Safety Report
October 1, 2016 – September 30, 2019
(FFY17 – FFY19)

Data and Evaluation
March 2020
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Introduction

The Rhode Island Department of Children, Youth & Families mission is to promote child safety, permanency and well-being. Promoting safety and reducing the probability of child maltreatment is first and foremost. Child maltreatment can have adverse lifelong impacts as evidenced by the Adverse Childhood Experience (See page 4). This report provides information on child maltreatment in RI that can be used in a collaboratively manner by agencies and organizations whose efforts are aimed at promoting safety among children and families throughout the State of RI.

National

Child maltreatment includes all types of abuse and neglect of a child under the age of 18 by a parent, caregiver, or another person in a custodial role (e.g., clergy, coach, teacher). There are four common types of maltreatment.

- Physical Abuse
- Sexual Abuse
- Emotional Abuse
- Neglect

In the United States in the year 2017:

- There were 674,000 victims of child abuse and neglect reported to child protective services (CPS) in 2017.
- The youngest children are the most vulnerable with about 24% of children in their first year of life experiencing victimization.
- CPS reports may underestimate the true occurrence of abuse and neglect. A non-CPS study estimated that 1 in 4 children experience some form of child abuse or neglect in their lifetimes.
- About 1,720 children died from abuse or neglect in 2017.
- The total lifetime cost of child abuse and neglect is estimated at $124 billion each year.

https://www.cdc.gov/violenceprevention/childmaltreatment/index.html

Rhode Island

The rate of child maltreatment in RI in FFY19 was 14.3 per 1,000 children (children less than 18 years old). The majority of child maltreatment nationally and in RI is in the form of neglect. In FFY19 in RI approximately 58.5% of maltreatment was in the form of neglect. Approximately 80% of children in RI who were victims of maltreatment in FFY19 were age 11 and younger and children under the age of 1 had the highest prevalence. This report provides information on RI DCYF Child Protective Services (CPS) investigations, maltreatment, repeat maltreatment and maltreatment in foster care.
Adverse Childhood Experiences (ACEs)

Childhood experiences, both positive and negative, have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As such, early experiences are an important public health issue. Much of the foundational research in this area has been referred to as Adverse Childhood Experiences (ACEs).

The CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) Study is one of the largest investigations of childhood abuse and neglect and later-life health and well-being. The original ACE Study was conducted at Kaiser Permanente from 1995 to 1997 with two waves of data collection. Over 17,000 Health Maintenance Organization members from Southern California receiving physical exams completed confidential surveys regarding their childhood experiences and current health status and behaviors. The CDC continues ongoing surveillance of ACEs by assessing the medical status of the study participants via periodic updates of morbidity and mortality data.

The ACE Pyramid represents the conceptual framework for the ACE Study. The ACE Study has uncovered how ACEs are strongly related to development of risk factors for disease, and well-being throughout the life course. Adverse Childhood Experiences have been linked to:

- risky health behaviors,
- chronic health conditions
- low life potential, and
- early death

![ACE Pyramid](image-url)
**The Building Community Resilience Pair of ACEs**

The pair of ACES tree was illustrated to communicate the relationship between adversity within a family and adversity within a community. Adverse childhood experiences (the leaves) can increase a person’s risk for chronic stress and adverse coping mechanisms, and result in lifelong chronic illness such as depression, heart disease, obesity and substance abuse. Physical or sexual violence, and abuse or neglect are often less obvious but can exist as chronic stressors.

The tree is planted in poor soil that is steeped in systemic inequities, robbing it of nutrients necessary to support a thriving community. Adverse community environments (the roots) such as a lack of affordable and safe housing, community violence, systemic discrimination, and limited access to social and economic mobility compound one another, creating a negative cycle of worsening soil that results in withering leaves.

By addressing ACEs as pairs, we are able to more readily engage diverse stakeholders in developing policy goals – policies that will support efforts to address adversities that are embedded in communities, but have their roots in systems.

https://publichealth.gwu.edu/sites/default/files/downloads/RedstoneCenter/Resource%20Description_Pair%20of%20ACEs%20Tree.pdf
Stats at a Quick Glance

Table 1 provides an overview of RI DCYF Child Protection Service (CPS) contact points with families. The overall aim is to leverage a surveillance system that can readily detect and respond to trends at the system level to better inform interventions aimed at promoting child safety and family well-being.

Percent and Rate of Indicated Maltreatment Trends

If the child and family present an elevated risk or safety concern, a CPS investigation is conducted that results in either an unfounded investigation or indicated investigation. Among families investigated, the percent of children indicated increased slightly over the three years (See Table 1). The rate of indicated child victims increased from FFY17 to FFY19. When a rate increases slightly while the percent decreasing slightly, it can result from a change in the population size as well as in the number of children investigated. The median age of indicated child victims across the 4 Federal Fiscal Years remained relatively consistent.

A goal in maintaining child safety is to mitigate the risk of a recurrence. The U.S. Children’s Bureau measure defines repeat maltreatment as a child indicated within 12 months of a previous indicated maltreatment. In FFY18, 10.2% of children experienced a repeat maltreatment. The median age at the time of the initial maltreatment was 4 years old and the median length of time between the two indicated events was 161 days, just over 5 months.

The number of unique children with a report of maltreatment in foster care decreased from FFY17 to FFY18. Throughout this report, foster care is the Federal definition, all children in an out-of-home placement.

Table 1. Stats at a Quick Glance, by Federal Fiscal Year (FFY).

