

Training and Education in Professional Psychology

Ethical and Diversity Considerations of Mandatory Reporting: Implications for Training

Claudia Porras Pyland, Marlene G. Williams, and Debra Mollen

Online First Publication, July 18, 2024. <https://dx.doi.org/10.1037/tep0000485>

CITATION

Pyland, C. P., Williams, M. G., & Mollen, D. (2024). Ethical and diversity considerations of mandatory reporting: Implications for training.. *Training and Education in Professional Psychology*. Advance online publication. <https://dx.doi.org/10.1037/tep0000485>

Ethical and Diversity Considerations of Mandatory Reporting: Implications for Training

Claudia Porras Pyland, Marlene G. Williams, and Debra Mollen

Division of Psychology and Philosophy, School of Social Work, Psychology, and Philosophy, Texas Woman's University

Mandatory reporting, a cornerstone of child protection, is intended to safeguard the welfare of children; however, the existing framework often fails to adequately consider the diverse needs and circumstances of marginalized families. This article highlights the need for greater attention related to reporting cases of suspected child maltreatment and advocates for a paradigm shift in training psychologists, highlighting diversity and multicultural competence as integral components. Drawing on a comprehensive review of literature, we shine a critical light on systemic failures of the child welfare system for marginalized families, including families of color and those living in poverty. When contemplating reporting, we urge trainees to consider how reporting bias might influence accurate reporting and highlight the importance of distinguishing between poverty and neglect. Through the application of a case example, we provide a nuanced discussion of an ethical decision-making process grounded in research that considers psychologists' legal and ethical responsibilities with particular attention to diversity variables. We conclude the article by providing teaching and training recommendations pursuant to the ethical and legal ramifications of mandatory reporting. The recommendations embrace ethical principles and prioritize diversity in mandatory reporting practices for a more just and equitable approach to child protection.

Public Significance Statement

This article advances ethical decision-making training practices by increasing awareness of the often unaddressed nuances in cases of suspected child maltreatment. Psychologists, in their roles as supervisors and educators, can heed the recommended classroom activities and ethical decision-making process presented in this article to ensure a more sound ethical decision-making process while minimizing bias and risk of harm to clients.

Keywords: mandatory reporting, ethical decision making, diversity, training and supervision

Mandatory reporting of child maltreatment is a legal requirement for psychologists and other mental health professionals when presented with a reasonable cause for suspicion. Reports should be made after careful deliberation to confirm reports are accurate, informed, and reasoned to ensure the best interest of the child (Tufford et al., 2021). Ethics codes, laws, and jurisdictional statutes are vital in our field to guide psychologists to protect people from harm, and yet, there are many factors that psychologists must consider to prevent making hasty, uninformed decisions. Reporting suspected child maltreatment

can have deleterious consequences, yet specific training for psychologists is lacking. Much of the current literature on mandatory reporting comes from social work with limited literature presenting mandatory reporting as an ethical dilemma inclusive of alternative options to reporting (Harrell & Wahab, 2022). Moreover, current social work textbooks reinforce risk management practices and focus on underreporting suspected abuse while failing to address the potential negative consequences of reporting and neglect to offer guidance for handling competing ethical obligations (Harrell & Wahab, 2022).

Claudia Porras Pyland  <https://orcid.org/0000-0001-7094-7361>

CLAUDIA PORRAS PYLAND is an Associate Professor and Licensed Psychologist at Texas Woman's University. She is the Director of the Master's Counseling Psychology Program at Texas Woman's University and founder of Transcended Healing. Her research and professional interests include relational trauma; autistic burnout; neuroaffirmative clinical, training, and assessment practices; emotional intelligence; and romantic attachment styles.

MARLENE G. WILLIAMS is a Licensed Psychologist and Assistant Professor of Counseling Psychology at Texas Woman's University. Her research and clinical interests broadly focus on intersectionality theory, Black feminist thought epistemology, gendered racism, and intergenerational trauma.

DEBRA MOLLEN is a Professor, Licensed Psychologist, and American Association for Sexuality Educators, Clinicians, and Trainers-Certified

Sexuality Educator at Texas Woman's University. She is the coauthor, with Brian Baird, of *The Internship, Practicum, and Field Placement Handbook: A Guide for the Helping Professions*. Her research and professional interests include sexuality, reproductive justice, training, and multicultural issues.

Claudia Porras Pyland played a lead role in conceptualization, visualization, writing—original draft, and writing—review and editing. Marlene G. Williams played a supporting role in writing—original draft. Debra Mollen played a supporting role in conceptualization and writing—original draft and an equal role in writing—review and editing.

