

Another Look at the National Study on Differential Response in Child Welfare

Caren Kaplan and Lisa Merkel-Holguin

Caren Kaplan, ACSW, joined the American Humane Association's staff as the director of child protection reform in June 2007. Kaplan is expanding the scope of American Humane's special initiative in differential response, launching and leading a national initiative on chronic neglect, and managing several efforts that will examine and refine the assessment of child safety, risk, and comprehensive family functioning by child protection agencies. Caren works out of Washington, D.C.

Lisa Merkel-Holguin, MSW, is the director of practice and systems advancement at the American Humane Association in Englewood, Colorado. Since 1997, she has also directed American Humane's family group decision making initiative.

Background

Over the past 40 years, child protective services intervention has expanded rapidly. This growth is principally due to an increase in reports in response to poverty, disparate access to resources, economic conditions, social isolation, and insufficient information of vulnerable families and their children. The volume of reports, the complexity of family situations, and the limited resources available to child protective services systems to assist families, coupled with the infusion of family-centered practice and strengths-based values, provided the platform

to support differentiated system responses to accepted reports of maltreatment.

Since the mid-1990s, beginning in Missouri and Florida (National Conference of State Legislators, 2000), an increasing number of states have been implementing a differential response in their child protective services systems. Differential response, also referred to as "dual track," "multiple track," or "alternative response," is an approach that allows child protective services to respond differently to accepted reports of child abuse and neglect, based on such factors as the type and severity of the alleged maltreatment, the number of previous reports, the age of the child, and the willingness of the parents to participate in services. While there is great variation among the states' implementation of differential response, it generally is applied to low- and moderate-risk cases with no immediate safety concerns. Those cases are provided a family assessment and offered timely, strengths-based services without a formal determination or substantiation of child abuse or neglect.

Historically, accepted maltreatment reports have received one traditional response – an *investigation* – with a primary focus on substantiating the allegations in the report. In the practice of differential response, the child protection investigative response is reserved for accepted reports that are high-risk and may involve egregious harm to children. While the ability to offer choices in how agencies respond to reports of child maltreatment is intuitive,



this burgeoning practice is frequently embraced without a comprehensive understanding of its elements and the essential commitment and support required to (a) ensure that workers are both comfortable with and skilled in working with families as partners, (b) be aware of and prepared for the resulting organizational transformation, and (c) possess the political will to sustain this approach.

In a comprehensive effort to detail the reform efforts of both state and local child protection systems, the Administration for Children and Families conducted a 3-year effort to describe the child protection policies in place in all 50 states and the District of Columbia. The resulting *National Study of Child Protective Services Systems and Reform Efforts* (U.S. Department of Health and Human Services [USDHHS], 2003) provided an initial baseline of differential response practices as identified by agency response. This 2003 study defined differential response as a response in which the agency assessed the needs of the child or family without requiring a determination that maltreatment had occurred or that the child was at risk of maltreatment. In the years following the publication of this study, innovation abounded in multiple child protection systems, including differential response practices and other transformations in the front end of these systems.

Building on the federal government’s 2003 national study, American Humane and the Child Welfare League of America (CWLA) collaborated to conduct a national study of differential response in child welfare in 2005-2006 (Merkel-Holguin, Kaplan, & Kwak, 2006). The purposes of the American Humane-CWLA study were fivefold: (1) to provide greater specificity of the

practice elements of differential response and thus, increase definitional clarity; (2) to provide states with the opportunity to describe their practice innovations and determine whether their approach was differential response; (3) to describe the national landscape of this approach once the characteristics were catalogued and summarized; (4) to make a significant contribution to the literature; and ultimately (5) to support communities in implementing differential response.

Striving for Clarity in Murky Waters

Since the formal inception of differential response with the first state statute to codify the practice of the Family Assessment and Response System (Child Protection and Reformation, 1993), a clear understanding of this approach has been challenged by the lack of common terminology and definition.

As has been the case with other child protection reforms, such as family preservation, states have embraced

a significant change in the way in which they relate to families and their needs, using different terminology, definitions, models, services, and service providers, all while shaping the evolution of the approach.

As mentioned previously, differential response is referred to by a variety of names. Regardless of the specific terminology used by states, the rationale for this approach is to offer flexibility to tailor the child protection response to the needs and circumstances of the family, to collaborate with families early rather than waiting for serious harm to occur, and to remove faultfinding in order to increase the possibility of parent engagement and, ultimately, child safety.