<table>
<thead>
<tr>
<th>Section 1: Investigations (Maltreatment)</th>
<th>FFY16</th>
<th>FFY17</th>
<th>FFY18</th>
<th>FFY19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of children investigated</td>
<td>7521</td>
<td>7470</td>
<td>10821</td>
<td>9288</td>
</tr>
<tr>
<td>Among children investigated, percent of children indicated</td>
<td>39.2%</td>
<td>41.4%</td>
<td>33.8%</td>
<td>34.3%</td>
</tr>
<tr>
<td>Median age at CPS report for indicated child victims (years)</td>
<td>6.0</td>
<td>5.0</td>
<td>6.0</td>
<td>6.0</td>
</tr>
<tr>
<td>Rate of indicated child victims (per 1,000 children under 18 years old in Rhode Island)</td>
<td>12.8</td>
<td>13.8</td>
<td>16.3</td>
<td>14.3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 2: Repeat Maltreatment*</th>
<th>FFY16</th>
<th>FFY17</th>
<th>FFY18</th>
<th>FFY19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of children who had repeat maltreatment within 12 months of the initial maltreatment</td>
<td>9.7%</td>
<td>11.2%</td>
<td>10.2%</td>
<td></td>
</tr>
<tr>
<td>Median age at initial maltreatment (years)</td>
<td>4.0</td>
<td>5.0</td>
<td>4.0</td>
<td></td>
</tr>
<tr>
<td>Median length of time between initial and repeat maltreatment (days)</td>
<td>158.0</td>
<td>141.0</td>
<td>161.0</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section 3: Maltreatment in Foster Care**</th>
<th>FFY16</th>
<th>FFY17</th>
<th>FFY18</th>
<th>FFY19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of victimizations of maltreatment in foster care</td>
<td>63</td>
<td>80</td>
<td>74</td>
<td></td>
</tr>
<tr>
<td>Number of unique child victims of maltreatment in foster care</td>
<td>59</td>
<td>77</td>
<td>72</td>
<td></td>
</tr>
<tr>
<td>Median age at CPS report (years)</td>
<td>9.0</td>
<td>10.0</td>
<td>7.0</td>
<td></td>
</tr>
</tbody>
</table>

*Unadjusted for age. Children’s Bureau adjust for age at initial victimization.
**At time of report, Children’s Bureau method of bed days calculations had not yet been released – subject to be revised.
Annual Safety Report

Section 1: Investigations (Maltreatment), FFY17-FFY19

Data Presented in Section 1:
The data presented in Section 1 reflect CPS (Child Protection Service) investigations completed during October 1, 2016 – September 30, 2019 (FFY17-FFY19), by federal fiscal year. The data is presented by investigation disposition year, meaning that FFY19 data may include investigations reported in previous years like FFY18 or FFY17 but were completed in FFY19. Children age 18 and older at the time of CPS report are excluded (consistent with Children’s Bureau reporting).
Section 1:
INVESTIGATIONS (MALTREATMENT)

Figure 1. Percent of investigations, by investigation disposition and year.

While the total number of investigations increased from FFY17 to FFY19, the percent of indicated investigations decreased from 37.9% in FFY16 to 31.0% in FFY19.

Data notes:
- Data unduplicated by investigation.
- Investigation level data reflect investigation level findings. A child may have indicated investigation even if all allegations are unfounded due to another child in the same investigation case being indicated.

Data source: RICHIST; data are current as of 10/1/2019.
Rhode Island is a mandatory reporting state wherein any person witnessing or having suspicion of child maltreatment are required to notify RI DCYF. Reporters can be classified into two subpopulations, reporters who are reporting in their professional role, “professional”, and reporters who are reporting not in a professional role, “non-professional”. Over the three years, professionals made a greater percentage of reporter calls associated with indicated investigations compared to unfounded investigations (See Figure 2).

Data notes:
- Data unduplicated by investigation and duplicated by child. Each investigation is counted once, but a child may be counted more than once if had multiple investigations.
- Professional includes reporter type of assistant principal, attendance officer, CPI, child advocate office, child care, child day care center, child day care home, clinic or hospital physician counselor, courts, DCYF attorney, DCYF probation/parole officer, DCYF social worker, DHS personnel, dental professional, Department of Corrections personnel, emergency services personnel, hospital social worker, medical examiner, mental health personnel, nurse (LPN), nurse (RPN), other child care provider, other DCYF staff, other law enforcement personnel, other medical personnel, other school personnel, other social services personnel, police, pre-school/nursery school, principal, private agency social worker, private physician, psychologist, school nurse, school social worker and teacher.
- Non-professional includes reporter type of babysitter, father/father substitute, friend/neighbor, institutional staff personnel, landlord, mother/mother substitute, not noted by report taker, other reporting source, relative or family, sibling and victim.
CPS SCREEN-IN TIME
INVESTIGATIONS (MALTREATMENT), continued

Figure 3. Median and Mean screen-in time, by CPS report type and year.

CPS (Child Protection Service) screen-in time reflects the time between when the CPS report was created by the CPS call floor and the time the CPS supervisor reviews and forwards the report to the Child Protective Investigator (CPI). The current DCYF policy requires emergency reports to be screened within 30 minutes, immediate reports in 120 minutes (2 hours) and routine reports in 240 minutes (4 hours). In FFY19, there was a decrease in the median and mean screen-in times for emergency, immediate, and routine reports (See Figure 3). This decrease can be attributed to the increase in front line staff. In both FFY18 and FFY19 the percent of investigations meeting the DCYF policy on screen-in time met or exceeded 90% (See Figure 4). Median, the middle most count, references the separation of upper-half, longer time to screen versus lower-half, shorter time to screen. Mean is used to determine outliers of times to screen.

Figure 4. Percent of investigations meeting DCYF policy on screen-in time, by CPS report type and year.

Data notes:
- Data unduplicated by investigation and duplicated by child. Each investigation is counted once, but a child may be counted more than once if had multiple investigations.

Data source: RICHIST; data are current as of 10/1/2019.
CPS RESPONSE TIME
INVESTIGATIONS (MALTREATMENT), continued

Figure 5. Median CPS response time, by CPS report type and year.

CPS (Child Protection Service) response time reflects time between the supervisor acceptance of the report and the first attempted, phone or face to face contact with any person in the investigation case. The current DCYF policy requires emergency reports to be responded within 4 hours, immediate reports in 12 hours and routine reports in 48 hours. Adherence to emergency response time was redefined to **within 2 hours** and was implemented on July 1, 2018. In FFY19, there was a decrease in the median and mean response times for routine reports (See Figure 5). This decrease can be attributed to the increase in front line staff. In FFY19, the percent of Immediate investigations meeting the DCYF policy on CPS response time exceed 93% (See Figure 6). Median, the middle most count, references the separation of upper-half, longer time to response versus lower-half, shorter time to response. Mean is used to determine outliers of times to report response.