CORRESPONDENCE CONCERNING THIS ARTICLE should be addressed to Claudia Porras Pyland, Division of Psychology and Philosophy, School of Social Work, Psychology, and Philosophy, Texas Woman's University, P.O. Box 425470, Denton, TX 76204, United States. Email: cporras@twu.edu

Similarly, psychology lacks a nuanced decision-making process in cases of suspected child maltreatment (American Psychological Association [APA] Practice Organization, 2013; Behnke, 2014). The APA *Ethical Principles of Psychologists and Code of Conduct* does not directly address considerations to make for mandatory reporting or other instances that warrant breaking confidentiality, deferring psychologists to mandated state law (APA, 2017; Standard 4.05b). Further, in our experiences in teaching a doctoral-level ethics course, we have found that trainees frequently report being advised against verifying their own suspicions, letting Child Protective Services (CPS) handle investigations. This general guidance to refrain from investigating neglects to consider that systemic racism and biases can have grave consequences for marginalized families (Beniwal, 2017; Cénat et al., 2021; Child Welfare Information Gateway [CWIG], 2021; Dettlaff et al., 2020; Fong, 2020; Legha & Gordon-Achebe, 2022). We acknowledge that investigating has legal implications, as it could compromise the integrity of the investigation and lead to conflicts of interest. The recommendation advising clinicians not to conduct their own investigation aims to prevent flawed investigations by professionals unqualified to make such determinations. Trainees frequently misinterpret this recommendation, thinking it implies they should refrain from asking questions. While clinicians should not undertake the investigative role of CPS, we encourage them to gather sufficient information to make well-informed decisions, considering nuances and the potential impact of these decisions when deciding whether to report.

Early-stage trainees may require additional guidance in determining what constitutes reasonable suspicion for reporting, a challenge due to variations in clinical judgment and interpretation of state reporting laws. State reporting laws typically instruct mental health professionals to make ethical decisions around mandatory reporting based on *reasonable cause* or *suspicion* with ambiguous language about what constitutes *reasonable suspicion* (Levi & Crowell, 2011). Neither state laws nor the APA *Ethics Code* (2017) addressed the importance of multicultural considerations in assessing reasonable suspicion. Consequently, identifying reasonable suspicion is challenging without gathering sufficient information and considering critical nuances in the decision-making process. This leads to inconsistencies in clinical judgment on reporting, with ethical decisions often grounded in feelings rather than a concrete belief in the occurrence of abuse (Levi & Crowell, 2011). It is essential for educators to help students address their personal biases and emotional reactions because decisions based solely on feelings rather than evidence can lead to a failure to consider the broader context, compromising the obligation to avoid harm (Standard 3.04). Furthermore, trainers must ensure that decisions include both ethics codes and legal requirements so that they are well-informed and ethically sound.

Considering what constitutes maltreatment adds to the complexity of these cases, given the variations in legal jurisdictions and state laws regarding maltreatment across states. Therefore, it is crucial for clinicians and trainees to examine the mandates specific to their jurisdiction and consider how cultural biases in their environment may influence their decisions. For example, slapping a child might be considered abuse in one jurisdiction, while it might be culturally acceptable in a jurisdiction where paddling in schools remains legal. Objective factors to consider in potential maltreatment cases are the child's age, the type of abuse, the injury and its circumstances, and the practitioner's familiarity with the family (Herendeen et al., 2014). Clinicians and trainees are more likely to have a thorough

understanding if they assess the context, cultural considerations, and current and future risk of harm. Not doing so can lead to under- or overreporting of child maltreatment. Failure to exercise adequate discernment and clinical judgment compromises the principles of justice and nonmaleficence—psychologists' ethical obligations to do no harm (Standard 3.04; APA, 2017).

To summarize, most current research discusses the issues associated with underreporting suspected abuse and neglect, while guidance on the complications arising from overreporting is scarce. While we recognize the importance of necessary reporting, we aim to add to the dearth of scholarship by considering the uncertain scenarios when making a report, which is not straightforward. Our intention is to provide guidance to help support educators as they consider nuance and complexity in training students regarding issues related to reporting. The case example provided next is designed to explore these ambiguous situations.

Case Example

Consider the following case example: You have been working with a 36-year-old client, Natalia, for 7 weeks. She arrives for your sixth session frustrated and complaining about her boyfriend. She reports that she was unexpectedly moved to evening shifts at the hospital where she works as a nurse and asked John, her boyfriend of 4 years, to watch her 12-year-old daughter, Erica. He agreed but after a few hours received a call from a close friend to meet him at a local bar. Not wanting to miss out on his friend's birthday celebration, he agreed and took Erica with him. Natalia is upset because she found out from Erica the morning of your session that Erica stayed in the car while he drank at the bar with his friends. Erica told Natalia that she stayed in the car watching a movie on her tablet, and John went out to check on her multiple times and instructed her to call him with any concerns. They were at the bar for a few hours before driving home. Natalia indicates that she is angry because "he threw away his year of sobriety on one night of fun" and put her daughter in danger. She admits she has not talked with John because she was on her way to your session when she found out this happened.

After reviewing the case described above, we encourage readers, particularly trainees, to consider the following questions: What are your first impressions of this case example? What potential legal and ethical issues are relevant? What would you say to Natalia? What, if anything, do you think is important to do in response to Natalia's description of what happened the previous evening? Though not elaborated upon, how might diversity considerations inform your decision making in this case? In our teaching and training experience, graduate students, particularly those early in their training, often offer automatic responses to this fictitious case example, most typically that they believe the correct course of action is to initiate a mandatory report to the local CPS agency. We aim to address these issues as they have significant ramifications for our students' ethics training and, subsequently, the lives of their clients.

In the following sections, we explore ethical and legal considerations in the context of mandatory reporting, attending especially to problems of ambiguity and the importance of helping our students develop and exercise sound clinical judgment. We draw particular attention to issues of diversity in mandatory reporting and how these should be carefully considered to inform decision making. We offer theoretical and empirical perspectives that inform the final

section of our article in which we provide teaching and training recommendations pursuant to the ethical and legal ramifications of mandatory reporting.