**Historically, accepted
maltreatment reports have
received one traditional
response – an *investigation*.**



Developed by the AIM team (American Humane, Institute of Applied Research, and Minnesota consultants¹) in 2007, a number of core values that guide the development, implementation, and evaluation of differential response are consistent across the previously mentioned differences. These values include:

- *Engagement versus adversarial approach.* The shift from an adversarial approach in which parents are “investigated” in a quasi-law enforcement method to an approach in which parents are partners in maintaining child safety is a significant change for most child protective services agencies.
- *Services versus surveillance.* Families receiving the noninvestigation assessment response are more likely to be receptive to and engaged in the receipt of services when approached in a nonadversarial, nonaccusatory way, resulting in better outcomes.
- *Label of “in need of services/support” versus “perpetrator.”* When individuals are not labeled as perpetrators, the stigma of being associated with child protective services decreases.
- *Encouraging versus threatening.* For the majority of reports, exposing families to an often intrusive and threatening investigation is unnecessary, especially when for many, this may be the first and only contact with child protective services. The intent of the assessment pathway in differential response systems is to encourage families who come into contact with child protective services to seek assistance when they are in crisis. When the fear of family members is not unnecessarily aroused, they may be more willing to seek assistance in the future because of the supportive nature of the intervention.

- *Identification of needs versus punishment.* By proactively engaging families in strengths discovery and also their identification of needs, while still attending to any precipitating concerns that led to the report, workers are able to switch the perception of the role of the child protective services agency to one of providing support and assistance rather than punishment.
- *Continuum of response versus one size fits all.* Child protective services responses to child abuse and neglect should more accurately correlate to and reflect the presenting risk, safety, child vulnerability, protective factors, and other essential criteria. Alternative response systems apply this value by providing low- to moderate-risk reports with a family assessment and high-risk reports with an investigation.

These core values highlight the contrast between the traditional investigative approach and that of a family assessment response. The traditional response approach, an investigative model, is rooted in the determination of whether a child has been harmed, a child is at risk of being harmed, and an individual is culpable for this conduct. The family assessment pathway in a differential response approach focuses on meeting the protective services needs of a child and the support and engagement of the family.

Commonalities Between the Family Assessment and Investigative Response Pathways

There are numerous philosophical and pragmatic commonalities between the two pathways. These include: (a) the three major outcomes which all child welfare responses and interventions target and strive to achieve – a focus on child safety, promotion of permanency, and attunement to child well-being, (b) an overt value of building partnerships with and

¹Our Minnesota partners include Carole Johnson, Suzanne Lohrbach, Robert Sawyer, and David Thompson.



leveraging community services to support child and family needs, (c) a recognition of the child protection agency's authority to make decisions about placement and court involvement, and (d) creating system flexibility so that child protection systems can rapidly respond to changing family circumstances and meet families' needs (Schene, 2005).

National Study Methodology

Given the variation among states' and counties' definition and implementation of alternative response, the *National Study on Differential Response in Child Welfare* (Merkel-Holguin, Kaplan, & Kwak, 2006) attempted to achieve definitional clarity and distinguish among the multitude of child protection reforms across the nation's state and county child welfare systems. States were surveyed in order to obtain a national "snapshot in time" of differential response. In conducting the qualitative survey, American Humane and CWLA identified a group of key informants as survey respondents based on published and unpublished literature on differential response and the network of state and county leaders engaged in this approach. Twenty-seven states and two counties participated in the survey. The qualitative profiles contained information on the title of model or referent, contact information, origins, description, evaluation and results, plans for the future, impact on front-line practice, and implementation challenges.

The majority of the qualitative profiles presented a snapshot of differential response in the summer and early fall of 2005. In an effort to ensure comprehensiveness, American Humane sent letters to the child welfare offices in the states that had not been profiled, inquiring if their state or any counties were engaged in differential response. Because the implementation of differential response and other innovative practices in child protective services is a dynamic

process and the majority of the profiles were finalized in summer 2005, some of the profiles may contain "outdated" information.

The profiles were completed in one of two ways. For the majority of profiles, CWLA interviewed the state or county respondents, requested background material on their work, and drafted the profiles, using the categories listed previously. The respondents, CWLA, and American Humane staff then reviewed the profiles. Modifications to the profiles were made with the respondents' approval of the final versions found in the compilation. Alternatively, a few states drafted their own profiles, based on the survey categories, and a similar process of review and modification ensued.