Figure 6. Percent of investigations meeting DCYF policy on CPS response time, by CPS report type and year.

Data notes:
- Data unduplicated by investigation and duplicated by child. Each investigation is counted once, but a child may be counted more than once if had multiple investigations.
- Data missing (25 in FFY17, 55 in FFY18, and 90 in FFY19) response time are excluded.

Data source: RICHIST; data are current as of 10/1/2019.
Maltreatment can range from neglect to medical neglect, emotional abuse, physical abuse, to sexual abuse. In a single investigation a child may be a victim of more than one type of indicated maltreatment. Over the three years, neglect continued to be the most frequent type of indicated maltreatment, remaining consistent across FFY17-FFY19. (See Figure 7). Emotional abuse was the second most frequent type, 26.5% in FFY17, 34.7% in FFY18, and 34.4% in FFY19. A large proportion of emotional abuse involves domestic violence. The percentages across all maltreatment types remained relatively constant over the three years presented. Congruently, of maltreatment -- as a multi-select variable, 13.4% of individual, indicated investigations had more than 1 type of maltreatment (see appendix Table 2).

Data notes:
- Data shown in investigation level. An investigation may be counted more than once if multiple children indicated in investigation.
- Only the indicated allegations are reflected.
- Percentage may add up to more than 100% because a child may be a victim of multiple maltreatment types.
- NCANDS maltreatment categories may be different from RICHIST categories.
- NCANDS maltreatment type of “other” includes RICHIST allegation types of corporal punishment, inappropriate restraint, other institutional abuse and other institutional neglect under Institutional Abuse & Neglect.
Figure 8. Percent of indicated child victims of maltreatment and population estimate of children under 18 years old in Rhode Island, by race, ethnicity and year.

Over the three years presented, children who are Black or African American or Multiracial are disproportionately represented with indicated maltreatment compared to RI 2018 population estimates from the U.S. 2018 Census estimates. Similarly, children age 0-9 are disproportionately represented with indicated maltreatment, 66.5% in FFY19 compared to comprising 53.2% of the RI population (See Figure 8 and 9).

Data source: U.S. Census 2017, 2018 population estimate by sex, age, race and Hispanic for children under 18.

Data notes:
- Data unduplicated by child. If a child had multiple investigations in a fiscal year, perhaps one indicated and one unfounded, the child is counted once as indicated child victim.
- Children with unknown/missing race and unknown/missing ethnicity are not shown.
Figure 9. Percent of indicated child victims of maltreatment and population estimate of children under 18 years old in Rhode Island, by age group and year.

Data source: U.S. Census 2017, 2018 population estimate by sex, age, race and Hispanic for children under 18.

Data notes:
- Data unduplicated by child. If a child had multiple investigations in a fiscal year, perhaps one indicated and one unfounded, the child is counted once as indicated child victim.
- Children with unknown/missing race and unknown/missing ethnicity are not shown.
While the total number of children investigated increased from FFY17 to FFY19, the percent of children indicated decreased from 41.4% in FFY17 to 34.3% in FFY19.

Data notes:
- Data unduplicated by child. If a child had multiple investigations in a fiscal year, perhaps one indicated and one unfounded, the child is counted once as indicated child victim.
Figure 11. Demographics of indicated child victims of maltreatment, by year. (see Table 1 in appendix)

Total N for FFY17 = 3090; FFY18 = 3656; FFY19=3181

The data represent an unduplicated number of child victims. If a child was indicated more than once within the 12-month period, the child would be counted once. There was relatively no change in the percent of children with indicated maltreatment in gender, race and ethnicity, and age groups across the three years presented. Approximately 1 in 6 children age 17 and younger who are indicated for maltreatment are under the age of 1 years old (Figure 12).

Figure 12. Percent of indicated child victims of maltreatment, by age and year.

Data notes:
- Data unduplicated by child. If a child had multiple investigations in a fiscal year, perhaps one indicated and one unfounded, the child is counted once as indicated child victim.
- Children with unknown/missing age are not shown.

Data source: RICHIST; data are current as of 10/1/2019.
The rate of child maltreatment in RI in FFY18 was 14.3 per 1,000 children (children less than 18 years old). Approximately 10 cities exceeded the RI rate of maltreatment.

Figure 13. Rate of indicated child victims per 1,000 children under 18-year-old in Rhode Island, by family city/county, FFY19. (excluding maltreatment in foster care) (see Table 2 in appendix)
Data Presented in Section 2:
The data presented in Section 2 focus on children under 18 years of age who had indicated maltreatment between October 1, 2015 – September 30, 2018 (FFY16-FFY18) and had a subsequent indicated report within 12 months of their initial. A subsequent indicated report which occurred within 14 days of the initial indicated report is not counted as repeat maltreatment, rather it is seen as additional information on the investigation.

The total number of unique child victims presented in this section is slightly different from the number presented in previous section on maltreatment. Maltreatment section is presented by investigation disposition year whereas repeat maltreatment section is presented by investigation report year. There are 3,656 unique child victims who completed investigation in FFY18 as shown in Section 1. There are 3,471 unique child victims who were reported for investigation in FFY18 and completed investigation in either FFY18 or FFY19 as presented in this section. The exclusion criteria and timeframe used to calculate repeat maltreatment are consistent with Children’s Bureau reporting.

Note: Though the total number of investigations has increased, the proportion of maltreatment has not increased.
Figure 14. Among indicated child victims reported in FFY18, percent who had subsequent indicated investigation, or repeat maltreatment*, within 12 months of the initial report. (N=3471)

Table 2. Among indicated child victims, number and percent who had subsequent indicated investigation, or repeat maltreatment*, within 12 months of the initial report, by year.

