

## Safe Reduction Dashboard: Focus on American Indian and Alaska Native Children

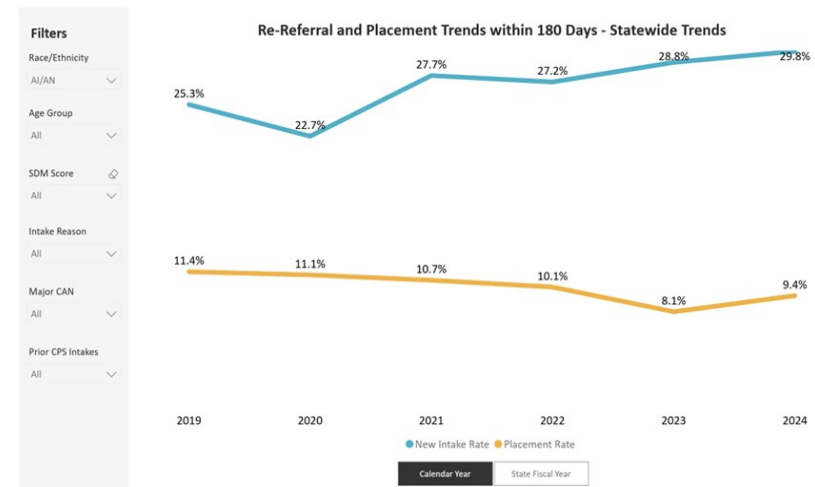
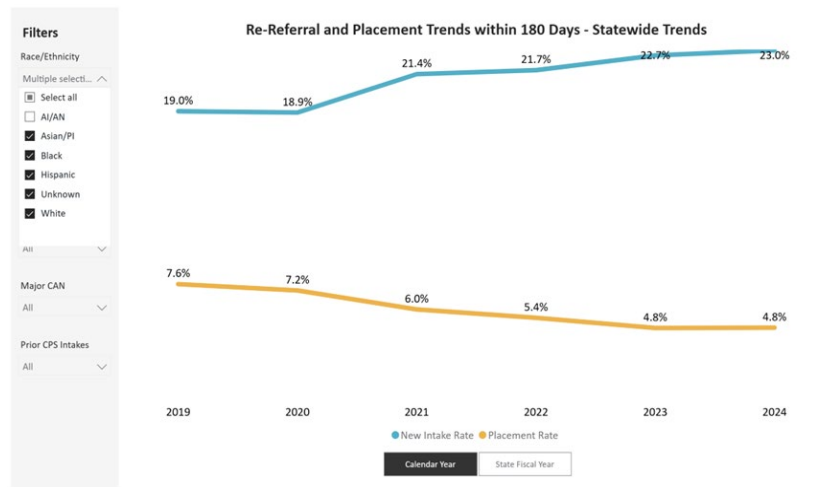


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The purpose of DCYF'S Office of Innovation, Alignment, and Accountability (OIAA) is to build agency capacity to make evidence-informed decisions, continuously learn and improve, and successfully enact system reform.

