequacy,” such omissions may be perceived by potential reporters as, or legally constituting, child neglect. Indirect effects, which are relevant to physical and emotional abuse as well as neglect, are thought to operate through parental stress, mental health, parenting behaviors, and the quality of the home environment. Research has documented that, relative to their higher-income counterparts, lower-income parents devote less time to child-centered activities and engage in lower-quality parenting behaviors that pose a risk for child maltreatment. Indirect effects of income on CPS involvement, though not maltreatment itself, have also been hypothesized to occur as a function of “surveillance” and/or “surveillance bias.” Lower-income families may have greater exposure to potential reporters and/or potential reporters may be more likely to make reports on lower-income families than their higher-income counterparts. Nonetheless, research has documented that the vast majority of families involved with CPS for child neglect have risk factors beyond limited economic resources, most frequently substance abuse, mental health challenges, and intimate partner violence.

Racial Disparities in Maltreatment and CPS Involvement. There are substantial racial disparities at all stages of CPS involvement (report, investigation, substantiation, and child removal), such that Black and Native American families, in particular, are considerably overrepresented and White and, especially, Asian families are considerably underrepresented in CPS caseloads relative to their representation in the general population. Accordingly, within group CPS-involvement rates are substantially higher for

Black and Native American than White families. Whereas the Black-White disparity in CPS involvement continues to be extreme, the magnitude of the disparity has declined precipitously over the past two decades. It is also important to recognize that Black-White disparities in subsequent stages of CPS involvement are predominantly driven by Black-White disparities in reports, such that relative disparities at the report stage do not widen (and may slightly narrow) at the substantiation and child removal stages. In other words, Black children are more likely than White children to be reported to CPS but, conditional on being reported, they are similarly or slightly less likely than White children to be substantiated or placed in foster care, suggesting that the primary source of disparities occurs outside of CPS, rather than within it.

Scholars have offered several hypotheses, with varying levels of supportive empirical evidence, for what “explains” racial disparities in CPS involvement. Primary hypotheses include structural racism, discrimination, and bias at the societal level; differences in “surveillance” and “surveillance bias” among potential reporters; and disparities between racial groups in “risk” for child maltreatment. Given well-documented and pervasive structural racism in U.S. society, it would be naïve to assume that these factors play no role in CPS involvement. Yet, there is no clear evidence to conclude that mandated reporting policies substantially influence reporting or substantiation patterns; causal estimates that “surveillance bias,” or biased decision making among potential reporters are primary drivers of racial disparities, are also lacking. Rigorous qualitative research indicates that families describe extensive experiences of racism, discrimination, bias, and disrespect in their interactions with CPS workers. However, quantitative studies find no differences by race in caseworker ratings of risk or harm to the child, nor of substantiation decisions, once maltreatment-related risk factors are considered, suggesting that racial “bias” is not driving CPS case decision making.

Finally, scholars have posited that average differences in “risk” for child maltreatment and CPS involvement reflect disparities between Black and White populations in economic scarcity and associated individual, family, community, and structural risk factors (mental health and substance abuse challenges, criminal justice system involvement, neighborhood quality), which drive racial disparities in CPS involvement. The preponderance of evidence indicates that differences in economic resources and associated maltreatment-related “risk factors” are the predominant drivers of racial disparities in CPS involvement. The existing evidence demonstrates two important patterns: (1) that disparities in low-income, poverty, psychosocial challenges, and neighborhood conditions are as large as or larger than disparities in CPS involvement, and (2) that adjusting for such factors substantially attenuates, eliminates, or even reverses the direction of disparities in CPS involvement.

Implications of Reducing Child Poverty. Rigorous evidence indicates that income is causally related to child maltreatment and CPS involvement, and that racial disparities in income and associated risk factors for child maltreatment are the predominant (though not necessarily sole) drivers of racial disparities in CPS involvement. Although poverty reduction policies are not a panacea for eliminating CPS involvement or racial disparities therein, reductions in poverty have the potential to substantially reduce both and, especially, the overrepresentation of Black families in CPS caseloads. Given evidence that income is causally related to substantiations and foster care placements, in addition to reports and investigations, reductions in poverty may result in reductions in CPS involvement at all levels.

Introduction

The overrepresentation of children and families from low-income and impoverished backgrounds in the child welfare system has been well documented (Berger and Slack, 2020; Pelton, 2015). Although most children from low-income backgrounds are not maltreated (Sattler, 2022; 2023), poverty is associated with all maltreatment types (Drake and Jonson-Reid, 2013; Putnam-Hornstein et al., 2013; Slack et al., 2004). The majority of children from impoverished backgrounds enter the child welfare system due to child neglect (Maguire-Jack and Sattler, 2022; Proctor and Dubowitz, 2014). In fact, the Fourth National Incidence Study (Sedlak et al., 2010) documented that children from poor families were seven times more likely to be neglected than children from higher-resourced families. Further, Slack and colleagues (2011), leveraging data on both maltreatment-related behaviors and child welfare system involvement from three large-scale studies, find economic hardship to be the most consistent predictor of child welfare system involvement and parent-reported neglect.

Poverty, like maltreatment, is a complex phenomenon that interacts with multiple related factors to affect child and family functioning. As Bywaters et al. (2016) assert, the likelihood that children from impoverished backgrounds will be maltreated is attenuated by factors such as parenting capacity, parent functioning (e.g., mental health), family ability to invest financially in their children's experiences, negative adult behaviors (e.g., substance use, intimate partner violence), positive adult behaviors (e.g., social support), and neighborhood conditions. However, family factors cannot fully explain the association between poverty and neglect (Fong, 2019). As articulated in a recent brief on poverty and neglect, it is important to consider the impact of historical, structural, and policy contexts that render families from minoritized groups more likely to experience both poverty and child welfare involvement (Child Welfare Information Gateway, 2023). In addition, it is important to recognize that a substantial proportion of substantiated child neglect cases involve intimate partner violence, parental substance abuse, and under-treated mental health conditions (Palmer et al., 2024).

Based on this evidence, some child welfare scholars, policymakers, and practitioners argue that the child welfare system is biased against families from low-income backgrounds. Because these families are more likely to engage with public institutions (e.g., social services, public housing, income supports), they are more likely to experience greater monitoring by professionals who are mandated reporters (Child Welfare Information Gateway, 2023). Accordingly, research has examined whether increased surveillance (Chaffin and Bard, 2006; Drake et al., 2017) or increased levels of risk (Drake and Rank, 2009; Kim et al., 2018) explain the strong association between poverty and child maltreatment. Whereas findings suggest that surveillance does not play a

substantial role in explaining such disparities, there is general agreement among most scholars that more practice and policy attention should be devoted to the structural barriers that render families impoverished. Further, more research is needed to understand the relation between poverty and maltreatment, including the mechanisms that explain this relation.

The overarching goal of this review is to explore how economic scarcity may be linked to children's entry into the child welfare system, with a particular focus on child neglect. A corollary goal is to disentangle when, how, and why child neglect may be attributable to factors beyond poverty, including neglectful parenting, parental challenges due to substance abuse, intimate partner (domestic) violence, mental health conditions, and poverty-related risks. To begin, we briefly examine the epidemiological and definitional issues relative to child neglect. Next, we address issues related to parenting, poverty, and poverty-related risks that may distinguish children who are neglected from those who are just reared in impoverished circumstances. We subsequently turn our attention to whether and why a lack of economic resources may be a *cause* of child maltreatment and Child Protective Services (CPS) involvement, including but not limited to neglect, what such a relation implies for racial disproportionality in CPS involvement, and the extent to which reductions in poverty may lead to reductions in CPS involvement and racial disparities therein. We conclude with a summary of core findings of the research literature that we hope will move us toward a better understanding of the poverty-neglect conundrum as well as inform child welfare policy and practice regarding neglect.

CHILD NEGLECT: EPIDEMIOLOGICAL AND DEFINITIONAL ISSUES

American child welfare policy is grounded in multiple pieces of legislation, in particular the Child Abuse Prevention and Treatment Act (CAPTA), (P.L. 100–294; P.L. 111–320; ACE, 2010). Building on these policies, the contemporary U.S. child welfare system has three main goals for the children it serves: (1) to preserve their safety from experiences of maltreatment (e.g., child protection investigations, foster care placement); (2) to ensure that they are reared in permanent family settings (e.g., family preservation, reunification, guardianship, adoption); and (3) to promote their well-being through a variety of child and family services. The extent to which child welfare systems achieve these goals is variable across service settings, geographic regions, and family characteristics (Jonson-Reid and Chiang, 2019; Wulczyn et al., 2017).

Epidemiological Background

National data from 2022 document that 558,899 U.S. children were victims of child abuse and neglect, yielding a rate of 7.7 victims per 1,000 children (Administration for Children and Families, 2024). This is certainly an underestimation of the children who are maltreated, given that children who are and are not substantiated as victims of maltreatment experience similar familial and contextual risks and subsequent adverse outcomes (e.g., poverty; Hussey et al., 2005; Kohl et al., 2009).^a In contrast, some scholars argue that these numbers could be substantially decreased if the families of children from impoverished backgrounds were not “surveilled” and characterized as neglectful due to their poverty-related circumstances (Edwards, 2019; Fong, 2020; Roberts, 2014). We review the empirical evidence on this debate below.

The overwhelming majority of children who enter the child welfare system are victims of child neglect. Current national data document that 74.3% of U.S. child maltreatment victims experience neglect; greater than 60% of victims only experienced neglect (Administration for Children and Families, 2024). However, multiple studies have documented that there is wide variability regarding the parental behaviors that lead to a substantiation of neglect (Dubowitz et al., 2022). In a recent analysis of data from the National Child Abuse and Neglect Data System (NCANDS), Rosenberg et al. (2024) documented that, regardless of mandated reporting policy (e.g., universal, anonymous, training for mandated reporters), other types of maltreatment (e.g., physical and sexual abuse) are more accurately reported than neglect alone. These authors assert that their evidence highlights the difficulty in identifying what constitutes child neglect.

