WHEN THE STATE BECOMES THE TRAUMA: FROM MKULTRA TO THE CPS PIPELINE

Survivor accounts of childhood mind control experiments describe trauma, isolation, drugs, and institutional power. Contemporary child protective services records raise a disturbing question: what happens when those same trauma mechanisms are reproduced inside a system that calls itself protection?

By Ann Vandersteel, Maureen Steele, Christopher Burns| American Made Foundation

Four women recently came together to discuss what they describe as childhood experiences connected to MKUltra. Their stories sound, at first, far removed from the modern American child welfare system.

Dr. Juliette Engel said she was placed into a government linked behavioral program as a child. **Cathy O'Brien** described what she calls Project Monarch, a trauma based conditioning program she believes grew out of MKUltra. **Lynne Scott Hagerman** described being trafficked as a very young child, deprived of control over food, water, and her own body, and later subjected to what she says were medical experiments. **Max Lowen** described isolation, deprivation, electroshock, and other forms of extreme trauma that she believes were intended to fragment the developing personality.

The most important point in comparing those accounts with what families experience in Child Protective Services is not whether CPS is MKUltra.

There is no documentary evidence in the materials reviewed for this investigation proving that the modern child welfare system is a continuation of the CIA program.

The comparison is more troubling than that.

It concerns **what trauma does to a child, what happens when institutions control the environment in which that trauma occurs, and how fear, separation, uncertainty, dependency, medication, and the destruction of attachment can alter behavior.**

Those mechanisms are central to the accounts given by Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman.

They are also present throughout the American Made book *CPS Pipeline: State Sanctioned Kidnapping* and the two congressional compendiums, *Taking Children: The Economics of American Family Separation* and *When the State Becomes the Trauma.*

The overlap deserves examination.

The *CPS Pipeline* book describes an “industrial pipeline” revenue stream composed of state agencies, private foster care agencies, court appointed special advocates, supervised visitation centers, drug testing laboratories, court ordered evaluators and psychologists, residential treatment facilities, group homes, behavioral health providers, Medicaid billing therapists, and contracted case management organizations that can acquire economic interests after government intervention begins.

In **Chapter One, “The Hidden Pipeline: How CPS and Family Courts Turn Families into Revenue Streams,” beginning on page 9**, the book describes a system that, in its authors' analysis, “thrives not on healing, but on breaking.”

That institutional structure provides an important backdrop for the trauma comparison that follows.

What MKUltra established

Before addressing survivor allegations, there is a documented historical baseline that cannot be dismissed.

The 1977 Senate investigation of MKUltra disclosed **149 subprojects**, many involving behavioral modification, drug acquisition, drug testing, and the surreptitious administration of drugs. Senate investigators also documented intermediary funding mechanisms intended to conceal CIA sponsorship.

The program reached deeply into civilian institutions. The surviving congressional record describes physicians, toxicologists, and specialists working in mental hospitals, narcotics hospitals, general hospitals, and prisons. Investigators questioned whether subjects inside those institutions could meaningfully give informed consent and whether the institutions themselves understood who was ultimately financing the research.

The Senate record also documents research into what the government called additional avenues for the **“control of human behavior,”** including electroshock, psychology, psychiatry, harassment substances, and the covert use of behavior altering materials.

Unwitting experimentation was not incidental. The surviving records show CIA officials discussing the operational importance of testing substances on people who did not know they were being tested.

The scope was much larger than Congress initially understood. Newly recovered records showed that dozens of universities and institutions were involved, and Senate investigators acknowledged that the program was more extensive than previous investigations had revealed.

That is the documented foundation.

The official record does not establish every allegation made by Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman. It does, however, establish something fundamental. The United States government secretly funded research designed to alter human behavior, used drugs and electroshock among the techniques studied, operated through medical and academic institutions, concealed sponsorship, and experimented on people without their knowledge.

Against that history, survivor testimony concerning childhood trauma cannot simply be dismissed because the concept of government sponsored behavioral manipulation sounds impossible.

We already know government sponsored behavioral experimentation was possible.

It happened.

The common denominator between MKUltra victims and CPS is trauma

The strongest point of intersection between the women's accounts and the CPS materials is trauma.

Max Lowen describes trauma as a mechanism through which a person can become psychologically trapped long after the original source of control is gone. She speaks of fear, repetition, and extreme experiences becoming embedded in emotion, behavior, and the nervous system.

Cathy O'Brien similarly identifies childhood trauma as the central mechanism she believes was used to produce compliance.

Whatever one concludes about their broader claims regarding intentional programming, modern trauma science strongly supports the underlying premise that severe childhood adversity can profoundly alter behavior and development.

The American Made trauma compendium documents research showing that severe childhood trauma can affect stress response systems, attachment, emotional regulation, cognition, executive functioning, memory, and long term health. The conditions identified in that literature include sudden caregiver loss, sibling separation, institutionalization, chronic uncertainty, fear, and repeated disruption of caregiving relationships.

Those are not theoretical possibilities in foster care. They are conditions that can occur immediately after removal.

A child may lose a mother and father in one afternoon. The child may also lose a bedroom, siblings, pets, school, neighborhood, community, and daily routine with almost no ability to understand why. That child may be driven away by strangers, placed into an unfamiliar home, and told when contact with the people who previously represented safety will next be permitted.

The state calls that placement. The nervous system may experience it as catastrophe.

The trauma compendium explains that removal can register in a child as abandonment, terror, and catastrophic loss.

That observation creates the first major parallel with trauma based conditioning: **remove the stabilizing attachment, destabilize the environment, and place the child in a situation controlled by unfamiliar authority.**

The stated purposes of the two systems are fundamentally different. MKUltra's documented historical objective included research into behavioral modification. CPS is legally charged with protecting children.

The intent is different.

The nervous system does not necessarily know the difference.

CPS Pipeline, Chapter Five: the moment removal becomes trauma

The significance of this distinction becomes clearer in **Chapter Five, "The Case Files: Real Families. Real Damage. No Accountability," beginning on page 27 of *CPS Pipeline*.**

The chapter urges readers to examine the experience through families rather than institutional terminology. It asks readers to consider children "who were never the same after they came home," and presents removal as an experience whose psychological consequences can continue long after a court proceeding ends.

One case described in *CPS Pipeline* concerns the **Rivera children**. The book recounts five children witnessing armed law enforcement surround their parents at a Texas gas station before the family was separated. The book states that officers drew weapons while the children watched their parents being ordered to the ground. **Chapter Five, page 28.**

For purposes of this comparison, the crucial issue is what a child's brain experiences during such an event.

The adult system may understand warrants, jurisdiction, custody orders, allegations, and legal procedure.

The child sees armed strangers take Mom and Dad away.

Trauma begins before the legal argument is resolved.

Attachment destruction changes the developing brain

One of the most significant findings in *When the State Becomes the Trauma* is that the parent is not merely another person in a child's environment. For a young child, the parent is part of the neurological architecture of safety.

Harvard research cited in the compendium explains that a stable, responsive caregiver can buffer the developing brain against toxic stress. When the frightening event itself is the loss of that caregiver, the child loses the very person who would ordinarily help regulate the fear response.

That has enormous implications for CPS removals.

The child may be frightened by police, caseworkers, court proceedings, or an unfamiliar placement. Under normal circumstances, the child would instinctively turn toward the parent. During removal, the parent may be physically prevented from providing that protection.

The state can therefore become the source of the frightening event while simultaneously removing the child's primary mechanism for regulating it.

Researchers cited in the American Made report have associated severe childhood maltreatment with changes in brain systems involved in memory, threat detection, reward, impulse control, and executive functioning. A repeatedly terrified child can become neurologically organized around survival rather than exploration, learning, trust, and secure attachment.

This is where the accounts of Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman become particularly relevant.

The women repeatedly describe trauma not simply as pain, but as something capable of changing how a child processes reality.

Modern neuroscience confirms that severe trauma can do exactly that.

What remains a separate question is **intent**.

There is evidence that MKUltra researchers intentionally sought methods of behavioral modification. There is no equivalent documentary evidence establishing that CPS, as a national institution, removes children for the purpose of creating trauma induced behavioral modification.

When a government system knowingly employs practices capable of producing severe trauma, however, the absence of an explicit mind control objective does not erase the resulting neurological injury.

The Justina case in *CPS Pipeline*

CPS Pipeline illustrates this problem through the case of **"Justina Pelletier,"** discussed in **Chapter Five, pages 29 and 30**.

The book describes "Justina Pelletier" as a 14 year old who became the subject of a medical dispute between physicians. According to the book, she was placed in state custody and in a locked psychiatric setting, experienced sharply restricted parental contact, remained separated from her family for more than a year, and suffered deterioration in both physical and emotional health.

The case is significant to this article because it demonstrates how medical authority, state custody, separation, isolation, and psychological distress can become intertwined.

Regardless of the legal rationale used to justify state action, the child's nervous system experiences the loss of family in real time.

Helplessness and the manufacture of compliance

Another recurring theme in the accounts of Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman is the destruction of personal control.

Lynne Scott Hagerman describes an environment in which adults determined when she ate, drank, moved, and what happened to her body. She says she had no meaningful power over what was being done to her.

That state of helplessness is central to traumatic conditioning.

The CPS materials reveal a bureaucratic version of the same psychological condition. Children are told where they will live. They may have little control over whether they see their parents. They may be moved between placements, separated from siblings, and have medical decisions transferred to the state or substitute caregivers.

Parents encounter a parallel system of compelled compliance.

The federal economic compendium describes a structure in which agencies investigate families, define risk, determine required compliance, and present those conclusions to courts that often give substantial weight to agency recommendations.

CPS Pipeline examines this issue directly in **Chapter Three, "The Incentive Machine: How CPS Gets Paid to Tear You Apart."**

On **page 20**, the book describes court ordered evaluations, parenting classes, anger management, supervised visitation, drug testing, and other required services. The book explains that a missed appointment can be recorded as "non compliance" and can affect the progress toward reunification.

That psychological structure matters.

When access to one's child depends on satisfying institutional demands, behavior is inevitably shaped by consequences.

The parent learns what the institution rewards.

The parent also learns what the institution punishes.

In many circumstances, the reward is additional access to the child.

The punishment is continued separation.

This is not proof of MKUltra.

It is a recognizable form of coercive behavioral pressure.

When resistance becomes pathology

The parallels become even sharper when psychological labeling enters the process.

The historical MKUltra record includes extensive CIA interest in psychiatry, psychology, and methods of influencing or assessing human behavior.

The CPS compendium describes families encountering a structurally different but psychologically analogous risk: **once resistance itself is interpreted as evidence of pathology, the individual becomes trapped inside the institution's narrative.**

This reflects a shared operational pattern across distinct agencies in which different stated missions converge on the same functional outcome. Children and their families can be conditioned and controlled through fear, producing compliance through psychological pressure rather than physical force.

This issue appears at the beginning of *CPS Pipeline*.

In **Chapter One, page 10**, the book describes parents asserting their rights during CPS investigations and being characterized as "combative." It also describes refusal to comply being interpreted as evidence that the family has something to hide.

The federal compendium expands on the concern through what it calls **retaliatory psychiatry**. It describes reports from parents who challenge CPS, contest medical findings, demand records, or complain about misconduct and then find themselves characterized as combative, paranoid, unstable, resistant, or psychologically concerning.

This can create a closed psychological loop.

A parent becomes desperate because the child is gone. The desperation is interpreted as instability.

A parent becomes angry because an allegation is disputed. The anger is interpreted as aggression.

A parent insists officials have misstated facts. That insistence may be characterized as paranoia.

The institution then points to the parent's response to the trauma of separation as additional evidence supporting continued intervention.

Children can become caught in a similar loop.

A child is removed and becomes anxious, angry, withdrawn, depressed, or dysregulated. Those responses are recorded as symptoms. Symptoms lead to diagnoses. Diagnoses lead to treatment. Treatment may include medication.

Meanwhile, the original trauma of separation can fade from the institutional narrative until the problem appears to reside entirely within the child.

Medical authority becomes another point of control

The medical dimension is a central issue in **Chapter Four of *CPS Pipeline*, "Diagnosing for Dollars: How State Contracted Doctors Enable Medical Kidnapping."**

The chapter examines the role of hospital based Child Abuse Pediatricians, disputed diagnoses, CPS referrals, and the weight medical opinions can carry once a dependency proceeding begins.

The book describes a recurring dynamic in which a medical allegation can initiate CPS intervention, after which additional diagnoses and services accumulate.