Theoretical and Research Considerations

Reporting Bias

An important consideration when engaging in legal, ethical, and culturally responsive decision making is reporting bias. Research has consistently shown that child maltreatment is reported more often for families of color and poor families, with the intersection of marginalized ethnicity and class contributing to the disproportionality of reports, discrepancies in the substantiation of reports, and ultimately having children removed from their homes (Cénat et al., 2021; CWIG, 2021). Notwithstanding explicit racism (Berkman et al., 2022; Palusci & Botash, 2021), visibility (exposure) bias and labeling bias are two types of bias linked to the disproportionate rates of child maltreatment reports. Visibility bias is the tendency of families and children who are more noticeable to mandated reporters to be disproportionately reported to CPS (Krase, 2013; Legha & Gordon-Achebe, 2022). Most states have centralized registries of child maltreatment investigations and Health and Human Services' support programs that share their data (CWIG, 2018). Law enforcement and social service personnel, the largest sources of reports across the United States (CWIG, 2023), have access to data available through cross-system reporting. Accordingly, families who access Health and Human Services' support programs are more likely to be identified and tracked than higher income families with private sources of support (Harrell & Wahab, 2022; Krase, 2013; Legha & Gordon-Achebe, 2022). Labeling bias is the increased likelihood that mandated reporters look for signs of maltreatment among certain populations (Beniwal, 2017; Harp & Bunting, 2020). Having dissimilar identities and cultural practices compared with their clients increases the likelihood of mandated reporters making an unsubstantiated report, as disciplinary practices incongruent from those of the reporter are more likely to be pathologized (Krase, 2013). It is beyond the scope of this article to discuss how systemic issues such as multigenerational poverty and unequal access to mental health treatment contribute to the disproportionate reporting of children to CPS. However, addressing these broader societal conditions is crucial to reducing the reporting rates among marginalized children, as reforms focused solely on CPS actions or the behavior of mandatory reporters are insufficient to tackle the root causes of the disparities (Drake et al., 2023).

Distinguishing Between Neglect and Poverty

Most unsubstantiated cases involve reports of suspected child neglect, which can be challenging to identify, particularly among poor families with limited resources (Legha & Gordon-Achebe, 2022; Milner & Kelly, 2021; Yordy, 2023). It is crucial to understand the legal distinction between poverty and neglect, as emphasized by a public defender who asserts that the inability to meet basic needs should not be equated with neglect (Dale, 2014). Many states exclude poverty-based neglect in mandatory reporting requirements (Dale, 2014; Milner & Kelly, 2021). The impact of systemic factors like unemployment, housing instability, and discrimination should also be considered. Notably, and illustrative of intersectionality,

71% of children living in poverty are children of color (Milner & Kelly, 2021). Helping trainees learn to discern between the impact of poverty and the presence of neglect is imperative in reducing the initiation of unnecessary case reports that can have grave consequences for families. Addressing the underlying issue of poverty by connecting families to resources, especially when neglect is not evident, is more likely to prevent child maltreatment than making a report to CPS (CWIG, 2023; Dale, 2014).

Consequences of Making a Report With Insufficient or Biased Information

Contrary to common misconceptions, mandated reporting does not always enhance child safety (Hixenbaugh & Khimm, 2022). In many instances, it can exacerbate stress on already burdened families, increasing the risk of future child maltreatment. Making an unfounded report, regardless of steps taken to mitigate the impact, can rupture the therapeutic relationship, potentially terminating a resource during a family's most stressful time (Tufford et al., 2019). The fear of being reported may discourage families from seeking help and accessing necessary services. After a report is made to CPS, data about the report are entered into a registry tracking suspected maltreatment, including unsubstantiated reports (CWIG, 2018). These data are often used by law enforcement, prosecutors, and potential employers, affecting individuals' employment opportunities (Kramer, 2019). These data disproportionately impact women of color, who are most often reported and investigated by CPS (Harrell & Wahab, 2022) and experience the highest rates of poverty as single heads of household (Damaske et al., 2017). The integration of the child welfare and penal systems is problematic as it unnecessarily links families to the legal system and increases the likelihood of biased treatment in future interactions with law enforcement (Dettlaff et al., 2020; Harp & Bunting, 2020; Legha & Gordon-Achebe, 2022). Therefore, making a report based on unfounded or biased suspicions, although unlikely to result in CPS removing children from their home, could create significant disruption in the family's life.

The original purpose of the welfare system, designed to support White families, has shifted over time to punitive investigations that criminalize parents, limiting opportunities for alternative approaches to child abuse prevention and intervention (Fong, 2020; Legha & Gordon-Achebe, 2022). Making unnecessary, ill-informed reports creates backlogs in the system, impeding its efficiency in serving families who need intervention and often devastating those families who do not. When harm is clearly identifiable, psychologists should file a report while offering support resources to the family to mitigate the additional stressors associated with an investigation. In cases where clear harm is not apparent, psychologists might assess whether education and resources are adequate to address concerns. These alternatives prove beneficial in settings where there is an ongoing therapeutic relationship with the family.