Some child welfare systems also report on the number of child maltreatment victims with specific caregiver risk factors. Available national data suggest that 23.8% of families involved with the child welfare system exhibit drug abuse, 15.2% exhibit alcohol abuse, and 26.5% exhibit domestic violence (Administration for Children and Families, 2024). Further, national data for 2022 document that 45,756 infants with prenatal substance exposure were referred to child welfare agencies, the majority of whom (79.2%) were screened-in to receive either an investigation or alternative response (i.e., services to support families and prevent maltreatment without formal child welfare system engagement) (Administration for Children and Families, 2024). Notably, some studies have documented that families’ participation in Differential Response (i.e., services to prevent maltreatment and support families) may result in a reduction in child neglect (Janczewski and Mersky, 2016; Simon et al., 2024). Overall, approximately 80% of CPS reports do not receive continued child welfare intervention beyond screening or investigation; however, a large

^a Research also indicates that the majority of children who experience an unsubstantiated investigation will be re-referred to CPS one or more times during childhood and that substantial proportions of these children will eventually experience substantiated investigations and/or foster care placements (see, e.g., Palmer et al., 2023).

proportion of such families are subsequently re-referred to CPS (Slack and Berger, 2020). Indeed, Palmer and colleagues (2023), using birth cohort data from California, document that the majority (55%-83%) of children reported to CPS for the first time, and not permanently removed from home as a result of that report, will experience one or more subsequent reports over the course of their childhood. This study further documents that 11%-39% will experience substantiation (without removal), and 6%-43% will experience foster care placement as a result of a subsequent report (variation in these rates reflects differences in age at and outcome of the initial report).

Finally, an abundance of studies document absolute racial disparities in CPS involvement, particularly regarding African American children (Dettlaff, 2020; Putnam-Hornstein et al., 2013), which are primarily driven by differences in CPS reports (see Drake, 2024, for a discussion of absolute and relative disparity rates). For example, it is estimated that over half (53.0%) of African American children are subject to a child protection investigation over the course of their childhoods (Kim et al., 2017). However, according to NCANDS data (Administration for Children and Families, 2022), African American children are not more likely to experience neglect than children of other races. Smaller studies do suggest that African American parents may be more likely to have substantiated neglect cases, depending on their geographic location (e.g., urban and racially segregated areas) and child welfare policies (e.g., prenatal drug exposure and IPV exposure defined as neglect) (Fong, 2019; Henry et al., 2020). For example, Jonson-Reid et al. (2013) documented that Black children involved with child welfare are more likely to live in poor communities, and to be reported and substantiated for severe and basic needs neglect. Similarly, in their meta-analytic review, Mulder et al. (2018) documented higher rates of overall neglect among non-White children. In contrast, Vanderminden et al. (2019) documented higher rates of neglect for White U.S. children. It is important to note that there is a strong link between race/ethnicity and poverty in the United States (National Academy of Sciences, 2019), which may to some extent explain the racial disparities in neglect victimization (Kim and Drake, 2018; Maguire-Jack et al., 2015). Specifically, according to the U.S. Census Bureau (2023), a much larger proportion of African American children (27.3%) and Hispanic children (22.4%), compared to White children (8.8%), are reared in conditions of poverty.

Definitional Background

According to CAPTA, child abuse and neglect is “at minimum, any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act, which presents an imminent risk of serious harm.” There is no scientific consensus on the definition of child neglect, and legal definitions vary by state, which can lead to subjective empirical, policy, and practice perceptions of this phenomenon (e.g., Casey Family Programs, 2024; Rebbe et al., 2024).

In the child welfare arena, child neglect has typically been characterized as an act of omission, typically consisting of “inadequate provision of basic necessities such as food, clothing, shelter, supervision, education, and medical care and, in some cases, a failure to meet children’s emotional or psychological needs,” as opposed to child abuse, which is described as an act of commission (Berger and Slack, 2020, p. 12). Parents are defined as neglectful if they fail to meet children’s basic needs, to provide adequate supervision, and/or to protect children from harm (DePanfilis, 2006; Mennen et al., 2010; Dubowitz et al., 2022). Further, parents may expose their children to environmental, medical, educational, or supervisory neglect (Jonson-Reid et al., 2013). Notably, these definitions are, perhaps by necessity, relatively broad and vague (Palmer et al., 2024) and, thereby, require subjective interpretation and application. They also do not consider parental “intent” as a condition for maltreatment or neglect. Yet, it is unclear whether establishing “objective” definitions is possible. For example, it may not be reasonable to attempt to definitionally “quantify” neglectful behaviors into fully prescriptive thresholds and expect potential reporters and CPS professionals to calculate accordingly (e.g., establishing a set number of hours a child of a certain age may be left unsupervised, or a precise number of meals a child may miss, before it is considered neglect). Relatedly, incorporating aspects of parental “intent” in definitions of maltreatment is likely to only increase subjectivity in decision making vis-à-vis reporting and CPS intervention.

Despite overarching definitions of neglect, there is great variability in how child welfare systems, policymakers, and practitioners define child neglect, including neglect “caused” by poverty (Rebbe, 2018). Some scholars have defined child neglect from the perspective of harm toward the child, such as situations in which a child’s health, well-being, development, or safety is adversely affected (Dubowitz et al., 2022). Such a definitional approach takes into consideration children’s phases of development, as well as their physical and mental health (Dubowitz et al., 2022). Scholars and practitioners also underscore the multidimensionality of neglect, considering the import of defining neglect according to subtype, chronicity, frequency, developmental timing, severity, and co-occurrence (Dubowitz et al., 2022). Finally, definitions of neglect are influenced by the social, community, and cultural contexts of children and families, including racial and ethnic bias of reporters and practitioners (Dubowitz et al., 2022).

TOWARD AN UNDERSTANDING OF NEGLECTFUL PARENTING IN THE CONTEXT OF POVERTY

Arguably, parents represent the most critical socializing agent for children of all ages (Morris and Smith, 2022). Parenting practices that provide children positive and *nurturing relationships* and stable and *resource-rich environments* lead to positive child outcomes (Hays-Grudo et al., 2022). Although many children in poverty experience these development-promoting caregiving contexts, poverty is a risk factor for neglectful parenting. Our intention is not to suggest that these parenting behaviors necessarily warrant child welfare intervention; our goal is to describe parenting processes among families living in poverty and those at risk for neglect. To this end, in the following sections, we review the research on the characteristics of parenting in the context of poverty and neglectful parenting practices, with particular attention to studies that attempt to disentangle the two phenomena. It is important to note that the disciplines which study parenting use particular terms to describe the phenomenon of parenting, which may seem inappropriate or biased to other disciplines. We attempt to put this phrasing in context toward a more cross-disciplinary interpretation of parenting processes.

Parenting in the Context of Poverty

Although poverty does not necessarily lead to negative parenting, a preponderance of evidence documents the association between poverty and compromised parenting behaviors (Hoff and Laursen, 2019; Magnuson and Duncan, 2019). Building on family investment theory and research (Conger and Donnellan, 2007), parents from impoverished backgrounds have fewer financial, psychological, and social resources to invest in their children's development than middle class parents, such that they tend to focus on meeting their children's basic needs, and are less likely to provide children with cognitive stimulation and emotional support (Duncan and Magnuson, 2003; Guo and Harris, 2000). Family stress theory and research (Conger et al., 2002) suggest that impoverished families experience higher levels of economic stress leading to parent and family psychological stress. Scholars suggest that this stress may result in lower levels of responsive and nurturing parenting, as well as higher levels of parenting that may be considered harsh and controlling (termed authoritarian parenting) (Evans et al., 2008; Scaramella et al., 2008; Wray, 2015).

Despite methodological critiques of the research on poverty and parenting (e.g., operationalization of poverty; correlational rather than causal nature of studies; inattention to mechanisms) (Duncan et al., 2017; Duncan et al., 2019; Magnuson and Duncan, 2019), multiple studies have documented distinctions in parenting related to socioeconomic status (SES). For example, research has documented SES differences in parental cognitions, specifically regarding

their expectations of their children's capacities (Hoff and Laursen, 2019; La Placa and Corlyon, 2016; Magnuson and Duncan, 2019), parents' goals for their children (Hoff and Laursen, 2019; Lareau, 2011), and their knowledge about child development (Hoff and Laursen, 2019; Saitadze and Lalayants, 2021). There is substantial research that points to SES differences in parenting styles, specifically that parents from low-income backgrounds tend to have more authoritarian parenting styles, which have been found to entail high levels of control and harshness, as well as low levels of responsiveness to children (Schneider and Schenk-Fontaine, 2022). Finally, research has documented that when compared to parents from higher SES backgrounds, parents from lower SES backgrounds spend less time with their children (Kalil et al., 2012), display lower levels of warmth and sensitivity and higher levels of intrusiveness and control (Tamis-LeMonda et al., 2004; Laureau et al., 2011; Mistry et al., 2010; Vernon-Feagans et al., 2008), and engage in less stimulation of their children's cognitive and language development (Hoff and Laursen, 2019; Kalil, Ryan, and Corey, 2012; Lareau, 2011).

It is important to note that these negative parenting behaviors do not constitute neglect, but may characterize the parenting of caregivers who have been deemed neglectful. Further, despite poverty's association with compromised parenting, there is great variability in the parenting experienced by children being reared in impoverished circumstances (Magnuson and Duncan, 2002; 2019). For example, in a study in the UK, about half of parents from impoverished backgrounds reported engaging in "ideal" parenting behaviors, and a minority reported engaging in "poor" parenting behaviors (Cooper, 2021).

