

To: Senate Committee on Human Services

From: Dana Ainam, Social Service Manager, Confederated Tribes of Grand Ronde

Date: March 27, 2017

Subject: SB 942 – Differential Response Program

My name is Dana Ainam. I am a member of the Grand Ronde Tribe and currently the Social Service Manager. Prior to this position, I was the Tribal Child Welfare Manager for almost 20 years. I have a formal seat on the DHS ICWA (Indian Child Welfare Act) Advisory Committee and the Child Welfare Advisory Committee, in addition I have served on a variety of committees over the years and have witnessed the evolution of child welfare practice in Oregon during this time.

I have the opportunity to be a part of the development of the Differential Response model for Oregon as a member of the ICWA Advisory Committee and the DR Steering Committee. The value of keeping children safe and with their families aligns closely with tribal tradition and beliefs and the federal requirements of the Indian Child Welfare Act. I believe the DR is a best practice model and can positively impact the children, parents, agency and communities we serve with through steady support, funding and continuous improvement protocols.

Approximately 8 years ago the Grand Ronde Child Welfare Program implemented a practice model similar to what is nationally called "Differential Response", offering families an opportunity to engage in services to strengthen their family and ultimately keep their children from entering foster care. You have heard that it takes 4-6 years to see substantial outcomes, this has been true of our experience. It takes time to train staff to enhance skills to engage families, build capacity to support the needs of families and, most important, get parents to trust in the intentions of child welfare support being offered. In Grand Ronde, we have safely reduced the number of children in foster care by over 50%, continued to expand our preventative services and after many years now have families voluntarily contact our program when needing support to overcome challenges.

Historically, I have witnessed DHS implement many changes in their practice model. Frequently models change based on high profile cases, community perception or tragedies within the system. When practice models frequently change it is difficult both internally and externally to understand the values of an agency. Offering struggling families support and resources when children are safe is a value that should not change.

I hope that Oregon will continue to a support the full implement Differential Response in Oregon. The model, policy and procedures assure for safety of children to the best of any systems ability. The development and implementation of Differential Response has been one of the most comprehensive processes I have experience within DHS. It has included strong community stakeholder input, thoughtful development of training, a strategic implementation plan that allows time for communities to prepare for implementation, coaching supports to community during implementation, fidelity reviews and outside evaluation.

In closing, I would like to leave you with these thoughts:

- DR requires the same safety assessment in either track. Prior to DR or in non-DR counties an unfounded assessment no further services from DHS.
- If there are concerns with the safety of children after assessment these concerns need be addressed through practice of the Oregon Safety Model, no Differential Response
- When children are safe but a family has moderate to high needs, connecting families with community services to provide appropriate services can reduce future agency involvement and promote better outcomes for family
- Entering the child welfare system is traumatic for children and families and leads to disparate outcomes for children
- Oregon continues to have nationally high rates of disproportionality of American Indian/Alaskan Native and African American children in their system.
- The DHS system needs adequate funding and staffing resources to assure an ability to adequately address safety and monitor families.
- Change in practice takes time.

I thank you for your time and your interest in assuring the safety and support of our children and families. As a member of the DR Steering Committee, I hope to have the opportunity to assist DHS in continuing with implementation and address areas of concern from the evaluation, legislations and others. I believe that given time, DR can positive impact the well-being of our children, families and communities.

Sincerely, Dana Ainam