The clearest connection to this article appears on page 24, where the book states:

> **"The trauma caused by removal is repackaged as a disorder."**

The surrounding passage discusses PTSD, ADHD, developmental delays, mood disorders, Medicaid reimbursement, and the possibility that symptoms emerging after state intervention may be converted into additional diagnoses and services.

That sentence captures one of the central concerns in the MKUltra comparison.

If intervention causes or intensifies trauma, and the resulting trauma response is then interpreted as evidence that the child requires additional institutional control, the process becomes self reinforcing.

The institution may begin by responding to a perceived condition.

Eventually it may be responding to conditions that intervention itself helped create.

Drugs, behavioral control, and foster care

MKUltra unquestionably involved experimentation with psychoactive drugs designed to study their effects on cognition and behavior.

Modern foster children are also prescribed psychotropic medications at elevated rates, but that fact alone does not establish that medication is being used for mind control.

There are legitimate clinical reasons why children in foster care may require mental health treatment. Many enter state custody with severe histories of abuse, neglect, or preexisting trauma.

The numbers nonetheless deserve scrutiny.

Government research has documented high levels of psychotropic drug use among subsets of the foster care population, including the use of multiple medications and particularly high rates in residential settings.

The policy question is whether, in some cases, a child experiences trauma through removal, disrupted attachment, institutionalization, or repeated placement, and the resulting behavior is subsequently treated pharmacologically without enough attention to the underlying trauma.

"Diego" in *CPS Pipeline*

A particularly relevant case appears in **Chapter Five, page 30 of *CPS Pipeline*.**

The book identifies the child as **"Diego."**

According to the book, "Diego" was six years old when a disputed assessment of a bruise led to CPS involvement. The book says he spent 18 months in foster care and was prescribed three psychotropic medications for agitation and adjustment disorder. During that period, according to the book, "Diego" developed night terrors, separation anxiety, and worsening school performance. The book describes him as withdrawn and traumatized when he was eventually returned to his mother.

The case, as presented in *CPS Pipeline*, raises a serious question.

If separation produces emotional dysregulation, and that dysregulation is subsequently medicated, has the system adequately distinguished a psychiatric disorder from a child's understandable response to losing family?

Medication can sometimes be clinically necessary.

It should never become a substitute for restoring attachment, security, continuity, and competent trauma treatment.

This question corresponds closely with the experiences described by **Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman**, whose accounts repeatedly link drugs, institutional authority, trauma, and behavioral control.

The circumstances are not identical.

The mechanism deserves examination.

Isolation is not neutral

Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman repeatedly describe isolation or separation from protective relationships as part of their trauma.

The CPS system can produce a different but still psychologically significant form of isolation through restricted visitation, placement far from home, sibling separation, institutional settings, and repeated changes in caregivers.

The trauma compendium cites research associating placement instability with aggression, depression, academic problems, delayed permanency, and difficulties forming meaningful attachments. It also discusses sibling separation as an additional source of psychological injury.

The same report cites National Child Traumatic Stress Network material reporting substantial PTSD burdens among former foster youth.

This is particularly relevant to **Lynne Scott Hagerman's** description of extreme childhood dependency. Lynne Scott Hagerman describes a childhood environment in which fear, lack of control, and dependence on adults shaped her experience.

The foster care circumstances discussed in the American Made materials are not equivalent to the extreme abuse Lynne Scott Hagerman alleges.

The biological principle is narrower and more defensible: **the human nervous system can register chronic fear, instability, helplessness, and attachment loss with extraordinary severity.**

That fact should influence every decision involving state removal.

The trafficking connection must be examined carefully

The accounts given by Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman include allegations involving organized trafficking, exploitation, and institutional actors.

Those allegations are not established by the official MKUltra record reviewed for this article.

The vulnerability of children in foster care to trafficking, however, is a documented public policy concern.

Evidence that foster youth face elevated trafficking vulnerability does not, by itself, prove that CPS as an institution traffics children.

The distinction is important.

The vulnerability is equally important.

A child separated from parents, moved repeatedly, isolated from siblings, desperate for affection, and lacking a durable adult advocate can possess precisely the vulnerabilities an exploiter seeks.

If government removes a child on the premise that the biological family cannot keep the child safe, government assumes an extraordinary responsibility for the conditions that follow.

Chapter Six of *CPS Pipeline*

The trafficking issue becomes central in **Chapter Six, “Where the Bodies Are Buried: Foster Care, Trafficking, and the Children Who Don't Come Home,” beginning on page 34.**

The chapter examines allegations and cases involving abuse, exploitation, trafficking, serious injury, and death after children enter state care.

The book also discusses individual children who died after foster placement.

Among them is **“Alex Hill,”** whose case appears in *CPS Pipeline*, **Chapter Six, page 35**. The book states that “Alex Hill,” a two year old Texas child, was removed from her father and later killed while in foster care.

The book also discusses **“Giovanni Eastwood”** and **“Jacob Pina”** in *CPS Pipeline*, **Chapter Six, pages 35 and 36**, as cases involving fatal injuries or neglect after placement.

These cases do not establish that the foster system is equivalent to MKUltra.

They establish why the loss of family protection cannot be treated as a neutral administrative event.

When government assumes custody, it assumes responsibility for the child's safety from that moment forward.

Trauma creates vulnerability to exploitation

This is perhaps the most consequential connection between the four survivor accounts and the CPS pipeline.

Traffickers do not require sophisticated mind control laboratories to exploit children.

Trauma itself can create exploitable conditions.

A frightened child seeks safety. A lonely child seeks attachment. A rejected child seeks belonging. A child conditioned by repeated placement disruption may become accustomed to adults disappearing. A child whose disclosures have repeatedly been ignored may stop believing that telling an adult will help.

A child who has learned that authority figures determine where she sleeps, whom she sees, and what happens to her body may also have difficulty distinguishing legitimate protection from coercive control.

The trauma research cited in *When the State Becomes the Trauma* describes how repeated fear and instability can organize the child's responses around survival rather than secure attachment, trust, and exploration.

That provides a scientifically grounded bridge to the accounts of Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman.

The four women describe trauma being intentionally exploited to create vulnerability and compliance.

Modern trauma science shows that trauma can create vulnerability and altered behavior regardless of whether the trauma was intentionally inflicted for that purpose.

A child welfare system that unnecessarily or recklessly traumatizes a child can therefore create some of the same vulnerabilities that predators understand how to exploit.

That is the paradox.

A system created to rescue children from exploitation can, when removal is unnecessary or poorly managed, produce conditions that increase susceptibility to exploitation.

Institutional secrecy is another common feature

MKUltra survived for years because it operated behind classification, front organizations, concealed funding, and compartmentalization.

Dependency courts operate under an entirely different legal framework, and confidentiality is commonly justified as necessary to protect children's privacy.

However, when state action results in family separation or the restriction of fundamental family rights, confidentiality cannot be permitted to erase meaningful due process.

Secrecy must not shield decisions from adversarial testing.

This issue is central to **Chapter Two of *CPS Pipeline*, "The Courts That Rubber Stamp Tyranny: Family Courts, Closed Doors, and the Death of Due Process."**

On **pages 14 and 15**, the book describes closed proceedings, limitations on public and press access, emergency hearings, agency deference, and the difficulties families face when important decisions occur before they have had a meaningful opportunity to challenge the government's case.
The same concern returns in **Chapter Seven, "How They Get Away With It: Immunity, Gag Orders, and Criminals in Black Robes."**

Pages 37 through 40 discuss gag orders, sealed records, immunity doctrines, restricted public access, and barriers families face when attempting to expose alleged misconduct.

One quotation from **Chapter Seven, page 40** captures the institutional problem:

> **"You can't fight what you can't expose."**

The book attributes that observation to a former CPS investigator turned whistleblower.

The comparison to MKUltra is not that a sealed dependency case equals a classified intelligence program.

The lesson is that secrecy alters the balance of power.

When one institution controls access to the records, defines the narrative, makes recommendations, and operates largely outside public observation, independent scrutiny becomes more difficult precisely when the consequences for the family are most profound.

The CPS pipeline adds something MKUltra did not require: a permanent economic ecosystem

One of the clearest differences between the historical CIA program and the modern child welfare system is economic structure.

MKUltra was a clandestine intelligence research operation financed through government appropriations and concealed funding mechanisms.

The child welfare system is a vast, legally established federal and state ecosystem involving foster care reimbursement, Medicaid, behavioral treatment, contractors, residential facilities, attorneys, evaluators, visitation providers, and other institutions.

This issue is one of the central themes of *CPS Pipeline*.

Chapter Three: The Incentive Machine

Chapter Three, pages 19 through 21, examines Title IV E, Title IV D, adoption incentive payments, Medicaid, court ordered services, and private providers. The book argues that once intervention begins, numerous government and private actors can receive revenue connected to placement, evaluations, services, medication, visitation, or continued custody.
The separate American Made congressional compendium, *Taking Children*, approaches the same question with a more formal policy analysis. It describes Title IV E, Title IV B, Title IV D, CAPTA, Medicaid linked services, TANF, detention funding, behavioral treatment programs, and extensive contractor networks. It cites GAO figures showing approximately $68.6 billion in Title IV E funds and $23.5 billion in TANF funds used for child welfare purposes between fiscal years 2015 and 2022.

Chapter Eight: The Profit Web

The book returns to this subject in **Chapter Eight, "The Profit Web: Who's Getting Paid to Steal Our Children, And Why They Never Stop."**

On **page 46**, *CPS Pipeline* describes a network of federal funding, contractors, agencies, health providers, courts, and service companies that can become economically connected to a dependency case after a child enters the system.

On **page 49**, the book states:

> **"No one profits from reunification. But everyone profits from separation."**

That is the book's characterization of the incentive problem, and it appears in the context of providers receiving money for therapy, medication, visitation, group home placement, and other services.

The policy issue does not depend on proving that every participant intends to harm families.

The relevant question is structural.

Does the system reward intervention more consistently than it rewards keeping a safe family intact?

Can contractors dependent on case volume remain economically indifferent to fewer cases?

Can institutions billing for treatment, placement, evaluation, medication, and visitation remain institutionally neutral about how rapidly those services end?

A coercive system backed by financial incentives does not require centralized conspiracy in order to become self perpetuating.

Systems can produce predictable outcomes simply because incentives, procedures, and institutional interests repeatedly point in the same direction.

The self reinforcing institutional cycle

The most concerning comparison may be the cycle that emerges once a child enters state custody.

The child is removed.

Removal creates or compounds trauma.

Trauma produces symptoms.

Symptoms generate evaluations.

Evaluations generate diagnoses.

Diagnoses generate treatment.

Treatment may generate billing.

The parent challenges the process.

The challenge may be characterized as noncompliance.

Noncompliance can delay reunification.

Delay creates additional trauma.

Additional trauma produces additional symptoms and services.

At some point, the original allegation can become only one component of a much larger institutional case.

That is why the sentence from Chapter Four, page 24 of CPS Pipeline matters so much:

> **“The trauma caused by removal is repackaged as a disorder.”**

If that dynamic occurs, the institution is no longer merely responding to the child's original condition.

It may be responding to consequences that institutional intervention itself helped create.

The four women's accounts and the CPS system: where the similarities lie

Taken together, **Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman** describe childhood environments characterized by loss of ordinary protection, extreme dependency on authorities, fear, trauma, bodily control, drugs or medical intervention, psychological manipulation, secrecy, and vulnerability to exploitation.

The CPS records, *CPS Pipeline*, and the trauma research describe a modern child welfare environment in which some children experience sudden separation from parents, sibling loss, chronic uncertainty, repeated placement changes, psychiatric evaluation, psychotropic medication, institutional placement, and vulnerability to exploitation.

Those are meaningful similarities.

The fundamental difference remains important.

> **MKUltra's documented purpose included research into behavioral modification. CPS's stated and legal purpose is child protection.**

That distinction cannot be erased.

Intent, however, does not cancel injury.

If two very different institutions expose a child's developing nervous system to similar combinations of fear, isolation, loss of attachment, dependency, and control, the child does not process the stated government mission before producing a stress response.

The child experiences what happened.

Torture is a legal term. Trauma is a biological reality.

The word torture requires careful use.

Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman describe conduct that, if substantiated, would constitute severe criminal abuse and, depending on the facts and law, could potentially qualify as torture.

Routine CPS removal is not legally equivalent to torture.

Unnecessary removal can nonetheless create intense and prolonged psychological suffering, particularly when combined with isolation, repeated placement, medication, institutionalization, neglect, or abuse while in state custody.

The American Made trauma compendium makes the point clearly: **removal itself is not biologically neutral.** It can become part of a child's accumulated trauma load.

That principle should affect the legal standard applied before government separates a family.