Recent research has examined factors that may protect parents and children from the impact of poverty and potentially increase the likelihood of positive parenting in impoverished circumstances. For example, Park (2023) documented that parents with more adaptive mindsets and active, problem-oriented coping strategies may have better cognitive and emotion regulation, which is related to more positive parenting behaviors. Social support has also been identified in multiple studies as protective against negative parenting in low-income families (Magnuson and Duncan, 2002). For example, in a study using data from the Fragile (now Future of) Families and Child Wellbeing Study, mothers' instrumental social support was associated with less physical and supervisory neglect and moderated the association between poverty and physical neglect (Sattler et al., 2022). In a study of African American adolescents in the rural south, Brody et al. (2017) found that supportive parenting (e.g., warmth, sensitivity, and emotional support) can buffer youth against the impact of long-term poverty on brain and psychosocial development.

Parenting Processes among Families in the Child Welfare System

Although child maltreatment is by definition characterized by compromised parenting, surprisingly little research has explicitly addressed parenting processes among maltreating families. Extant evidence suggests that the parenting displayed within maltreating families varies greatly with respect to the type, severity, and chronicity of maltreatment, as well as the characteristics and contexts of parental behaviors (Jones Harden et al., 2022).

Early evidence on parenting among maltreating families was plagued by methodological problems, such as aggregating all maltreated children regardless of maltreatment type or severity. Nevertheless, this evidence suggests that, overall, maltreated children experience lower quality parenting than their non-maltreated peers (Azar, 2002; Koenig Cicchetti, and Rogosch, 2000). Specifically, maltreating parents display decreased knowledge about child development and parenting; unrealistic developmental expectations of their children; poorer quality interactions with their children; and inconsistent responsiveness to their children (Azar et al., 2002; Howe et al., 2000). They also tend to rely on harsher forms of discipline (e.g., corporal punishment) rather than verbal disciplinary practices (Koenig et al., 2000). Moreover, neglectful behaviors have been documented among parents who are less motivated and less empathic with respect to their children (Coohey, 1998; Shahar, 2001).

Although studies in this area are variable with respect to methodological rigor, relatively more research has focused on parent functioning and parenting processes in the context of child neglect as opposed to other forms of maltreatment. Dunn et al. (2002) assert that the key risk factors for child neglect are caregiver history of neglect exposure; parental psychological functioning (e.g., coping, ego strength); capacity for perspective taking and empathy; lack of knowledge about children's developmental needs and tasks; and psychiatric disorders other than substance use disorder. Many studies have pointed to parenting-related risk factors among parents who neglect their children, such as increased overall and parenting-related stress (Schumacher et al., 2001; Slack et al., 2002; Stith et al., 2009). Additionally, parents who neglect their children have been found to display low self-esteem, impulsivity, anger, and hyper-reactivity (Schumacher et al., 2001; Stith et al., 2009).

Based on Wilson et al.'s (2008) meta-analysis of parent-child interaction studies, neglectful parents are less involved with their children than non-maltreating parents. Multiple studies find that child neglect is characterized by lower parental warmth and harsher parenting, such as greater reliance on corporal punishment (Mulder et al., 2018; Schweer-Collins et al., 2020; Slack et al., 2004). Finally, neglectful parents have been found to exhibit less empathy toward their children (Moulder et al., 2018; Shahar, 2001), view their children as problems (Stith et al., 2009), have less proficient caretaking skills, and know less about child development than non-neglectful parents (Azar et al., 2002).

Substantial research has examined child neglect from the perspective of social information processing theory and documented neurocognitive and social cognitive difficulties among parents who neglect their children (Azar et al., 2017). For example, neglectful parents have been documented to have inappropriate expectations of children and to attribute hostile intent to children's actions (Azar et al., 2017). Regarding medical neglect, some parents have been found to have cognitive limitations, an inability to follow medical advice due to low health literacy, and communication difficulties with health care professionals (Logan-Greene and Semanchin Jones, 2018; Parmeter et al., 2018).

Further, mothers involved with the child welfare system exhibit impaired executive functioning, specifically poorer performance on neuropsychological tests assessing working memory, attention, cognitive flexibility, planning, and problem-solving (Azar et al., 2012; Azar et al., 2016). Mothers of maltreated children display more cognitive inflexibility than non-maltreating mothers (Azar et al., 2012; Fontaine and Nolin, 2012) and poorer problem-solving in caretaking situations (Azar et al., 2012). Parents who demonstrate fewer complex decision-making strategies may generate fewer responses from and/or make inappropriate choices for, their children, which is related to inadequate supervision (Morrongiello and House, 2004). Parents with poor inhibition may have difficulty sustaining attention to children when faced with competing stimuli, and cognitive inflexibility may hinder shifts in responses as children develop (Johnston et al., 2012).

Despite the congruence between parenting processes found among parents from impoverished backgrounds and those who neglect their children, a very small body of research has attempted to disentangle the effects of poverty from parenting behaviors vis-à-vis families' involvement with the child welfare system. For example, Slack et al. (2004) found that low levels of parental warmth, physical discipline use, and child frequent television viewing were parenting factors associated with child neglect, beyond the influences of socioeconomic factors. In a study of maltreatment writ large, Berger and Brooks-Gunn (2005) documented that parenting knowledge about child development and observed parenting behaviors had a larger influence on maltreatment than did SES, but that parenting and SES had distinct impacts on maltreatment. Finally, in a unique, qualitative study (Russell et al., 2008), parents articulated that poverty was the major impediment to their provision of quality care for their children and that the psychological distress they felt as a result of poverty led to their compromised parenting. Together, these studies suggest that parenting knowledge and behaviors and socioeconomic factors are both independently and interactively associated with child maltreatment, such that each plays an important role in its own right, and also that the relation of each with child maltreatment may vary in the context of the other. However, there is clearly a need for more research that attempts to explicitly identify neglectful behaviors above and beyond parenting behaviors associated with poverty.

CHILD NEGLECT IN THE CONTEXT OF ENVIRONMENTAL RISK FACTORS

Neglected children may experience a multitude of caregiver risks beyond poverty, including the three major parental risks that are associated with child welfare involvement: parental mental health challenges, parental substance use, and intimate partner violence (McKenzie and Scott, 2011; Palmer et al., 2024; Skinner et al., 2021; 2023). In a study of poverty indicators and child neglect, primary caregivers were twice as likely to have physical neglect substantiated if they had mental health or substance abuse problems (Carter and Meyers, 2007). In their review, Slack et al. (2011) documented that parental depression and drug use were related to Child Protective Services' identification of neglect. More recently, Palmer and colleagues (2024) documented that the vast majority of investigated neglect cases involves risk factors beyond low-income and poverty status, with more than 75% of all neglect investigations and about 99% of physical neglect investigations involving substance use (41%), mental health challenges (18%), intimate partner violence (21%), and/or concurrent allegations of physical abuse, sexual abuse, or parental absence or abandonment (29%).

Notably, each of these risks factors is found at higher levels among families from impoverished backgrounds (Karriker-Jaffee, 2013; Magnuson and Duncan, 2019). The features of parenting that maltreated children experience may exacerbate or compensate for these caregiver risks and may influence children's short- and long-term developmental trajectories (Friedman et al., 2021; Ruberry et al., 2018). However, these risks should be considered in the context of other protective and risk factors, such as family structure, social support, neighborhood conditions, and structural factors (Austin et al., 2020; Jaffee et al., 2017). For example, Maguire-Jack and Klein (2015) find that proximity to mental health or substance abuse treatment services is associated with lower levels of child neglect. Below, we review the research literature on the most common parent risk factors among children at risk for neglect: substance abuse; intimate partner violence; and mental health challenges. This trifecta of risks has been found to be highly detrimental to parenting processes and children's outcomes.

Substance abuse

Parental substance abuse has a pernicious impact on parenting, and subsequent child outcomes. Similar to poverty and other risk factors, the nuance and context of substance abuse, including the type and severity, comorbidity with psychiatric disorders, the social ecology (i.e., other risk and protective factors of the family and community), and the accessibility of appropriate treatment for parents who use substances, should be considered in assessing its relation to child maltreatment. Several studies have found an association between substance use and child maltreatment (e.g., Donohue et

al., 2019; He et al., 2022; Manly et al., 2013). National data documented that about 15% of parents reported to CPS met the criteria for alcohol abuse and 24% for drug abuse (Administration for Children and Families, 2024). Similar to the overall maltreatment rates, this may be an underestimation of the families affected by substance use, as other researchers have underscored the strong correlation between parental substance use and child maltreatment (Austin et al., 2022; Kepple, 2018). For example, in a sample of parents reported to child welfare, 70% of the caregivers reported the misuse of a substance and over 50% had drug-related arrests (Staton-Tindall et al., 2012).

Research has documented a link between substance abuse and child neglect specifically (Clement et al., 2016). An early study found that adults with an alcohol or drug disorder were 4.2 times more likely to have reported neglectful behavior toward their children than average adults (Kelleher et al., 1994). In their examination of neglect subtypes, Cozza et al. (2018) documented a relation between parental substance use and physical neglect, moral-legal neglect, and educational neglect. An analysis of data from the National Survey of Child and Adolescent Well-being (NSCAW) yielded findings with respect to the timing of substance use; parental substance abuse in the past year only was related to a higher frequency of neglect compared to other categories of maltreatment (Kepple, 2018). Related to the question of poverty and neglect, Ondersma (2002) found that substance use was the strongest predictor of neglect among low-income parents. However, in their meta-analysis, Mulder et al. (2018) did not document a link between parental substance abuse and neglect.

