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Date: March 27, 2017

To: The Honorable Senator Sara Gelsler, Chair  
The Honorable Senator Alan Olsen, Vice-Chair  
Senate Committee on Human Services

From: Tamara Fuller, Ph.D.  
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Subject: SB 942

For the record, my name is Tamara L. Fuller, Director of the Children and Family Research Center (CFRC) at the University of Illinois at Urbana-Champaign. The CFRC was selected to design and implement a rigorous evaluation of the Oregon Differential Response (DR) Program. I am the Principal Investigator (PI) of the Oregon DR evaluation and also served as the PI of a statewide evaluation of DR in Illinois, which was part of a national evaluation funded by the Quality Improvement Center on Differential Response in Child Protective Services (QIC-DR). I am the author of a chapter on Differential Response in the *Handbook of Child Maltreatment* (published in 2014) and have presented findings related to Differential Response evaluation at numerous state and national child welfare conferences. I am here to testify on the impact of Differential Response on child safety, based on my knowledge of the rigorous evaluations that has been done to date.

Examination of child safety is of the utmost importance in the evaluation of any child welfare program and each of the DR evaluations have included measures of child safety. Typically, child safety is measured as the rate of screened-in maltreatment re-reports during a follow-up period of 6 or 12 months. If possible, some evaluations have also measured the rate of substantiated re-reports during the follow-up period, as well as the rate of child removals from the home during the follow-up period.

When evaluating the outcomes of an intervention or program such as DR, it is important to have an appropriate comparison group so that the outcomes of the children or families that received the new intervention (in this case, an assessment) can be compared to similar children or families that did not receive the new intervention (in this case, an investigation). Rigorously designed evaluations use comparison groups that have been created by either randomly assigning families to groups or by carefully matching each family in the treatment group to a similar family in the comparison group.

As of 2017, several rigorously-designed and executed evaluations have been conducted that have compared the safety of children in families who received an assessment (i.e., that did not conclude with a substantiated decision) to those that received an investigation (i.e., that concluded with a substantiation decision). Of these evaluations, most found no statistically significant differences in the rate of subsequent maltreatment reports between the two groups (specifically, those in New York,

Colorado, and Ohio [2013]). Three evaluations (in Ohio [2011], Minnesota, and Missouri) found that children in families that received an assessment had lower rates of maltreatment re-reports (i.e., were more safe) than children in families that received an investigation. One evaluation (Illinois) found that children in families that received an assessment had higher rates of re-reports (i.e., were less safe) than those that received an investigation. Although the Oregon DR evaluation has not yet been completed, results from the 2016 Interim Evaluation Report also found no differences in the rate of maltreatment re-reports between families that received an assessment and similar families that received a traditional CPS response (with substantiation).

When other measures of child safety are used, such as the rate of substantiated maltreatment reports, the evaluations found either no difference between children in families that receive an assessment versus an investigation (Illinois and Colorado) or found that children who received an assessment were safer than those that received an investigation (New York). In Oregon, the results from the 2016 Interim Evaluation Report found no differences in the rate of founded maltreatment re-reports between families that received an assessment and similar families that received a traditional CPS response. Finally, evaluations that examined the rates of child removals into out-of-home care found no differences between children who received an assessment versus an investigation (Illinois, Colorado, Ohio [2013]). Preliminary results of the Oregon DR evaluation also suggest no differences in child removals between children who received an assessment and those that received a traditional CPS response.

To summarize and conclude, if you examine the totality of the empirical evidence that has been collected in rigorously designed DR evaluations to date (including data collected in Oregon), the evidence does not suggest that children that receive an assessment are less safe than those that receive an investigation that includes a substantiation decision. The well-circulated critique of DR written by Elizabeth Bartholet (2014) is not based on systematic social science research review procedures. Instead, this article focuses only on those evaluation findings that support its argument and therefore present an overly negative picture of DR. This review, although brief, has hopefully provided a more balanced perspective that is based on a careful review of *all* of the rigorously conducted research on DR.

Thank you for your time and the opportunity to speak on this issue. I am available to answer any additional questions you might have about the Oregon DR evaluation or the research evidence on DR that has been collected in other states.

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