The question should not merely be whether an agency can identify some hypothetical future risk.

The question should be whether the demonstrable danger of leaving the child safely supported at home exceeds the predictable trauma that removal itself may inflict.

The trauma compendium proposes essentially that standard. Every removal decision should confront the trauma the intervention will cause and explain why that trauma is less dangerous than leaving the child safely supported at home.

That may be one of the most important reforms Congress could enact.

SECRECY, ADMINISTRATIVE POWER, AND THE GOVERNMENT AMERICANS CANNOT SEE

There is one final parallel between MKUltra and the modern child welfare apparatus that reaches beyond trauma science.

It is secrecy.

MKUltra depended upon secrecy for its existence. Programs were compartmentalized. Funding was concealed. Outside institutions were used. Researchers and subjects did not always know who ultimately stood behind the work. Records were classified, and significant portions of the MKUltra archive were later destroyed.

The American people could not meaningfully consent to a program they did not know existed.

They could not vote against activities that were hidden from them.

They could not challenge experiments they did not know were occurring.

They could not demand accountability for records they were never permitted to see.

That history matters when examining administrative power today.

The comparison is not that Child Protective Services operates as a classified intelligence operation.

It does not.

The comparison concerns what happens when government power becomes increasingly **administrative, insulated, contractual, and hidden from the citizens over whom that power is exercised.**

CPS Pipeline addresses this problem repeatedly.

Chapter Two, "The Courts That Rubber Stamp Tyranny," examines dependency proceedings conducted behind closed doors and the consequences that can follow from agency allegations before parents receive a meaningful opportunity to challenge them.

Chapter Seven, "How They Get Away With It," examines sealed records, gag orders, immunity doctrines, confidential proceedings, and institutional mechanisms that can make independent review exceptionally difficult.

The book reduces the problem to one sentence:

> **"You can't fight what you can't expose."**

That observation, attributed in *CPS Pipeline* to a former CPS investigator turned whistleblower, appears in **Chapter Seven, page 40**.

The statement applies far beyond CPS.

Government that cannot be seen cannot easily be supervised.

Government that cannot be questioned cannot easily be corrected.

Government that controls its own evidence, investigates its own conduct, defines its own standards, and shields its proceedings from public scrutiny can drift away from the constitutional premise of accountable public service.

From representative government to administrative government

The American constitutional structure begins with a radically different premise.

Government receives delegated authority from the people.

The Constitution does not begin with an agency.

It does not begin with a department.

It does not begin with a contractor.

It begins:

> **“We the People.”**

That distinction is fundamental.

The constitutional model places political sovereignty with the people and delegates governmental powers through institutions established by law.

Members of Congress and Presidents are electorally accountable. Judges exercise constitutionally established judicial authority. States operate under their own constitutional structures within the federal system.

The modern administrative state complicates that relationship.

Citizens increasingly encounter government not through elected representatives, but through agencies, departments, boards, contracted providers, evaluators, nonprofit organizations, private companies, hospital teams, guardians, vendors, and administrative professionals who may exercise enormous practical control over a person's life without ever appearing on a ballot.

That is particularly visible in child welfare.

A parent may never meet the legislator who created the statutory structure governing the case.

Instead, the parent meets a caseworker.

Then an evaluator.

Then a contracted psychologist.

Then a Guardian ad Litem.

Then a supervised visitation provider.

Then a Child Abuse Pediatrician.

Then a foster agency.

Then a Medicaid funded provider.

Then attorneys and court appointed professionals.

Each participant may claim authority derived from another institution.

The parent eventually confronts not one elected official, but a network.

That is administrative government in one of its most consequential forms.

Agencies are not the sovereign

There is an important legal distinction here.

Government agencies are not literally private fictional corporations merely because they possess organizational structures, budgets, employees, contracts, or corporate style administrative systems.

Some public bodies may possess statutory corporate characteristics, and governments routinely contract with private corporations and nonprofit organizations.

That does not make all agencies private companies.

The constitutional concern is deeper.

An agency is not the source of sovereignty.

An agency possesses only the authority lawfully delegated to it.

A department does not possess natural rights.

A contractor does not become sovereign because government signs a contract.

A caseworker does not acquire unlimited authority because an agency manual says so.

A private provider receiving public money does not become the constitutional representative of the people merely because government outsourced a function to it.

Every legitimate exercise of public power must ultimately trace back to lawful constitutional and statutory authority.

That is precisely why administrative power becomes dangerous when the chain of accountability becomes difficult to see.

The citizen should always be able to ask:

Who authorized this?

Under what statute?

Under what constitutional power?

What evidence supports the action?

Who is accountable if the evidence is false?

Who can reverse the decision?

Who financially benefits from the intervention?

Who audits the contractor?

Who supervises the agency?

Who answers to the voter?

If those questions cannot be answered, government is no longer functioning with the transparency expected of a constitutional republic.

The fictional mirror

This is where the modern administrative structure can begin to resemble a **fictional mirror of constitutional government**.

The forms remain familiar.

There is a court.

There is an agency.

There are lawyers.

There are hearings.

There are orders.

There are regulations.

There are official titles.

There are government seals.

Everything looks like government.

The constitutional question is whether the substance still matches the appearance.

If an agency effectively accuses, investigates, defines risk, determines compliance, selects experts, controls records, recommends disposition, and then appears before a court that gives substantial deference to those conclusions, the structure may retain the appearance of separated constitutional powers while functioning very differently in practice.

The American Made congressional compendium identifies a similar concern. It describes dependency systems in which agencies investigate, agencies define risk, agencies define compliance, and courts may substantially defer to agency conclusions.

That is not the same thing as proving the entire child welfare system unconstitutional.

It is a warning about concentrated administrative power.

The more functions concentrated around one institutional network, the more urgently constitutional safeguards matter.

Due process matters.

Open courts matter.

Independent judicial review matters.

Preservation of exculpatory evidence matters.

Public records matter.

Financial audits matter.

Freedom of speech matters.

The ability to challenge government matters.

Without those protections, a constitutional republic can remain intact on paper while citizens experience something very different in practice.

The corporation cannot replace the citizen

The concern becomes more serious when government authority becomes intertwined with private economic interests.

CPS Pipeline, particularly Chapters Three and Eight, documents the book's concerns regarding foster care contractors, treatment providers, Medicaid billing, psychological evaluations, supervised visitation, residential facilities, child support contractors, and other entities that can receive revenue after a family enters the child welfare system.

These entities are not elected.

Yet their reports, diagnoses, recommendations, services, and records can influence whether a family remains together.

That creates a constitutional accountability question deserving far greater scrutiny.

When government delegates significant functions to a private corporation or nonprofit organization, **government cannot outsource its constitutional obligations along with the contract.**

Public authority cannot become unaccountable private power merely because a service has been privatized.

Government cannot evade due process by placing consequential functions inside a contractor.

It cannot evade transparency merely by routing information through proprietary systems.

It cannot evade responsibility for harm by pointing to a foster provider, evaluator, hospital, contractor, or nonprofit organization that government selected, licensed, funded, or relied upon.

If public money and delegated authority are being used to interfere with fundamental family relationships, constitutional accountability must follow that power.

MKUltra provides the historical warning

That is one of the lessons MKUltra should have taught America.

Government power does not become less governmental because an outside institution performs the work.

A university can be used.

A hospital can be used.

A foundation can be used.

A contractor can be used.

A physician can be used.

An intermediary can be used.

The identity of the institution does not answer the underlying question:

Who authorized the activity, and where did the authority come from?

MKUltra demonstrated how compartmentalization can make responsibility difficult to locate.

One participant knows the funding.

Another knows the experiment.

Another knows the subject.

Another knows the operational purpose.

Very few people may see the entire structure.

That is one of the dangers of administrative fragmentation.

No single participant needs to understand the whole system for the system to continue functioning.

That lesson should weigh heavily when examining today's child welfare networks.

A caseworker may believe she is following policy.

A doctor may believe he is satisfying a reporting obligation.

An evaluator may believe she is performing a neutral assessment.

A contractor may believe it is fulfilling a state contract.

A judge may believe the agency has already investigated the facts.

A foster provider may believe the placement was legally justified.

Every participant sees one piece.

The family experiences the entire machine.

Constitutional government requires visible accountability

A republic described by Abraham Lincoln as government “of the people, by the people, for the people” cannot remain healthy if consequential public power becomes so diffuse that nobody can identify who is responsible for exercising it.

Representative government depends upon accountability.

Administrative government depends heavily upon delegation.

Delegation is not inherently unconstitutional. Modern government uses agencies to administer laws enacted by legislatures.

The danger begins when delegation becomes insulation.

When agency interpretation substitutes for independent judicial judgment.

When contractors exercise consequential governmental functions without meaningful public accountability.

When secrecy prevents citizens from examining government conduct.

When immunity prevents meaningful remedies for unlawful acts.

When economic interests become entangled with coercive public power.

When bureaucracy begins to behave as though citizens exist to serve the system rather than the system existing to serve citizens.

At that point, the question is no longer merely whether an agency followed its own procedures.

The question becomes whether constitutional government itself has been inverted.

“We wrestle not against flesh and blood”

There is also a spiritual dimension to this problem.

It connects directly with the testimony of Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman and with **Chapter Ten of *CPS Pipeline*, “The Spiritual War.”**

America's founding cannot accurately be reduced to one theological source. The founding generation drew upon biblical thought, English common law, natural law, classical republican traditions, and Enlightenment political philosophy.

Biblical principles nevertheless formed an important part of the moral and intellectual environment in which the American experiment developed.

Human beings possess dignity government does not create.

Law exists above the ruler.

Power must be restrained because human beings are fallible.

Parents possess responsibilities toward their children that precede administrative government.

Conscience cannot simply be owned by the state.

Civil authority is not divine authority.

These ideas resonate through biblical tradition and through the natural rights philosophy reflected in America's founding documents.

The Declaration of Independence does not say rights are granted by agencies.

It states that human beings are **“endowed by their Creator”** with unalienable rights.

Government is instituted to secure those rights.

That order matters.

Creator.

Human being.

Rights.

Government.

Government does not come first.

When the state begins acting as though it created the family, granted parental authority, owns the child, or possesses rights superior to the people from whom its authority ultimately derives, the constitutional order has been turned upside down.

For Christians, the institutional struggle also has a spiritual dimension.

Paul writes in **Ephesians 6:12** that the struggle is not ultimately against “flesh and blood,” but against principalities, powers, and spiritual forces of evil.

That passage cautions against reducing systemic evil to individual personalities.

The caseworker is not necessarily the enemy.

The foster parent is not necessarily the enemy.

The doctor is not necessarily the enemy.

The judge is not necessarily the enemy.

The deeper danger can reside in structures, incentives, ideologies, fear, deception, secrecy, and systems that gradually normalize conduct that individuals might never undertake alone.

That does not erase personal accountability.

It places personal accountability inside a larger moral battle.

The Christian response is therefore not hatred.

It is truth.

Exposure.

Discernment.

Courage.

Protection of the innocent.

Resistance to deception.

Refusal to participate in wrongdoing.

Restoration of the proper relationship between God, the individual, the family, and civil government.

This is why the question of children reaches beyond public policy.

A child's identity is being formed.

A child's understanding of trust is being formed.

A child's relationship with authority is being formed.

A child's understanding of family is being formed.

Whoever controls those formative relationships exercises extraordinary power over the future.

That is why secrecy matters.

That is why family matters.

That is why constitutional government matters.

That is why trauma matters.

And that is why the warning contained in MKUltra should not remain locked inside history books.

America does not need to wait for another generation of declassified records to learn that concentrated power, secrecy, psychological manipulation, institutional self protection, and vulnerable children are a dangerous combination.

The constitutional republic requires something different.

Government that can be seen.

Government that can be questioned.

Government that can be challenged.

Government that answers to law.

Government that answers to the people.

And, for Americans who understand liberty through the biblical tradition, government that remembers it is **not God**.

The state is the servant.

The people are not its subjects.

Children are not its property.

What happens when the rescue system reproduces the injury?

This is ultimately where the MKUltra comparison leads.

The most disturbing lesson from MKUltra is not simply that government officials once experimented on human beings.

It is that intelligent and credentialed people operating within respected institutions participated in conduct that later generations recognized as profoundly unethical.

Government officials participated.

Researchers participated.

Physicians participated.

Universities participated.

Institutional authority provided legitimacy.

Secrecy limited scrutiny.

Today's child welfare system operates under the language of protection.

Many people working inside it undoubtedly believe they are protecting children.

History still warns us against allowing benevolent language to end the inquiry.

CPS Pipeline develops that argument across several chapters.