The quantitative survey, based on the American Humane-CWLA definition of the core elements of differential response and the qualitative profile responses, was sent to 20 states and counties in April 2006. Fifteen states and counties responded. Four states and one county deemed that their innovative practices did not meet the majority of the core elements, and therefore, opted out of the quantitative survey.

The quantitative survey was composed of 17 nominal and mutually exclusive questions. The purpose of this survey component was to provide a national portrait of differential response, using consistent, categorical information complementing the profiles. Core elements identified in the following paragraphs were used not only as a guide to determine the categorization of practices for the qualitative listing, but also to support the quantitative survey questions. A copy of the survey responses can be found at www.americanhumane.org/differential.

Key state informants were asked to respond to the 17-item survey if their practice approach was consistent with the following definition of differential response established for this survey:



Differential response is an approach that allows child protective services to respond differently to accepted reports of child abuse and neglect. Differential response is “a formal response of [the] agency that assesses the needs of the child or family without requiring a determination that maltreatment has occurred or that the child is at risk of maltreatment” (USDHHS, 2003, Chapter 5)

Core elements were identified in an attempt to achieve definitional clarity and distinguish among the multitude of child protection reforms across the nation’s state and county child welfare systems. Selected core elements, as identified in the *National Study of Differential Response in Child Welfare* (Merkel-Holguin, Kaplan, & Kwak, 2006) included:

- The use of two or more discrete responses to reports of maltreatment that are *screened-in and accepted* by the child protection agency for response. Typically, this would include the traditional approach – an investigation pathway – and the nontraditional approach – a family assessment pathway.
- Multiple responses for reports of maltreatment that are screened-in and accepted for response.
- Pathway assignment determined by presence of imminent danger, level of risk, the number of previous reports, the source of the report, or presenting case characteristics such as type of alleged maltreatment and age of the child reported.
- A possible decrease or elevation in original pathway assignments based on additional information gathered during the investigation or assessment phase. An increase or decrease in threats of harm or risk level can trigger a change in pathway assignment.

- Establishment of multiple tracks codified in statute, policy, or protocols.
- The ability of families who receive a noninvestigatory response to accept or refuse the offered services after a family assessment, as long as child safety is not compromised.
- No formal determination that child maltreatment occurred (i.e., no substantiation or finding of abuse or neglect). Labels of perpetrators and victims are not used when alleged reports of maltreatment receive a noninvestigation family assessment response.
- A differential use of the central registry, depending on the type of response. Given that there is no identification or labeling of a perpetrator, the names of the individuals served through a noninvestigation family assessment pathway are not entered into the central registry.

Summary of Findings

Table 1 summarizes the complete responses to this survey. Respondents from 15 states (Alaska, Florida, Hawaii, Kentucky, Louisiana, Minnesota, Missouri, North Carolina, Oklahoma, Pennsylvania, Tennessee, Virginia, Washington, West Virginia, and Wyoming) indicated that their child protection system incorporated an alternative response to reports of suspected maltreatment, and 11 of these (Hawaii, Kentucky, Minnesota, Missouri, North Carolina, Oklahoma, Pennsylvania, Tennessee, Virginia, Washington, and Wyoming) indicated that there is statewide implementation of their alternative response approach.

The survey found that in all 15 states there are policies or practice protocols which formally guide the implementation of and child welfare practice in a differential response system. All respondents indicated that assignment to either the traditional investigation response or the



noninvestigation family assessment response is based on specific criteria, including the type of alleged maltreatment, the age of the child, and the number of previous reports. All states indicated that there could be reassignments of the initial response from noninvestigation family assessment to investigation based on additional information gathered during the assessment phase or situation changes during the life of the case. (Reassignment is less likely if the initial assignment has been made to an investigative response pathway.) All but one of the state respondents indicated that the name of the alleged perpetrator is *not* entered into the central registry for individuals served through a noninvestigation assessment response.

State respondents identified their use of various criteria (such as precipitating factors, exposure to domestic violence, or substance abuse) to determine a child's risk level and the response pathway assignment. The source of the report was not a factor in any of the states in determining whether an accepted report could be assigned to the assessment response pathway. All 15 state respondents indicated that reports of sexual abuse, serious physical injury or abuse, or cases where there has been a child death connected to a report of abuse or neglect *cannot* be assigned to the noninvestigation assessment response pathway. Ten states also identified serious neglect as a type of maltreatment that cannot be assigned to the noninvestigation assessment response. With the exception of three states that require investigation for maltreatment allegations involving young children, the age of the child does not preclude the assignment to the assessment response pathway in states that implement a differential response.