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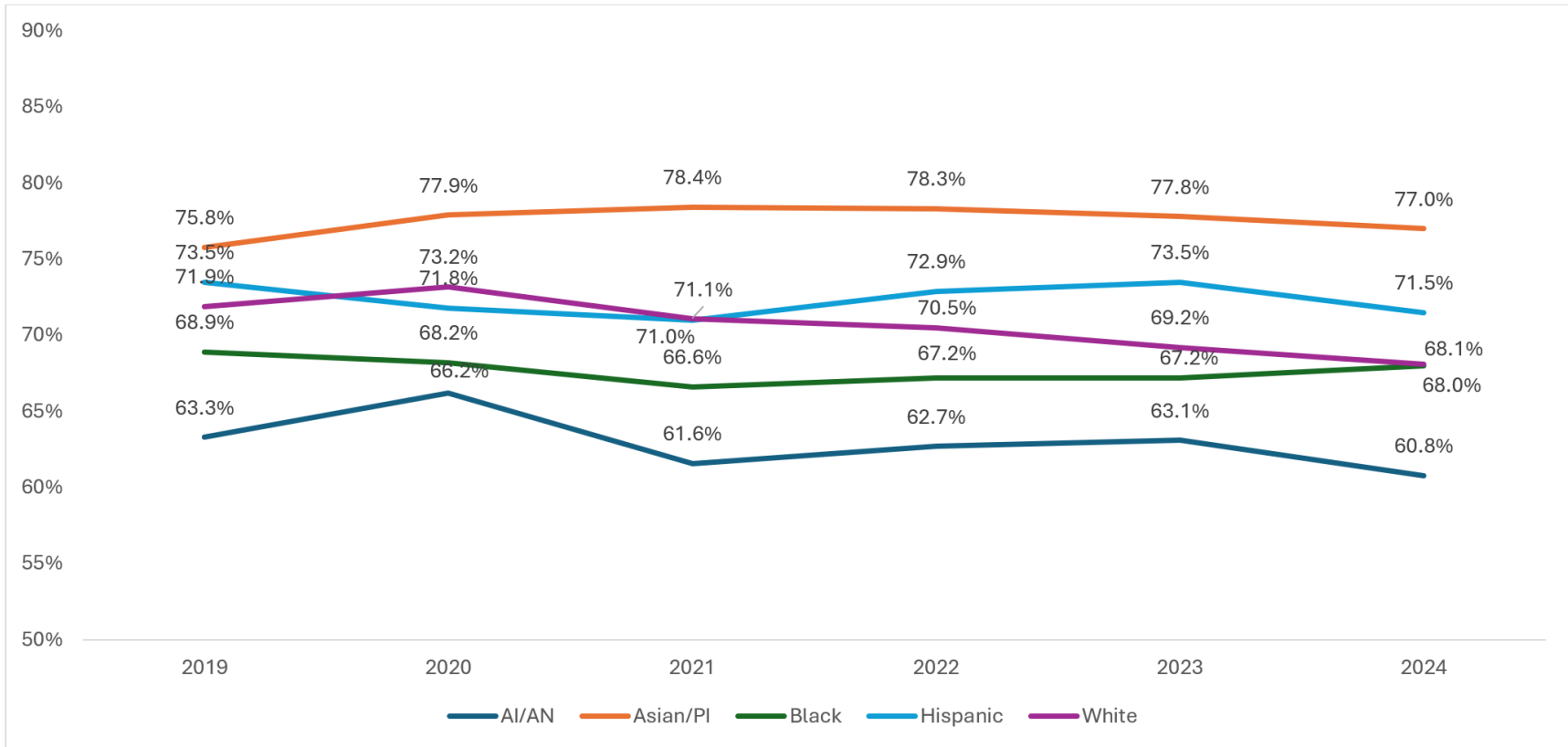
**Re-Referral and Placement Trends:** In the chart below, at the child level, we look at whether a new intake or placement happened within 180 days of a reference intake (a screened-in CPS intake). If both events occurred, the one that happened first is counted as the outcome. These trends vary by race/ethnicity, age, SDM risk level, and prior number of CPS intakes. These categories can be explored using filters.



Between 2023 and 2024 the placement rate for non-AI/AN children stayed at 4.8%, while for AI/AN children the placement rate increased from 8.1% to 9.4%. Additionally, the re-referral rate rose more quickly for AI/AN children (from 28.8% to 29.8%) while for non-AI/AN children the rate only increased from (22.7% to 23.0%).

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Percent of Children separated, by race/ethnicity, experiencing **Neither** a placement event nor a re-referral within 180 days.