Regarding parenting, individuals with substance abuse disorders have reported decreased knowledge about parenting, lack of parenting skills, and poor attitudes about parenting (Kerwin et al., 2014). Parenting behaviors of parents who abuse substances are more compromised than those of non-abusing parents (Seay and Kohl, 2015). For example, multiple studies across different drug types have pointed to lower quality interactions between drug-abusing parents and their children, including less frequent interactions (Mayes et al., 1997), less responsivity and contingency (Haabrekke et al., 2015), less pleasure, enthusiasm, and enjoyment during play (Burns et al., 1997), less involvement (Suchman and Luthar, 2000), impaired affective involvement leading to lower quality dyadic affective behavior (Siqueland et al., 2014), and less secure attachment (Hyysalo et al., 2022).

There is also a strand of research that underscores the challenges for individuals with substance use disorder to modulate arousal and regulate emotions (Stellern et al., 2023). This dysregulation may lead to impaired parenting (e.g., attentional deficits, impulsivity), that is particularly problematic for children who may be dysregulated themselves due to prenatal substance exposure (Shadur and Hussong, 2020). Notably, however, there are also studies that do not show a link between substance abuse and negative parenting,

suggesting that other factors (e.g., mental health) may be more detrimental to parenting processes than substance use per se (Johnson and Rosen, 2009; Lloyd and Kepple, 2017). Finally, many scholars and practitioners have highlighted that addictive behaviors often decrease parents' motivations to attend and respond to their children (Rutherford and Mayes, 2017), which may lead to physical and supervisory neglect (Anderst and Moffatt, 2014).

Intimate partner violence

Intimate partner violence (IPV) has been described as a continuum of abusive behaviors toward an intimate partner, including physical and sexual violence, and verbal and psychological aggression (Grogan-Kaylor et al., 2020). Approximately 25% of U.S. mothers involved with the child welfare system have experienced some form of IPV (Nwabuzor Ognonnaya et al., 2019). IPV can lead to many negative psychological effects on victims (Levendosky and Graham-Bermann, 2001; Grogan-Kaylor et al., 2019; Herbell et al., 2020), which tend to influence other aspects of victims' lives, specifically their parenting.

Mothers' experiences with IPV are negatively associated with warmth towards their children (Chiesa et al., 2018). Because of the psychological and economic strains of IPV, victimized parents are less likely to have adequate time to respond to their children's needs (Grogan-Kaylor et al., 2019; Levendosky and Graham-Bermann, 2001). Research is mixed regarding links between IPV and "parenting style," with some studies suggesting that IPV victims are prone to higher rates of authority-control styles of parenting (e.g., Levendosky and Graham-Bermann, 2001), whereas others suggest that they use more permissive styles of parenting, in which rules are unclear, unpredictable, and subject to inconsistent follow-through (Grogan-Kaylor et al., 2019; Rossman and Rea, 2005). Mothers who have reported some level of IPV also report higher use of punitive discipline and lower levels of positive parenting (Murray et al., 2012; Rossman and Rea, 2005).

Research has documented impaired interactions between IPV-affected parents and children. For example, communication, connectedness, and effective parenting skills tend to be less commonly used, while physical aggression and neglect are more frequently displayed (Chiesa et al., 2018). Similarly, there is evidence that IPV impedes mothers' well-being and ability to provide basic care and nurturance, leading to neglect (Nicklas and MacKenzie, 2013). Some of this impaired functioning may be due to the effects of traumatic brain injury, which has been documented at high rates among adults with IPV histories, among IPV affected children, and among physically abused children (Costello and Greenwald, 2022; Glick et al., 2016; Haag et al., 2022).

In a number of studies, IPV has been associated with child neglect (Bartlett et al., 2014; Logan-Greene and Semanchin Jones, 2018; Mulder et al., 2018; Yang and Maguire-Jack, 2018). For example, in a study with a large community sample of families with young children, Nicklas and MacKenzie (2013) found

that IPV exposure led to neglect through its negative effect on mothers' psychological wellbeing and ability to provide basic care and nurturance to their children. Some scholars and practitioners argue that IPV exposure, in and of itself, can reflect neglectful parenting because a critical parental responsibility is to provide children a safe home environment (McTavish et al., 2016). Notably, however, in some studies, IPV-affected women reported better parenting, which may reflect their attempt to compensate for the violence that their children were witnessing (Grogan-Kaylor, 2020; Jones Harden et al., 2021). Further, women who were involved in the child welfare system who had experienced IPV in the past but were no longer victims of IPV had significantly better parenting than women who were currently experiencing IPV (Casanueva et al., 2008).

Mental health challenges

There is an abundance of literature linking mental health challenges with higher levels of negative parenting behaviors (Fontaine and Nolin, 2012), including maltreatment. Similarly, a robust empirical literature exists on the association between poverty and mental health challenges (Dohrenwend, 1990; Sameroff and Seifer, 1990). Again, as with other parental risks, mental health challenges should be considered in the context of myriad factors, including type and severity of illness, as well as other ecological factors, such as social support and access to treatment. Parenting in the context of mental health challenges and poverty subjects children and parents to a variety of assaults on their functioning (Smith and Mazure, 2021; Perera et al., 2014).

As Azar and Wright (2022) assert, parental mental health challenges can adversely impact parenting in multiple domains: (1) *basic tasks* to meet children's concrete needs; (2) *developmental tasks to promote children's development*; and (3) *hazardous tasks to address emergency situations* (e.g., illness, injuries). Further, parents with mental health challenges display impaired interactions with their children, exhibiting negative affect, disengagement, poor synchrony, poor affective recognitional skills, and poor attention (Harries et al., 2023; Oyserman et al., 2002). With respect to basic tasks, parents with mental health problems are less able to garner the concrete resources (e.g., income, housing, food) that are important for childrearing (Azar and Wright, 2022). They are also less likely to have organized households, schedules, and routines that allow for children's basic, concrete, health, and educational needs to be met (Power et al., 2016). As a result, they may be at increased risk for neglect allegations which, among parents with mental health challenges, often relate to failures to keep their children physically safe (e.g., lack of health care, injury risk) (Yang et al., 2020). Many studies have also documented that parents with mental health challenges are less likely to promote their children's cognitive and social-emotional development. For example, parents with mental health challenges have been found to exhibit fewer responsive, emotionally available and stimulating behaviors, and to display less positive affect in interactions with their children (Dib et al., 2019; Kluczniok et al., 2016).

Additionally, parents are at higher risk of child neglect if they exhibit decreased emotional control, coping and regulation, which are key features associated with mental health challenges (Lavi et al., 2019).

Building on a Social Information Processing framework, Azar and colleagues have identified multiple factors that impede quality parenting among individuals with mental health challenges (Azar and Wright, 2022; Azar and Weinzierl, 2005). They argue that parents with mental health challenges have social cognitive and neurocognitive deficits that adversely impact their parenting. Specifically, parents with mental health challenges are disproportionately likely to exhibit rigid and inflexible role schema, limited executive function capacities, and impaired appraisals of others and situations. Such cognitive deficits may lead to inappropriate and less responsive parenting which adversely affects children's development and functioning (e.g., lack of adequate attention to supervision, safety, and hygiene) (Azar and Wright, 2022). Further, the increase in psychosis among men and women due to the use of cannabis with high levels of THC is only just now being recognized as a growing public health concern (Hjorthøj et al., 2023), which affects the ability to think clearly and regulate emotions.

Research has shown that mental health challenges are associated with increased risk for all forms of child maltreatment (Clemens et al., 2019). For example, in a meta-analytic review of risk factors for neglect, parental history of antisocial behavior and criminal offending, as well as of mental and psychiatric problems, are related to increased risk of child neglect (Mulder et al., 2018). Parents with mental health challenges exhibit behaviors such as disengagement from their children, failure to monitor their children, bizarre behavior, apathy, immaturity, rigidity, stereotyped views of the child (e.g., the child is a "burden"), poor planning, unresponsiveness to the child's emotional distress, and minimization of the child's needs, all of which are associated with child neglect (Azar and Wright, 2022; Reupert et al., 2016). Further, studies have documented a link between specific psychiatric conditions and child maltreatment (Bogacki and Weiss, 2007; Laulik et al., 2016; Fontaine and Nolin, 2012). Because depression is the most common psychiatric disorder and has been extensively studied with respect to parenting, we briefly discuss it here. We also discuss families who have experienced traumatic stress, due to the substantial literature on the intergenerational transmission of maltreatment.

Depression

The most common psychiatric disorder is depression, especially among women of childbearing age (Hasin et al., 2018). Building on the strong research base on depression's impact on parenting (Dix and Moed, 2019), scholars have documented a link between parental depression and risk for child maltreatment, especially child neglect (Clément et al., 2016). For example, mothers diagnosed with a mood disorder (e.g., depression) are twice as likely

as typical mothers to be reported for child maltreatment within the first year of the child's life (Hammond et al., 2017). Parental depression has been associated with adverse parenting behaviors including child neglect, self-orientation, lack of attentiveness, disengagement, and emotional maltreatment (Dix and Meunier, 2009; Kohl et al., 2011; Lee et al., 2012; Mustillo et al., 2011; Turney et al., 2011). Further, studies show that parental depression may lead to psychological aggression and physical assault toward children (Turney et al., 2011), as well as greater negative perceptions of and fewer positive emotions towards children (Dix and Meunier, 2009). Finally, it is important to recognize that financial strain is a significant risk factor for depressive symptoms in parents (Kelley et al., 2015) and that financial strain and depression are independently and interactively related to maltreatment risk. Parents from low SES families with depression are far less likely than other parents to meet children's immediate needs (Roscoe et al., 2018), a core feature of child neglect. Maternal depression has also been found to be a primary mechanism through which parental history of abuse and neglect is associated with parents' neglect of their own children (Yang et al., 2018).

