



Highlights of [GAO-04-267T](#), a testimony for the Subcommittee on Human Resources, Committee on Ways and Means, House of Representatives

Why GAO Did This Study

To better monitor children and families served by state child welfare agencies, Congress authorized matching funds for the development of statewide automated child welfare information systems (SACWIS) and required that the Department of Health and Human Services (HHS) compile information on the children served by state agencies. This testimony is based on our July 2003 report and addresses the following: (1) states' experiences in developing child welfare information systems and HHS's role in assisting in their development, (2) factors that affect the reliability of data that states collect and report on children served by their child welfare agencies and HHS's role in ensuring the reliability of those data, and (3) practices that child welfare agencies use to overcome challenges associated with SACWIS development and data reliability. For the July 2003 report, we surveyed all 50 states and the District of Columbia regarding their experiences developing and using information systems and their ability to report data to HHS. We also reviewed a variety of HHS documents and visited five states to obtain firsthand information. Finally, we interviewed HHS officials and child welfare and data experts and reviewed relevant literature.

www.gao.gov/cgi-bin/getrpt?GAO-04-267T.

To view the full product, including the scope and methodology, click on the link above. For more information, contact Cornelia M. Ashby at (202) 512-8403 or ashbyc@gao.gov.

CHILD WELFARE

States Face Challenges in Developing Information Systems and Reporting Reliable Child Welfare Data

What GAO Found

HHS reported that 47 states are developing or operating a SACWIS, but many states continue to face challenges developing their systems. Most state officials said they recognize the benefit their state will achieve by developing SACWIS, such as contributing to the timeliness of child abuse and neglect investigations; however, despite the availability of federal funds since 1994, states reported a median delay of 2½ years beyond the time frames they set for completion. States reported that they encountered some difficulties during SACWIS development, such as challenges receiving state funding and creating a system that reflected their work processes. In response to some of these challenges, HHS has provided technical assistance to help states develop their systems and conducted on-site reviews of SACWIS to verify that the systems meet federal requirements.

Despite efforts to implement comprehensive information systems, several factors affect the states' ability to collect and report reliable adoption, foster care, and child abuse and neglect data. States responding to GAO's survey and officials in the five states GAO visited reported that insufficient caseworker training and inaccurate and incomplete data entry affect the quality of the data reported to HHS. In addition, states reported technical challenges reporting data. Despite HHS assistance, many states report ongoing challenges, such as the lack of clear and documented guidance on how to report child welfare data. In addition, although states were mandated to begin reporting data to the Adoption and Foster Care Analysis Reporting System (AFCARS) in 1995, few reviews of states' AFCARS reporting capabilities have been conducted to assist states in resolving some of their reporting challenges.

Some states are using a variety of practices to address the challenges associated with developing SACWIS and improving data reliability. For example, 28 states reported using approaches to help caseworkers identify and better understand the data elements that are required for federal reporting.

In a related report, we recommended that the Secretary of HHS consider ways to enhance the guidance and assistance offered to states to help them overcome the key challenges in collecting and reporting child welfare data. These efforts could include a stronger emphasis placed on conducting AFCARS reviews and timelier follow-up to help states implement their improvement plans or identifying a useful method to provide clear and consistent guidance. HHS generally agreed with our findings but, in response to our recommendation, said that we did not recognize the long-term efforts to provide AFCARS and National Child Abuse and Neglect Data System related guidance. HHS also noted that the data definitions need to be updated and revised and said it was in the process of revising regulations. HHS added that it is firmly committed to continue to support the states and to provide technical guidance and assistance as resources permit.