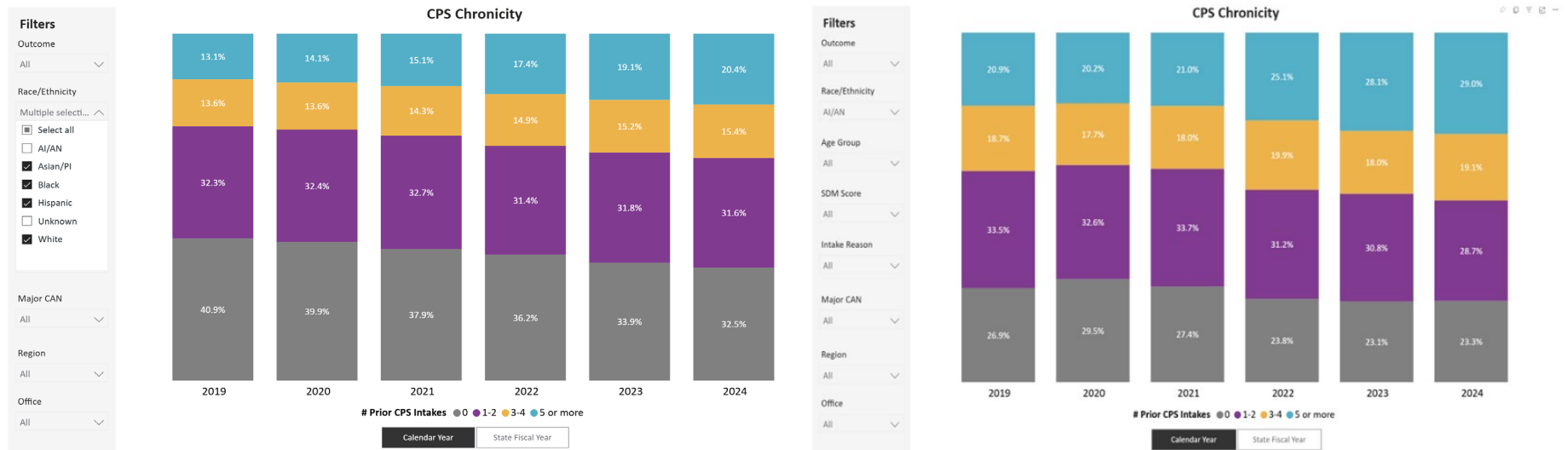


The **Grow the Green** tab of the dashboard shows the number of children who have had **neither** a re-referral nor a placement event within 180 days. **The disparity between the percentage of AI/AN children and other children who have not experienced either a re-referral or a placement event has grown over the past 6 years.**

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### Comparing AI/AN children and children of other racial/ethnic groups – CPS Chronicity

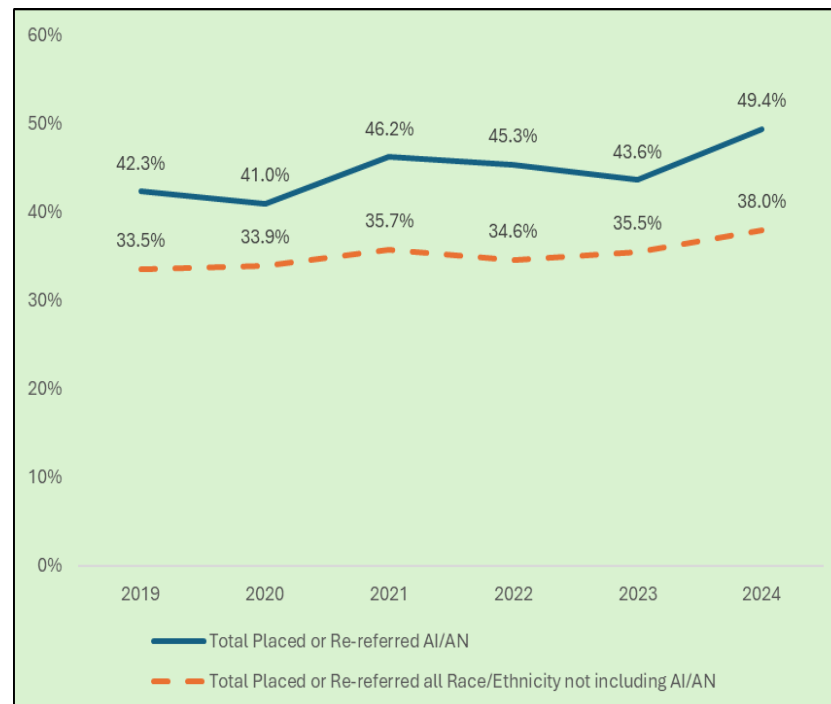
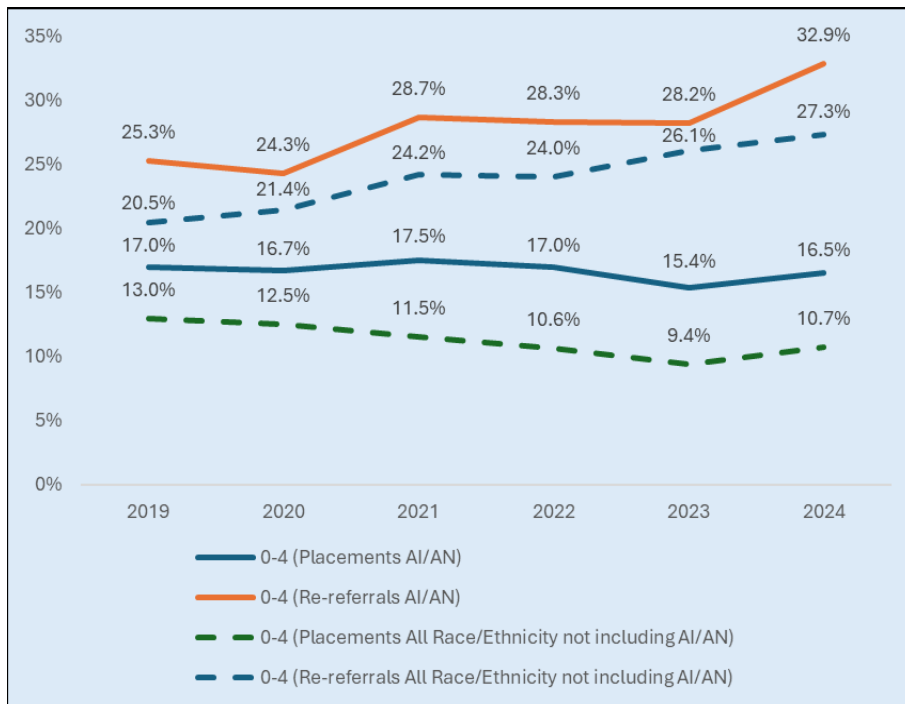
**CPS Chronicity:** This tab in the dashboard focuses on the number of prior screened-in CPS intakes associated with each child. The four categories of prior number of intakes are 0, 1-2, 3-4 or 5 or more. This count does not include the current intake so if a child had three prior screened-in intakes associated with them, the reference intake would be their 4<sup>th</sup> intake.