That matters because institutional time and childhood time are very different things.

A court may deliberate for six months.

A bureaucracy may require another evaluation.

An appeal may take a year.

The child experiences every night without the parent.

The attachment injury does not wait for the final ruling.

The congressional investigation that should follow

Congress does not need to declare CPS another MKUltra.

It needs to investigate whether modern child welfare practices are unnecessarily exposing children to trauma mechanisms that science already understands.

That investigation should examine forced separation, attachment injury, placement instability, sibling separation, psychotropic medication, medical control, institutional confinement, trafficking vulnerability, abuse in care, retaliatory psychological evaluations, sealed proceedings, contractor incentives, and prolonged custody.

Congress should require reliable national reporting showing how many children enter foster care without serious psychiatric diagnoses and develop them after removal.

How many begin psychotropic medication after entering custody?

How many receive multiple psychiatric drugs?

How many experience three, five, or ten placements?

How many are separated from siblings?

How many suffer physical or sexual abuse after government takes custody?

How many disappear from placements?

How many become trafficking victims?

How many children eventually return home after the initial allegation proves unsubstantiated, exaggerated, or insufficient?

Congress should also ask the trauma question before removal rather than years afterward:

> **What trauma will this intervention inflict, and what evidence establishes that leaving the child safely at home presents the greater danger?**

We already know what trauma can do

America spent decades learning that MKUltra existed.

We do not need another generation to learn that childhood trauma has consequences.

Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman tell us through their personal accounts that fear, isolation, bodily control, loss of autonomy, and psychological coercion can remain with a child for a lifetime.

Modern neuroscience independently tells us that severe childhood adversity can affect attachment, emotional regulation, cognition, memory, executive functioning, and the body's stress response.

CPS Pipeline: State Sanctioned Kidnapping places those principles inside America's modern child welfare system.

The book traces how a family can be transformed into a government case, then follows that process through the courts, service providers, medical systems, foster care networks, and the financial structures surrounding child welfare. It examines secrecy, judicial deference, compulsory services, medical authority, abuse within foster care, gag orders, immunity, institutional funding, and the broader consequences of transferring authority over family, identity, and belonging to increasingly impersonal systems.

Taken as a whole, the book argues that the central danger is not limited to isolated bad actors or individual mistakes. It is found in structural features of the system itself, particularly those that can make state intervention relatively easy to initiate, difficult to challenge, and far harder for families to reverse.

The cumulative question is difficult to avoid:

> **What happens when an institution created to protect children repeatedly exposes some of them to the very conditions trauma science tells us can change a developing mind?**

Once government takes physical custody of a child, it assumes responsibility for what happens next.

There will always be circumstances in which removal is morally and legally necessary because a child faces immediate danger from violence, sexual abuse, severe deprivation, or life-threatening neglect. The American Made materials explicitly recognize those cases.

The scandal begins when removal becomes routine, when predictable trauma is dismissed as an administrative side effect, when symptoms created or intensified by separation are treated without adequately confronting the separation itself, when parental resistance is recast as pathology, when frightened children become vulnerable to predators, and when institutional secrecy makes it nearly impossible for the public to determine what happened.

MKUltra showed America what can happen when government, medicine, psychology, institutional authority, and secrecy converge around vulnerable human beings.

CPS Pipeline raises a different question for our generation:

> **Are we capable of recognizing dangerous patterns while they are happening, or will we wait fifty years for history to tell us what we should have seen ourselves?**

For the children already caught inside the system, fifty years is too late.

APPENDIX A

WHAT DOES THE GOVERNMENT ACTUALLY KNOW ABOUT CHILDREN AFTER THEY ENTER STATE CUSTODY?

A review of federal databases, GAO investigations, HHS Inspector General audits, AFCARS data, trafficking research, and the gaps that remain between them

The central paper raises a series of questions Congress should be asking about children after they enter government custody.

How many begin taking psychotropic medication after removal?

How many are simultaneously prescribed several psychiatric drugs?

How many experience three, five, or ten different placements?

How many are separated from brothers and sisters?

How many are physically or sexually abused after entering state custody?

How many disappear from placements?

How many become trafficking victims?

How many ultimately return home after allegations that triggered state intervention were unsubstantiated, insufficient, or never resulted in termination of parental rights?

A deeper review reveals an extraordinary problem.

The federal government collects enormous amounts of information about foster children, yet the United States still does not maintain one transparent national system capable of answering these questions from beginning to end for an individual child's journey through state custody.

The information exists in fragments.

AFCARS tracks foster care episodes, placement information, permanency goals, and exits.

The National Child Abuse and Neglect Data System, known as NCANDS, collects maltreatment information.

Medicaid claims contain prescription and treatment data.

States maintain separate child welfare databases.

Missing children may appear in child welfare, law enforcement, and National Center for Missing & Exploited Children systems.

Trafficking allegations may be recorded through still other programs.

Federal inspectors audit samples of records after the fact.

These systems were not designed as one integrated longitudinal accountability record.

As a result, policymakers can know that hundreds of thousands of children pass through foster care while still struggling to answer a much simpler question:

What happened to each child after government took custody?

That fragmentation should become part of the congressional investigation itself.

1. Psychotropic medication after entering custody

What we know

Federal investigators have established that psychotropic drug use among foster children warrants substantial oversight.

Florida DCF, February 2024: Florida publishes its own *Psychotropic Medications Report for Children in Out-of-Home Care*. As of **February 28, 2024**, Florida reported that **964 of 6,002 children ages 0 through 17 in out-of-home care, or 16.06 percent, had one or more current psychotropic prescriptions**.

The numbers were considerably higher among adolescents. For children **ages 13 through 17**, Florida reported **1,232 of 4,318 children, or 28.53 percent**, with a current psychotropic prescription. Among 13 through 17 year olds in **licensed substitute care**, the rate reached **33.37 percent**.

Florida DCF, August 2023: An earlier Florida report identified **2,264 of 19,888 children in out-of-home care, or 11.38 percent**, as having at least one current psychotropic prescription. Florida's reporting also provides breakdowns by age, sex, race, placement type, region, and community based care lead agency.

There is an important methodological caution. **The August 2023 and February 2024 Florida reports appear to use somewhat different tables or reporting populations. Their headline percentages therefore should not be presented as evidence of a simple increase from 11.38 percent to 16.06 percent without first reconciling the definitions and denominators used in each report.**

The Florida data are especially important when placed beside the original federal investigation.

The Government Accountability Office's **GAO-12-201, *Foster Children: HHS Guidance Could Help States Improve Oversight of Psychotropic Prescriptions*, issued in December 2011**, examined foster children enrolled in Medicaid in Florida, Massachusetts, Michigan, Oregon, and Texas.

Using 2008 data, GAO found that foster children in the five states were prescribed psychotropic medications at markedly higher rates than nonfoster children enrolled in Medicaid. Depending upon the state, approximately **21 percent to 39 percent of foster children** received at least one psychotropic medication. GAO found foster children were prescribed these medications at rates approximately **2.7 to 4.5 times higher** than nonfoster Medicaid children.

GAO emphasized an important qualification. The higher prescribing rates did not, by themselves, prove inappropriate prescribing. Children entering foster care may have greater mental health needs and substantially greater histories of trauma than other children.

But that finding did not end the federal concern.

HHS Office of Inspector General, 2018: HHS OIG conducted an important follow-up investigation involving **625 foster children in five states**, using foster care case files and Medicaid claims from **fiscal year 2015**.

The investigation found that **one in three foster children receiving psychotropic medication did not receive treatment planning or medication monitoring required under their own states' policies.**

That distinction is critical.

The issue is not simply how many foster children receive psychiatric medication. The federal government's own investigation found significant deficiencies in whether children receiving those drugs were also receiving the treatment planning and clinical monitoring their states required.

And the federal government is examining the issue again.

HHS Office of Inspector General, March 16, 2026: OIG announced a new investigation titled *Treatment Planning and Medication Monitoring for Children in Foster Care Receiving Psychotropic Medication*.

The investigation is particularly significant because OIG explicitly states that, **approximately ten years after the period examined in its earlier review, high rates of psychotropic medication use among foster children remain concerning.**

OIG plans to examine **Medicaid claims and foster care case files from five selected states**, focusing on screening, assessment, treatment planning, and medication monitoring.

As of this writing, that investigation remains active. **Its final findings have not yet been released.**

That means Congress should be watching this investigation closely. The federal government is presently asking whether problems identified approximately a decade ago continue inside today's foster care system.

There is another important federal data source.

The Centers for Medicare & Medicaid Services now collects broader behavioral health quality measures through the Medicaid and CHIP Child Core Set, including a measure titled **"Metabolic Monitoring for Children and Adolescents on Antipsychotics."**

That measure can help determine whether children receiving antipsychotic medications receive appropriate metabolic monitoring, an important safety issue because these drugs can produce significant metabolic effects.

The limitation is equally important. **CMS Child Core Set figures are not restricted to children in foster care.** They therefore cannot replace a foster specific analysis such as GAO's five state investigation or HHS OIG's foster care reviews.

Taken together, these federal and Florida records raise a much larger question than whether psychotropic medications are sometimes medically appropriate.

They unquestionably can be.

The question for this investigation is whether children who have just experienced forced separation, loss of attachment, placement disruption, sibling separation, institutionalization, or repeated changes in caregivers are subsequently developing behavioral symptoms that are treated pharmacologically, and whether government is adequately distinguishing **preexisting psychiatric illness from trauma produced or intensified after state intervention.**

That question leads directly to the national data gap.

What we do not know nationally

What federal reporting still does **not** routinely provide is the precise question posed in this paper:

> **How many children entered state custody without psychotropic medication and began taking those medications after removal?**

AFCARS is not a prescription database.

Medicaid contains prescription claims, but those claims must be linked with child welfare records to establish the timing of medication relative to removal, placement changes, diagnoses, sibling separation, institutionalization, and reunification.

HHS OIG's methodology demonstrates that such linkage is possible. Its investigators have used both Medicaid claims and foster care case files.

The problem is that the resulting information is not routinely produced as a national child welfare accountability measure.

Congress should require it.

For every child entering foster care, researchers should be able to determine whether the child was taking a psychotropic medication **before removal**, whether a new medication was initiated **after removal**, whether additional drugs were added following placement changes, how long those prescriptions continued, what diagnosis supported them, what monitoring occurred, and whether the medications were discontinued after reunification.

Without that longitudinal information, the United States can count prescriptions without adequately answering the far more consequential question:

> **What happened to the child's mental health after the government took custody?**

2. Multiple psychiatric drugs and polypharmacy

Federal investigators have documented simultaneous use of multiple psychotropic medications among foster children.

GAO reported that a subset of foster children receiving psychotropic drugs were simultaneously taking three or more.

Earlier federal reviews also identified children receiving five or more psychotropic medications concurrently, a level that raised concerns among consulting child psychiatrists.

This issue connects directly with **Chapter Three of the *CPS Pipeline* book, "The Incentive Machine,"** and its discussion of psychiatric medication in foster care.

It also connects with **"Diego,"** the six year old discussed in *CPS Pipeline*, **Chapter Five, page 30**, whom the book describes as receiving three psychotropic medications during 18 months in foster care following a disputed medical removal.

The comparison does not establish that "Diego's" medications were medically inappropriate merely because three drugs were prescribed.

His case raises the larger question federal investigators themselves have asked:

> **Who independently reviews psychiatric polypharmacy among children whose parents may no longer control their medical decisions?**

There is no simple national public dashboard allowing parents, Congress, or researchers to determine in real time how many foster children are taking one, two, three, four, or five psychotropic medications concurrently.

3. State evidence on psychotropic oversight

Federal audits show that medication oversight problems are not confined to one state.

HHS OIG has identified incomplete medication documentation, missing authorization records, and monitoring weaknesses in multiple state child welfare systems.

Audits of states including Florida, California, and Indiana have found gaps between medications prescribed to children and what appeared in state child welfare records.

Those findings create an accountability problem extending beyond prescribing rates.

> **If government assumes legal custody of a child, government should possess an accurate record of the medications being administered to that child.**

The absence of reliable records prevents meaningful oversight.

It also makes it harder to determine whether medication began before or after removal, whether dosages increased following placement instability, and whether behavioral symptoms changed after family separation.

4. Treatment planning and medication monitoring

Prescribing medication is only part of the issue.

The HHS Office of Inspector General has examined whether foster children receiving psychotropic medication also receive appropriate treatment planning and monitoring.

Its report, **"Treatment Planning and Medication Monitoring Were Lacking for Children in Foster Care Receiving Psychotropic Medication,"** identified deficiencies among sampled children in several states.