<table>
<thead>
<tr>
<th></th>
<th>FFY16 (N=2896)</th>
<th></th>
<th>FFY17 (N=3332)</th>
<th></th>
<th>FFY18 (N=3471)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Repeat maltreatment (Subsequent indicated investigation)</td>
<td>280</td>
<td>9.7%</td>
<td>372</td>
<td>11.2%</td>
<td>354</td>
<td>10.2%</td>
</tr>
<tr>
<td>Subsequent unfounded investigation</td>
<td>296</td>
<td>10.2%</td>
<td>468</td>
<td>14.0%</td>
<td>437</td>
<td>12.6%</td>
</tr>
<tr>
<td>No subsequent investigation</td>
<td>2320</td>
<td>80.1%</td>
<td>2492</td>
<td>74.8%</td>
<td>2680</td>
<td>77.2%</td>
</tr>
</tbody>
</table>

*Repeat maltreatment: report date of the first subsequent indicated investigation falls within 12 months of the initial indicated investigation reported in FFY18.

The number and the percent of children who experienced repeat maltreatment*, decreased from 372 children (11.2%) in FFY17 to 354 children (10.2%) in FFY18.

Data notes:
- Data reflect observed percentage, unadjusted for age. Children’s Bureau adjust for age at initial victimization.
- Data unduplicated by keeping the first indicated report in a fiscal year as the initial. If a child had multiple subsequent investigations within 12 months, the first indicated investigation is counted.
- Subsequent investigations reported within 12 months but have not yet completed as of the last day of next fiscal year are not reflected. (example: for the initial investigation reported in FFY16, only the subsequent investigation reported within 12 months and completed in FFY17 are counted as repeat maltreatment)
- Subsequent indicated investigations occurring within 14 days of the initial indicated investigation are not counted as repeat maltreatment.
In a single investigation a child may be a victim of more than one type of indicated maltreatment. Similar to first indicated maltreatment, neglect continued to be the most frequent type of indicated maltreatment when repeat maltreatment occurred. In repeat maltreatment, emotional abuse continues to be the second most frequent type, 30.2%. A large proportion of emotional abuse involves domestic violence. The percentages across all repeat maltreatment types remained relatively constant compared to initial maltreatment.

Data notes:
- Data shown in investigation level. An investigation may be counted more than once if multiple children indicated in investigation.
- Only the indicated allegations are reflected.
- Percentage may add up to more than 100% because a child may be a victim of multiple maltreatment types.
- NCANDS maltreatment categories may be different from RICHIST categories.
- NCANDS maltreatment type of “other” includes RICHIST allegation types of corporal punishment, inappropriate restraint, other institutional abuse and other institutional neglect under Institutional Abuse & Neglect.
Figure 16. Percent of child victims of repeat maltreatment and population estimate of children under 18 years old in Rhode Island, by race, ethnicity and year.

Figure 16 and 17 compares U.S. Census estimates of children in RI to the proportion of children indicated with repeat maltreatment in FFY17 and FFY18. The data involving repeat maltreatment reveal a different picture than what was observed with indicated maltreatment. In FFY18, there is less disproportionality observed among Hispanic children indicated for repeat maltreatment compared to the disproportionality observed in indicated maltreatment. Children identified as Multiracial were disproportionately represented with repeat maltreatment compared to the proportion of children in RI who are Multiracial in both years presented.
Figure 17. Percent of child victims of repeat maltreatment and population estimate of children under 18 years old in Rhode Island, by age group and year.

Data source: U.S. Census 2016, 2017, 2018 population estimate by sex, age, race and Hispanic for children under 18.

Data notes:
- Data unduplicated by keeping the first indicated report in a fiscal year as the initial. If a child had multiple subsequent investigations within 12 months, the first indicated investigation is counted.
- Children with unknown/missing race and unknown/missing ethnicity are not shown.
Figure 18. Demographics of child victims of repeat maltreatment, by year.

There is relatively equal distribution of repeat maltreatment between females and males and repeat maltreatment is more prevalent among young children. Among children victims of repeat maltreatment, children between the ages of 0-11 were most frequently victimized. In FFY17 84% of the victims were age 0-11 and in FFY18, 86% of the victims were age 0-11 (See Figure 18). Among children of repeat maltreatment, Black Non-Hispanic increased from FFY17 to FFY18. It is important to note this sample size is small and small changes in the number of victims can translate into larger percentage changes. Among child victims of repeat maltreatment age 17 years and younger, approximately 1 in 6 were under the age of 1 year old (See Figure 19).

Figure 19. Percent of child victims of repeat maltreatment, by age and year. (caution in interpreting percentages due to small numbers)

Data notes:
- Data unduplicated by keeping the first indicated report in a fiscal year as the initial. If a child had multiple subsequent investigations within 12 months, the first indicated investigation is counted.

Data source: RICHIST; data are current as of 10/1/2019.
The median length of time to repeat maltreatment increased from 141 days in FFY17 to 161 days in FFY18. In FFY18, about 54% of children who experienced a repeat maltreatment did so within 6 months of the initial indicated maltreatment. In FFY17, about 59% of children did so within 6 months.

*Length of time: number of days between the report date of first indicated maltreatment in FFY17 and the report date of first subsequent indicated maltreatment within 12 months of the initial.