Traumatic Stress

Although trauma exposure is not tantamount to a mental health disorder (only about 6% of individuals develop Post-traumatic Stress Disorder; Bisson, 2024), the literature on intergenerational transmission of trauma merits discussion. There is substantial evidence regarding trauma's negative impact on parenting. For example, parenting may be adversely affected due to trauma-exposed parents' emotional dysregulation and negative perceptions of their children (Iyengar et al., 2019). Women affected by trauma in childhood have shown harsher parenting styles, increased hostility, and intrusiveness toward their infants (Savage et al., 2019). Moreover, in a recent meta-analytic review, Rowell and Neal-Barnett (2022) documented a direct association between adverse childhood experiences (ACEs) and parental emotional (un)availability and negative discipline techniques, which is potentially mediated by maternal depression and dissociation. In another review, Lotto et al. (2023) found a strong link between mothers' ACEs and a variety of negative parenting processes, including parenting stress, physical abuse, maltreatment, dysfunctional discipline, neglect, harsh parenting, and emotional abuse.

These parenting behaviors may be due to the mental health consequences of trauma (Erickson et al., 2019; Madigan et al., 2019). Maternal psychopathology may affect children both directly and indirectly via parenting stress, which has been found to exert a profound influence on family functioning (Cho et al., 2021; Mak et al., 2020; Owen et al., 2006). Further, trauma-exposed children are at an increased risk of becoming a victim or perpetrator of IPV or a perpetrator of child maltreatment in adulthood (Leve et al., 2015; Yang et al., 2018). Madigan et al. (2019) suggest that parents with a maltreatment history are twice as likely to maltreat their children. Finally, parental history of abuse

and neglect is a risk factor for neglect specifically; in one study, young mothers who had experienced neglect were 60 times more likely than those who had not to neglect their own children (Bartlett et al., 2017).

THE CAUSAL EFFECT OF INCOME ON CHILD MALTREATMENT AND CPS INVOLVEMENT

A wide range of child, parent, family, community/neighborhood, and macro-environmental (economic and policy context) factors have been identified as correlates of both child maltreatment and CPS involvement at the individual/family and aggregate (community, neighborhood, state) levels (see, e.g., Font and Maguire-Jack, 2020; Skinner, Bywaters, and Kennedy, 2023). Notably, however, there is little evidence regarding which of these factors may be *causes of*, as opposed to *correlates of* or *risk factors for*, child maltreatment or CPS involvement, such that a change in the factor leads to a change in a child or family's probability of maltreatment or CPS involvement that cannot be explained by any other factor ("all else equal"). The difficulty identifying which factors *cause* child maltreatment or CPS involvement reflects that many such factors are jointly determined by processes that also directly contribute to maltreatment or CPS involvement risk, themselves. For example, a host of individual and contextual factors may jointly influence family members' mental health, substance abuse, and intimate partner violence experiences, as well as their child maltreatment or CPS involvement experiences. Yet establishing *causal* relations between such factors and child maltreatment or CPS involvement requires that the unique influence that a specific factor has on the probability that child maltreatment or CPS involvement will occur can be isolated from the influence of all other factors. Isolating the causal effect of many such risk factors is challenging because they are not randomly distributed among families and are difficult, if not impossible, for researchers to manipulate (randomly assign or vary).

A large and longstanding research literature has established that low-income status and poverty are strong and consistent correlates of child maltreatment and CPS involvement, particularly with respect to child neglect, in the United States and other wealthy countries (Berger and Waldfogel, 2011; Font and Maguire-Jack, 2020). To the best of our knowledge, there are no national data available to estimate the proportion of CPS-involved families that are low income or poor. However, evidence from Wisconsin, describing earnings and means-tested social welfare program participation in the year before a CPS investigation, suggests that the vast majority of families experiencing an investigation are low-income: 40% of such families had no earnings reported to the Unemployment Insurance system in at least one quarter of the year; 76% received Supplemental Nutrition Assistance Program benefits; and 71% received Medicaid in the year prior to an investigation (Berger and Slack, 2020).

Because income and poverty status can be randomly or quasi-randomly manipulated—that is, directly varied in a manner that is not jointly determined with, and does not directly influence, any other family characteristics or experiences, except as a direct consequence of the change in income—rigorous research has established a plausibly *causal* relation of income with child maltreatment and CPS involvement. Studies that have isolated the role of income in *causing* rather than *being correlated with* a probabilistic change in child maltreatment and/or CPS involvement stand in sharp contrast to research on most, if not all, other correlates of child maltreatment and CPS involvement, for which only associations, and not causal relations, have been documented. Isolating the causal role of income is possible by leveraging variation in income that is “exogenously” imposed on families from outside of the family system—that is, variation in income that is fully determined by external factors and, as such, is fully unrelated to family characteristics or behaviors, and changes therein, except as a consequence of the change in income. Such exogenous variation in family income may occur as a function of public policy and program variation in assignment of financial resources to families with the same characteristics and behaviors (“all else equal”). A growing body of research has employed experimental and quasi-experimental designs to exploit such variation and, thereby, establish a *causal* effect of income on child maltreatment and CPS involvement, with the majority of such studies focusing on CPS involvement rather than behavioral indicators of maltreatment.

The most rigorous evidence to date is found in one experimental study (Cancian et al., 2013) and four quasi-experimental studies (Berger et al., 2017; Bullinger, Packham, and Raissian, 2023; Rittenhouse, 2023; Wildeman and Fallesen, 2017) that leverage policy variation resulting in exogenous differences in family income, all else equal, to estimate the causal impact of income on a family’s risk of CPS involvement and other measures of child maltreatment.^b In the only existing experimental study of which we are aware, Cancian and colleagues (2013) employ administrative data from a randomized experiment in Wisconsin, in which participating families in the Temporary Assistance for Needy Families (TANF) program were randomly assigned either to receive all of the child support paid on their children’s behalf or to receive a partial amount of those child support payments, with the remainder being diverted to the state

b Also of note, Fein and Lee (2003) conducted an experimental evaluation in Delaware in which families with children were randomly assigned to receive either the state’s Aid to Families with Dependent Children’s unconditional cash benefit or to a Temporary Assistance for Needy Families-like benefit that was conditional on meeting work requirements, was time limited, and included a “family cap” restricting the increase in benefit amount for additional children. Compared to those randomly assigned to receive the unconditional cash benefit, those subject to conditions received lesser income support and experienced a higher subsequent rate of substantiation for child neglect. However, the study is unable to disentangle whether the higher child neglect rate resulted from lesser income, itself, or from the conditions required for benefit receipt. A related literature examines relations of variation in the generosity of income support policies between U.S. states over time with variation in aggregate (state) level indicators of child maltreatment and finds that more generous income support policies are associated with lower child maltreatment rates (see, e.g., Biehl and Hill, 2018; Bullinger et al., 2021; Ginther and Johnson-Motoyama, 2017; Johnson-Motoyama et al., 2022; Klevens et al., 2017; Kovski et al., 2022a; Kovski et al., 2022b; Paxson and Waldfogel, 2002, 2003; Raissian and Bullinger, 2017; Rostad et al., 2020).

to provide ‘cost-recovery’ for the family’s TANF benefits. Families receiving the full amount of child support received, on average, \$101 to \$180 greater child support income per year and experienced approximately a 10% lower likelihood of having a child maltreatment investigation over the subsequent two years, relative to families receiving the partial child support payment.

Turning to the quasi-experimental studies, Berger and colleagues (2017) used national survey data and an instrumental variables strategy that leverages policy variation between states and over time in the generosity of state Earned Income Tax Credit (EITC) benefits to estimate the causal effect of an exogenous EITC policy-induced difference in family income on CPS investigations and behavioral approximations of child physical abuse and neglect among single-mother families. They find that an additional \$1,000 of annual family income results in an 8% to 10% lower likelihood of being investigated by CPS and a 3% to 4% lower likelihood of exhibiting neglectful behaviors. They find no effect for abusive behaviors.

Rittenhouse (2023) used administrative data from California and a regression discontinuity strategy to estimate the causal effect of income on CPS involvement by comparing families receiving different amounts of child-related tax benefits in a child’s first year of life, based on variation in the timing (month and year) of their child’s birth and tax policy in effect at the time of the birth, all else equal. She found that receipt of an additional \$1,000 resulted in a 3% lower likelihood of a CPS investigation, 4% lower likelihood of a substantiation, and 8% fewer days spent by the child in foster care by age 3. Moreover, she found that the protective effect of this additional income vis-à-vis CPS involvement persists through age 8 (the end of the observation period of the study) and holds for both physical abuse and neglect. She also found that the reduction in days spent in foster care is particularly large for Black children and that the decline in CPS referrals is particularly large with respect to referrals by health care professionals.

Bullinger, Packham, and Raissian (2023) employed linked administrative and survey data from Alaska and leveraged variation in birth timing and annual Alaska Permanent Fund Dividend payment amounts to examine exogenous differences in family income resulting from variation in the dividend payments families receive. They found an additional \$1,000 of income to result in a 10% lower likelihood of CPS investigations and substantiations by age 3. Moreover, they found that this effect was larger for substantiated than unsubstantiated cases and that the effect for substantiated cases was considerably larger for neglect than for physical abuse, whereas the effect among unsubstantiated cases was larger for physical abuse than neglect. They also found a decline in the total number of referrals families experienced, conditional on having an initial referral, and in child mortality by age 5 among families experiencing an initial CPS referral.

Finally, Wildeman and Fallesen (2017) used administrative data from Denmark to identify an exogenous change in income, caused by a policy-induced reduction in cash welfare benefit amount, among families receiving cash welfare to examine the effect of the resulting income decline among welfare-receiving families on subsequent foster care placements for their children. They found that the reform resulted in welfare-receiving families experiencing, on average, 30% less monthly income and, in turn, a 25% increase in the likelihood of having a child placed in foster care.

