



Risk assessment in child welfare¹

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What is risk assessment?

Risk assessment is used to estimate the chances that a particular negative event will occur. In child welfare, risk assessment is used to determine the likelihood of future abuse or neglect, so that action can be taken to prevent it.

Why structured risk assessment?

Social workers have always assessed risk for future maltreatment as part of their work, by using their clinical judgment and experience. Structured risk assessment has been promoted to improve accuracy and consistency in identifying children at high risk for severe future maltreatment. Severe maltreatment typically refers to acts that endanger the physical health and safety of a child, and may include sexual abuse.

Structured risk assessment provides a uniform way for social workers to collect and organize case information relevant to risk. This means that all workers collect and consider the same information, and record it in a consistent fashion. Structured risk assessment instruments are designed to guide clinical judgment, not replace it.

There are two types of risk assessment tools. Consensus-based instruments use expert clinical judgment to determine which client characteristics should be assessed. Two commonly used consensus-based instruments are the Washington Risk Assessment Matrix and the California Family Assessment Factor Analysis.² Actuarial-based instruments, on the other hand, provide the client characteristics to be assessed, based on research showing a strong statistical relationship with future maltreatment. The most widely used actuarial-based instrument is the Michigan Structured Decision Making (SDM) System's Family Risk Assessment of Abuse and Neglect.²

How does structured risk assessment differ from other types of assessment?

The kind of information collected in risk assessment relates specifically to the likelihood of future harm and is more narrowly focused than some other types of assessment such as comprehensive child and family assessments. Risk assessment does not necessarily provide the information that addresses broader aspects of child well-being. Nor does it provide information about the long-term needs of children and families.

Risk assessment is related to, but not identical to, safety assessment. Safety assessment focuses on the risk of severe harm in the immediate future so that short term decisions can be made. For children who are considered unsafe, the possibility of severe harm occurring is too great to leave them in that situation. Emergency removal of a child may be required until the family situation is stabilized and a more complete assessment can be conducted. Risk assessment, on the other hand, considers the likelihood that severe maltreatment will occur over the longer term.

How is risk measured?

Risk assessment instruments measure specific risk factors such as:

- nature and severity of previous maltreatment
- characteristics of the family environment (e.g., domestic violence)
- caregiver characteristics (e.g., substance abuse)
- child characteristics (e.g., age, problem behaviour).

Some children in a family may be at higher risk for maltreatment because of such things as their age, gender, or disabilities. Each risk factor is given a rating and social workers

consider the combination of ratings to assess overall risk. This overall risk is generally classified into levels such as low, moderate, and high.

Since risk assessment provides a systematic way for documenting risk, it is used in making decisions about the type and intensity of services required. Accuracy in assessing risk is crucial to ensure that needed services are allocated and appropriate action is taken.

Concerns about risk assessment

1. Risk assessment is narrow in scope

The current focus on risk assessment provides information that is only relevant to address child protection concerns, without adequate attention to promoting child well-being. Critics argue that insufficient attention is given to the needs of the majority of maltreated children who are not likely to be physically endangered, but who are, nonetheless, at risk for a variety of long term social, emotional, and behavioural problems. For example, the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) found that 96% of all cases of reported maltreatment did not result in “serious” physical harm that required medical attention.³ Critics advocate for a system that recognizes and addresses a broader range of child needs.

2. The accuracy of risk assessment is not well established

Accuracy is thought to be enhanced because risk assessment instruments are evidence-based. That is, the information that is gathered as part of the risk assessment is based on research evidence that certain family and child characteristics are associated with high risk of serious maltreatment in the future.

Research suggests that professionals in other fields make more accurate judgments about risk level when guided by risk assessment instruments, rather than clinical judgment alone.⁴ However, the validity and reliability of commonly used child maltreatment risk assessment instruments have not been sufficiently evaluated. Though there have been some positive findings for some instruments,^{2,5,6} research has not consistently shown that the accuracy (validity) of child welfare workers’ judgments about risk is improved by standardized risk assessment. It is also unclear whether workers using these tools are consistent in their judgments about risk (reliability). We do not know, for example, if two workers would assign the same risk level for a particular child. Yet the risk level assigned by a single worker often determines services received.

In addition, no single risk assessment tool is yet widely accepted. Across jurisdictions, the number of items included in risk assessment instruments varies from 6 to over 40.⁷ Thus, there is no consensus about what elements are required to accurately assess risk.

Conclusion

Better tools and clinical training are needed to help child welfare workers improve the accuracy of their assessments of situations where children are at high risk of severe harm because of abuse or neglect. Although structured risk assessment has been shown in other fields to hold promise, a more extensive and systematic approach to the development and testing of child maltreatment risk assessment tools is needed to support child welfare practice.

CECW research initiatives

Several risk assessment research initiatives are underway at the University of Toronto site of the Centre of Excellence for Child Welfare, including a validation study of the Ontario Risk Assessment Model (ORAM) instrument (Barber & Trocmé), analysis of the relationship between ORAM and placement decisions (Knoke, Trocmé, Goodman & Leslie) and a Social Sciences and Humanities Research Council Strategic Cluster Grant to establish an evidence-based model for risk assessment in child welfare. (Regehr, Trocmé, Barber, Hart & Tourigny).

1 This information sheet was peer reviewed by experts in the field of child welfare.

2 Baird, C., & Wagner, D. (2000). The relative validity of actuarial- and consensus-based Risk Assessment Systems. *Children and Youth Services Review*, 22 (11/12), 839-871.

3 Trocmé, N., MacLaurin, B., Fallon, B., Daciuk, J., Billingsley, D., Tourigny, M., et al. (2001). *Canadian incidence study of reported child abuse and neglect: Final report*. Ottawa, ON: Minister of Public Works and Government Services Canada

4 Dawes, R.M., Faust, D., & Meehl, P.E. (1989, March 31). Clinical versus actuarial judgment. *Science*, 243 (4899), 1668-1674.

5 Leschied, A.W., Chiodo, D., Whitehead, P.C., Hurley, D., & Marshall, L. (2003). The empirical basis of risk assessment in child welfare: The accuracy of risk assessment and clinical judgment. *Child Welfare*, 82(5), 527-540.

6 Baird, C., Wagner, D., Healy, T., & Johnson, K. (1999). Risk assessment in child protective services: Consensus and actuarial model reliability. *Child Welfare*, 78(6), 723-748.

7 Rycus, J.S., & Hughes, R.C. (2003). *Issues in Risk Assessment in Child Protective Services: Policy White Paper*. Available from the North American Resource Centre for Child Welfare website, <http://www.narccw.com>.

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