That finding should be read alongside the central trauma argument of this paper.

If a traumatized child's behavior is treated pharmacologically, Congress must determine whether the child is receiving meaningful trauma treatment or merely medication management.

Those are not the same thing.

5. How many placements does a foster child experience?

This question is better represented in federal data.

The **Adoption and Foster Care Analysis and Reporting System, or AFCARS**, contains case specific information regarding children for whom state child welfare agencies have placement, care, or supervisory responsibility.

AFCARS includes foster care history, removal information, discharge information, permanency goals, and placement settings.

Federal performance systems also measure placement stability.

The underlying national data can therefore address questions such as how often children change placements.

What is not always readily available to the public is a simple national presentation answering specific thresholds:

How many children experience three placements?

Five?

Ten?

How does placement instability differ by age?

How does it correlate with psychiatric diagnosis?

How does it correlate with psychotropic medication?

How does it correlate with running away, trafficking vulnerability, or failure to reunify?

Congress should require those longitudinal results to be routinely published.

Placement instability should be treated as a child safety outcome, not merely an administrative statistic.

6. Sibling separation

Federal law recognizes that sibling relationships matter.

The **Fostering Connections to Success and Increasing Adoptions Act of 2008** requires state child welfare agencies receiving federal funds to make reasonable efforts to place siblings removed from their homes together. When siblings cannot be placed in the same home, agencies generally must make reasonable efforts to maintain frequent visitation or other continuing contact when doing so is consistent with the safety and well being of the children.

That legal requirement exists because sibling relationships can become critically important after removal.

A child entering foster care may lose a mother, father, home, school, neighborhood, routines, pets, and familiar caregivers in a matter of hours. In that moment, a brother or sister may be the only remaining person who shares the child's history and understands what has just been lost.

The trauma research examined in *When the State Becomes the Trauma* makes this especially significant. When children lose primary attachment figures, preserving remaining family relationships can provide continuity during an otherwise destabilizing event.

Federal reviews, however, show that the legal preference for keeping siblings together does not guarantee that it happens.

What the earlier national federal review found

The most useful nationwide federal comparison still comes from the Children's Bureau's **Child and Family Services Reviews, Round 3**, covering reviews conducted across all 50 states and the District of Columbia.

Across the cases reviewed, federal evaluators found that children were placed with all of their siblings who were also in foster care in only **46 percent of applicable cases**.

When siblings were separated, federal reviewers found a valid reason for separation in **65 percent** of the applicable cases. For siblings placed apart, federal reviewers also found that contact was inconsistent. Approximately **66 percent** had visits with sufficient frequency, while **75 percent** had visits judged to be of sufficient quality.

Those figures are important because they show that the federal sibling placement mandate has never translated into universal sibling preservation.

Less than half of the applicable sibling groups examined in the Round 3 federal review were placed together throughout the review period.

More recent Round 4 federal reviews show the problem remains

The Children's Bureau is now conducting and publishing **Round 4 Child and Family Services Reviews**, and the newer state reports demonstrate that sibling placement continues to vary sharply across the country.

Recent federal reviews include some states with relatively strong performance and others where many siblings remained separated.

For example, the **2025 Rhode Island Round 4 Final Report** found that children with siblings were placed together in **75 percent of applicable cases**. Federal reviewers reported that where the state performed poorly, sibling separation was often driven by **resource limitations rather than the individual needs of the children**. Reviewers also noted that agencies did not always continue searching for placements capable of reunifying siblings after an initial separation.

A recent **Virginia Round 4** report found that children were placed with all siblings who were also in foster care in only **45.83 percent of applicable cases**.

Another Round 4 federal report found sibling placement together in **60 percent of applicable cases**, while a separate recent federal review reported a figure of only **36.36 percent** for the direct question of whether the child was placed with all siblings who were also in foster care.

Other states performed considerably better when the federal measure included either joint placement or a documented valid reason for separation. The **2025 Kentucky Round 4 Final Report**, for example, reported strong performance on sibling placement, while Maryland's recent federal review found siblings were either placed together or had a valid reason for separation in **89 percent of applicable cases**.

These state figures should not be averaged together and presented as a new national percentage. The Round 4 reviews examine separate state case samples, and the federal government has not yet published a completed nationwide Round 4 aggregate sibling placement figure comparable to the earlier Round 3 national analysis.

That absence is itself significant.

The newest AFCARS data still do not give the public a simple national sibling-separation rate

The federal government now has AFCARS foster care data available through **fiscal year 2025**. The National Data Archive on Child Abuse and Neglect lists FY2024 and FY2025 foster care files and a six month AFCARS dataset extending through FY2025.

AFCARS is a powerful national child welfare database. It contains case specific foster care information and can support detailed research on removal, placement, permanency, and a child's history in care.

Yet the existence of large federal datasets does not mean the public receives an easily understood national measure answering a basic question:

> **Of all children entering foster care with brothers or sisters also in care, how many remain together?**

The government should be able to report that number annually.

It should also be able to distinguish:

siblings placed together immediately;

siblings initially separated but later reunited in placement;

siblings partially separated because a larger sibling group was divided;

siblings permanently separated throughout foster care;

siblings separated for a documented safety or clinical reason;

siblings separated because no foster home could accept the whole group;

and siblings separated because of placement disruptions or lack of available beds.

These categories matter because not all sibling separation is equivalent.

There are legitimate circumstances in which siblings should not live together. One sibling may have harmed another. Children may require different levels of treatment. A particular placement may be unsafe.

But federal reviewers themselves have documented cases in which the obstacle was simply the absence of a foster home capable of accepting a sibling group.

That is not a child specific safety determination.

That is a **system capacity failure**.

The federal government recognizes that placement capacity is part of the problem

The federal Child and Family Services Review guidance treats failure to place siblings together because a home cannot accommodate the full sibling group as an area needing improvement unless the agency continues meaningful efforts to reunite them.

Federal guidance gives a concrete example of four siblings initially separated because no home could accept all four. Reviewers treated the shortage of an appropriate placement as a resource problem rather than a valid child specific reason for permanently separating the children.

That distinction should be incorporated into national reporting.

A child should not lose a brother or sister simply because the state assumed custody without possessing a placement capable of keeping the family unit intact.

Once government removes children from their parents, a lack of beds, foster homes, transportation, or staffing should not be permitted to disappear behind the bureaucratic phrase **“placement limitations.”**

For the child, it is another family separation.

Why this matters to the trauma analysis

Sibling separation is particularly important in the context of the MKUltra and CPS comparison developed in this paper.

Dr. Juliette Engel, Max Lowen, Cathy O'Brien, and Lynne Scott Hagerman describe childhood experiences in which isolation, separation from protective relationships, and dependence upon unfamiliar authority played central roles in the trauma they say they endured.

Modern foster care is not MKUltra, and lawful sibling separation is not equivalent to deliberate psychological experimentation.

The common mechanism being examined is **attachment disruption**.

A child who has just lost a parent may use a sibling as an emotional anchor.

The sibling remembers the same home.

The sibling knows the parents.

The sibling understands the family's routines and language.

The sibling may be the only person in the foster environment who can reassure the child that the life that existed before removal was real.

Separating siblings can therefore compound the initial attachment rupture.

The state may understand two separate foster placements.

The children may experience the loss of the last person who still feels like home.

What Congress should require

Federal law has required reasonable efforts to preserve sibling relationships since 2008.

Nearly two decades later, the federal government should be able to tell the American people exactly how successful that mandate has been.

Congress should require a standardized annual national sibling preservation report showing:

the number of children entering foster care with at least one sibling also in care;

the percentage placed with all siblings;

the percentage placed with some but not all siblings;

the percentage completely separated;

the reasons for every separation;

the number later reunited in the same placement;

the frequency and duration of sibling visitation for children living apart;

the number separated because no suitable placement could accept the entire sibling group;

and the developmental and permanency outcomes associated with sibling separation.

The newest federal reviews show that states can achieve much better sibling preservation than others, but they also show that the outcome remains heavily dependent on placement resources, state practice, and local capacity.

That is not enough.

A government that removes brothers and sisters from their parents should be able to tell the public whether it also removed those children from one another, why it did so, how long the separation lasted, and what it did to repair the damage.

7. Abuse after children enter state custody

The federal record establishes that maltreatment in foster care and residential facilities occurs.

The harder question is how completely the government counts it.

HHS Office of Inspector General reported in 2024 that many states lacked sufficient information to monitor maltreatment in residential facilities serving children in foster care.

Federal investigators identified states unable to consistently identify patterns of maltreatment, limited visibility across facility chains, difficulties monitoring children placed outside their home states, and inconsistent reporting.

GAO has also documented allegations of physical, emotional, and sexual maltreatment in residential facilities, including cases involving death.

These federal findings correspond with **Chapter Six of the *CPS Pipeline* book, "Where the Bodies Are Buried."**

The book discusses **"Alex Hill," "Giovanni Eastwood," and "Jacob Pina"** as children whose cases involved death or severe neglect following foster placement.

The federal reports do not independently verify every assertion in the book.

They do establish the broader conclusion that serious maltreatment can occur inside residential systems serving foster youth and that important weaknesses remain in how states track and oversee that harm.

> **Abuse in government custody can be real while the national data describing it remain incomplete.**

8. Children who disappear from foster care

The word **disappear** requires precision.

Federal and state systems generally use administrative categories such as **runaway, missing from care, or unauthorized absence**. A child who leaves a foster placement voluntarily and is recovered the next day is not equivalent to a child who is abducted, trafficked, or remains missing for months.

Yet those very different circumstances can initially enter government systems through the same broad category of a missing child.

The newest national data show the scale of the problem.

NCMEC reported 23,348 children missing from foster care in 2025

According to the **National Center for Missing & Exploited Children**, NCMEC received **23,348 reports of children missing from foster care in 2025**.

That number is particularly striking when placed beside NCMEC's overall missing children caseload.

Across all categories, NCMEC supported **32,167 missing children cases in 2025**. Of those, **29,013 were resolved**, producing an overall reported recovery rate of approximately **90 percent**. NCMEC reported **3,154 cases still active** at the end of the reporting period.

NCMEC also reported that **92 percent of all missing children cases it handled in 2025 involved children who had run away**.

These figures should be interpreted carefully.

The **23,348 foster care figure refers to reports of children missing from foster care**, while the broader 32,167 figure includes missing children from multiple circumstances, including family abductions, nonfamily abductions, lost or injured children, and runaways.

The foster care figure nonetheless establishes something significant:

> **Tens of thousands of missing from care reports reach the national clearinghouse in a single year.**

That is not a marginal phenomenon.

The federal reporting system has previously failed to capture many missing foster care episodes

The current 2025 NCMEC figures also need to be considered against a disturbing federal audit of earlier reporting practices.

In **2023**, the HHS Office of Inspector General examined **74,353 episodes in which foster children were missing for at least two calendar days** between July 1, 2018, and December 31, 2020.

OIG found serious failures in state reporting to NCMEC.

Of 100 sampled missing child episodes:

- only **33 were reported to NCMEC within the federally required 24 hour period**;
- **45 were never reported to NCMEC**;
- and **22 were reported late**.

Extrapolating from the sample, OIG estimated that **51,115 of the 74,353 missing foster care episodes were not reported to NCMEC in accordance with federal requirements**.

That included an estimated:

- **34,869 episodes never reported to NCMEC at all**; and
- **16,246 episodes reported later than the required 24 hour window**.

That means approximately **69 percent of the missing foster care episodes in the audit universe were estimated to have been reported improperly or not reported at all**.

This finding is critical when interpreting historical national statistics.

Earlier NCMEC totals were not necessarily a complete measure of children missing from foster care because some state agencies were failing to notify NCMEC as required.

The federal government itself documented the reporting gap.

HHS OIG subsequently closed its recommendation in March 2024 after the Administration for Children and Families took steps intended to improve compliance.

That may help explain why more recent reporting is stronger.

It does not erase the historical undercount.

A missing child can pass through several disconnected systems

AFCARS collects case level foster care information and can identify circumstances such as runaway status. The National Center for Missing & Exploited Children maintains a separate missing child system. Law enforcement uses the FBI's National Crime Information Center. State agencies maintain their own case management systems. Trafficking screening and investigations may be handled through still other child welfare, law enforcement, medical, or victim services programs.

Federal law requires that a child missing from foster care be reported promptly to law enforcement and NCMEC. NCMEC specifically instructs agencies to contact law enforcement immediately and have the child's information entered into the FBI's NCIC system.

The problem is not that government possesses no data.

The problem is that the child's experience can be divided across multiple data systems.

One system may record the child as a runaway.