UNDERSTANDING INCOME AS A CAUSE OF CHILD MALTREATMENT AND CPS INVOLVEMENT

Together, the studies described above provide rigorous evidence that income is *causally* related to CPS investigations, substantiations, and foster care placements, as well as to other indicators of child maltreatment (potentially abusive and neglectful behaviors, child mortality). Why might this be the case? As described by Slack and colleagues (2023), limited economic resources (e.g., low income, poverty, material hardship) may be related to child maltreatment both directly and indirectly. Direct effects are particularly relevant to child neglect which, as discussed above, includes inadequate provision of goods and services for children’s care in areas such as food, clothing, shelter, medical care, educational support, and supervision—typically without consideration of parental intent but, in some states, for reasons other than “poverty alone.” When limited household resources prevent parents from accessing such goods and services at levels that provide for their children’s consumption above some minimum threshold of “adequacy,” such omissions may be perceived by potential reporters as, or legally constitute, child neglect. And, even in states with a “poverty clause,” potential reporters and child welfare professionals may struggle to determine whether poverty alone, as opposed to the interplay of limited resources and parental decision making, is the sole driving factor.

Indirect effects, which are relevant to physical and emotional abuse as well as neglect, are thought to operate through parental stress and mental health, parenting behaviors, and the quality of the home environment. The provision of high-quality parenting is emotionally- and time-intensive, as well as expensive, and lower-income parents face greater constraints than their higher-income counterparts in each of these domains (Hays, 1996; Hays-Grudo et al., 2022). As noted above, limited economic resources constrain parents’ opportunities vis-à-vis the quantity and quality of goods, services, and experiences they are able to provide for their children. Research has also documented that, relative to their higher-income counterparts, lower-income parents devote less time to child-centered activities and engage in lower-quality parenting behaviors vis-à-vis warmth and responsiveness, cognitive stimulation, emotional support, consistency, harshness, and physical discipline (Kalil and Ryan, 2020). This

reflects that economic scarcity is associated with greater parental stress and psychological distress, greater cognitive load, strained executive function, poorer parental health and mental health (anxiety, depression), and less family stability which, in turn, are associated with cognitive biases, impulsive decision making, and poorer support for and interactions with children. Evidence also suggests that, on average, lower-income parents have less knowledge, skills, and information through which to meet their children’s age-specific developmental needs (Berger and Font, 2015; Crnic and Coburn, 2020; Kalil and Ryan, 2020).^c All of these factors pose risks for child maltreatment (Font and Maguire-Jack, 2020, Slack et al., 2023).

In addition, indirect effects of income on CPS involvement, though not maltreatment itself, may occur as a function of “surveillance” and/or “surveillance bias.” That is, all else equal, lower-income families may have greater exposure to potential reporters and/or potential reporters may be more likely to make reports on lower-income families than their higher-income counterparts.^d We return to this issue below.

RACIAL DISPARITIES IN MALTREATMENT AND CPS INVOLVEMENT

As noted above, there are substantial racial disparities, in absolute terms, at all stages of CPS involvement (report, investigation, substantiation, and child removal), such that Black and Native American families, in particular, are considerably overrepresented and White and, especially, Asian families are considerably underrepresented in CPS caseloads relative to their representation in the general population. Accordingly, within-group CPS-involvement rates are substantially higher for Black and Native American than White families. Notably, however, the Black-White disparity has been the subject of considerably more research than the Native American-White disparity. As such, we focus our discussion on the Black-White disparity in CPS involvement. It is also important to recognize that absolute Black-White disparities in subsequent stages of CPS involvement are predominantly driven by Black-White disparities in reports, such that relative disparities at the report stage do not widen (and may slightly narrow) at the substantiation and child removal stages. In other words, Black children are more likely than White children to be reported to CPS but, conditional on being reported, they are similarly or slightly

^c Research also suggests that abusive and neglectful parents are less skilled at recognizing children’s emotions and the reasons therefore, exhibit greater bias in perceptions of children and their behaviors, and are more aggressive toward children (Camilo, Vaz Garrido, and Calheiros, 2016, 2022).

^d Theoretically, the relation of income with child maltreatment and/or CPS involvement may be spurious, such that other individual, family, contextual, or structural factors simultaneously determine both family income and maltreatment/CPS involvement. However, as described above, findings from rigorous research leveraging exogenous variation in family income indicate that this is not the case.

less likely than White children to be substantiated or placed in foster care (authors' calculations from Administration for Children and Families, 2023, 2024; see, also, Drake et al., 2023).

Before delving further into the factors that may be driving this disparity, it is important to consider several overarching “facts.” First, whereas the Black-White disparity in CPS involvement continues to be extreme—for example, Black children are about twice as likely as White children to experience foster care placement—the magnitude of disparity has declined precipitously over the past two decades (Meyers et al., 2018; Roehrkasse, 2021; Wulczyn et al., 2023). Second, “true” rates of maltreatment in the U.S. population and within subgroups thereof are unknown. As such, racial disparities in CPS involvement are typically calculated as the difference between a racial group’s population representation rate and its CPS involvement rate, or by simply comparing CPS involvement incidence or prevalence rates between groups; ideally, they would be calculated as the difference between a racial group’s “true” maltreatment rate and its CPS involvement rate. Because “true” maltreatment rates are unknown, however, research has not definitively established whether disparities reflect differences in underlying maltreatment risk, overinclusion of Black families, or under-inclusion of White families but, as discussed below, there is suggestive evidence here (Drake et al., 2024). Third, as noted above, disparity rates are largest at the report and investigation stage and are considerably less pronounced at subsequent stages of CPS involvement (substantiation and removal), suggesting that the primary source of disparities occurs *outside of CPS*, rather than within it (Baron, Goldstein, and Ryan, 2023; Drake et al., 2023a, 2024; Meyers et al., 2018).

With these considerations in mind, scholars have offered several hypotheses, with varying levels of supportive empirical evidence, for what “explains” racial disparities in CPS involvement. Primary hypotheses include structural racism, discrimination, and bias at the societal level; differences in “surveillance” and “surveillance bias” among potential reporters; bias among CPS professionals; and disparities between racial groups in “risk” for child maltreatment. Below, we consider each of these hypotheses, in turn, recognizing that they are not mutually exclusive, such that any or all may be operating simultaneously to various degrees.

With respect to the first of these hypotheses, existing empirical studies have neither been designed, nor able, to isolate the causal effect of structural racism, discrimination, and bias at the societal level on racial disparities in CPS involvement (Boyd, 2022). Nonetheless, given a robust research literature documenting pervasive historical and contemporary existence of such, spanning all aspects of U.S. society, policy, and institutions—including income, wealth, financial markets, housing markets, labor markets, criminal and civil justice systems, education systems, and health care, among others (Darity and Mullen, 2022; Darity, Mullen, and Slaughter, 2022; Rothstein,

2017)—it would be naïve to entertain that these factors do not play a role with regard to racial disparities in CPS involvement. At the same time, the existing evidence does not suggest a larger role of these factors vis-a-vis CPS than other institutions.

Turning to differences in “surveillance” and “surveillance bias” among potential reporters, it is certainly possible that both are at play (Boyd, 2014, 2022; Dettlaff and Boyd, 2022). For example, given well-documented evidence of heightened law enforcement surveillance of low-income communities and communities of color (Boyles, 2015; Braga, Brunson, and Drakulich, 2019; Brunson and Gau, 2014), it is reasonable to suspect heightened surveillance of such communities vis-à-vis child maltreatment (Fong, 2019); indeed, about a fifth of CPS reports are made by law enforcement (U.S. Department of Health and Human Services [USDHHS], 2024).

In addition, low-income populations and populations of color are disproportionately likely to participate in public social welfare benefit and social service programs (e.g., home visiting programs, Head Start, Early Head Start). Participation in contemporary social welfare benefit programs (e.g., Supplemental Nutrition Assistance Program, Temporary Assistance for Needy Families) is unlikely to directly result in heightened surveillance because “home inspections” and, in most cases, in-person assessments of families are no longer required for program enrollment and recertification. However, participation in social service programs, by increasing exposure to mandated reporters, may result in increased risk of being reported. Approximately 10% of reports are made by social services personnel and 6% by mental health providers; by comparison, 20% of reports are made by educational personnel and 11% by medical personnel (USDHHS, 2024). Yet, the preponderance of quantitative evidence, here, suggests that heightened exposure to mandated reporters (“surveillance”) plays, at best, a very small role in explaining disparities in CPS involvement (Chaffin and Bard, 2006; Drake, Lee, and Jonson-Reid, 2009; Drake, Jonson-Reid, and Kim, 2017; Jonson-Reid, Drake, and Kohl, 2009; Kim, Drake, and Jonson-Reid, 2018). Moreover, there is no clear evidence to conclude that mandated reporting policies substantially influence reporting or substantiation patterns (Day, Tach, and Mihalec-Adkins, 2022; Rosenberg, Williams, and Martinez, 2024). Finally, it is important to recognize that self-reported maltreatment-related experiences exhibit similar racial and income disparities to those in CPS involvement (Baldwin et al., 2019; Slopen et al., 2016; Steele et al., 2016; Thomas and Waldfogel, 2022; Thomas, Waldfogel, and Williams, 2023).

Of course, it is also possible that, conditional on both identical exposure to potential (mandated or voluntary) reporters and identical behaviors, low-income families and families of color are disproportionately likely to be reported to CPS. That is, given identical information, it is possible that potential

reporters are more likely to make a report on such families than on their higher-income and White counterparts. Whereas vignette studies have found evidence of racial and income-related biases vis-à-vis “identification” of abuse and neglect (e.g., Ards et al., 2012; Metcalf et al., 2022), the evidence regarding actual, “real world” behaviors is less clear, largely due to a lack of rigorous large-scale individual-level studies that are able to compare reporting of families of different races or incomes, “all else equal” (Harris, 2021). As such, causal estimates of “surveillance bias,” or biased decision making among potential reporters, are lacking.