The survey found additional variation among the states in terms of whether the differential response system includes a formal pathway for reports of child maltreatment that are screened out of child protective services,

whether assignment to the noninvestigation assessment response was limited by the number of the family's previous reports of alleged child maltreatment, or whether an assessment response can be provided when a child is placed in foster care or when the case is involved in the juvenile dependency court.

While the general differential response approach nationwide embraces key values of family engagement and service provision, jurisdictions vary in their conceptual delineation of who should receive which options. As noted in several studies, there is additional variation in the length of the service, the amount of service provided to the family, the service provider, and whether the service option is voluntary or mandatory.

Highlighting Unique Practice Issues

In conducting the national study, several practice issues were unearthed that require additional examination to gain sufficient understanding of differential response practice, support the intentions of the practice, and attempt to eliminate that which is unintended and not desired.

Case assignment. All respondents indicated that assignment to either the traditional investigation response or the noninvestigation assessment response is based on specific criteria, including the type of alleged maltreatment, the age of the child, and the number of previous reports.

State respondents identified their use of various criteria (child's age, number of previous reports, precipitating factors, or exposure to domestic violence) to determine a child's risk level; it is the risk level that is a determinant in the response pathway assignment. In most states, cases of low to moderate risk are eligible to be served through the noninvestigation family assessment response. The states also reported that families' voluntary

requests for services are served through the assessment response. For example, in Kentucky, when a social worker receives a voluntary request for assistance from an individual with a previous case history and there is a low risk for abuse, neglect, or dependency, the social worker may take the request as an assessment. Conversely, high-risk cases and cases of imminent danger are served through the traditional, investigatory pathway.

Maltreatment categories. Some types of maltreatment categories are excluded summarily from the assignment to assessment response. There are frequent case-specific determinations in which particular types of maltreatment may be precluded from assignment to the assessment response given the level of risk, worker discretion, and consultation with the supervisor. This circumstance highlights the complexity inherent in any assignment schema as well as the importance of flexibility in making these determinations, given the specific circumstances of any particular family and their children.

All 15 state respondents, with qualifications noted where applicable, indicated that sexual abuse reports *cannot* be assigned to the noninvestigation assessment response. Similarly, all 15 states indicated that serious physical injury or abuse or cases where there has been a child death connected to a report of abuse and neglect *cannot* be assigned to the noninvestigation assessment response pathway. Ten of the 15 respondents (Florida, Hawaii, Kentucky, Louisiana, Missouri, Oklahoma, Pennsylvania, Virginia, Washington, and West Virginia) identified serious neglect as a type of maltreatment that cannot be assigned to the noninvestigation assessment response. Slightly less than one half of the state respondents (7 out of 15: Hawaii, Kentucky, Pennsylvania, Tennessee, Virginia, Washington, and Wyoming) indicated that there can be no assignment to the noninvestigation assessment response where

there is serious mental injury. Slightly more than one half of state respondents (8 out of 15: Hawaii, Kentucky, Minnesota, North Carolina, Pennsylvania, Virginia, Washington, and West Virginia) reported that cases of abandonment cannot be assigned to the noninvestigation assessment pathway. Six states (Florida, Kentucky, Minnesota, North Carolina, Pennsylvania, and West Virginia) preclude cases of medical neglect, and four (Kentucky, Oklahoma, Tennessee, and West Virginia) prohibit cases that involve drug-exposed infants from being assigned to the noninvestigation assessment response.

Import of Worker Discretion

Based on conversations with numerous state respondents and explanatory notes provided by these respondents, it became readily apparent that workers' clinical judgment and discretion were of great importance in the implementation of differential response. There are few *hard and fast rules* that cannot be altered given the practice wisdom of a specific worker and the approval of a supervisor.

Much like the decisions that workers make at different points in the life of the case, there is a unique set of decisions associated with differential response in which the worker's discretion is of significance. These include:

- Initial pathway assignment
- Pathway response reassignment
- The use of assessment response when the child is in care
- The ability to respond to family issues that workers previously had no means to address

While intake and screening systems have discrete guidelines for assigning cases to the response pathways, many of these systems also support case-level decision making in determining the appropriate response.

Missouri, as cited previously, is one example where three reports constitute a significant risk factor; but based on other case characteristics, staff have latitude to determine the pathway. Another example is Kentucky, where if a report alleges injuries to an adolescent as the result of altercations between child and custodian, the report may be accepted for an investigation or a Families In Need of Service Assessment (FINSA). In making that determination, the social worker specifically focuses on the age of the child, precipitating factors, the degree and appropriateness of force used by the caretaker, and the need for further services to assist in eliminating the violent behavior in the home.

