Affected Community Perspectives on Algorithmic Decision-Making in Child Welfare Services

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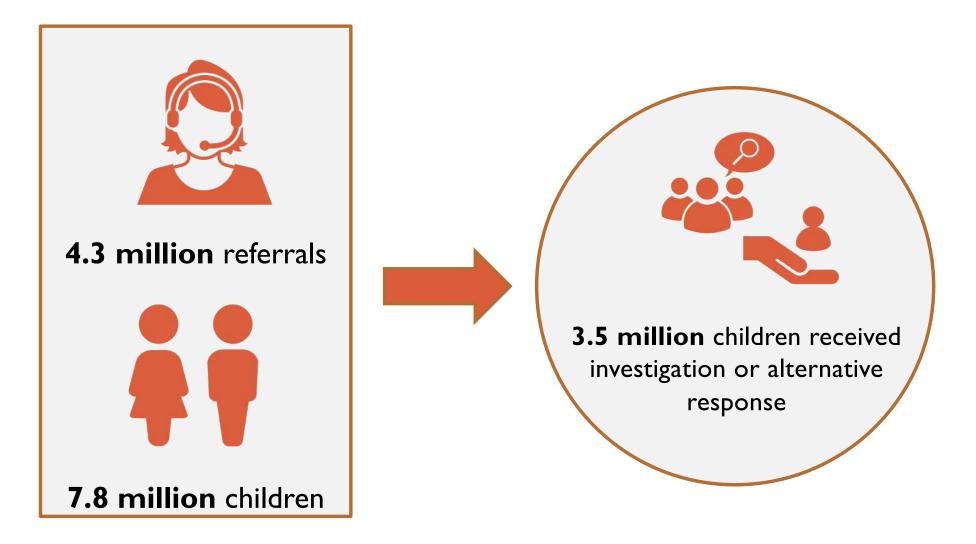


It is estimated that **37.4%** of children experience a CPS investigation by age 18

Source: Kim et al. (2017) Lifetime Prevalence of Investigating Child Maltreatment Among US Children

2018 US Child Maltreatment Statistics

Source: Child Maltreatment 2018 based on 2018 NCANDS data



The New York Times Magazine

FEATURE

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Can an Algorithm Tell When Kids Are in Danger?

Can an algorithm help keep kids safe? So far, Allegheny County's screening tool is improving accuracy

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A Child Abuse Prediction Model Fails Poor Families

Why Pittsburgh's predictive analytics misdiagnoses child maltreatment and prescribes the wrong solutions



"We definitely oversample the poor," says Erin Dalton, Director of Allegheny County's Office of Data Analysis, Research and Evaluation. "All of the data systems we have are biased. We still think this data can be helpful in protecting kids." NKBIMAGES/GETTY IMAGES

Pittsburgh's child welfare agency goes full Orwell



Starting in 2020, Allegheny County, Pa. will attempt to, in effect, stamp EVERY child born in the county with a "scarlet number" risk score that could haunt the child and her or his family for life.

Need systems that are reliable and trusted

- Many widely used approaches to building and evaluating risk assessment models fail to be reliable, often for underappreciated reasons
- Even if a tool is reliable, there many be significant obstacles in getting the public to trust it and to trust how it is used
- Issues go deeper than compliance with laws and regulation

"There is enormous opportunity for positive social impact from the rise of algorithms and machine learning. But this requires a licence to operate from the public, based on trustworthiness. [...] We have seen before in the case of genetic modification what can happen when science is pushing forward but loses public trust—this set the take-up of the science back significantly."

Shah, Algorithmic Accountability (2018)

- Schuler & Namioka, 1993 'In Participatory Design the people destined to use the system play a critical role in designing it.'

THREE CENTRAL QUESTIONS

i

How do people who are most likely to be subject to or affected by algorithmic decision-making feel about the deployment of such systems?

ii

What are the primary sources of community discomfort surrounding the development and deployment of such tools?

iii

What can researchers and designers do in the development and deployment stages to raise comfort levels among affected communities?



Colquitt (2001) On the dimensionality of organizational justice: A construct validation of a measure.

WORKSHOP PARTICIPANTS

USA study

5 x workshops Single USA county 83 participants



A FICTIONAL SCENARIO

Nicole's Story

You are doing well, looking after your three-year 1a old daughter Nicole on your own with support from your parents and extended family. One night, after a long day at work you come home, feed and play with Nicole and put her to bed. You then take a hot bath, put some headphones on and relax for a half hour but when you get out of the bath and check on Nicole you find she is not in her bed.

> Nicole is found by a neighbour, barefoot, cold and lost, trying to find her Nana's house (where you have walked with her many times). The worried neighbour settles Nicole, who is very upset, and returns her to your care. On returning home the neighbour calls Child Welfare Services and the call centre worker decides to recommend an investigation.

The next day you pick up Nicole from daycare and are very embarrassed to hear that a social worker has visited the daycare centre to make inquiries about you and your family situation. The social worker also visits your home and informs you that you are under investigation, which involves checking on any previous welfare or criminal records, and that the outcome could take some weeks.

Nicole's Story 1b

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Imagine the same scenario, but where Child Welfare Services have introduced a computer tool to help workers make more informed decisions about whether to recommend an investigation or not. When you neighbour calls Child Welfare Services, a computer tool runs a statistical analysis of historic data which includes family case history, public health data, and criminal justice records, and also the history of other calls and how they turned out. The result is a risk score which predicts the level of child risk, from 1 (low risk) to 10 (severe risk). Since you have no history with Child Welfare

Services and no criminal record, Nicole's risk score is assessed as being low and does not result in an investigation

Nicole's Story

1c It is now nine years later and Nicole is 12. She is going through some difficult times - she has fallon in with a bad crowd and you ground her because of bad behavious Late that evening she jumps out her bedroom window and runs away to a friend's place. Police

are concerned to see her walking alone late at night and bring her home You explain what has happened, but they are required to inform Child Welfare Services.