Another records the missing person investigation.

Another records a trafficking allegation.

Another records a placement disruption.

Another records medical treatment.

Another records a return to care.

Unless those records are linked longitudinally, Congress cannot easily determine the full sequence of events.

State data show how repeated missing episodes can become concentrated among a small number of vulnerable children

Recent state level audits provide another warning.

A Connecticut state audit covering **2021 through 2023** identified **3,736 runaway incidents involving minors in state care**, according to reporting on the audit. Runaway incidents increased approximately **42 percent** over the period examined.

Even more striking, **six teenage girls accounted for 341 runaway episodes** during the three year period.

Some youth were missing for extended periods, including one reportedly absent for as long as **two years**. The audit also identified trafficking victimization among some of the children examined and raised concerns about inadequate planning, inconsistent screening, and a shortage of appropriate placements.

That example illustrates why a raw count of missing episodes is not the same thing as the number of individual missing children.

One highly vulnerable child may disappear from care many times.

That repeated pattern is itself a risk indicator.

What Congress still cannot answer cleanly

The 2025 NCMEC data answer part of the question.

We now know that NCMEC received **23,348 missing from foster care reports in one year**.

What the public still cannot see in one national report is:

How many unique children those 23,348 reports represent.

How many children went missing once.

How many disappeared repeatedly.

How many were missing for less than 24 hours.

How many were gone for days, weeks, months, or years.

How many were recovered.

How many were injured while missing.

How many experienced sexual exploitation or trafficking.

How many returned voluntarily.

How many were located by law enforcement.

How many remain unresolved.

How many died while missing.

How many were placed back into the same setting from which they repeatedly ran.

Those are not unreasonable questions.

They are the minimum information needed to evaluate whether the government successfully protected children after assuming custody.

Congress should require one national longitudinal **Missing From Foster Care Accountability Report** that links child welfare, NCMEC, NCIC, placement history, trafficking screening, and recovery outcomes while protecting children's identities.

The state should be able to answer not merely how many reports were filed, but **what happened to the children.**

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9. Foster care and human trafficking

Federal agencies now provide stronger numerical evidence for the relationship between foster care, missing from care episodes, and child sex trafficking.

The strongest current national figure comes from NCMEC.

In 2025, 17 percent of children reported missing from foster care to NCMEC were identified as likely child sex trafficking victims

According to NCMEC's **2025 impact data**, of the children missing from foster care who were reported to NCMEC, **17 percent were identified as likely victims of child sex trafficking**.

Placed beside the **23,348 reports of children missing from foster care in 2025**, that percentage demonstrates the seriousness of trafficking risk among the missing from care population.

However, the figures must not be misrepresented.

The 17 percent figure does **not** mean that 17 percent of all children in foster care are trafficking victims.

It does not mean every child who runs away is trafficked.

It refers specifically to children **missing from foster care and reported to NCMEC**, among whom NCMEC identified 17 percent as likely child sex trafficking victims.

That is a very different and much more defensible statement.

The data suggest trafficking risk rises sharply once a child is missing from care

NCMEC itself describes children who run from foster care as particularly vulnerable because they may lack shelter, food, stable relationships, and a sense of belonging, conditions traffickers can exploit.

That observation corresponds directly with the trauma analysis developed throughout this paper.

A child who has already experienced removal from parents, sibling separation, placement disruption, or institutional care may enter a runaway episode with severe unmet attachment and survival needs.

A trafficker does not necessarily need sophisticated psychological techniques.

The child may already be hungry.

The child may need somewhere to sleep.

The child may want affection.

The child may distrust government authorities.

The child may believe no safe adult is coming.

Those vulnerabilities can become tools of exploitation.

NCMEC's 2025 trafficking data show a broader increase in identified trafficking reports

NCMEC also reported a dramatic rise in child sex trafficking reports submitted through its CyberTipline in 2025.

The organization reported **113,530 child sex trafficking reports in 2025**, compared with **26,823 in 2024**, a reported increase of **323 percent**.

That increase does not necessarily mean actual trafficking prevalence increased by 323 percent.

NCMEC specifically notes that the change reflects multiple factors, including enactment of the **REPORT Act of 2024**, which expanded reporting obligations for electronic service providers, as well as changes in platform reporting and online trafficking activity.

That distinction is important because reporting changes can create apparent statistical spikes even when the underlying prevalence changes by a different amount.

The same caution applies to missing foster care data.

Better reporting can increase the count without meaning that the actual number of children going missing increased proportionally.

Current foster care trafficking statistics are stronger than the old "86 percent" claim

This is especially important because foster care trafficking debates have historically relied on widely repeated statistics that are often misquoted.

One frequently circulated claim states that **86 percent of child sex trafficking victims came from foster care**.

That is not what the older NCMEC statistic meant.

The underlying statement referred to a subset of endangered runaways identified as likely sex trafficking victims, and among that subset a large proportion were reported to have been in social services care when they went missing.

It did **not** establish that 86 percent of all trafficking victims nationally originated in foster care.

The current 2025 NCMEC data are cleaner.

The strongest defensible statement is:

NCMEC reported 23,348 children missing from foster care in 2025, and 17 percent of the missing from care children reported to NCMEC were identified as likely child sex trafficking victims.

That statistic is serious enough without exaggeration.

Peer reviewed research also links runaway episodes and placement instability with trafficking allegations

A peer reviewed study indexed by the Department of Justice examined nearly **37,000 Florida youth age ten and older** who experienced at least one foster placement between 2011 and 2017.

Researchers examined human trafficking allegations among youth who ran away from foster care and found that trafficking allegations were associated with factors including prior maltreatment, placement history, and runaway behavior.

The importance of the study is not that every runaway youth was trafficked.

It is that trafficking did not appear randomly.

It clustered among children already experiencing instability.

Repeated movement.

Prior abuse.

Running away.

Disrupted relationships.

These factors map closely onto the trauma vulnerabilities discussed elsewhere in this paper.

Federal law recognizes the connection between going missing and trafficking

The federal government has formally acknowledged this relationship.

The Administration for Children and Families issued guidance in 2022 titled **“Responding to Human Trafficking among Children and Youth in Foster Care and Missing from Foster Care.”**

Federal child welfare law requires agencies to respond when foster children go missing and to address trafficking risk, including through reporting and efforts to understand what happened during a missing episode.

Congress also considered the **Find and Protect Foster Youth Act**, which would require HHS to evaluate state and tribal protocols concerning children missing from foster care and would require additional work by HHS and GAO concerning missing and trafficked foster youth. The Congressional Budget Office described those proposed requirements in January 2024.

The fact that Congress has considered additional federal legislation demonstrates that existing systems have not fully solved the problem.

The greatest data gap is the pathway from missing child to trafficking victim

The current system can tell us that a child went missing.

It may later identify that child as a trafficking victim.

What the United States still does not routinely publish is the complete national pathway between those events.

Congress should require data showing:

How many children missing from foster care were screened for trafficking after recovery.

How many screenings were positive.

How many trafficking allegations were investigated.

How many were substantiated.

How many resulted in criminal charges.

How many children disappeared repeatedly before trafficking was identified.

How long children were missing before exploitation occurred or was discovered.

What placement the child left immediately before the trafficking episode.

Whether children were placed back into the same setting after recovery.

How many received specialized trafficking services.

How many were trafficked again.

How many remain missing.

Those data would reveal whether the state is interrupting trafficking pathways or simply recording the consequences after exploitation occurs.

The most supportable national conclusion

The available evidence now allows a stronger conclusion than the earlier version of this section.

> **In 2025, NCMEC received 23,348 reports involving children missing from foster care, and 17 percent of the children missing from care who were reported to NCMEC were identified as likely victims of child sex trafficking.**

Federal auditors have also documented serious historical failures by state agencies to report missing foster care episodes to NCMEC, estimating that **51,115 of 74,353 missing episodes examined from 2018 through 2020 were either never reported or not reported within the federally required time period.**

Together, these findings establish two facts.

First, children missing from foster care represent a substantial national population.

Second, trafficking risk among that population is not speculative.

It is measurable.

What remains inadequately measured is the complete trajectory from removal, to placement disruption, to running away, to exploitation, to recovery, and ultimately to long term outcome.

That finding strengthens the trafficking concerns raised in *CPS Pipeline* without making the unsupported claim that every missing foster child is trafficked or that CPS itself is necessarily the trafficker.

The more precise conclusion is also more powerful:

Government takes custody promising safety. When thousands of those children subsequently go missing, and a significant share of the missing population is identified as likely trafficking victims, the government owes the public a complete accounting of how those children became vulnerable, what happened while they were missing, and whether the system returned them to safety when they were found.

10. Congregate care and institutional placement

The federal government has spent years attempting to reduce unnecessary reliance on institutional and group home placements.

That history matters in a paper examining isolation, institutional authority, psychiatric treatment, and trauma.

Tens of thousands of foster youth remain in congregate or residential care at a given point in time.

Congress has limited federal reimbursement for certain congregate-care placements, reflecting a growing preference for family-based placements when they can be made safely.

Government therefore already recognizes that **where a child is placed matters.**

Custody is not biologically neutral.

Institutionalization is not interchangeable with family attachment.

That reality should be reflected not only in funding policy, but in trauma policy.

11. Reunification after unsubstantiated, insufficient, or nonvictim findings

AFCARS tracks how children leave foster care, but it does not answer one of the most important accountability questions in the entire child welfare system:

How many children were removed from their families even though the allegation that triggered government intervention was ultimately unsubstantiated, insufficient, contradicted, closed without a finding, or otherwise failed to establish that the child was a victim of maltreatment?

The newest federal data bring us closer to answering that question, but they still do not provide the complete answer.

In FY2024, 79,209 children left foster care through reunification

The Children's Bureau's **FY2024 AFCARS dashboard** reports that **176,730 children exited foster care during federal fiscal year 2024**.

Their recorded exit reasons included:

- **79,209 children, or 45 percent, reunified with parents or primary caretakers**
- **46,935, or 27 percent, exited through adoption**
- **19,082, or 11 percent, exited to guardianship**
- **11,359, or 6 percent, went to live with relatives**
- **15,379, or 9 percent, exited through emancipation**
- **2,068, or 1 percent, transferred to another agency**
- **661 were recorded as runaway or whereabouts unknown at exit**
- **391 children died while in foster care**
- and additional cases were reported in other or missing categories. (Administration for Children and Families)

Reunification therefore remained the single largest exit category in FY2024.

That matters.

But reunification alone does not tell us why the child entered foster care, whether the allegations were ultimately established, or whether removal should have occurred in the first place.

A legitimate safety problem can be corrected and a family later reunified.

A parent struggling with addiction may successfully complete treatment.

A dangerous domestic violence situation may change.

A family may secure housing.

A child may safely return home after the original danger has been addressed.

Those are legitimate reunifications following legitimate intervention.

The accountability problem arises because the federal system does not clearly distinguish those cases from a very different category:

> **children who were removed even though the underlying maltreatment allegation was never substantiated.**

The 2024 NCANDS data reveal that thousands of children classified as nonvictims still received foster care services

The most significant recent federal data come from the **Child Maltreatment 2024** report.

NCANDS, the National Child Abuse and Neglect Data System, records the outcome of CPS investigations and assessments.

For FFY2024, the report identified:

- **517,967 children classified as victims**
- **2,557,771 children classified as nonvictims**

Among those populations, the report states that:

- **102,765 victims received foster care postresponse services**
- **38,723 nonvictims also received foster care postresponse services**. (LINK nky)

That means **1.5 percent of the nonvictim population in the reporting states received foster care services following the CPS response**.

The federal definition requires careful explanation.

“Nonvictim” does **not** mean that every allegation was false.

NCANDS nonvictim records can include children whose cases were classified as:

- unsubstantiated;
- alternative response nonvictim;
- closed with no finding;
- other nonvictim dispositions;
- or similar state defined outcomes.

The NCANDS codebook specifically includes disposition categories such as **Substantiated**, **Indicated or Reason to Suspect**, **Alternative Response Victim**, **Alternative Response Nonvictim**, **Unsubstantiated**, **Unsubstantiated Due to Intentionally False Reporting**, and **Closed No Finding**. (NDACAN)

Therefore, the **38,723 figure cannot be described as 38,723 wrongful removals**.

Federal data do not support that conclusion.

But the number establishes something that deserves far greater congressional attention:

> **Tens of thousands of children received foster care services after a CPS response in a year when the federal maltreatment data classified them as nonvictims.**

That is a materially different statement from saying that all foster children were proven victims before removal.

They were not.

Florida alone reported 1,803 nonvictims receiving foster care services in 2024

The state level figures demonstrate how widely this issue varies.