The worker is able to redress multiple objections to involvement in the child welfare system as well as make greater strides in working with families. Workers believe that they are better able to engage families earlier in the case process, services are provided sooner, and the stigma of involvement in the child welfare system is diminished. Social workers report that families are more receptive and less resistant and that they are performing “real” social work practice. Several studies by Loman and Siegel (2004a, 2004b) indicated increased satisfaction of both families and workers. It is interesting to note advocates for or recent adopters of differential response provided benefits related to workforce issues – retention, reduced workload, reduced recidivism, and caseload management – as impetus for change.

Voluntary Services

Whenever possible, it is important to engage families in a manner that promotes the voluntary selection of and participation in services. This is true regardless of whether a family is assigned to a traditional response pathway or a differential response pathway.

The specific level of risk to the child influences the degree to which services are voluntary. When the child is determined to be at high risk of imminent harm, services are most likely to be mandated and families who are in the differential response pathway are likely to be reassigned to the investigation pathway. When the child is assessed to be at moderate risk of imminent harm, services may be voluntary or they may be mandatory. Different states deal with the reassignment issue differently. In many instances, such a determination would be made in response to specific case characteristics.

The opportunity for families to engage in services *voluntarily* is a core element of the differential response approach. It has been suggested that when the child protective services agency offers families the choice to elect and participate in services, the family is more likely to develop a constructive partnership with service providers, experience greater satisfaction with service delivery, and perhaps, improve the outcomes associated with service provision.

In the quantitative, categorical survey on differential response, state respondents were asked whether services were voluntary for families who receive a noninvestigation assessment response. This question did not specify the level of risk to the child determined by the assessment process and thus, the interplay between the level of risk and the opportunity to engage in services voluntarily was not captured. Therefore, states responded to the question in disparate ways. Given the complexity of the issue and the lack of comparable data across states, the authors opted not to categorize the responses or report these findings in the response table.

However, with the collection of additional information from state respondents, it is apparent that the specific level of risk to the child influences the degree to which services are



voluntary. When the results of an assessment indicate low levels of risk of maltreatment, the majority of state respondents indicate that service provision is voluntary. As the continuum of risk moves from low to high, the need for mandated services also increases. For example, a number of states noted that if the assessment indicates that the child is at high risk of maltreatment, the provision of *voluntary* services is no longer an option. In such instances, some states reassign high risk cases to the investigation pathway. Some states, on the other hand, mandate services through court involvement, but do not require an investigation.

In addition, a number of states noted that if parents or caregivers decline to address the risk factors and cooperate with services that are deemed essential to reduce the high level of risk, this refusal triggers a more coercive response. When families receiving the assessment response reject services, some states reassign the case to the investigation pathway while others mandate services. With any of these more coercive and adversarial reactions to refusal, we must question whether the opportunity to participate in services is indeed *voluntary*. In Hawaii, for families offered voluntary case management services, an investigation response is triggered if services that would decrease risk or impact child safety are refused by the family. Similarly, in Minnesota, if the assessment reveals that the child is not safe or is at high risk of maltreatment, services are not optional. If the parents refuse to resolve the issues, a juvenile court petition would be filed to order the actions necessary to make the child safe.

While there appears to be consistency that the concept of voluntary service provision is no longer an option when children are determined to be at high risk, there is some variability on this question with moderate-risk cases. Although not all state respondents provided clarifying

information, in Louisiana, there are cases in which voluntary services are available to families who are receiving a noninvestigation assessment response and whose children are determined to be at moderate risk of maltreatment. In Minnesota, services are voluntary for families whose children are at moderate risk of maltreatment. In some of the other states, moderate risk determination results in either reassignment to the investigation pathway or mandated services. Because the issue of voluntary services is a core component of differential response, more in-depth study is required to fully understand the complexity of states' policies and protocols related to this issue.

Variations on a Theme: Selected Child Protective Services Innovations

Table 2 highlights various innovations, including differential response, that are being implemented in the United States. As it shows, many states have implemented child protective services innovations that are related to, and yet are not, differential response. Many of these state respondents indicated that they were indeed carrying out this reform, when in reality, based on the federal and American Humane-CWLA definition of differential response, this was not the case. Examples of states with these notable innovations include California, New Mexico, and Wisconsin, which have multiple response pathways. None of the pathways are dedicated to screened-in and accepted reports of alleged child abuse and neglect as would be the case in differential response. All three of these states have a dedicated community pathway for screened-out cases. Families are connected with services in the community for which there is voluntary participation and no formal involvement of the child welfare agency.