The next day you receive a visit from a social worker who says that the computer tool they are using scored Nicole as being at high risk. This is because your new partner has a previous domestic violence investigation on his record and together with your data record in the Child Welfare Services system there is possibility of a pattern.

D. Four years later, Nicole is now 16 and doing well. 1d She is in a stable relationship with her boyfriend and becomes pregnant. She has a lovely boy, Anthony. You are very supportive, and Anthony is a happy, healthy baby. While still at the bospital

Nicole's

Story

Nicole receives a visit from a nurse explaining that she has been identified by a statistical tool as needing support, and offering her home visits and access to other services over Anthony's first year. II). During the course of the conversation the

nume tells Nicole that statistics show that 1 in 5 mothers identified as needing support -- like she has been - end up having their child removed by Child Welfare Services. Home visits tend to reduce. the risk of placement.

iii). Would your response be any different if she tells Nicola that statistics show that 4 in 5 mothers identified as needing support -- like she has been - end up having their child placed by Child Walfare Services?

SCENARIO STEPS **'Nicole's Story**

Scenario 1A

Reactive + human decision-making

Presents a child welfare decision being made by an intake worker in reaction to a call from a member of the public. There is no mention of personal data or a computer tool being involved in making the decision.

Scenario 1B Reactive + algorithm-assisted

decision-making

Presents a child welfare action that is reactive, and a decision that is made by a human assisted by an algorithm.

Scenario 1C

Reactive + algorithmic decision-making + using family's child welfare data

Presents a child welfare action that is reactive, and a decision that is made by an algorithm including associative data (child welfare investigation).

Scenario 1D (i), (ii), (iii) Proactive + algorithmic decision-making + using family's child welfare data

Presents a child welfare action that is proactive, and a decision to offer services that is made by an algorithm — with three different ways of communicating this decision to the family.

Scenario 1E

Reactive + algorithmic decision-making + using administrative data beyond child welfare

Presents a child welfare action that is reactive, and a decision that is made by an algorithm including associative data (criminal justice data).

Scenario 1F

Proactive + algorithmic decision-making + using administrative & community data Presents a child welfare action that is proactive, and a decision that is made by an algorithm including nonassociative data (criminal records, neighborhood, age). SYSTEM LEVEL CONCERNS

1.

System-level concerns were the most common reasons given for low comfort in algorithm-assisted and algorithmic decision-making.

SYSTEM-LEVEL CONCERNS

Low trust and low benefit

FAMILIES

"It's been me versus the system."

"They would look at me more because I had previous experience than because they wanted to help me with my daughter."

FRONTLINE PROVIDERS

"It seems like a deficit model — let's weigh up all the dirty things in your life, nothing good though."

SPECIALISTS

" 'Investigation' says that you've been judged already."

DATA CONTEXT CONCERNS

2.

All groups raised concerns about potential bias on the part of case workers involved in the decision process, as well as bias present in the data or the algorithm.

SYSTEM-LEVEL CONCERNS

Concerns about bias

FAMILIES

"The system here in America just lets us down, especially if you are Black."

SPECIALISTS

"How honest are we allowed to be? Most of our systems were not made for people of colour, or by people of colour, or have People of Color in them."

FRONTLINE PROVIDERS

"My neighbour might be shooting up heroin and their six year old is out in the street, but they have private insurance so their records aren't part of this system. The computer tool is only capturing people who have to use public health so there's a bias to poorer people in the system."

EXPLAINABILIY AND TRANSPARENCY

3.

Participants questioned whether a statistical model could adequately account for all relevant decision elements, and emphasized the need for a human in the loop approach.

SCENARIO SPECIFIC CONCERNS

Data context and interpretation

FAMILIES

"A computer cannot understand context. My son has autism — how does the data account for this?"

FRONTLINE PROVIDERS

"The score should be a flag rather than a definitive 'go'. It needs to be approached with curiosity: Where are you at? What are you facing? What are your needs? Would you benefit from home visits, more community? Help put it back together. If Child Welfare was just a score we wouldn't be sitting here."

SPECIALISTS

"Use data without removing human decision-making."

ACCOUNTABILITY

4.

Participants wanted more information on how the algorithm weighs different factors, and the ability to dispute the score.

EXPLAINABILIY AND TRANSPARENCY

5.

Even potentially beneficial decisions resulted in discomfort due to concerns about how and whether risk information was communicated to families and case workers.

1d

i). Four years later, Nicole is now 16 and doing well.
She is in a stable relationship with her boyfriend and becomes pregnant. She has a lovely boy,
Anthony. You are very supportive, and Anthony is a happy, healthy baby. While still at the hospital
Nicole receives a visit from a nurse explaining that she has been **identified by a statistical tool as needing support**, and offering her home visits and access to other services over Anthony's first year.

 ii). During the course of the conversation the nurse tells Nicole that statistics show that 1 in 5 mothers identified as needing support — like she has been — end up having their child placed by Child Welfare. Home visits tend to reduce the risk of placement.

iii). Would your response be any different if the nurse tells Nicole that statistics show that 4 out of 5 mothers identified as needing support — like she has been — end up having their child placed by Child Welfare? Participants approved of young mothers being offered supportive services such as home visits.

> Saying that mothers like her have a 1 in 5 chance of having their child placed (removed) was perceived as a threat.

Saying there's a 4 in 5 chance was perceived as a bigger threat

Participants were wholly opposed to any mention of a statistical tool in this context.

RESEARCH TEAM

Predictive Risk Models

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