



**CONSORTIUM FOR CITIZENS
WITH DISABILITIES**

May 11, 2007

The Honorable Tom Harkin
Chair
Subcommittee on Labor, HHS and Education
Committee on Appropriations
U.S. Senate
Washington, D.C. 20510

The Honorable Arlen Specter
Ranking Member
Subcommittee on Labor, HHS and Education
Committee on Appropriations
U.S. Senate
Washington, D.C. 20510

Dear Chairman Harkin and Ranking Member Specter:

As members of the Consortium for Citizens with Disabilities, we are writing to urge funding in the FY08 Labor, HHS and Education Appropriations Bill for programs authorized under the ***Child Abuse Prevention and Treatment Act (CAPTA)*** CAPTA basic state grants at \$84 million for strengthening states' child protection systems, CAPTA Title II community-based prevention grants funding at \$80 million, and CAPTA discretionary research and demonstration grants at \$36 million, as the President's budget proposes. We are also writing to ask for an increase in funds to \$725 million for ***Part C of IDEA*** to meet requirements in the CAPTA 2003 amendments. CCD is a coalition of approximately 100 national disability organizations working together to advocate for national public policy that ensures the self determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society.

The link between child abuse and neglect and disability is harrowing. HHS reports 900,000 children abused and neglected in the U.S. An estimated 1,500 children die of abuse or neglect each year; children under age 4 account for three-quarters of these fatalities. Near-fatal child maltreatment leaves another 18,000 children permanently disabled each year. Without adequate family support, these victims of near-fatal child maltreatment, along with all other children with disabilities, are 3.76 times more likely to be victims of neglect, 3.79 times more likely to be physically abused, 3.88 times more likely to experience emotional abuse, and 3.14 times more likely to be sexually assaulted than children without disabilities.

In addition, child maltreatment has been shown to be a significant cause of serious disability in children. The National Center on Child Abuse and Neglect determined that 36.6 percent of the substantiated cases of maltreatment in a 1993 study sample caused disabilities. A 2006 study by United Cerebral Palsy and Children's Rights found that at least one-third of children in foster care in the US have disabilities, ranging from minor developmental delays to significant mental and physical disabilities. The study included evidence that the special needs of this population are not being met in foster care systems and that these children experience worse outcomes than other children in foster care.

CAPTA Title I currently provides the only source of federal dollars dedicated solely to improving the CPS system to ensure that serious allegations of child abuse and neglect are thoroughly investigated and that every child and family in a confirmed case of abuse or neglect actually receives services. However, average caseloads for child protection workers are double the recommended caseload. Many child maltreatment victims (43%) receive no

treatment or services. Significant increases are needed in Title I to immediately correct this unacceptable reality and prevent further harm and disability to children.

At the same time, we need to focus on preventing the horrors of child abuse and neglect. Annual direct costs of child abuse and neglect in the U.S. total over \$24 billion in hospitalizations, chronic health and mental health care, child welfare services, law enforcement, and courts. Indirect costs from special education, other health and mental health care, crime, and lost productivity, total more than \$94 billion annually.

Preventing child abuse is cost effective. A GAO evaluation of child abuse prevention efforts found "total federal costs of providing prevention programs for low-income populations were nearly offset after four years." Community prevention services to overburdened families are far less costly than the damage inflicted on children from abuse and neglect.

Yet, Title II of CAPTA, the only source of federal funding dedicated solely to community-based child abuse and neglect prevention activities, is sorely underfunded. We are especially pleased that Title II of CAPTA is focused on innovative community-based prevention services and that a small share of its dollars fund services to assist families of children with disabilities through respite care and other supports and is authorized to provide support services for parents with disabilities as well. Respite has been shown time and again to not only alleviate the serious stress these families face, stress that can lead to abuse or neglect, but has actually had an impact in reducing the incidence of abuse and neglect and out-of-home placements in communities where it is available.

We are also writing to ask for an increase in funds to \$725 million for Part C of IDEA. CAPTA was amended in 2003 with a provision that links abuse and neglect to early intervention. States are now required under CAPTA to develop "provisions and procedures for referral of a child under the age of 3 who is involved in a substantiated case of child abuse or neglect to early intervention services funded under Part C of the Individuals with Disabilities Education Act (section 106(b)(2)(A)(xxi))." Part C is a component of the Individuals with Disabilities Education Act (PL 105-17, IDEA) under which each state implements an early intervention system for infants and toddlers with disabilities and their families. Section 637(a)(6) of the reauthorized IDEA 2004, requires states to provide "a description of the State policies and procedures that require the referral for early intervention services under this part of a child under the age of 3 who--` (A) is involved in a substantiated case of child abuse or neglect; or` (B) is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure.

The current early intervention system is struggling to serve the families now enrolled. The new CAPTA requirements have substantially increased the workload for providers of Part C evaluation and intervention services. Currently, Part C serves about 298,150 children (2.4% of the population under 3) nationwide. The Department of Education has established a benchmark for each state to serve 2 percent of the population of children under the age of 3. Unfortunately, as of the December 2005 national child count, 20 states, DC and several other eligible jurisdictions are not meeting this benchmark. Rough estimates suggest that an additional 167,000 children may be determined eligible for early intervention services as a result of the CAPTA and IDEA 2004 amendments and Part C will not have the resources to respond.

Without additional resources to both the Part C and CAPTA state agencies, the promise of the 2003 CAPTA amendments will never be realized. In addition to the increased numbers of children that Part C will assess and serve if referrals from child protection are regularized, the types of Part C services required may change. Specifically, it seems likely that children involved with child protection will have social-emotional and behavioral issues more frequently than other children served by Part C. Therefore, Part C may need to enhance its ability to meet early childhood mental health needs.

Let's not continue our national legacy of child maltreatment and even death. With full funding for CAPTA and sufficient funding for IDEA Part C -- we can begin a new legacy of sound policy focused on prevention and caring. And let's not turn our backs on the research that says prevention, such as respite, not only works, it saves the

government billions of dollars by preventing more costly and more traumatic out-of-home placements, school failure, and even prison. Thank you for your consideration of our request.

Sincerely

American Dance Therapy Association
American Psychological Association
Association of University Centers on Disabilities
Brain Injury Association
Division of Early Childhood of the Council for Exceptional Children
Easter Seals
Helen Keller National Center
IDEA Infant and Toddler Coordinators Association
Learning Disabilities Association of America
National Coalition on Deaf-Blindness
National Respite Coalition
TASH