Iowa also has a formal pathway to refer the family to a community-based agency and has four formal response levels that allow the agency's

workers to consider an array of factors in making a determination as to the best way to respond.

North Dakota and South Dakota have a single nonadversarial response to all reports of alleged maltreatment. The Dakotas use many of the characteristics of the differential response pathway in their single-track systems.

These and the many other innovations that exist to refine our encounters with families when they are first involved in the child welfare system demonstrate the struggle and the desire to respond more appropriately to vulnerable families and their children.

Growth of Differential Response Practices

Currently, the landscape of differential response is rapidly evolving and spreading in child protection. Soon after the completion of the *National Study of Differential Response in Child Welfare*, the authors acquired additional information related to the pursuits of other states in this arena. In the year that followed the publication of the national study, at least five states passed legislation or adopted policy that enabled the use of differential response approaches to screened-in and accepted reports of suspected child abuse and neglect. These six states were Massachusetts, Nevada, New Jersey, New York, Ohio and Vermont. Given the rate of growth, it is important to remain vigilant and monitor the following issues as the approach evolves and expands.

The child welfare field is actively pursuing, through diversified experience, evaluation, and research, more knowledge about differential response implementation. Many questions regarding differential response remain unanswered to date, including but not limited to:

- In county-administered systems, what degree of variation will be implemented?
- Are changes in law needed to allow for both an alternative response and an investigatory response? If so, what changes are necessary?
- As one changes the definition of child abuse and neglect, as anticipated in Ohio, what will be the impact not only on alternative response but also on investigations?
- What sector of the workforce is best suited to providing alternative response?¹
- If child welfare staff is best suited to provide alternative response, what knowledge, skills, and expertise are best to work with families in an alternative response system? How are they different from those that are best suited for an investigation approach?
- What are the key factors that make a difference? Is it the amount of service provided to families, the attitude of workers who seek to “empower and strengthen” families rather than “punish” families, or other factors?
- Can alternative response exist as a viable response for child protective services and not just an alternative? In other words, is it a response that all cases with certain characteristics should receive or only those for whom there are enough “slots”?

Conclusion

With the data from the *National Study on Differential Response in Child Welfare* as a foundation from which to base future inquiry, as well as the questions they raise, there is much opportunity as well as need to gain additional

¹ An early version of alternative response implemented in Washington state essentially diverted such cases from the child protective services system to community providers. Alternative response cases were not considered part of the child protective services workload. In other communities, including Minnesota, alternative response is provided by the same workers who provide investigation services.



understanding about the impacts of differential response on child welfare systems, including front-line practice, outcomes for children and families, and impact on worker and family satisfaction. Attempting to identify the stressors to the system and the solutions to the presenting difficulties will allow for the growth of a practice innovation that celebrates our ability to make a positive difference in the lives of families who come to the attention of the child protection system.



Table 1. Summary of State Survey Responses

State	Number of response pathways for accepted reports of child abuse/neglect	Differential Response System includes formal response for screened-out reports	Scope of implementation	Assignment of case to assessment or traditional response depends on various criteria	Assignment to assessment response limited by:				Assessment response can be used when child placed in foster care	Assessment response can be used in cases involved with juvenile dependency court	Initial response assignments can be reassigned from non-investigation to investigation
					maltreatment category	source of reporter	age of child	number of previous reports			
AK	2 ^a	No	Multiple sites	Yes	Yes	No	No	No	Yes	Yes	
FL	2	Yes	Multiple sites	Yes	Yes	No	No	No	No	Yes	
HI	3	No	Statewide	Yes	Yes	No	No	No	Yes	Yes	
KY	2	Yes	Statewide	Yes	Yes	No	No	Yes ^c	Yes	Yes	
LA	2	No	Multiple sites	Yes	Yes	No	No	No	No	Yes	
MN	2	Yes ^d	Statewide	Yes	Yes	No	No	No	Yes	Yes	
MO	2	Yes	Statewide	Yes ^e	Yes	No	No ^f	Yes ^g	Yes	Yes	
NC	2	No	Statewide	Yes	Yes	No	Yes ^h	No	Yes	Yes	
OK	2	No	Statewide	Yes	Yes	No	No	Yes ⁱ	No	Yes	
PA	2	No	Statewide	Yes	Yes	No	No	Yes	Yes	Yes	
TN	2	Yes	Statewide	Yes	Yes	No	No	Yes	Yes	Yes	
VA	2	No	Statewide	Yes	Yes	No	No	Yes ^k	No	Yes ^l	
WA	2	Yes	Statewide	Yes ^m	Yes	No	No	No	No	Yes	
WV	2	Yes	Multiple sites	Yes	Yes	No	Yes ⁿ	No	Yes	Yes	
WY	3	No	Statewide	Yes	Yes	No	Yes ^o	No	Yes	Yes	