Data notes:
- Data unduplicated by keeping the first indicated report in a fiscal year as the initial. If a child had multiple subsequent investigations within 12 months, the first indicated investigation is counted.
- Subsequent investigations reported within 12 months but have not yet completed as of the last day of next fiscal year are not reflected. (example: for the initial investigation reported in FFY18, only the subsequent investigation reported within 12 months and completed in FFY19 are counted as repeat maltreatment)
- Subsequent indicated investigations occurring within 14 days of the initial indicated investigation are not counted as repeat maltreatment.
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Section 3: Maltreatment in Foster Care (Out-of-Home Placements), FFY16-FFY18

Data Presented in Section 3:
The focus in Section 3 is the occurrence of indicated maltreatment of child victims in foster care in between October 1, 2015 and September 30, 2018 (FFY16-FFY18). NCANDS and AFCARS data are used to indicate child victims of maltreatment in foster care, and RICHIST data extract is used as a supplement to provide details on maltreatment and child victims. Data is presented by investigation report year. For example, FFY18 data includes child victims reported in FFY18 and reached disposition in FFY18 or FFY19. Child victims of maltreatment in foster care who were reported in FFY18 but did not complete investigation by the end of FFY19 are not reflected. The definition of foster care is consistent with the federal definition, any out of home placement including foster homes and congregate care. To stay consistent with the Children’s Bureau Child and Family Services Review (CFSR) Round 3, the following rules are applied in the analysis: Maltreatment reported within 7 days of removal from home are not counted as maltreatment in foster care. Children age 18 and older at the time of CPS report are excluded. A CPS report within 1 day of the previous report is excluded.

The method in which the Children’s Bureau report on maltreatment in foster care changed within the last few of years which impacts both the number of children identified as maltreated in foster care as well as presenting the data as a rate per bed days. In previous methods, the Children’s Bureau classified maltreatment in foster care by the perpetrator rather than using a foster care (Federal Definition, all out-of-home placements) status. For example, the perpetrator needed to be a foster care provider to be considered maltreatment in foster care. Presently, the Children’s Bureau classifies a child maltreated in foster care who had a report of maltreatment 8 days or after a removal and can include any perpetrators. The purpose for providing this explanation is two-fold. First, the data presented in this report applies the updated Children’s Bureau of placement in foster care 8 days or greater subsequent to a report of maltreatment and includes any perpetrator. Secondly, this modified classification may be related to changes in maltreatment in foster care numbers. This report does not include the rate per bed days as the Children’s Bureau is currently finalizing the methodology, although will present this additional information in future reports.
Figure 21. Demographics of indicated child victims of maltreatment in foster care, by year.
Total N for FFY16 = 59; FFY17 = 77; FFY18= 72

Data notes:
- Data unduplicated by child. A child victim of maltreatment in foster care counted once.

By gender, the percent of male victims increased from FFY17 to FFY18. Among child victims, White Non-Hispanic and Black Non-Hispanic racial groups increased from FFY17 to FFY18, whereas Hispanic (any race) and Multiracial Non-Hispanic decreased. Among child victims, the percent of children age 0-5 increased from FFY17 to FFY18, while the the percent of children age 6-11 and 12-16 decreased the same during the same time period.
Figure 22. Percent of maltreatment types of indicated investigations in a foster care setting, by year.

Over the three years presented, the most frequent type of indicated maltreatment in foster care was “neglect” and “other”. In FFY16, 46% of maltreatment in foster care was “other” followed by 47.9% “neglect”. In FFY17, 35.0% of maltreatment in foster care was “neglect” followed by 42.5% “other” whereas in FFY18, 23.0% of maltreatment in foster care was “other” followed by 55.4% “neglect”.

Data notes:
- Data shown in investigation level. An investigation may be counted more than once if multiple children indicated in investigation.
- Only the indicated allegations are reflected.
- Percentage may add up to more than 100% because a child may be a victim of multiple maltreatment types.
- NCANDS maltreatment categories may be different from RICHIST categories.
- NCANDS maltreatment type of “other” includes RICHIST allegation types of corporal punishment, inappropriate restraint, other institutional abuse and other institutional neglect under Institutional Abuse & Neglect.
In FFY18, the most prevalent perpetrator relationship is non-relative foster parent (35.1%), followed by relative foster parent (25.7%). From FFY16 to FFY18, group home or residential staff perpetrator relationship decreased from 34.9% to 16.2%, while non-relative foster parent perpetrator relationship increased from 11.1% to 35.1%.

It is important to note factors that may influence these percentages that are unrelated to the perpetrator relationship. For example, young age is associated with increased risk for child maltreatment. There are more young children in foster family settings compared to congregate care settings. Another is the proportion of children in the placement setting. There are more children in foster families compared to children in congregate care.

Data notes:
- Data shown in investigation level. An investigation may be counted more than once if multiple children indicated in investigation.
- Percentage may add up to more than 100% because a child may have had multiple allegations and/or multiple perpetrators for each allegation.
- Other/unknown includes NCANDS perpetrator relationship of other professionals, friends or neighbors, other and unknown or missing.
- Only the perpetrator relationship to indicated allegations in foster care are reflected.
WHERE IN FOSTER CARE
MALTREATMENT IN FOSTER CARE, continued

Figure 24. The percent of indicated investigations in foster care (out-of-home placement), across placement types, by year.

Figure 23 presents the distribution of indicated investigations in foster care across placement types to better understand the distribution and design tailored interventions to mitigate the risk of maltreatment in foster care. For both congregate care and relative kinship, the percent of maltreatment decreased from FY17 to FY18. The percent of maltreatment increased in not kinship settings from FY17 to FY18. It is important to note there are more children placed in foster family settings compared to congregate care. Percent of children in foster family settings has increased across this time period, for example in FY18 73.0% of children were in out of home settings with foster families. Among children with foster families, approximately 44.4% are in relative kinship foster families.

Data notes:
- Data shown in investigation level. An investigation may be counted more than once if multiple children indicated in investigation.
- Congregate care includes placement type of group homes, assessment and stabilization center, medical hospital, psychiatric hospital, residential facility and substance abuse facility.
- Other includes placement type of absent from care, independent living and RITS.