An Overburdened System

Over the last decade, most states have expanded the list of professionals required by law to report suspicions of child abuse or imposed new reporting requirements and penalties for failing to report (Hixenbaugh & Khimm, 2022). Most recently, Texas Governor Greg Abbott deemed trans-affirmative care child abuse and, with the

support of mandatory reporting legislation, instructed the Texas Department of Family and Protective Services to investigate youth receiving trans-affirmative care (Abbott, 2022; Harrell et al., 2023). We offer this as an example of how proposed legislation weaponizes reporting mandates to surveil and criminalize marginalized families for political gain. Of the nearly 4 million screened child welfare reports disclosed to the U.S. Department of Health and Human Services in 2021, nearly half (48.5%) were screened out either due to insufficient information or not meeting the legal definitions of abuse and neglect in the given state. Despite the already overburdened system (Beniwal, 2017), child welfare departments reported a decrease in their total workforce between 2020 and 2021 (CWIG, 2021). CPS workers' ability to seek out the necessary information to conduct accurate and comprehensive assessments is often inadequate, leading to the premature closure of cases. The overburdened welfare system may impact children in one of two ways, either by increasing the likelihood that they will be unnecessarily removed from their home or decreasing the likelihood that they will be removed when removal is warranted (Beniwal, 2017), both of which are likely traumatic for children.

In response to greater awareness of the harmful impact of mandatory reporting, a growing number of attorneys, researchers, and child welfare reform advocates are calling for enhanced training for professionals mandated by law to report child maltreatment (CWIG, 2021; Milner & Kelly, 2021), with many calling for the abolition of mandatory reporting (Dettlaff et al., 2020; Hixenbaugh & Khimm, 2022). Until and unless the system undergoes a radical overhauling, psychologists and other mental health professionals must learn to navigate the difficult task of complying with legal mandates while simultaneously considering the potential impacts on the families with whom they work. A nuanced ethical decision-making process, grounded in the understanding of disparate treatment for families of color and those living in poverty, is vital to protect children and prevent future maltreatment.

Ethical and Legal Considerations Relevant to the Case Example

Review the Problem and Consider Culture

For our case example, we employed S. J. Knapp et al.'s (2017) ethical decision-making model (EDMM) for its simplicity, applicability during crises, and reliance on principle-based ethics. The first step involves reviewing the facts of the situation and considering cultural implications. We advise against hasty conclusions and encourage clinicians to carefully consider factors that are often overlooked when reporting is a concern. Important information to gather includes identifying the client, including identity and cultural considerations relevant to the case. In this case, there is no ambiguity that Natalia is the client. It would be helpful to ask about Natalia and her family's relevant identities and cultural expectations, particularly regarding Erica's age and level of maturity. In many cultures, 12-year-olds are considered sufficiently mature to be left home alone. In addition to cultural considerations, the client's identities must be considered to determine how likely they are to receive just and fair treatment by CPS and the judicial system. Families living below the poverty line and families of color are more likely to receive unequal treatment and are more likely to remain under continued scrutiny once in the system (Dettlaff et al., 2020;

Fong, 2020; Legha & Gordon-Achebe, 2022), so careful attention to these factors is important.

Being careful not to make uninformed assumptions, and consistent with developing alternatives (S. J. Knapp et al., 2017), we encourage clinicians to consider the credibility of the information available. In this case, Natalia has received the information secondhand, thereby increasing the risk of inaccuracies. Assessing if there is a pattern of neglectful behavior that has put Erica at risk in the past would also help determine if a similar scenario is likely to recur. Further, assessing risk factors, such as a history of intimate partner violence, would help determine if a report might exacerbate violence in the home. In these cases, psychologists should establish a safety plan in the event the client or child is at increased risk of violence. S. J. Knapp et al. (2017) instructed clinicians to consider how cognitive biases and emotional aspects may impact the judgment of this case. We encourage psychologists to ask: What biases do I have that may influence how I see the problem? How do I personally and professionally view cultural differences between me and my client? How have these cultural differences and biases impacted our work together prior to this ethical concern? We recommend that clinicians seek consultation with a trusted colleague on cases likely to elicit implicit biases. Analyzing the options, arriving at and implementing the decision, and reflecting on the impact of the decision round out the steps of the decision-making model (S. J. Knapp et al., 2017).

Therapist Factors That Contribute to the Ethical Decision-Making Process

Implicit bias is particularly harmful in cases of mandatory reporting where the stakes are consequential. The topic of child maltreatment elicits strong emotional responses in most people, as our ethical and moral foundation compels us to do all we can to prevent harm, especially to the most marginalized, vulnerable people. Ongoing reflection of our emotional responses can help us identify potential biases the case might be eliciting, and our ability to regulate our emotions increases the likelihood that we will effectively navigate the decision-making process (S. J. Knapp et al., 2017; Nouman et al., 2020). Biases related to identities or core beliefs associated with stereotypes may influence decisions to report and should be identified prior to making a decision to report (Dickerson et al., 2017). Therapists should also reflect on their own similar and dissimilar identities and how these might impact their clinical judgment. Possible biases could be explored with the following questions. What could be influencing my decision? What are my beliefs about and experiences with alcohol abuse? What are my beliefs about child development and entrusting children with more independence? What are my personal experiences with CPS, child maltreatment, and reporting? What are my beliefs about single mothers? What are my beliefs about the gender of victims and perpetrators?

