



HEALTH INFORMATION AND DATA SHARING Issue Brief

Equity Concerns and Recommendations to Support Fair Practices in Sharing and Using Child Welfare Data


Introduction

In recent years, federal, state, and local child welfare agencies have begun to develop data sharing policies and practices to support sharing child welfare data with other agencies.¹ These agencies intend to use data sharing to enhance the government's ability to coordinate and improve the provision of social services. Interagency data sharing often presents concerns and risks related to privacy, but child welfare data in particular presents additional concerns because of the consequences of child welfare involvement, as well as the racial and wealth disparities in the system. Each year, millions of children experience some involvement with state or local child welfare agencies. It is estimated that 37.4 percent of all children, and 53 percent of Black children, are subjected to an investigation by child protective services before turning eighteen.² As agencies continue to consider and implement data sharing practices, they should center equity throughout the process.

This issue brief will explore the relationships between child welfare, public health, data sharing, and racial and income disparities. It will then present five recommendations for agencies, community partnerships, and policy researchers to incorporate into the development of data sharing and use practices to reduce the risk of further perpetuating harm against vulnerable communities.

Public Health and Child Welfare

According to the Administration for Children and Families (ACF), child welfare systems are state and local services tasked with "preventing child abuse and neglect by strengthening families, protecting children from further maltreatment, reuniting children safely with their families, and finding permanent families for children who cannot safely return home."³ However, for many parents, advocates, and experts, system interventions are more comparable to punishment that is better described as family "regulation" or "policing," instead of child protection.⁴ According to the most recent data published by the Children's Bureau of ACF, in 2022 187,000 children entered foster care and a total of 369,000 children were living in foster care.⁵



Investigation, removal, and placement create trauma for children and families. Separation from primary caregivers can be traumatic for someone at any age but can be especially harmful for younger children. Specifically, separation can impact children's resilience to stress, sleep patterns, and ability to fight off illness.⁶ Contact with child protective services is correlated with large and statistically significant negative effects on the likelihood of smoking, internalizing and externalizing behavior, school suspensions or expulsions, and mental health and development, including depression, anxiety, and impulsivity.⁷ Regardless of how long (or briefly) they are separated from their families for, children suffer long-term negative health impacts caused by the experiences of trauma and loss from the removal itself, even if they are reunited within a few days.⁸ Experts in child trauma suggest that, even when parents are not able to meet a child's needs or keep them safe, it is important to maintain these familial relationships for the wellbeing of the child.⁹ Parents and caregivers may experience many of the same traumatic impacts. A 2022 Human Rights Watch study reported that parents describe investigation and monitoring as nerve-wracking, invasive, and humiliating. Interviews from the same study also included that "[p]arents say they feel 'broken,' 'destroyed,' and 'completely shattered and in a perpetual state of grief, trauma and longing' at seeing their children placed in the foster system."¹⁰


Child welfare systems do not affect families equitably. Involvement with child welfare systems is typically initiated by a report of suspected child abuse or neglect, which, in the majority of cases, leads to an investigation of the family to determine whether the report is substantiated.¹¹ Low income families and communities with limited resources often have more exposure to mandated reporters because they have a greater use of social services, which creates a dynamic where communities with higher rates of "poverty are surveilled, scrutinized, and reported more than those with greater resources."¹² Due to historical and ongoing racial biases and discrimination in housing, employment, incarceration, and education, Black children are more likely to grow up in households experiencing poverty.¹³ However, even among families with similar socioeconomic status, Black and Indigenous families are more likely to become involved in the child welfare system than White families.¹⁴ Black children are more likely to be removed from their families, remain separated from their families for longer periods of time, and are less likely to transition out of foster care through reunification or adoption than White children.¹⁵ These racial disparities are the outcome of many compounding factors, including the conflation of poverty and neglect, broad and vague state laws and policies, conscious and unconscious biases of individuals, historical and continued hyper-surveillance of people of color, and structural racism.¹⁶

Child Welfare Agencies and Data Sharing and Use

The collection, use, and disclosure of data in connection with the child welfare system take various forms, which raise different considerations for public health and health equity. For children and youth in the system, sharing their individual data across governmental agencies may support care coordination, access to benefits, and consistent education enrollment. However, other kinds of data sharing and uses, such as mandatory and non-mandatory reporting, certain kinds of research, and the use of predictive analytics, can drive system involvement and reproduce biases that replicate racist outcomes and deepen health disparities. This section lays out some of these different types of data practices in more detail, highlights equity-related concerns, and identifies considerations for mitigating harm.