State	Initial response assignments can be reassigned from investigation to noninvestigation	State mandates differential response (DR) in statute	State has practice/policy protocols that formally guide implementation or practice of DR	No substantiation of alleged maltreatment for families in non-investigation assessment response	Name of alleged perpetrator entered into central registry for those served through noninvestigative assessment response
AK	No	No	Yes	Yes	No
FL	Yes	No	Yes ^a	Yes	Yes ^b
HI	No	No	Yes	Yes	No
KY	No	Yes	Yes	Yes	No
LA	No	Yes	Yes	Yes	No
MN	Yes	Yes	Yes	Yes	No
MO	Yes	Yes	Yes	Yes	No
NC	Yes	Yes	Yes	Yes	No
OK	No	Yes	Yes	Yes	No
PA	No ^c	Yes	Yes	Yes	No
TN	No	Yes	Yes	Yes	No
VA	No	Yes	Yes	Yes	No
WA	Yes	No	Yes	Yes	No
WV	No	No	Yes	Yes	No
WY	Yes	Yes	Yes	Yes	No

Note. From *National Study on Differential Response in Child Welfare*, by L. Merkel-Holguin, C. Kaplan, and A. Kwak, November 2006, Denver: American Humane Association and the Child Welfare League of America.

^aOnly in the communities that have differential response grantees.

^bAs of 2005, the Florida Department of Children and Families began a 2-year process of designing and developing its alternative response system. Therefore, the responses to the survey reflect the implementation team's thinking in October 2005.

^cWhile it is not the specific number of reports that triggers an investigation, typically multiple reports enhance risk and safety concerns, and previous reports are used as one factor in determining the appropriate pathway.

^dMinnesota has a third pilot response pathway in 38 of 87 counties for screened-out reports.

^eReports other than those of sexual abuse go to the "family assessment response" if the allegations, if found to be true, would not constitute a law violation.

Table 1 notes continued.

^f Age is only one criterion that influences pathway selections.

^g If a report is screened as a “family assessment” and has three or more prior calls to the hotline with the same abuse or neglect type, staff have the option to upgrade to the investigation response pathway. This decision is made on the basis of how the agency can best serve the family.

^h Only true for children under the age of 1 who have allegedly been shaken or subjected to corporal punishment.

ⁱ Three previous reports disqualify assignment to a noninvestigation assessment response.

^j The only exception is corporal punishment when it does not involve injury to an older child or older children who do not have adequate supervision.

^k Three previous reports within the year disqualify assignment to a noninvestigation assessment response.

^l Except if the case was taken into protective custody.

^m Low-risk referrals go to alternative response and moderate- to high-risk referrals are assigned to traditional investigation.

ⁿ Any child under 6 is not eligible to be served through the noninvestigation assessment response.

^o Under development as of October 2006.

^p Currently, the workgroup recommends the name of the individual to be entered in the system, but not be indicated in an “alleged perpetrator” role.

^q After completion of the investigation, it can be assigned as a general protective services case if it has been determined that child abuse was not committed.



Table 2. Differential Response (DR) in Child Welfare by State

State	DR Statewide	DR multiple jurisdictions <i>not</i> statewide ^a	DR formal pathway for screened-out reports ^b	DR in development ^c	Other innovation ^d	DR non-operational ^e
AK		X				
AZ						X
CA ^f					Differential response	
CO					Child welfare and TANF implementation for prevention purposes	
CT					Hartford Community Partnership	
DC					Community collaboratives	
DE						X
FL		X	X	X	Community partnerships for protecting children	X
GA					Community partnerships for protecting children	
HI	X					
IA ^g					Child abuse assessment & community partnerships for protecting children	
IL					Integrated assessment program	
IN					Community partners for child safety	
KY	X		X		Community partnerships for protecting children	
LA		X		X		
MA				X	Connecting families	
MD				X		
MI					SDM: 5-category disposition	
MN	X		X			



Table 2 continued.