Data source: RICHIST; data are current as of 10/1/2019.
Figure 25. Rate of children indicated maltreatment per 1,000 children by placement types in foster homes, by all out of home placement at RI DCYF, FFY18

Data notes:
- Data unduplicated at the child level
- See to appendix figures 1 and 2 for rates of congregate care and foster family settings of children indicated maltreatment per 1,000 children in out of home placement types

Data source: RICHIST; data are current as of 10/1/2019.
MALTREATMENT IN FOSTER CARE PLACEMENT TYPES

MALTREATMENT IN FOSTER CARE, continued

Figure 26. Percent of children with indicated maltreatment in foster care, placement types within congregate care and foster family settings at DCYF FFY18

In FFY18, the below are counts in the defined out of home placement type and indicated for maltreatment in foster care:

Congregate Care:
- 6 children were in a Residential Facility
- 12 children were in a Group Home
- 1 child was in Assessment and Stabilization

Foster Family:
- 24 children were in a Relative Kinship foster home
- 28 children were in a Non-Kinship foster home
- 1 child were in a Non-Relative Kinship foster home

High percentages of children indicated with maltreatment may be a function of greater numbers of children in not kinship and group home placements in comparison to other out of home placement types.

Data notes:
- Data unduplicated at the child level
- See to appendix figures 1 and 2 for rates of congregate care and foster family settings of children indicated maltreatment per 1,000 children in out of home placement types

Data source: RICHIST; data are current as of 10/1/2019.
Maltreatment can range from neglect to medical neglect, emotional abuse, physical abuse, institutional/other to sexual abuse. In a single investigation a child may be a victim of more than one type of indicated maltreatment. Neglect is the most frequent type of indicated maltreatment in Foster Families, while institutional/other is most frequent type of indicated maltreatment in Congregate Care. Percentage may add up to more than 100% because a child may be a victim of multiple maltreatment types.

Figure 28. Median and Mean age of children with an indicated maltreatment in foster care, family versus congregate care FFY18

Data notes:
- Data unduplicated at the child level
- NCANDS maltreatment type of “other” includes RICHIST allegation types of corporal punishment, inappropriate restraint, other institutional abuse and other institutional neglect under Institutional Abuse & Neglect.

Data source: RICHIST; data are current as of 10/1/2019.

RI Department of Children, Youth & Families
Data and Evaluation Unit
Figure 29. Median length of time (LOT) in days from removal to indicated maltreatment and from placement* start date to indicated maltreatment, foster family versus congregate care FFY18

The focus of this subsection is to: evaluate the differences in length of time to indicated maltreatment in comparing two out of home placement types (i.e., foster families versus congregate care). Removal to maltreatment and placement to maltreatment times were calculated. Maltreatment was defined by CPS report date of an indicated investigation. Placement was defined by where the maltreatment occurred.

Among children in congregate care, the median length of time from removal to indicated maltreatment was 243 days. While the median length of time from placement start to indicated maltreatment was 58 days. This suggests most indicated maltreatment occurred post-first placement.

Data notes:
- Data unduplicated at the child level
- Use of incident date versus report date as the definition of maltreatment date was evaluated – decision to define maltreatment by report date
*Placement where maltreatment occurred
Table 3. Count and percentage of children indicated maltreatment (FFY18-FFY19), by total relative kinship foster home types and report year in FFY18-FFY19 (N=59)

<table>
<thead>
<tr>
<th>Children in Licensed Relative Kinship Foster Home</th>
<th>Children in Pending License Relative Kinship Foster Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFY18 (N=1877) N (%)</td>
<td>FFY19 (N=1855) N (%)</td>
</tr>
<tr>
<td>Indicated Maltreatment</td>
<td>Indicated Maltreatment</td>
</tr>
<tr>
<td>25 (1.3%)</td>
<td>28 (1.5%)</td>
</tr>
<tr>
<td>1 (0.14%)</td>
<td>5 (0.8%)</td>
</tr>
</tbody>
</table>
Recommendations by Licensing:

Related to increase of Neglect on page 27:

- Increase foster family access to clinical and nonclinical support services (such as support groups and improved daily maintenance payments). *(this also directly connects to CFSR 2.3)*

Related to increase of Not kinship indications on page 29 AND assertion on page 33 related to maltreatment occurring post first placement:

- Implement an Active Contract Management Model with contracted private agencies, an add the Department’s traditional home as another measure in analysis to determine patterns related to this increase in maltreatment. *(this also directly connects to CFSR 2.3)*, and to focus on stability of children’s first placement.
- Conduct a training with internal and private agency staff on the themes related to maltreatment, specifically areas of neglect, to support the identification of risk factors.
- Use private agency resources to implement process to ensure ongoing monitoring in foster homes, and Department resources to increase oversight of foster homes.

Related to congregate care indications (across the board), and increase of Sexual Abuse indications on page 27, and congregate care rates of sexual abuse indicates on page 32:

- Implement multi-disciplinary comprehensive Congregate Care Reviews, with representatives from the three oversight divisions Contracts and Compliance, Licensing, Community Services and Behavioral Health, using additional data from Child Protective Services to help inform focus areas.
**APPENDIX**

Table 1. Demographics of indicated child victims of maltreatment, by year.

<table>
<thead>
<tr>
<th></th>
<th>FFY17 (N=3090)</th>
<th>FFY18 (N=3656)</th>
<th>FFY19 (N=3181)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>1537 (49.7%)</td>
<td>1826 (49.9%)</td>
<td>1562 (49.1%)</td>
</tr>
<tr>
<td>Male</td>
<td>1545 (50.0%)</td>
<td>1820 (49.8%)</td>
<td>1604 (50.4%)</td>
</tr>
<tr>
<td>Unknown/missing</td>
<td>8 (0.3%)</td>
<td>10 (0.3%)</td>
<td>15 (0.5%)</td>
</tr>
<tr>
<td><strong>Race and Ethnicity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black Non-Hispanic</td>
<td>347 (11.2%)</td>
<td>365 (10.0%)</td>
<td>354 (11.1%)</td>
</tr>
<tr>
<td>Hispanic (any race)</td>
<td>832 (26.9%)</td>
<td>876 (24.0%)</td>
<td>726 (22.8%)</td>
</tr>
<tr>
<td>Multiracial/other Non-Hispanic</td>
<td>295 (9.6%)</td>
<td>291 (8.0%)</td>
<td>268 (8.4%)</td>
</tr>
<tr>
<td>White Non-Hispanic</td>
<td>1442 (46.7%)</td>
<td>1604 (43.8%)</td>
<td>1342 (42.2%)</td>
</tr>
<tr>
<td>Unknown/missing</td>
<td>174 (5.6%)</td>
<td>520 (14.2%)</td>
<td>490 (15.4%)</td>
</tr>
<tr>
<td><strong>Age at CPS report</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-5 years</td>
<td>1566 (50.7%)</td>
<td>1745 (47.7%)</td>
<td>1459 (45.9%)</td>
</tr>
<tr>
<td>6-11 years</td>
<td>957 (31.0%)</td>
<td>1194 (32.7%)</td>
<td>1021 (32.1%)</td>
</tr>
<tr>
<td>12-16 years</td>
<td>514 (16.6%)</td>
<td>636 (17.4%)</td>
<td>625 (19.7%)</td>
</tr>
<tr>
<td>17 years</td>
<td>51 (1.7%)</td>
<td>80 (2.2%)</td>
<td>74 (2.3%)</td>
</tr>
<tr>
<td>Unknown/missing</td>
<td>2 (0.1%)</td>
<td>1 (0.0%)</td>
<td>2 (0.1%)</td>
</tr>
<tr>
<td><strong>Median age at CPS report (years)</strong></td>
<td>5.0</td>
<td>6.0</td>
<td>6.0</td>
</tr>
</tbody>
</table>