Ethical Versus Legal Obligations

In cases of mandated reporting, it is important to consider several questions to aid in clarifying the ethical dilemma and our ethical obligations while acknowledging alternative resolutions to reporting. Is this dilemma a legal, ethical, and/or professional problem? What are your ethical and legal obligations and how might they coalesce or conflict? In response to these questions, keep in mind

that the APA *Ethics Code* (2017) does not require psychologists to report abuse and neglect. The mandate to report is most clearly framed as a legal, not an ethical, requirement. The APA ethics code leaves the decision to psychologists' professional judgment (APA, 2017).

Aside from reporting to CPS, clinicians might consider whether to report John, who is suspected of driving while intoxicated and leaving a child unsupervised, and/or Natalia, the responsible caregiver, to the authorities. There is currently no evidence to suggest that John was in fact drinking; rather, Natalia assumed John was drinking and had not discussed her concern with him. In some states, abandoning or endangering a child could result in felony charges, which could indirectly and significantly impact Erica and Natalia. Further, many state laws do not offer guidance on assessing risks of harm and biases that may impact a psychologist's professional judgment and use vague language for what constitutes *reasonable suspicion*. Thus, making an informed decision necessitates considering additional questions. What harm might come to Erica or Natalia if you report? What are the benefits of reporting? Do the harms outweigh the benefits? Considering the APA *Ethics Code* (2017, Standard 1.02), what reasonable steps can be taken to minimize undue harm to Natalia and Erica? Clinicians should explore alternatives to reporting and consider possible consequences. Clinicians trained to report every suspicion of child maltreatment without questioning are likely to experience *cognitive rigidity*, difficulty identifying resolutions that do not involve reporting (S. J. Knapp et al., 2017), so preemptively identifying a list of alternative resources might lead to a more balanced resolution. In the case example, clinicians should self-reflect and distinguish between neglect and poverty, as it is not uncommon for poverty to be conflated with child neglect (Yordy, 2023). Clinicians might find that locating childcare resources for Natalia or helping her set firm boundaries with John might be a more reasonable resolution in this case.

By engaging in a more in-depth ethical decision-making process that accounts for the gaps not addressed in professional ethics codes and state laws, psychologists and trainees can arrive at a more thorough understanding of their ethical and legal obligations with minimal bias and risk of harm to their clients. Helping trainees engage in this process when considering reporting abuse can help them identify alternative effective courses of action to take instead of prematurely determining that reporting is their only option.

Teaching and Training Considerations

Researchers have documented the tendency for graduate students and psychologists to struggle to resolve ethical dilemmas suitably. Jenkin et al. (2021), for example, found that advanced students tended to see personal ethical dilemmas as more morally conflictual than professional ones and cautioned that the latter may engender an overreliance on rules. McDonald-Sardi et al. (2020) found that psychologists evidenced more advanced ethical judgment than students and that many psychologists and students were unable to resolve dilemmas consistent with experts' opinions.

Returning to the case example, we use Handelsman et al.'s (2005) acculturation model to help understand the ways trainees often respond to complex ethical dilemmas, especially those involving multicultural considerations, particularly in the initial stages of training. Having adapted their model from Berry's (1992) original work on cultural adaptation, Handelsman et al. explained that

psychologists and trainees who employ the assimilation strategy may perfunctorily respond to ethical dilemmas by adhering strictly to the *Ethics Code* (APA, 2017) and cautioned that doing so "may lead to empty, legalistic, and overly simplistic applications of our ethical principles" (Handelsman et al., 2005, p. 61). We aspire to teach our students how to conceptualize and make ethical decisions using integration as a strategy, which allows for more complex approaches to solving dilemmas in which psychologists consider multiple vantage points, perspectives, and possible outcomes.

One important consideration is teaching students how to understand and apply the *Ethics Code* (2017) judiciously in conjunction with considering and weighing broad systemic factors. Barnett (2019) outlined four key limitations to the *Code*, namely, its incompleteness in guiding psychologists sufficiently, temporal limitations that command regular revision, the breadth of the standards that belie a formulaic solution to complex ethical dilemmas, and the lack of guidance when ethical principles conflict. In our fictitious case example, we can help facilitate our students' growth by considering the ethical principles and standards relevant to and of potential conflict. The principles of beneficence and nonmaleficence, in conjunction with Standards 3.01 (Unfair Discrimination) and 3.04 (Avoiding Harm), for example, would prompt us to ask who would potentially benefit from making a report and who could be harmed by it. How might making a report potentially cause more harm than ameliorate it? The principle of justice inspires us to consider the importance of fairness in our work. Drawing from the scholarship that reveals that poor families and Black, Indigenous, and people of color families are disproportionately likely to be reported and have their children removed, we can teach students that moving too quickly to report can have profound consequences that undermine our commitment to just practice. We also urge trainers and students to consider the impact of clinical experience across settings. For instance, trainees in community mental health or school settings may encounter unique experiences and considerations compared with those in a private practice setting. Students in school settings might need to consult school policies and ensure they are considering all stakeholders.