State	DR Statewide	DR multiple jurisdictions not statewide ^a	DR formal pathway for screened-out reports ^b	DR in development ^c	Other innovation in CPS ^d	DR non operational ^e
MO	X		X		Community partnerships for protecting children	
NC	X					
ND					Safety strength risk assessment	
NJ				X	Child welfare service/assessment	
NM ^h					Differential response	
NV ⁱ				X		X
NY ⁱ					Differential response	
OH				X		
OK	X					
OR					Family support and connections	
PA	X					
SD					Initial family assessment	
TN	X		X			
TX					Community partnerships for strengthening families	X
UT					Domestic violence pilot project	
VA	X					
WA	X		X			
WI				X		
WV		X	X			
WY	X					



Table 2 notes

Note. Data from *National Study on Differential Response in Child Welfare*, by L. Merkel-Holguin, C. Kaplan, and A. Kwak, November 2006, Denver: American Humane Association and the Child Welfare League of America. Source data was provided by states in spring 2006. Supplemental information is captured from community-based child abuse prevention applications. Alabama, Arkansas, Idaho, Kansas, Maine, Mississippi, Montana, Nebraska, New Hampshire, Rhode Island, South Carolina, and Vermont did not provide information for the study and thus, information is needed. Differential response is defined as “a formal response of the agency that assesses the needs of the child or family without requiring a determination that maltreatment has occurred or that the child is at risk of maltreatment” (USDHHS, 2003).

^a Contractual arrangements may or do exist with other service providers; authority for the implementation of this approach resides with the child welfare agency.

^b In addition to two discrete responses, there is at least one formal track or pathway that diverts screened-out reports to community-based agencies and/or other service providers.

^c Differential response, under the authority of the child welfare agency, is in the stages of development or initial implementation with the intent to establish a formal system either statewide or in multiple jurisdictions.

^d Practice innovations that provide a comprehensive, countywide or statewide approach respond to and assess the needs of vulnerable children and their families in a nontraditional manner without conducting a formal investigation. Such approaches may be provided under the auspices of the child welfare agency or another service provider.

^e Differential response was previously implemented by the child protection agency statewide or in selected jurisdictions and the approach is no longer in existence.

^f California Department of Social Services has established three pathways that are implemented by the county child welfare agencies. None of these pathways correspond to the definition of differential response (USDHHS, 2003). Therefore, although the pathways have some of the essential criteria, the approach is characterized as an innovation.

^g Iowa’s response system, although not an alternative response, provides a formal pathway to refer the family to a community-based agency.

^h New Mexico’s differential response is dedicated to meet the needs of families not screened-in to the child protective services system.

ⁱ Nevada has enabling legislation that allows for statewide use of formal alternative response. There are no broad efforts to initiate the system and lack of organizational capacity has resulted in limited success. (Reclassified for this table; the National Study characterizes Washoe County, NV as having an alternative response system.)

^j New York’s child abuse statute requires that a determination of suspected maltreatment be made and the perpetrator’s name be entered into the central registry. Nonetheless, Westchester County is attempting to implement the other characteristics and elements of an alternative response county-wide.

References

Child Protection and Reformation, Mo. Rev. Stat. § 210.115 (1993).

Loman, L. A., & Siegel, G. L. (2004a, February). *Differential response in Missouri after five years: Final report*. Retrieved September 20, 2007, from <http://www.iarstl.org/papers/MODiffResp2004a.pdf>

Loman, L. A., & Siegel, G. L. (2004b). *Minnesota alternative response evaluation: Final report*. Retrieved September 26, 2007, from <http://iarstl.org/papers/ARFinalEvaluationReport.pdf>

Merkel-Holguin, L., Kaplan, C., & Kwak, A. (2006, November). *National study on differential response in child welfare*. Denver, CO: American Humane Association and Child Welfare League of America.

National Conference of State Legislatures. (2000, July). *Child protective services reform legislative trends*. Retrieved March 10, 2008, from <http://www.ncsl.org/programs/cyf/CPSRLT.htm>

Schene, P. (2005). The emergence of differential response. *Protecting Children*, 20(2 & 3), 4-7.

U.S. Department of Health and Human Services. (2003, April). *National study of child protective services systems and reform efforts: Review of state CPS policy*. Washington, DC: U.S. Government Printing Office. Available at <http://aspe.hhs.gov/hsp/cps-status03/state-policy03>.