Data notes:
- Data unduplicated by child. If a child had multiple investigations in a fiscal year, perhaps one indicated and one unfounded, the child is counted once as indicated child victim.
## Table 2. Maltreatment types as a multi-select variable (cross first selected maltreatment type by additional selected maltreatment type of an individual indicated investigation), FFY18-FFY19.

<table>
<thead>
<tr>
<th>First Selected Maltreatment Type with an additional selected maltreatment</th>
<th>Additional Selected Maltreatment Type (N=1043)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
</tr>
<tr>
<td><strong>Neglect (N=649)</strong></td>
<td></td>
</tr>
<tr>
<td>Medical Neglect</td>
<td>50</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>50</td>
</tr>
<tr>
<td>Emotional Maltreatment</td>
<td>547</td>
</tr>
<tr>
<td><strong>Physical Abuse (N=389)</strong></td>
<td></td>
</tr>
<tr>
<td>Neglect</td>
<td>298</td>
</tr>
<tr>
<td>Medical Neglect</td>
<td>0</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>15</td>
</tr>
<tr>
<td>Emotional Maltreatment</td>
<td>74</td>
</tr>
<tr>
<td><strong>Sexual Abuse (N=5)</strong></td>
<td></td>
</tr>
<tr>
<td>Emotional Maltreatment</td>
<td>5</td>
</tr>
</tbody>
</table>

**Data notes:**
- “Other” as an additionally selected maltreatment type excluded due to low count (N=5)
Table 3. Number and Percent of Allegations of indicated child victims of maltreatment, by year.

<table>
<thead>
<tr>
<th></th>
<th>FFY18 (N=4399)</th>
<th>%</th>
<th>FFY19 (N=3595)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Abuse (N=1317)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excessive/Inappropriate Discipline</td>
<td>293</td>
<td>40.1%</td>
<td>230</td>
<td>39.3%</td>
</tr>
<tr>
<td>Drug/Alcohol Abuse</td>
<td>221</td>
<td>30.2%</td>
<td>180</td>
<td>30.7%</td>
</tr>
<tr>
<td>Cut, Bruise, Welt</td>
<td>183</td>
<td>25.0%</td>
<td>145</td>
<td>24.7%</td>
</tr>
<tr>
<td>Tying/Close Confinement</td>
<td>9</td>
<td>1.2%</td>
<td>10</td>
<td>1.7%</td>
</tr>
<tr>
<td>Human Bite</td>
<td>2</td>
<td>0.3%</td>
<td>5</td>
<td>0.9%</td>
</tr>
<tr>
<td>Bone Fracture</td>
<td>1</td>
<td>1.5%</td>
<td>3</td>
<td>0.5%</td>
</tr>
<tr>
<td>Other Abuse</td>
<td>3</td>
<td>0.4%</td>
<td>2</td>
<td>0.3%</td>
</tr>
<tr>
<td>Malnutrition/Starvation</td>
<td>0</td>
<td>0.0%</td>
<td>1</td>
<td>0.2%</td>
</tr>
<tr>
<td>Subdural Hematoma</td>
<td>2</td>
<td>0.3%</td>
<td>2</td>
<td>0.3%</td>
</tr>
<tr>
<td>Burn/Scalding</td>
<td>1</td>
<td>0.1%</td>
<td>2</td>
<td>0.3%</td>
</tr>
<tr>
<td>Brain Damage/Skull Fracture</td>
<td>2</td>
<td>0.3%</td>
<td>2</td>
<td>0.3%</td>
</tr>
<tr>
<td>Sprain/Dislocation</td>
<td>1</td>
<td>0.1%</td>
<td>1</td>
<td>0.2%</td>
</tr>
<tr>
<td>Internal Injury</td>
<td>1</td>
<td>0.1%</td>
<td>1</td>
<td>0.2%</td>
</tr>
<tr>
<td>Abandonment</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Death</td>
<td>0</td>
<td>0.0%</td>
<td>2</td>
<td>0.3%</td>
</tr>
<tr>
<td>Neglect (N=4305)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of Supervision/Caretaker</td>
<td>1426</td>
<td>60.3%</td>
<td>1278</td>
<td>65.9%</td>
</tr>
<tr>
<td>Other Neglect</td>
<td>523</td>
<td>22.1%</td>
<td>327</td>
<td>16.9</td>
</tr>
<tr>
<td>Lack of Supervision/No Caretaker</td>
<td>197</td>
<td>8.3%</td>
<td>164</td>
<td>8.5%</td>
</tr>
<tr>
<td>Inadequate Shelter</td>
<td>102</td>
<td>4.3%</td>
<td>106</td>
<td>5.5%</td>
</tr>
<tr>
<td>Cut, Bruise, Welt</td>
<td>34</td>
<td>1.4%</td>
<td>17</td>
<td>0.9%</td>
</tr>
<tr>
<td>Educational Neglect</td>
<td>31</td>
<td>1.3%</td>
<td>20</td>
<td>1.0%</td>
</tr>
<tr>
<td>Drug/Alcohol Abuse</td>
<td>12</td>
<td>0.5%</td>
<td>4</td>
<td>0.2%</td>
</tr>
<tr>
<td>Burn/Scalding</td>
<td>6</td>
<td>0.3%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Inadequate Food</td>
<td>2</td>
<td>0.1%</td>
<td>2</td>
<td>0.1%</td>
</tr>
<tr>
<td>Tying/Close Confinement</td>
<td>3</td>
<td>0.1%</td>
<td>2</td>
<td>0.1%</td>
</tr>
<tr>
<td>Death</td>
<td>1</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Bone Fracture</td>
<td>2</td>
<td>0.1%</td>
<td>2</td>
<td>0.1%</td>
</tr>
<tr>
<td>Emotional Neglect</td>
<td>4</td>
<td>0.2%</td>
<td>9</td>
<td>0.5%</td>
</tr>
<tr>
<td>Abandonment</td>
<td>0</td>
<td>0.0%</td>
<td>4</td>
<td>0.2%</td>
</tr>
<tr>
<td>Brain Damage/Skull Fracture</td>
<td>1</td>
<td>0.0%</td>
<td>1</td>
<td>0.0%</td>
</tr>
<tr>
<td>Excessive/Inappropriate Discipline</td>
<td>3</td>
<td>0.1%</td>
<td>1</td>
<td>0.0%</td>
</tr>
<tr>
<td>Subdural Hematoma</td>
<td>2</td>
<td>0.1%</td>
<td>1</td>
<td>0.0%</td>
</tr>
<tr>
<td>Human Bite</td>
<td>0</td>
<td>0.0%</td>
<td>1</td>
<td>0.0%</td>
</tr>
<tr>
<td>Internal Injury</td>
<td>0</td>
<td>0.0%</td>
<td>1</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other Abuse</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Poisoning/Noxious Substances</td>
<td>1</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Sprain/Dislocation</td>
<td>1</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Wound</td>
<td>1</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Medical Neglect (N=52)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>22</td>
<td>0.5%</td>
<td>30</td>
<td>0.8%</td>
</tr>
<tr>
<td>Sexually Transmitted Disease</td>
<td>22</td>
<td>100.0%</td>
<td>30</td>
<td>100.0%</td>
</tr>
<tr>
<td>Sexual Exploitation</td>
<td>12</td>
<td>6.6%</td>
<td>3</td>
<td>2.3%</td>
</tr>
<tr>
<td>Sexual Intercourse</td>
<td>60</td>
<td>33.2%</td>
<td>41</td>
<td>30.8%</td>
</tr>
<tr>
<td>Sexual Molestation</td>
<td>108</td>
<td>59.7%</td>
<td>89</td>
<td>55.9%</td>
</tr>
<tr>
<td>Sexual Abuse (N=314)</td>
<td>181</td>
<td>4.1%</td>
<td>133</td>
<td>3.7%</td>
</tr>
</tbody>
</table>