With respect to the role of bias among CPS professionals, a large and rigorous qualitative research literature indicates that families describe extensive experiences of racism, discrimination, bias, and disrespect in their interactions with CPS professionals (Fong, 2020, 2023; Hanna and Rogers, 2022; Merritt, 2020, 2021; Miller et al., 2012). These findings are crucial to recognizing that CPS may not be approaching or serving families appropriately and, thereby, may be failing to establish productive partnerships and collaborations with families, thus compromising family engagement and service effectiveness. Families’ report of such experiences is unsurprising given that CPS is a microcosm of U.S. society and its institutions. That is, we have no a priori reason to expect that interactions with CPS are characterized by greater (or lesser) racism, discrimination, or bias than interactions with other social institutions, nor has existing evidence established such differences. Such experiences may, however, be further exacerbated in the CPS context given its adversarial and stigmatizing nature. Nonetheless, it is important to recognize that, by design, qualitative studies are not intended to be representative of an underlying population. As such, these findings cannot be generalized to the population of CPS-involved families as a whole, nor assumed to be the “typical” experience of CPS-involved families.

It is also crucial to recognize that although low-income families and, especially, families of color, experience adverse and traumatizing interactions with CPS, which they attribute to racism and discrimination, this information does not inform whether bias on the part of CPS professionals is a *cause* of racial disparities in CPS trajectories. This reflects that establishing a *causal* relation requires a plausible and observable counterfactual condition, which is not possible—nor relevant—in qualitative studies of lived experience. That is, because families’ experiences with CPS occur only in the context of their actual race, they are unable to know what those experiences would have been, were they of a different race, “all else equal.” This does not imply that racial bias or racism among CPS professionals is nonexistent, nor does it call into question families’ lived experiences. It simply reflects that different research methodologies provide different types of information to answer different types of questions.

In the only large-scale nationally representative quantitative study of individual-level caseworker behaviors of which we are aware, Font, Berger, and Slack (2012) found no differences by race in caseworker ratings of risk or harm to the child, nor of substantiation decisions, once case characteristics (i.e., maltreatment-related risk factors) were considered, suggesting that racial “bias” is not driving CPS case decision making. In addition, they found that Black caseworkers were more likely than White caseworkers both to assess Black children as being at greater risk of harm from abuse or neglect than White children, and to substantiate Black families compared to White families for maltreatment.

Four additional quantitative research findings are salient to considering the role of caseworker bias in driving racial disparities in CPS trajectories. First, as noted above, the largest racial disparities in CPS involvement have been well documented to occur at the report and investigation stages and, thus, to be driven by reporters rather than CPS professionals. Disparities in substantiation and removal, which are directly affected by caseworker actions, are considerably smaller (Baron, Goldstein, and Ryan, 2023; Drake et al., 2023a, 2024; Meyers et al., 2018), with the notable exception that, conditional on foster care placement, Black children spend a substantially longer amount of time in care and are less likely than White children to reunify with their family or be adopted (Wulczyn, 2020). Second, a real-world study of the effect of “blind removals,” in which a team of CPS professionals is presented the evidence gathered during the investigation, but is not aware of the child or family’s race or ethnicity, and subsequently makes a consensus decision on whether to petition for foster care placement, found no evidence that this approach affects racial disparities in removal rates compared to status quo CPS practice (Baron, Goldstein, and Ryan, 2023).^e Third, recent evidence suggests that, relative to screen-in expectations based on algorithmic (e.g., machine learning; predictive analytics) predictions of child maltreatment risk alone, CPS worker behaviors in the context of such tools function to reduce racial disparities in screen-in decisions (Cheng et al., 2022; Stapleton et al., 2022). Fourth, in a particularly rigorous study of CPS caseworker decision making in Michigan, Baron and colleagues (2024) leveraged quasi-random assignment of child maltreatment reports to CPS hotline screeners and investigators to estimate the *causal* effects of caseworker decision making on subsequent foster care placement disparities for Black and White children, taking risk of future maltreatment into account. They find that Black children are more likely than White children to be placed in foster care, even conditional on future maltreatment risk. Yet, the Black-White disparity in foster care placement is concentrated among high-risk children and reflects that high-risk White children tend to be “under-placed” in foster care. As such, they conclude both that current CPS decision making likely results in White

^e Notably, the study also documents that racial disparities were most pronounced at the report and investigation stages, rather than the child removal stage, such that disparities in removals were already quite small prior to implementation of the “blind removal” process (Baron, Goldstein, and Ryan, 2023).

children disproportionately remaining in high-risk homes and that “raising the threshold to place Black children in foster care ... may disproportionately harm Black children by keeping them in risky home environments” (p. 49). Thus, on the whole, our assessment of the research to date leads us to conclude that whereas there are no grounds for dismissing claims of racism, racial bias, and discrimination within CPS systems, there is not convincing evidence that racial disparities in CPS involvement and trajectories are substantially driven by “punitive” behaviors toward Black families on the part of CPS caseworkers.

Finally, scholars have posited that average differences in “risk” for child maltreatment and CPS involvement reflect disparities between Black and White populations in economic scarcity and associated individual, family, community, and structural risk factors, such as mental health and substance abuse challenges, criminal justice system involvement, and neighborhood quality, which drive racial disparities in CPS involvement (Barth et al., 2022; Coulton et al., 2007; Drake et al., 2011; Jonson-Reid, Drake, and Kohl, 2009; Jones Harden and Slopen, 2022; Maguire-Jack, Yoon, and Hong, 2022; Molina, Alegria, and Chen, 2012; Wadsworth et al., 2016). We note that this is the most straightforward of the proposed hypotheses to quantitatively test using available data and statistical techniques and, indeed, this proposition has been tested in a considerable number of rigorous quantitative studies.

The preponderance of evidence indicates that differences in economic resources and associated maltreatment-related “risk factors” are the predominant drivers of racial disparities in CPS involvement. The existing evidence demonstrates two important patterns: (1) that disparities in low-income, poverty, psychosocial challenges, and neighborhood conditions are as large as or larger than disparities in CPS involvement; and (2) that adjusting for such factors substantially attenuates, eliminates, or even reverses the direction of disparities in CPS involvement (Drake et al., 2011; 2023, 2024; Jonson-Reid, Drake, and Kohl, 2009; Putnam-Hornstein et al., 2013; Putnam-Hornstein, Prindle, and Rebbe, 2022). Note that, in interpreting this second finding, it is important to recognize that, if economic scarcity is a *cause* of maltreatment, to which the evidence presented above attests, then accounting for differences in income and associated risk factors between racial groups when estimating racial disproportionality provides evidence that these factors are key mechanisms linking race to CPS involvement. If, however, differences in CPS involvement by economic scarcity and associated risk factors reflect only that lower-income populations face greater surveillance and/or “surveillance bias,” but no greater risk of maltreatment itself, then this strategy implies that racial disparities are explained not by differential risk, but rather by differential surveillance of lower-income populations, in which Black families are overrepresented, or of Black families. Our consideration of the available evidence suggests that it supports the former, rather than the latter, interpretation.

Our review of the literature leads us to three primary conclusions. First, whereas quantitative research has been unable to estimate the magnitudes of the combined effects of historical and contemporary structural racism, discrimination, and bias at the societal level on racial disparities in CPS involvement, it indicates that contemporary differences in “surveillance,” “surveillance bias” among potential reporters, and bias among CPS professionals are not the major drivers of racial disparities in CPS involvement. Yet, in the context of U.S. society, writ large, it would be naïve to expect that these factors are fully absent from reporting and CPS processes. Second, evidence that racial disparities in CPS involvement are driven by reports and investigations, rather than substantiations or foster care placements, suggests that the role of any such biases is more pronounced among potential reporters than among CPS agencies and professionals. Third, the evidence that differences in income and associated risk factors are the primary drivers of racial disparities in CPS involvement is strong and convincing. It is crucial to recognize, however, that this conclusion does not stand in contrast to hypotheses that racial disparities in CPS involvement are driven by historical and contemporary structural racism, bias, and discrimination in U.S. society, nor does it suggest that bias and discrimination are fully absent from mandated or voluntary reports or CPS institutions, professionals, and practices. Rather, it is well established that racial differences in income, poverty, and related risk factors—which the preponderance of rigorous evidence indicates predominantly drive racial disparities in CPS involvement—are the direct result of historical and contemporary structural racism, bias, and discrimination in U.S. society.

IMPLICATIONS OF REDUCING CHILD POVERTY FOR CPS INVOLVEMENT AND RACIAL DISPARITIES THEREIN

Rigorous evidence that income is (probabilistically) *causally* related to child maltreatment and CPS involvement, in concert with compelling evidence that racial disparities in income and associated risk factors for child maltreatment are the predominant (though not necessarily sole) driver of racial disparities in CPS involvement, begs the question of whether reductions in child poverty would likely lead to reductions in CPS involvement and to reductions in racial disparities therein. The best available evidence, here, is provided by a recent microsimulation of the likely effects of three child poverty reduction policy packages proposed in the National Academy of Sciences, Engineering, and Medicine report, *A Roadmap to Reducing Child Poverty* (2019), on CPS investigation rates (Pac et al., 2023). Pac and colleagues (2023) use a two-stage microsimulation approach to first estimate the reduction in the child poverty rate that would be expected if each of three policy packages proposed in the report were implemented and, subsequently, to estimate the resulting expected

reduction in CPS investigations, overall and by race, employing the most rigorous existing estimates of the causal effect of income on CPS involvement. They find that, depending on the policy package enacted and magnitude of the causal effect of income on CPS modeled, the three packages have the potential to reduce child poverty by 33.9% to 46.4% and, subsequently, to reduce CPS investigations by 11.3% to 19.7%. These estimates suggest that reductions in CPS involvement would be roughly 33.3% to 42.5% of the magnitude of reductions in poverty.