Motivations for Sharing Child Welfare Data Among Agencies

Advocates of data sharing and enhancing interoperability among governmental agencies highlight the potential for sharing data to better support families and children. For example, de-identified data, such as child welfare,



Medicaid, Temporary Assistance for Needy Families (TANF), behavioral health, or education data, can be shared across agencies to develop and evaluate programs that aim to benefit particular vulnerable populations.¹⁷ Alternatively, at the individual level, data sharing can promote access to health-affirming services. For example, children and youth placed in the foster care system who are eligible for Title IV-E supports are automatically eligible for Medicaid, and sharing eligibility information from child welfare agencies with Medicaid agencies or Managed Care Organizations can help to ensure that children and youth receive timely access to coverage and needed health care.¹⁸

In a 2021 Data Confidentiality Toolkit,¹⁹ ACF outlined situations in which child welfare agencies might share data about individual children and parents to improve health and social outcomes, increase efficiencies, and reduce redundancies:

- Sharing with the TANF and Medicaid systems can make it easier to determine a child's eligibility for Title IV-E foster care maintenance payment;
- Sharing with schools can support school stability and educational improvement for children who are in foster care, or otherwise removed from their homes;
- Sharing with courts can help agencies to find family members that provide child support and create potential kinship care for children placed in out-of-home care;
- Sharing with the juvenile justice system can improve coordination between child welfare case workers and probation officers when applicable; and
- Sharing with mental health and substance use treatment systems and Medicaid programs can help to prevent children in foster care from receiving inappropriate psychotropic medications, to coordinate treatment for a child, their parents, or caregivers, and to access services for a child, parent, or caregiver with a substance use disorder in order to safely prevent the out-of-home placement of a child or to reunify a child.

Evidence-based research conducted by the American Public Human Services Association and Chapin Hall at the University of Chicago finds that increased access to economic and concrete supports, such as public assistance programs, affordable housing, and childcare assistance, is associated with decreased child welfare involvement.²⁰ These findings suggest that providing families with services and supporting economic stability are effective tools to prevent system-involvement. In 2022, ACF published a memorandum emphasizing to state agencies the role of human services in addressing, instead of intensifying, the harm through promoting policies that directly address systemic issues, such as creating task forces focused on addressing disparities or contracting with diverse providers of goods and services.²¹ In response to this urge, federal and state agencies have begun to explore ways to utilize data collected by human services to coordinate connecting families with resources.

Equity Issues in Data Use and Sharing

Despite agencies' intentions to use data to promote equitable outcomes, the racial and socioeconomic disparities in child welfare raise concerns in data use and sharing.²² Administrative data collected by agencies disproportionately includes people living in poverty, and people who are Black, Indigenous, and people of color. Treating the data as race- and class-neutral would be inaccurate and could lead to system-level data use that unintentionally replicates structural racism and other systems of oppression. Alternatively, individual-level use of data can cause personal harm by providing case workers, service providers, teachers, law enforcement, and other government employees with personal information that could lead to biased treatment and/or punitive action and could lengthen system involvement.



Reproduction of Racial Biases

State and local child welfare agencies are increasingly incorporating into their processes predictive analytics tools, i.e., “models that systematically use data collected by jurisdictions’ public agencies to attempt to predict the likelihood that a child in a given situation or location will be maltreated.”²³ However, the tools are developed using historical data that reflects the overrepresentation of Black families reported to child welfare agencies,²⁴ which may continue and increase existing bias.²⁵ Further, the data will not reflect recent and ongoing changes, such as new practices to prevent the conflation of poverty and neglect.²⁶ Some advocates have also expressed concern that administrative data collected by agencies does not and cannot provide case-by-case context required in child welfare matters.²⁷

Proponents of predictive analytics contend that these tools can be used appropriately if steps are taken to directly acknowledge and account for the racial and economic biases in the data. To minimize the effects of race and ethnicity on future decision-making, a Chapin Hall report recommends that agencies “explicitly acknowledge the racial/ethnic disparities, avoid predictor variables that signify potentially biased system responses to children and families, and engage ethics review committees with diverse representation.”²⁸ According to the report, predictive analytics should not replace human judgment; the tool should be used to supplement expertise, clinical judgment, and critical thinking about strengths, needs, and contextual factors.²⁹ However, skeptics of the tools remain concerned that child welfare staff will be influenced by biased results, even when given the ability to override outputs.³⁰ Both proponents and opponents of the use of predictive analytics agree that agencies should prioritize transparency regarding the development and operation of the model.

Surveillance

Many children whose families are investigated live in communities that experience oversurveillance. This often means that, even before interactions with child welfare agencies, children may have witnessed removals by government actors among family members, friends, and neighbors, creating a well-founded fear of police and child protection. This preexisting fear can exacerbate the trauma resulting from family separation.³¹ Further, fear of being reported for neglect creates distrust between families and professionals such as teachers, health care providers, and social service workers, leading families to restrict their participation in government-funded services and resources.³² This distrust of government and fear of exposure to surveillance or policing is a racialized issue because communities of color are inequitably affected by law enforcement action and violence – ultimately making surveillance a barrier to health-supportive services (e.g., Medicaid, harm reduction programs, and food assistance programs) for people of color.³³

Privacy and Confidentiality

Cross-agency data sharing presents concerns related to privacy and confidentiality. The transfer of data increases the risk of data being accessed improperly, for example, through an unauthorized disclosure or security breach.³⁴ The Casey Foundation highlights some of the privacy safeguards that agencies should consider when developing data sharing plans: “ensuring that data are securely stored; limiting the number of fields collected and shared; [l]imiting who can access the data; [o]bscuring birthdates and removing contact information; and] creating new identifiers can help protect personal information.”³⁵ While privacy is a central concern in nearly all data sharing, there is a growing body of research into privacy equity. Elderly, young, and economically disadvantaged people are at greater risk of being targeted by online scammers or attacks when data are breached.³⁶ It is necessary to accurately determine the risk of harm caused by privacy loss to the specific populations about whom data will be stored, used, and shared to ensure proportionate and adequate protections for children and families involved in the child welfare system.