Data source: RICHIST; data are current as of 10/1/2019.
RI Department of Children, Youth & Families Data and Evaluation Unit
<table>
<thead>
<tr>
<th></th>
<th>Emotional Maltreatment (N=1916)</th>
<th>Other (N=90)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1063</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>24.2%</td>
<td>0.8%</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>1055</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>99.3%</td>
<td>62.2%</td>
</tr>
<tr>
<td>Emotional Abuse</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other Emotional abuse</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other (N=90)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Institutional Neglect</td>
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<td>37</td>
</tr>
<tr>
<td></td>
<td>62.2%</td>
<td>0.8%</td>
</tr>
<tr>
<td>Inappropriate Restraint</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>18.9%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Corporal Punishment</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>8.1%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other Institutional Abuse</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>8.1%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Data notes:
- Data duplicated by child - if a child had multiple allegations indicated for a single investigation OR an investigation had multiple children
- Missing N=88

Data source: RICHIST; data are current as of 10/1/2019.

RI Department of Children, Youth & Families
Data and Evaluation Unit
Table 4. Number and Percent of Allegations of indicated child victims of repeat maltreatment, FFY18.

<table>
<thead>
<tr>
<th>Category</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
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<tr>
<td>Lack of Supervision/Caretaker</td>
<td>195</td>
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</tr>
<tr>
<td>Other Neglect</td>
<td>40</td>
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</tr>
<tr>
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</tr>
<tr>
<td><strong>Sexual Abuse</strong></td>
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</tr>
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<td>Sexual Molestation</td>
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<td><strong>Other</strong></td>
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<tr>
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<tr>
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</table>

Data notes:
- Data duplicated by child - if a child had multiple allegations indicated for a single investigation OR an investigation had multiple children.
## APPENDIX

Table 5. Rate of indicated child victims per 1,000 children under 18-year-old in Rhode Island, by family city/town and year.

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<th>FFY19</th>
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<td>-----------</td>
<td>----------------------------------</td>
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<tr>
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<tr>
<td>3</td>
<td>Central Falls</td>
<td>144</td>
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<tr>
<td>4</td>
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Data source: RICHIST; data are current as of 10/1/2019.

RI Department of Children, Youth & Families
Data and Evaluation Unit
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<tr>
<th>Rank</th>
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<th>Number of indicated child victims</th>
<th>Rate of indicated child victims (per 1,000 children under 18 in RI)</th>
<th>Rank</th>
<th>Case Town</th>
<th>Number of indicated child victims</th>
<th>Rate of indicated child victims (per 1,000 children under 18 in RI)</th>
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</tr>
</tbody>
</table>


Data note:
- Data unduplicated by child. If a child had multiple investigations in a fiscal year, perhaps one indicated and one unfounded, the child is counted once as indicated child victim.
- Excluded child victims with unknown or out of state case address.
- Excluded child victims of maltreatment in foster care.