Moreover, they find that such reductions in poverty and CPS involvement would disproportionately be concentrated among families of color, families with lower levels of parental educational attainment, and single-parent families, all of which are disproportionately likely to be poor. Considering the Black-White ratio of CPS involvement, for example, they find that White families would experience 6.7% to 13.0% fewer investigations, whereas Black families would experience 18.7% to 28.5% fewer investigations. Given baseline investigation rates of 7.7% for Black families and 3.5% for White families, these estimates indicate that investigation rates would be reduced to 6.3% to 5.5% for Black families and to 3.3% to 3.0% for White families, such that the overall Black-White ratio in investigations would be reduced from 1.91:1 to 1.83:1, compared to a baseline rate of 2.20:1, thereby declining by about 13.2% to 16.8%. These declines are on the order of 38.9% to 36.2% of the magnitude of the associated reductions in poverty for the U.S. population overall.

At the same time, Black families are currently overrepresented in CPS relative to their representation in the U.S. population, at a ratio of 1.8:1. This ratio would be reduced to 1.5:1 to 1.3:1, representing a 16.7% to 27.8% decline in the population overrepresentation rate for Black families. These declines are roughly 49.3% to 59.5% of the magnitude of associated reductions in child poverty for the U.S. population. By comparison, White children are underrepresented in CPS relative to their representation in the U.S. population, at a ratio of 0.72:1. This ratio would decrease to 0.66:1 to 0.63:1 if the proposed child poverty reduction packages were enacted, representing an 8.3% to 12.5% greater population underrepresentation rate for White families. These increases are on the order of 24.5% to 26.9% of the magnitude of the associated reductions in poverty for the U.S. population. Thus, while not a panacea for eliminating CPS investigations or racial disparities therein, reductions in poverty have the potential to substantially reduce both and, especially, to reduce the rate of overrepresentation of Black families in CPS relative to the representation in the U.S. population.

In contextualizing these results, however, it is crucial to consider that the reductions in CPS involvement estimated by Pac and colleagues (2023) reflect only reductions in investigation rates, which will not likely directly translate

to proportionate reductions in substantiation and foster care placement rates.^f Indeed, we suspect that reductions in substantiation and foster care rates associated with reductions in poverty would be smaller in magnitude than reductions in investigation rates because reduced rates of investigation may be concentrated among lower-risk families—those for which economic resources (and not also psychosocial challenges) are the primary factor driving the CPS report—and that such families may be less likely than higher-risk families to have their CPS case elevated to substantiation or child removal. Nonetheless, given that several studies provide direct evidence that income is *causally* related to substantiation and foster care placement (Bullinger, Packham, and Raissian, 2023; Rittenhouse, 2023; Wildeman and Fallesen, 2017), reductions in poverty can be expected to also result in reductions in these events.^g

f As noted by Pac and colleagues (2023), as many as 77,000-106,00 fewer children would be substantiated, and 16,000-23,000 fewer children would be placed in foster care if reductions in substantiation and foster care placement rates were proportionate to those for investigations. However, such reductions are not likely to be disproportionately smaller than those for investigation, which are likely to “disproportionately occur among families whose primary risk factors are economic (rather than psychosocial) in nature and who are at lower baseline risk of substantiation and removal” (p. 76).

g At the same time, it is possible that reductions in investigations due to reductions in poverty may lead to a greater proportion of investigations resulting in substantiation or foster care placement, to the extent that the composition of investigated cases becomes “higher risk,” on average.

Conclusions

Our review of the existing literature linking low-income/poverty and child neglect yields nine general conclusions. We summarize each below.

Conclusion 1. Definitions of neglect (statutory and otherwise) tend to be broad, vague, and require subjective interpretation of parental behaviors on the part of potential reporters and CPS professionals. However, there are efforts in some states, such as California, to establish clearer definitions of neglect (Casey Family Programs, 2024). In addition, definitions of neglect do not, generally, consider parental “intent” as a relevant factor but, in many states, exclude behaviors due solely to “poverty alone.” In our view, adding consideration of parental intent to definitions and assessments of neglect has the potential to increase rather than decrease subjectivity in decision making and, perhaps, biases in assessments, given that gauging “parental intent” is a fundamentally subjective endeavor. Moreover, while there is no compelling evidence that “poverty exclusion” clauses—or mandated reporting policies more generally— influence reporting or CPS worker decision making, determining whether parental behaviors are due solely to poverty “alone,” as opposed to also reflecting associated risk factors and parental decision making, is inherently difficult and subjective.

Conclusion 2. The vast majority of CPS reports result in no ongoing services beyond screening and, potentially, investigation; likewise, most CPS reports do not result in a maltreatment substantiation. There is also evidence that caregiver risks and child outcomes are similar regardless of substantiation status of the maltreatment referral. This does not necessarily indicate, however, that most families are erroneously reported. Indeed, a large proportion of such families are re-reported to CPS, often within a relatively short time period, and many subsequently have a case opened for services. This may reflect conflicting aspects of CPS’s mission. To the extent that CPS is charged with responding to maltreatment that has already occurred, then providing services in unsubstantiated cases may be viewed as overreaching whereas, to the extent that CPS is charged with safeguarding children from future maltreatment, then the provision of services in unsubstantiated cases is appropriate and, perhaps, desirable. Nonetheless, low rates of initial and ongoing service provision by CPS, coupled with evidence indicating both that more than a third of American children experience a CPS investigation by age 18 and that the majority of investigations are for allegations of child neglect, raise reasonable questions as to whether many CPS-involved families might be better served by other systems.

Conclusion 3. Child neglect is by far the most common type of (alleged) maltreatment at all stages of CPS involvement. Moreover, while neglect is closely linked to poverty—and most families referred to CPS are low income or poor—poverty and neglect are not “one-and-the-same.” That is, despite the possibility that neglect and poverty may, in some cases, be conflated in practice, evidence that factors such as substance use, mental health challenges, IPV, and concurrent allegations of physical abuse, sexual abuse, and parental absence or abandonment are present in the vast majority of neglect allegations suggests that poverty is not the “sole” or, perhaps, even primary factor driving neglect-related CPS involvement in most cases. In short, there is no compelling evidence that reporters or CPS professionals consistently fail to differentiate poverty and neglect.

Conclusion 4. Low-income and poor parents tend to make fewer financial, time, and emotional investments in children and, on average, provide lower quality parenting behaviors and caregiving environments than their higher income counterparts. However, it is important to underscore that there is substantial variability in parenting processes among low-income parents, and also that adverse parenting patterns reflect both structural and psychosocial factors that determine parental opportunities and constraints and, in turn, drive income-based differences in parental stress, decision making, and behaviors that are associated with a range of risk factors for child neglect. Although parenting interventions were not addressed herein (see Jones Harden et al., 2022, for a review), such interventions have been found to be effective in promoting positive parenting practices among families from low-income backgrounds, and thus have the potential to reduce child neglect.

Conclusion 5. Rigorous evidence indicates that income is *causally* related to child maltreatment and CPS involvement including, but not limited to, neglect. Experimental and quasi-experimental studies provide consistent evidence that greater family income *results* in a lower probability of child maltreatment, as measured by parental behaviors, CPS involvement (investigations, substantiations, and foster care placements), and child mortality.

Conclusion 6. Large racial disparities at all levels of CPS involvement persist despite substantial declines therein in recent decades. Notably, however, these racial disparities are driven by differentials at the report and investigation stages rather than at the substantiation and foster care placement stages. That is, conditional on being reported, Black children are similarly or slightly less likely than White children to be substantiated or placed in foster care. This suggests that Black-White disparities in CPS involvement are primarily driven by factors outside of CPS itself.

Conclusion 7. Rigorous qualitative evidence indicates that Black families describe their interactions with CPS to be characterized by racism, discrimination, bias, and disrespect, and that they perceive being disproportionately subjected to “surveillance” and “surveillance bias” by potential reporters. These findings provide crucial evidence for understanding how families experience interactions with reporters and CPS professionals. They suggest that current approaches to reporting, engaging, and serving families would benefit from considerable reform and reorientation in order to effectively promote supportive, productive, and trusted collaborations between families and CPS systems to ensure child safety. Yet, it is also important to recognize that qualitative research is neither designed to establish causal relations nor to be representative in nature, such that population-level dynamics cannot be inferred from qualitative findings. As such, the qualitative literature does not inform whether bias on the part of reporters or CPS professionals is a cause of racial disparities in CPS involvement, nor how CPS involvement is ‘typically’ experienced by families.

Conclusion 8. The preponderance of quantitative evidence indicates that concurrent disparities in income and associated maltreatment-related risk factors are the primary (proximal) drivers of racial disparities in CPS involvement. This conclusion does not imply that bias and discrimination are absent from reporting and CPS practices, nor that racial differences in CPS involvement are not influenced by historical and contemporary structural racism, bias, and discrimination in U.S. society and institutions. Indeed, differences in income and related risk factors that drive racial disparities in CPS involvement in the United States have been documented to result from historical and contemporary structural factors reflecting racism, bias, and discrimination.

Conclusion 9. Policies and programs that substantially reduce child poverty are also likely to substantially reduce child maltreatment and CPS involvement, but are not a panacea therefor. The best available evidence suggests that reductions in CPS involvement would be roughly 33% to 43% of the magnitude of reductions in child poverty. Reductions in child poverty also have the potential to considerably reduce, but are unlikely to eliminate, Black-White disparities in CPS involvement, with expected declines in the Black-White investigation ratio likely on the order of roughly 36% to 39% of the magnitude of reductions in child poverty. At the same time, large reductions in child poverty have the potential to markedly reduce the rate of overrepresentation of Black families in CPS relative to their representation in the U.S. population, on the order of 49% to 60% of the magnitude of reductions in child poverty.

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