Utilizing Ethical Decision-Making Models to Address Nuances of Mandated Reporting

To minimize undue harm to our clients, EDMMs, along with training and supervision, can be utilized to further ensure that there is adequate consideration of aspects that are often missing from laws and ethics codes (i.e., multicultural considerations, risks of harm, and defining "reasonable" cause). EDMMs include specific steps for gathering more information, multicultural considerations, and assessing options/risks, but these steps often get glossed over in mandatory reporting cases. In fact, there are some mixed findings on the reasons for the nonuse of EDMMs, which demonstrate that some clinicians or trainees may not use EDMMs because they either do not address the complexities of particular cases or rely on their own judgment (Levitt et al., 2015). Relying solely and unquestionably on one's personal judgment is risky because it is more likely to be influenced by assumptions and biases. There are additional limitations that may contribute to reported EDMMs' nonuse, including a lack of multicultural considerations (Johnson et al., 2022), though some EDMMs do include steps specific to assessing multicultural factors (Frame & Williams, 2005). Johnson et al.'s (2022) review of EDMMs found that 47% accounted for multicultural considerations, with some of them directly addressing

self-awareness of biases and most including a deliberation process along with an assessment of personal values and potential risks. According to their taxonomy of EDMMs, the deliberation process typically includes defining situation specifics such as identifying the problem, considering potential courses of action, and “determining if standard or past actions are unacceptable for the current situation” (Johnson et al., 2022, p. 204). The EDMM steps associated with considering personal values typically includes reflection, moral sensitivity, and personal competence, while assessment of risk tends to include perspective taking of those affected and relevant cultural factors (Johnson et al., 2022). It is especially important that trainees and psychologists thoroughly address each of these steps when considering reporting, as the effects of such reports can be life-altering and are susceptible to clinician biases. Thus, utilizing an EDMM that includes specific steps for deliberation, potential risk, and checking biases, assumptions, and cultural/systemic factors can help with determining reasonable cause/suspicion based on facts rather than feeling, ultimately aiding in more sound clinical decision making.

Teaching Strategies

There are several viable techniques for helping students learn how to deliberate more intentionally and consider complexities in making informed decisions about whether, when, and how to report suspected child abuse and neglect. Ametrano (2014) discussed several useful assignments in which students were tasked with identifying their personal values and beliefs that informed their initial response to several dilemmas, including one in which a therapist sees a client slap their child in the waiting room and has to decide whether they should make a report. We might encourage self-reflection to consider whether corporal punishment remains legal in that jurisdiction’s school system and how that might impact that region’s cultural views on slapping. In our case vignette, we can encourage students to consider what their own experiences were like in their families regarding the ages when they were entrusted with increasing levels of responsibility and independence and their sociocultural implications.

S. Knapp et al. (2017a) offered useful ideas for advancing professionalism through self-reflection. To engage in reflective practice, we can teach students about the importance of cultivating a professional network; encourage them to pursue therapy, particularly with a focus on addressing their biases; participate in professional development opportunities; seek feedback from trusted sources; and engage in expressive writing (S. Knapp et al., 2017a). Kimball and Daniel (2020) suggested a creative reflective writing strategy in which students selected from an instructor-provided list three populations or issues that they found would be most challenging for them to address effectively, identified the nature of their discomfort, delineated the values and beliefs that undergirded their potential for bias, and generated potential sources of action. Faculty can include in this list families experiencing poverty who parent differently from class-privileged families, encouraging students to consider their biases and how these could mislead them into making an unnecessary report (see Barteck et al., 2009).

Finally, S. Knapp et al. (2017b) encouraged psychologists to pose to themselves a series of questions designed to deepen their awareness and improve their practice. For example, they encouraged

practitioners to gauge their emotional responses, consider how they assess their competence, identify their implicit biases, recognize problematic cognitive shortcuts and heuristics they employ, and clarify their values. We would encourage similar reflections for the case presented. In particular, we encourage trainees and psychologists to recognize the emotions that arise when reading the case, identify the implicit biases they have that could misinform their decision-making process, and consider and challenge the presence of a confirmation bias or fundamental attribution error that would lead them to make a report prematurely.

Conclusion

We have presented a nuanced understanding of the importance of approaching the decision to report suspected child maltreatment and neglect with caution. Ethical guidance is often too general to be helpful, and legal guidance can be amorphous. Relying on instinct or responding automatically can lead psychologists to make ill-informed decisions to either over- or underreport suspected child neglect, which can have devastating consequences. Educators can help students examine their values and beliefs around factors related to reporting, as well as ensure trainees understand the kinds of bias that result in overreporting parents of color and poor parents to CPS. We encourage the judicious use of self-reflective questions, a careful accounting of biases, and the employment of an EDMM inclusive of cultural factors to make more informed decisions in cases involving child neglect and maltreatment.

