

## **Child Abuse Prevention and Treatment Act (CAPTA) and the Comprehensive Addiction and Recovery Act of 2016 (CARA)**

### **Background:**

Since 2003, CAPTA has included a state plan requirement that the state has policies and procedures to address the needs of substance-exposed infants, including requirements to make appropriate referrals to child protective services and other appropriate services, and a requirement to develop a plan of safe care for the affected infants. The provisions required states to have policies related to “infants born and identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure.

In 2010, the provision was amended to also include infants affected by Fetal Alcohol Spectrum Disorder.

The President signed CARA into law on July 22, 2016. CARA aims to address the problem of opioid addiction in the United States. The law deals with various aspects of substance use disorder, particularly opioid use disorder.

### **Requirements:**

CARA requires modification of state policies and procedures to address the needs of infants born with and identified as being affected by all substance abuse (not just illegal substance abuse as was the requirement prior to this change).

Requires plans of safe care for infants born and identified as being affected by substance abuse or withdrawal symptoms or Fetal Alcohol Spectrum Disorder. Plans must:

- Ensure the safety and well-being of infants following the release from the care of health care providers, by (1) addressing the health and substance use disorder treatment needs of the infant and affected family or caregiver; and (2) monitoring these plans to determine whether and how local entities are making referrals and delivering appropriate services to the infant and affected family or caregiver (in accordance with state requirements); and
- Develop the plans of safe care for infants affected by all substance abuse (not just illegal substance abuse as was the requirement prior to the change).

Requires states to report in the National Child Abuse and Neglect Data System (NCANDS), to the maximum extent practicable:

- The number of infants identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder;
- The number of infants with safe care plans; and
- The number of infants for whom service referrals were made, including services for the affected parent or caregiver.