Key Considerations and Recommendations for Advancing Equitable Data Practices

State and local agencies, community initiatives, and policy advocates that are interested in implementing rules and agreements for data sharing between child welfare services and other agencies or community partnerships may minimize the risk and harm of increasing racial and socioeconomic disparities by prioritizing racial equity in the development and use of interagency data sharing processes. Below is a non-exhaustive list of considerations and recommendations to promote equitable data sharing between agencies to better aid families and communities through state- and community-led social supports.

1. Implement community-level data sharing instead of relying on individual data when possible

The Rutgers Institute for Families in the Rutgers University School of Social Work reports aggregate data from the New Jersey Department of Children and Families and other governmental and non-profit sources. This project promotes data transparency and provides opportunities to track and share prevention-related data, while maintaining privacy for individual administrative data.³⁷ This data was used to identify socioeconomic biases in reports of neglect as a priority issue for the New Jersey Task Force on Child Abuse and Neglect Subcommittee on Race, Poverty, and Neglect.³⁸ The subcommittee is developing an initiative to train mandated reporters and educate reporters about support services for families unrelated to allegations of neglect.³⁹

2. Partner with communities in developing data policies and plans⁴⁰

Broward County, Florida serves as an example of a municipality that explicitly adopted racial equity principles in its development of data-sharing systems.⁴¹ Children's Services Council (CSC) of Broward County posed three key components for building an equitable system structure: "[1] a governance structure that includes youth and community advisors, built through participatory action research and community organizing; [2] a new message that sharing data is also about sharing power and seeing each other as partners with assets and expertise, with government workers and the people they serve creating policies and practices together; and [3] inclusive legal agreements and business rules, allowing everyone involved to understand the stakes and their role in the process."

3. Be intentional about what data is collected and how it is collected – record “positive community indicators”⁴²

The Casey Foundation suggests that agencies would benefit from collecting data on positive elements of children's well-being, such as cognitive and physical development, emotional stability, and social connections, as opposed to deficit-based indicators.⁴³

4. Implement a multi-tiered approach to data access

University of Pennsylvania's Actionable Intelligence for Social Policy published a toolkit to advise agencies and communities on ways to employ racial equity principles in data sharing. The toolkit recommends using a multi-tiered approach with a clear delineation of practical and legal availability:

Open data “can be shared openly, either at the aggregate or individual level, based on state and federal law.”

Restricted data “can be shared, but only under specific circumstances with appropriate safeguards in place.”

Unavailable data “cannot or should not be shared, either because of state or federal law, lack of digital format (paper copies only), or data quality or other concerns.”⁴⁴

5. De-couple social services from surveillance

Access to adequate food, housing, and other material resources reduces the likelihood of unnecessary reports to and interactions with child welfare services.⁴⁵ Too often, access to such resources is only instigated in connection with child welfare interventions that tie support to continued surveillance and the threat of family separation.⁴⁶ Surveillance erodes family privacy and reflects suspicion of low income communities and communities of color.⁴⁷ Advocates and activists emphasize the importance of investing in community-based social supports that can promote long-term wellbeing over short-term assistance conditioned on contact with the child welfare system and punitive surveillance.⁴⁸ San Francisco leveraged Medicaid funding to help finance Family Resource Centers, which are community-based resource hubs where families can access formal and informal supports outside of government programs.⁴⁹

Conclusion

Data collected by child welfare agencies or in connection with the receipt of other social services disproportionately includes people living in poverty and, due to structural racism, Black and Indigenous people. Data use and sharing practices should account for these disparities to understand and mitigate additional risks of racialized harm when possible. As federal, state, and local governments embrace interagency data sharing systems as a tool for improving accuracy and efficacy in connecting families with resources, they should engage with and incorporate equitable practices to reduce the risk of perpetuating additional harm to the communities they aim to support.

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⁴⁶ CHILDREN'S RIGHTS, JMACFORFAMILIES & ANGELA OLIVIA BURTON, WELFARE AND CONTROL: THE U.S. CHILD WELFARE SYSTEM (Feb. 2025), <https://www.childrensrights.org/wp-content/uploads/2025/02/2025-UN-Report-Welfare-and-Control-The-U.S.-Child-Welfare-System.pdf> (last visited Apr. 13, 2025).

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