References

- Abbott, G. (2022). *Letter to James Masters, commissioner of the Texas Department of Family and Protective Services*. <https://gov.texas.gov/uploads/files/press/O-MastersJaime202202221358.pdf>
- American Psychological Association. (2017). *Ethical principles of psychologists and code of conduct* (2002, amended effective January 1, 2017). <https://www.APA.org/ethics/code/>
- American Psychological Association Practice Organization. (2013). *Reporting child abuse and neglect*. <https://www.apaservices.org/practice/good-practice/reporting-child-abuse.pdf>
- Ametrano, I. M. (2014). Teaching ethical decision making: Helping students reconcile personal and professional values. *Journal of Counseling & Development*, 92(2), 154–161. <https://doi.org/10.1002/j.1556-6676.2014.00143.x>
- Barnett, J. E. (2019). The ethical practice of psychotherapy: Clearly within our reach. *Psychotherapy*, 56(4), 431–440. <https://doi.org/10.1037/pst0000272>
- Barteck, K., Vanderwalde, H., & Barnett, J. E. (2009). The mandatory reporting of suspected child abuse and neglect: Ethical obligations, dilemmas, and concerns. *Psychotherapy Bulletin*, 44(4), 31–34.
- Behne, S. (2014). Disclosing confidential information. *Monitor on Psychology*, 45(4), 44–48. <https://www.APA.org/monitor/2014/04/disclosing-information>
- Beniwal, R. (2017). Implicit bias in child welfare: Overcoming intent. *Connecticut Law Review*, 49, 1021–1067. https://opencommons.uconn.edu/law_review/365/
- Berkman, E., Brown, E., Scott, M., & Adiele, A. (2022). Racism in child welfare: Ethical considerations of harm. *Bioethics*, 36(3), 298–304. <https://doi.org/10.1111/bioe.12993>
- Berry, J. W. (1992). Acculturation and adaptation in a new society. *International Migration*, 30(Suppl. 1), 69–85. <https://doi.org/10.1111/j.1468-2435.1992.tb00776.x>