According to the 2024 Child Maltreatment table, Florida reported:

- **19,206 victims**, of whom **5,815, or 30.3 percent, received foster care services**;
- **276,741 nonvictims**, of whom **1,803, or 0.7 percent, received foster care services**. (LINK nky)

Other examples include:

Missouri: 3,241 nonvictims received foster care services, representing 3.5 percent of reported nonvictims.

Tennessee: 3,002 nonvictims received foster care services, or 3.7 percent.

West Virginia: 1,806 nonvictims, or 5.1 percent.

Wisconsin: 1,589 nonvictims, or 5.7 percent.

Minnesota: 1,650 nonvictims, or 5.6 percent.

Nebraska: 1,036 nonvictims, or 3.2 percent. (LINK nky)

The differences between states are substantial.

Some states reported virtually no nonvictim foster care removals.

Others reported rates above five percent.

Those differences warrant investigation.

Are the differences caused by state law?

Different disposition definitions?

Different removal standards?

Alternative response programs?

Different reporting practices?

Different thresholds for judicial intervention?

Or genuinely different case populations?

The current national reporting system does not make those answers immediately visible.

The 2023 numbers show the same phenomenon

This is not a one year anomaly.

The **Child Maltreatment 2023** report identified approximately **3.08 million children who received either an investigation or alternative response**.

Of these:

- approximately **546,159 were classified as victims**;
- approximately **2,535,556 were classified as nonvictims**.

The report also recorded:

- **105,153 victims receiving foster care services**;
- and **40,076 nonvictims receiving foster care services**. (Administration for Children and Families)

Again, these are not automatically cases of wrongful removal.

But they show that federal child welfare data have recorded roughly **40,000 children per year classified as nonvictims who nonetheless received foster care services** in both 2023 and 2024.

That finding deserves to be elevated into a central congressional question.

What happened to those children?

Of the 40,076 nonvictims receiving foster care services in 2023 and the 38,723 in 2024:

How many were eventually reunified?

How many returned home within days?

How many remained in care for months?

How many were placed with relatives?

How many entered adoption proceedings?

How many received psychotropic medications?

How many were moved repeatedly?

How many were separated from siblings?

How many experienced abuse while in care?

How many of the original reports were unsubstantiated?

How many were classified as alternative response cases?

How many were closed with no finding?

How many were later substantiated through another report?

How many families were ultimately exonerated?

The federal government does not currently publish those answers as one linked national outcome.

NCANDS knows the disposition. AFCARS knows the foster care outcome. The public does not get the linkage.

This is the heart of the problem.

NCANDS contains case level information about CPS reports and dispositions.

AFCARS contains case level information about foster care entry, placement, permanency, and exit.

Federal Child Welfare Outcomes reports already use both datasets together for some measures.

For example, federal Outcome 2 combines **NCANDS and AFCARS** to measure maltreatment occurring while children are in foster care.

Federal Outcome 4 uses AFCARS to measure **time to reunification and reentry into foster care**. (CW Outcomes)

The federal government therefore already possesses technical experience linking child welfare datasets for national performance measures.

What it does not routinely publish is the linkage most relevant here:

> **Maltreatment disposition at entry + foster care removal + duration in custody + services received + exit outcome.**

That missing linkage prevents Congress and the public from distinguishing among fundamentally different cases.

A child removed after severe substantiated abuse should not be statistically indistinguishable from a child removed during an investigation that ultimately produced a nonvictim finding.

Yet at the national public reporting level, those trajectories are not presented together.

Reunification rates also vary significantly by state

The national FY2024 reunification rate was approximately **45 percent of foster care exits**. (Administration for Children and Families)

Recent federal reviews show meaningful state variation.

For example, federal reporting cited in Texas's Round 4 Child and Family Services Review material states that the national reunification share was approximately **48 percent** in the comparison data used for that review, while Texas remained below that national level despite improvement between FY2023 and FY2024. (CFSR Portal)

In FY2023, New Jersey reported **48.9 percent** of foster care exits to reunification, while North Dakota reported **56.5 percent**. (CW Outcomes) (CW Outcomes)

The variation reinforces the need for more granular reporting.

A national reunification percentage alone cannot tell us whether states differ because of child safety needs, family preservation efforts, court practice, removal thresholds, funding structures, or other institutional factors.

Congress should create a disposition to outcome measure

Congress should require HHS to publish an annual national table linking the initial CPS disposition to the child's foster care outcome.

At minimum, every child entering out of home custody should be placed into one of the following disposition categories:

Substantiated maltreatment.

Indicated or reason to suspect.

Alternative response victim.

Alternative response nonvictim.

Unsubstantiated.

Unsubstantiated due to intentionally false reporting.

Closed with no finding.

Other or unresolved.

For each category, the government should report:

how many children were removed;

the average and median length of custody;

how many placements they experienced;

whether siblings were separated;

whether psychotropic medications began after removal;

whether maltreatment occurred while in care;

whether the child went missing;

whether trafficking was identified;

and whether the child ultimately exited through reunification, kinship care, guardianship, adoption, emancipation, transfer, runaway status, or death.

That would finally allow Congress to distinguish between **successful intervention following proven danger** and **state imposed family separation after allegations that never resulted in a victim finding.**

Without that distinction, reunification statistics tell us only that children came home.

They do not tell us why they were removed.

They do not tell us whether the evidence changed.

And they do not tell us whether the separation should have happened in the first place.

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12. The data are rich, but accountability is fragmented

The United States does not suffer from a shortage of child welfare databases.

It suffers from a shortage of **integrated accountability**.

Federal agencies collect extraordinary quantities of information about children and families.

Yet those records are divided among systems designed for different statutory purposes, operated by different agencies, submitted under different definitions, and often analyzed separately.

That fragmentation prevents the public from seeing a child's complete journey through state intervention.

AFCARS contains foster care histories for children nationwide

The **Adoption and Foster Care Analysis and Reporting System** is federally mandated and collects case specific information about children for whom state or tribal Title IV E agencies have responsibility for placement, care, or supervision.

The FY2024 AFCARS file contains **107 variables** concerning subjects such as child demographics, previous foster care stays, service goals, removal and discharge dates, funding sources, and parent information. (NDACAN)

AFCARS data are now available through **FY2025**, according to the National Data Archive on Child Abuse and Neglect. (NDACAN)

The Children's Bureau's national dashboard uses AFCARS to report entries, exits, living arrangements, permanency plans, and other foster care characteristics. (Administration for Children and Families)

For FY2024 alone, AFCARS reports:

- **174,280 children entering out of home care** in updated federal data;
- **176,730 children exiting foster care**;
- **79,209 exits to reunification**;
- **46,935 to adoption**;
- **19,082 to guardianship**;
- **15,379 through emancipation**;
- and other exit categories. (NCSACW) (Administration for Children and Families)

That is an enormous amount of information.

But AFCARS does not independently tell us whether the allegation leading to each removal was substantiated.

NCANDS contains investigation and maltreatment disposition data

The **National Child Abuse and Neglect Data System** contains another enormous set of records.

The FY2024 NCANDS Child File is a case level dataset containing children associated with CPS reports that received a disposition.

It includes information on:

- report dates;
- child demographics;
- types of alleged maltreatment;
- final maltreatment dispositions;
- risk factors;
- services;
- and perpetrators. (NDACAN)

The NCANDS disposition structure explicitly distinguishes among substantiated cases, indicated cases, alternative response findings, unsubstantiated cases, intentionally false reports, closed no finding cases, and other dispositions. (NDACAN)

The 2024 national report counted **517,967 victims and 2,557,771 nonvictims** in the foster care services analysis. (LINK nky)

Yet NCANDS alone does not provide the public with the complete subsequent foster care trajectory.

Medicaid knows what treatment the child received

Medicaid claims contain another part of the story.

For many foster children, Medicaid records:

prescriptions;

psychiatric medications;

doctor visits;

hospitalizations;

mental health treatment;

therapy;

laboratory monitoring;

and other reimbursed health services.

HHS Office of Inspector General has repeatedly linked Medicaid claims with foster care case files when investigating psychotropic medication oversight.

That proves that cross system linkage is technically feasible.

But those linked results are generally produced through special audits, not maintained as a routine public longitudinal child welfare dashboard.

NCMEC knows when many children go missing

The National Center for Missing & Exploited Children receives missing from care reports and works with child welfare agencies and law enforcement.

In 2025, NCMEC reported **23,348 children missing from foster care**, while federal audits have previously shown that many missing foster care episodes historically were not reported to NCMEC in accordance with federal requirements.

NCMEC also reported that **17 percent of children missing from foster care reported to it in 2025 were identified as likely victims of child sex trafficking**.

Those data are critical.

But they are another separate piece of the child's story.

Law enforcement systems hold another piece

The FBI's National Crime Information Center and state or local law enforcement systems contain records concerning missing children, recoveries, criminal investigations, abductions, trafficking investigations, assaults, and other incidents.

The child welfare case system may know that the child ran away.

NCMEC may know the child was missing.

Law enforcement may know the child was recovered from a trafficker.

Medicaid may know the child was hospitalized after recovery.

AFCARS may know the child changed placements.

NCANDS may know whether later maltreatment was substantiated.

But unless those records are connected, the public sees fragments.

Courts hold perhaps the most consequential evidence

Dependency courts maintain:

removal petitions;

emergency orders;

affidavits;

expert testimony;

case plans;

visitation orders;

motions;

evidentiary rulings;

termination proceedings;

and reunification orders.

Those records may contain the actual legal basis for removing the child.

Yet family court confidentiality rules, sealed files, incompatible state systems, and limited public access mean these records are not integrated into the federal outcome datasets.

The result is extraordinary.

The federal government may know that a child was removed.

It may know the child later received three psychiatric medications.

It may know the child changed foster homes six times.

It may know the child went missing twice.

It may know the child was identified as a trafficking victim.

It may know the child returned home three years later.

Yet the national reporting system may still be unable to answer the foundational question:

> **What allegation justified taking that child from the family, and was that allegation ultimately proved?**

Federal systems already link datasets when government chooses to do so

This fragmentation is not purely a technological necessity.

The Children's Bureau already combines datasets for important federal outcome measures.

The **Child Welfare Outcomes** methodology uses both NCANDS and AFCARS to calculate maltreatment in foster care.

AFCARS is used to calculate exits, reunification, reentry, permanency, and placement stability. (CW Outcomes)

This demonstrates that the federal government can connect child welfare records across systems when it considers the policy question important enough.

The missing element is not technical ability.

It is the absence of a required **end to end accountability framework**.

The newest datasets make the fragmentation harder to justify

The federal government now possesses:

FY2025 AFCARS foster care data. (NDACAN)

FY2024 NCANDS child level maltreatment data. (NDACAN)

FY2024 AFCARS national exit and placement data. (Administration for Children and Families)

Medicaid claims data capable of supporting prescription and treatment analyses.

NCMEC missing from care data.

NCIC and law enforcement missing person information.

Child and Family Services Review performance measures.

State administrative case files.

Court records.

Provider billing records.

The information exists.

The longitudinal accountability record does not.

The 2024 nonvictim foster care data show why linkage matters

This is where the fragmented system becomes more than a technical inconvenience.

In 2024, NCANDS reported **38,723 nonvictims receiving foster care postresponse services**. (LINK nky)

AFCARS separately reports tens of thousands of reunifications and other exits.

Those two facts naturally generate an obvious question:

What happened to the 38,723 nonvictim children after they entered foster care services?

Federal public reporting does not immediately tell us.

How many returned home?

How quickly?

How many remained in custody for more than a year?

How many were adopted?

How many became guardianship cases?

How many were medicated?

How many were separated from siblings?

How many experienced placement instability?

How many went missing?

That is the accountability gap in concrete form.

Data quality itself remains an issue

Even where information is required, federal reviews regularly identify data quality problems.

AFCARS documentation warns that distributed files may not exactly match dashboard counts because of differences in reporting periods, processing rules, and data translation. (NDACAN)

NCANDS remains dependent on state administrative systems being mapped into a national structure. (NDACAN)

Recent Child and Family Services Review reports have identified state data quality problems severe enough to prevent calculation of certain federal performance indicators. Minnesota's 2025 Round 4 report, for example, noted that data quality problems prevented calculation of its foster care reentry indicator in recent reporting periods. (CFSR Portal)

HHS OIG audits have separately identified missing medication information in state child welfare databases.

Missing from care audits have identified failures to report children to NCMEC on time.

The problem is therefore not simply fragmentation.

Sometimes individual fragments are incomplete.