In 2024, **20.4%** of non-AI/AN children had **5 or more prior intakes**, and **35.8%** had **3 or more prior intakes**. For AI/AN children these numbers were **29.0%** for **5 or more prior intakes** and **48.1%** for **3 or more prior intakes**.

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### Comparing AI/AN children aged 0-4 and other children – Placement and Re-Referral trends

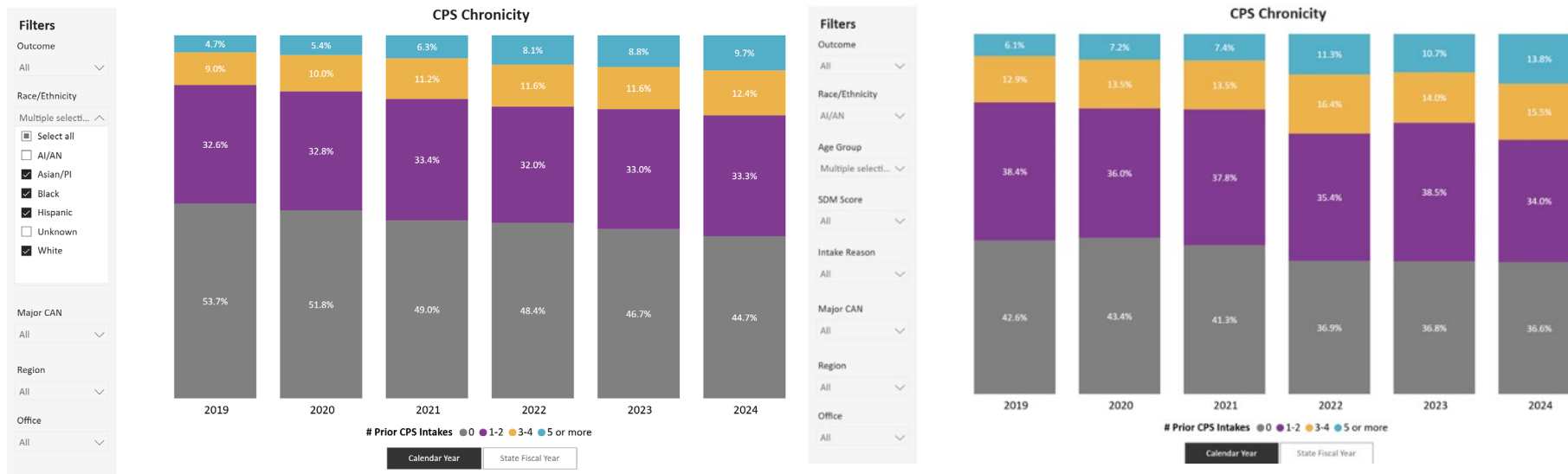


Children 0-4 represent the most vulnerable children involved with CW. AI/AN children aged 0-4 continue to be much more likely to have a re-referral (**32.9% compared to 27.3%**), or to have a placement episode (**16.5% compared to 10.7%**) within 180 days of an intake.

**Nearly half** of AI/AN children experience either a re-referral or placement with 180 days of a screened-in intake, while this number is 38% for children not identified as AI/AN.

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### Comparing AI/AN children aged 0-4 and other children – CPS Chronicity



In 2024, **13.8% of AI/AN children were identified as victims in at least five** intakes prior to the current intake, and **29.3% were victims in at least three prior intakes**. Among children who were not identified as AI/AN, these figures were 9.7% and 22.3%, respectively. This indicates that AI/AN children aged 0-4 are more likely to be frequently involved in child welfare cases.