- Cénat, J. M., McIntee, S., Mukunzi, J. N., & Noorishad, P. (2021). Overrepresentation of Black children in the child welfare system: A systematic review to understand and better act. *Children and Youth Services Review, 120*, Article 105714. <https://doi.org/10.1016/j.chidyouth.2020.105714>
- Child Welfare Information Gateway. (2018). *Establishment and maintenance of central registries for child abuse or neglect reports*. U.S. Department of Health and Human Services, Children's Bureau. <https://www.childwelfare.gov/resources/establishment-and-maintenance-central-registries-child-abuse-or-neglect-reports/>
- Child Welfare Information Gateway. (2021). *Child welfare practice to address racial disproportionality and disparity*. U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. https://www.childwelfare.gov/pubPDFs/racial_disproportionality.pdf
- Child Welfare Information Gateway. (2023). *Separating poverty from neglect in child welfare*. U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. <https://www.childwelfare.gov/resources/separating-poverty-neglect-child-welfare/>
- Dale, M. K. (2014). *Addressing the underlying issue of poverty in child-neglect cases*. American Bar Association. <https://www.americanbar.org/groups/litigation/committees/childrens-rights/articles/2014/addressing-underlying-issue-poverty-child-neglect-cases/>
- Damaske, S., Bratter, J. L., & Frech, A. (2017). Single mother families and employment, race, and poverty in changing economic times. *Social Science Research, 62*, 120–133. <https://doi.org/10.1016/j.ssresearch.2016.08.008>
- Detlaff, A. J., Weber, K., Pendleton, M., Boyd, R., Bettencourt, B., & Burton, L. (2020). It is not a broken system, it is a system that needs to be broken: The upEND movement to abolish the child welfare system. *Journal of Public Child Welfare, 14*(5), 500–517. <https://doi.org/10.1080/15548732.2020.1814542>
- Dickerson, K. L., Lindner, S., Scurich, N., & Quas, J. A. (2017). When is neglect, neglect? It depends on who you ask. *Child Maltreatment, 22*(3), 256–264. <https://doi.org/10.1177/1077559517709558>
- Drake, B., Jones, D., Kim, H., Gyourko, J., Garcia, A., Barth, R. P., Font, S. A., Putnam-Hornstein, E., Duerr Berrick, J., Greenson, J. K. P., Cook, V., Kohl, P. L., & Jonson-Reid, M. (2023). Racial-ethnic differences in child protective services reporting, substantiation and non-placement, with comparison to non-CPS risks and outcomes: 2005-2019. *Child Maltreatment, 28*(4), 683–699. <https://doi.org/10.1177/10775595231167320>
- Fong, K. (2020). Getting eyes in the home: Child protective services investigations and state surveillance of family life. *American Sociological Review, 85*(4), 610–638. <https://doi.org/10.1177/0003122420938460>
- Frame, M., & Williams, C. (2005). A model of ethical decision making from a multicultural perspective. *Counseling and Values, 49*(3), 165–179. <https://doi.org/10.1002/j.2161-007X.2005.tb01020.x>
- Handelsman, M. M., Gottlieb, M. C., & Knapp, S. (2005). Training ethical psychologists: An acculturation model. *Professional Psychology: Research and Practice, 36*(1), 59–65. <https://doi.org/10.1037/0735-7028.36.1.59>
- Harp, K. L. H., & Bunting, A. M. (2020). The racialized nature of child welfare policies and the social control of Black bodies. *Social Politics, 27*(2), 258–281. <https://doi.org/10.1093/sp/jxz039>
- Harrell, S., Jordan, S., & Wahab, S. (2023). From exceptionalism to relationality: Responding to mandatory reporting in Texas anti-trans directives. *Affilia, 38*(1), 13–19. <https://doi.org/10.1177/08861099221136632>
- Harrell, S., & Wahab, S. (2022). The case for mandatory reporting as an ethical dilemma for social workers. *Advances in Social Work, 22*(2), 818–840. <https://doi.org/10.18060/24910>
- Herendeen, P. A., Blevins, R., Anson, E., & Smith, J. (2014). Barriers to and consequences of mandated reporting of child abuse by nurse practitioners. *Journal of Pediatric Health Care, 28*(1), e1–e7. <https://doi.org/10.1016/j.pedhc.2013.06.004>
- Hixenbaugh, M., & Khimm, S. (2022). *Mandatory reporting was supposed to stop severe child abuse. It punishes poor families instead*. ProPublica. <https://www.propublica.org/article/mandatory-reporting-strains-systems-punishes-poor-families>
- Jenkin, A. C., Ellis-Caird, H., & Winter, D. A. (2021). Moral judgments and ethical constructs in clinical psychology doctoral students. *Ethics & Behavior, 31*(1), 1–12. <https://doi.org/10.1080/10508422.2019.1684294>
- Johnson, M., Weeks, S., Peacock, G., & Domenech Rodríguez, M. (2022). Ethical decision-making models: A taxonomy of models and review of issues. *Ethics & Behavior, 32*(3), 195–209. <https://doi.org/10.1080/10508422.2021.1913593>
- Kimball, P., & Daniel, D. (2020). Reflective writing: Enhancing students cognitive complexity through ethics education. *Journal of Creativity in Mental Health, 15*(2), 250–264. <https://doi.org/10.1080/15401383.2019.1682737>
- Knapp, S., Gottlieb, M. C., & Handelsman, M. M. (2017a). Enhancing professionalism through self-reflection. *Professional Psychology: Research and Practice, 48*(3), 167–174. <https://doi.org/10.1037/pro0000135>
- Knapp, S., Gottlieb, M. C., & Handelsman, M. M. (2017b). Self-awareness questions for effective psychotherapists: Helping good psychotherapists become even better. *Practice Innovations, 2*(4), 163–172. <https://doi.org/10.1037/pri0000051>
- Knapp, S. J., VandeCreek, L. D., & Fingerhut, R. (2017). *Practical ethics for psychologists* (3rd ed.). American Psychological Association.
- Kramer, A. (2019). *Banned for 28 years: How child welfare accusations keep women out of the workforce*. The New School, Center for New York City Affairs. <https://www.centernyc.org/banned-for-28-years>
- Krase, K. S. (2013). Differences in racially disproportionate reporting of child maltreatment across report sources. *Journal of Public Child Welfare, 7*(4), 351–369. <https://doi.org/10.1080/15548732.2013.798763>
- Legha, R. K., & Gordon-Achebe, K. (2022). The color of child protection in America: Antiracism and abolition in child mental health. *Child and Adolescent Psychiatric Clinics of North America, 31*(4), 693–718. <https://doi.org/10.1016/j.chc.2022.05.004>
- Levi, B. H., & Crowell, K. (2011). Child abuse experts disagree about the threshold for mandated reporting. *Clinical Pediatrics, 50*(4), 321–329. <https://doi.org/10.1177/0009922810389170>
- Levitt, D. H., Farry, T. J., & Mazzarella, J. R. (2015). Counselor ethical reasoning: Decision-making practice versus theory. *Counseling and Values, 60*(1), 84–99. <https://doi.org/10.1002/j.2161-007X.2015.00062.x>
- McDonald-Sardi, J., Mathews, R., Reece, J., & Pratt, C. (2020). The effect of experience in psychological practice on making ethical judgements. *Australian Psychologist, 55*(6), 634–644. <https://doi.org/10.1111/ap.12463>
- Milner, J., & Kelly, D. (2021). The need for justice in child welfare. *Child Welfare, 99*(3–4). <https://www.cwla.org/the-need-for-justice-in-child-welfare/>
- Nouman, H., Alfandari, R., Enosh, G., Dolev, L., & Daskal-Weichhendler, H. (2020). Mandatory reporting between legal requirements and personal interpretations: Community healthcare professionals' reporting of child maltreatment. *Child Abuse & Neglect, 101*, Article 104261. <https://doi.org/10.1016/j.chiabu.2019.104261>
- Palusci, V. J., & Botash, A. S. (2021). Race and bias in child maltreatment diagnosis and reporting. *Pediatrics, 148*(1), Article e2020049625. <https://doi.org/10.1542/peds.2020-049625>
- Tufford, L., Bogo, M., Katz, E., Lee, B., & Ramjattan, R. (2019). Reporting suspected child maltreatment: Educating social work students in decision making and maintaining the relationship. *Journal of Social*

Work Education, 55(3), 579–595. <https://doi.org/10.1080/10437797.2019.1600442>

Tufford, L., Lee, B., Bogo, M., Wenghofer, E., Etherington, C., Thieu, V., & Zhao, R. (2021). Decision-making and relationship competence when reporting suspected physical abuse and child neglect: An objective structured clinical evaluation. *Clinical Social Work Journal*, 49(2), 256–270. <https://doi.org/10.1007/s10615-020-00785-6>

Yordy, J. (2023). *Poverty and child neglect: How did we get it wrong?* National Conference of State Legislatures (NCSL). <https://www.ncsl.org/>

[state-legislatures-news/details/poverty-and-child-neglect-how-did-we-get-it-wrong](https://www.ncsl.org/state-legislatures-news/details/poverty-and-child-neglect-how-did-we-get-it-wrong)

Received August 7, 2023

Revision received April 24, 2024

Accepted April 25, 2024 ■