The paradox is now measurable

The United States child welfare system is capable of counting:

children investigated;

children classified as victims;

children classified as nonvictims;

children removed;

children placed in foster care;

foster care exits;

adoptions;

guardianships;

reunifications;

placement changes;

psychiatric prescriptions;

Medicaid claims;

missing children;

and identified trafficking victims.

Yet the public cannot routinely connect those categories into one complete child level outcome.

The system is data rich while the public remains information poor.

That should no longer be acceptable.

What Congress should require

Congress should condition federal child welfare funding on creation of a standardized **National Child Welfare Longitudinal Accountability Framework**.

The objective should not be to create a public database identifying children.

Privacy can and must be protected.

The objective should be to create anonymized, auditable national outcome reporting that follows the full course of state intervention.

Each foster care episode should be capable of answering:

Why did government intervene?

What was the final disposition of the original allegation?

Was maltreatment substantiated?

Was the child classified as a victim or nonvictim?

When was the child removed?

How many placements occurred?

Were siblings separated?

What medical and psychiatric treatment began after removal?

Did the child receive psychotropic medication?

Did the child experience maltreatment while in government custody?

Did the child go missing?

Was trafficking suspected or confirmed?

How long did the child remain in care?

How did the child exit?

Did the child reenter foster care?

Those answers should then be reported by state and nationally.

States can retain their constitutional authority over family and child welfare law.

Uniform outcome reporting does not require federalizing every custody decision.

Congress already ties extensive federal funding to reporting requirements under Title IV E and related programs.

If federal government can require states to submit data to obtain funds, it can require those data to answer the most basic accountability question:

Did government intervention leave the child safer than government found the child?

Until that question can be answered from removal through final outcome, the United States will continue to possess one of the world's largest child welfare data systems without possessing what families and lawmakers need most:

a complete accounting of what state custody actually did to the child.

APPENDIX FINDING: WHAT CAN ACTUALLY BE ANSWERED TODAY?

Psychotropic medication: Partially answered. Federal studies and Medicaid data document elevated prescribing, but medication initiation after custody begins is not routinely presented as a unified national measure.

Multiple psychiatric drugs: Partially answered. Polypharmacy is documented, but there is no simple current national dashboard showing concurrent medication counts for all foster youth.

Multiple placements: Well documented in underlying AFCARS and performance data, though specific thresholds such as three, five, or ten placements are not always prominently reported nationally.

Sibling separation: Partially tracked. Federal law addresses sibling placement and contact, but a complete national percentage is not routinely presented.

Physical or sexual abuse after entering custody: Documented, but federal inspectors have identified important gaps in state monitoring and reporting.

Children who go missing: Partially tracked across multiple systems using categories such as runaway and missing from care. National accountability remains fragmented.

Trafficking: Foster youth, especially those missing from placements, are recognized as a vulnerable population. There is no reliable single national prevalence figure.

Return home after unsubstantiated allegations: Reunification is tracked. Whether the original allegations were false, insufficient, unsubstantiated, or later contradicted is not cleanly linked in a single national public metric.

THE QUESTION CONGRESS SHOULD NOW ASK

The weakness of national data should not be treated as a footnote to the child welfare debate.

It is part of the story.

Government removes the child.

Government decides the placement.

Government can authorize or influence medical treatment.

Government licenses or monitors the foster provider.

Government controls or receives dependency records.

Government receives reports when the child runs away.

Government investigates allegations of maltreatment in care.

Government receives federal data from states.

Yet Congress still cannot open one national accountability system and determine, from removal through final disposition, exactly what happened to every child.

That should change.

The same government capable of documenting federal reimbursement should be capable of documenting whether the child was safe.

The same government capable of billing Medicaid should be capable of determining when psychiatric medication began.

The same government capable of recording a placement should be capable of showing how many times the child was moved.

The same system capable of separating brothers and sisters should be capable of telling Congress how often that occurred.

The same government that assumes legal custody should be capable of reporting how many children were abused, went missing, were trafficked, were institutionalized, or returned home after the original justification for removal could no longer be sustained.

This appendix therefore produces a finding as important as any individual statistic:

> **America does not suffer from a complete absence of child welfare data. It suffers from fragmented accountability.**

The information is spread across systems that rarely allow the public to see a child's entire journey.

Congress should require a national longitudinal child welfare accountability framework capable of following outcomes from the moment of removal through reunification, guardianship, adoption, emancipation, transfer, or death while preserving legitimate child privacy.

Every child taken into government custody should have an auditable record showing what government intervention actually did to that child's life.

If the state claims the power to separate a family in the name of protection, the state should also bear the burden of proving what happened after it took control.

That is not an unreasonable demand.

It is the minimum accountability owed to the child.

APPENDIX B

NONVICTIM CHILDREN RECEIVING FOSTER CARE SERVICES: THE ACCOUNTABILITY GAP

A focused review of FY2024 federal maltreatment data, foster care outcomes, and the unresolved question of how many children were physically separated without an ultimate victim classification

There is a number buried inside the federal government's 2024 child maltreatment data that deserves far more attention than it has received.

38,723.

According to the federal Child Maltreatment 2024 report, 38,723 children classified as nonvictims received foster care postresponse services after a CPS investigation or assessment.

That number must be handled carefully.

It does not mean 38,723 children were wrongfully removed.

It does not mean 38,723 allegations were false.

And it does not mean every one of those children was physically removed from a parent and placed into a traditional foster home.

But it does establish something that should trigger congressional scrutiny:

> **Tens of thousands of children received foster care services in cases where the federal maltreatment data did not classify them as victims.**

That is a very different statement from saying the government only moves children into foster care after maltreatment is proven.

The federal data do not support that assumption.

What the 2024 federal data actually show

The most important recent numbers come from the federal Child Maltreatment 2024 report.

NCANDS, the National Child Abuse and Neglect Data System, records the outcomes of CPS investigations and assessments.

For federal fiscal year 2024, the report identified:

517,967 children classified as victims

2,557,771 children classified as nonvictims

Among those populations:

102,765 victims received foster care postresponse services

38,723 nonvictims also received foster care postresponse services

That means 1.5 percent of the nonvictim population in the reporting states received foster care services after the CPS response.

That is not a trivial number.

It is also not self-explanatory.

What does “nonvictim” mean?

This is where precision matters.

The federal term nonvictim is broader than “false allegation.”

NCANDS nonvictim records can include cases classified as:

unsubstantiated;

alternative response nonvictim;

closed with no finding;

other nonvictim dispositions;

or similar state defined outcomes.

The NCANDS codebook also distinguishes among categories including Substantiated, Indicated or Reason to Suspect, Alternative Response Victim, Alternative Response Nonvictim, Unsubstantiated, Unsubstantiated Due to Intentionally False Reporting, and Closed No Finding.

So the 38,723 figure cannot honestly be described as 38,723 wrongful removals.

Federal data do not support that conclusion.

But neither should the number be waved away.

The federal government's own reporting shows that thousands of children received foster care services following CPS involvement even though the resulting maltreatment data did not classify them as victims.

That should immediately raise a second question:

How many of those children were physically separated from their families?

The federal public data do not answer that cleanly.

That is the accountability gap.

Florida makes the problem concrete

Florida alone reported 276,741 nonvictims in 2024.

Of those, 1,803 children, or 0.7 percent, received foster care services.

By comparison, Florida reported:

19,206 victims

5,815 of those victims, or 30.3 percent, received foster care services

The Florida numbers show that foster care services were not limited to children whose CPS cases resulted in victim classification.

Again, that does not automatically mean those 1,803 nonvictim children were wrongly taken.

But it raises unavoidable questions.

Were they placed outside the home?

Were they placed with relatives?

Did they remain physically with parents while receiving some form of foster care related service?

How long were they in care?

What legal finding authorized the placement?

Was the allegation ever substantiated?

Was the case closed without a finding?

Was the child later returned home?

The current federal reporting structure does not give the public those answers in one place.

This changes the legal question

The original question was:

How many children were removed even though the allegation was ultimately unsubstantiated or insufficient?

That remains important.

But the 2024 data require a more careful formulation.

The more defensible question is:

> **How many children who received out of home foster care services were ultimately classified by CPS as nonvictims?**

Then comes the legal question:

> **Of those children, how many removals actually satisfied the governing legal threshold for separation?**

Those are two different inquiries.

A nonvictim finding does not automatically mean a removal was unlawful.

Emergency removal decisions are generally made based on the facts and risk known at the time, not solely on the later administrative disposition.

A state may temporarily remove a child while investigating an immediate safety concern and later conclude that maltreatment could not be substantiated.

That can happen lawfully.

But the opposite can also occur.

A child may be removed on weak allegations, remain separated for months, and eventually return home after the case never produces a victim finding.

The national statistics do not tell us how often that happens.

That is precisely the number Congress should demand.

The threshold for removal is not the same as the threshold for investigation

This distinction is critical.

CPS can investigate based on a report or suspicion.

Removing a child is a much more serious act.

The legal threshold for emergency removal varies by state, but generally involves some form of immediate or substantial danger, serious risk, or judicial finding that remaining in the home would be contrary to the child's welfare.

The federal child welfare framework also generally requires reasonable efforts to prevent removal when safely possible.

That means the system should distinguish clearly between:

A report serious enough to investigate

and

A danger serious enough to separate a child from a parent.

Those are not the same standard.

Yet the federal outcome data do not give the public a clean national answer showing how many children crossed that second threshold and were later classified as nonvictims.

Reunification does not answer whether the original removal was justified

AFCARS adds another piece of the story.

In FY2024, 176,730 children exited foster care.

Of those, 79,209, or 45 percent, reunified with parents or primary caretakers.

Reunification was the largest exit category.

That is important.

But it does not tell us whether those removals were all justified.

Many unquestionably were.

A legitimate safety problem can be corrected.

A parent can complete addiction treatment.

Domestic violence can end.

Housing can stabilize.

A dangerous situation can improve.

Those are legitimate removals followed by legitimate reunification.

But reunification can also occur after a case weakens, evidence changes, or an allegation is not substantiated.

A federal database records both outcomes under the same final word:

Reunified.

That word tells us where the child ended up.

It does not tell us why the child was taken.

It does not tell us whether the allegation was eventually established.

It does not tell us whether the state satisfied the legal threshold for separation.

And it does not tell us how much trauma occurred before the child came home.

The federal government already holds the pieces

This is what makes the problem so difficult to excuse.

NCANDS contains maltreatment disposition data.

AFCARS contains foster care entry, placement, duration, and exit data.

Medicaid can contain treatment and prescription histories.

State court systems contain removal petitions and judicial findings.

NCMEC and law enforcement systems contain missing child information.

Federal agencies already link datasets for some child welfare outcomes.

The information exists.

What the public does not receive is the complete chain:

Report → investigation → disposition → removal → legal basis → duration → placements → services → reunification or other exit.

That missing linkage prevents policymakers from answering the most important question:

> **Did the government take children who did not ultimately meet a victim classification, and if so, why?**

The number Congress should require

Congress should require HHS and the states to report annually:

1. How many children were physically removed from a parent or legal guardian.

2. How many of those children were ultimately classified as victims.

3. How many were ultimately classified as nonvictims.

4. Within the nonvictim group, how many dispositions were unsubstantiated, closed with no finding, alternative response nonvictim, intentionally false, or other.

5. How long each child remained outside the home.

6. What legal basis authorized the initial and continued removal.

7. Whether reasonable efforts to prevent removal were made or excused.

8. How many children were later reunified.

9. How many experienced multiple placements, sibling separation, medication, abuse in care, missing episodes, or trafficking while separated.

Then Congress should require a second analysis:

Of the children removed and later classified as nonvictims, how many removals failed to satisfy the applicable legal standard?

That is the real accountability measure.

Not every nonvictim removal is unlawful.

But no system should be permitted to hide unlawful or unnecessary removals inside broad outcome categories that make them statistically indistinguishable from justified interventions.

The real issue is not whether 38,723 children were wrongfully removed

We cannot say that.

The data do not support it.

The real issue is that 38,723 nonvictim children received foster care services in one federal fiscal year, and the public cannot readily determine from national reporting how many were physically removed, how long they were separated, why they remained in care, or whether the legal basis for removal held up.

That is enough to justify a congressional investigation.

The government has built a system capable of counting victims.

It can count nonvictims.

It can count foster care services.

It can count reunifications.

What it still does not transparently show is how those categories connect in the same child's case.

Until that happens, America cannot answer a basic question with confidence:

> **How many children were separated from their families even though the state never ultimately classified them as victims of maltreatment?**

And the question after that is even more consequential:

> **How many of those separations should never have happened?**

That is the number the public deserves to know.

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