



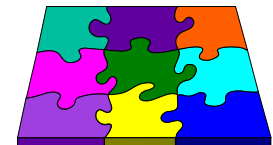
Effectiveness and Costs of the New Paradigm: Alternative Response in Minnesota

15th National Conference on Child Abuse and Neglect, April 18-23, 2005

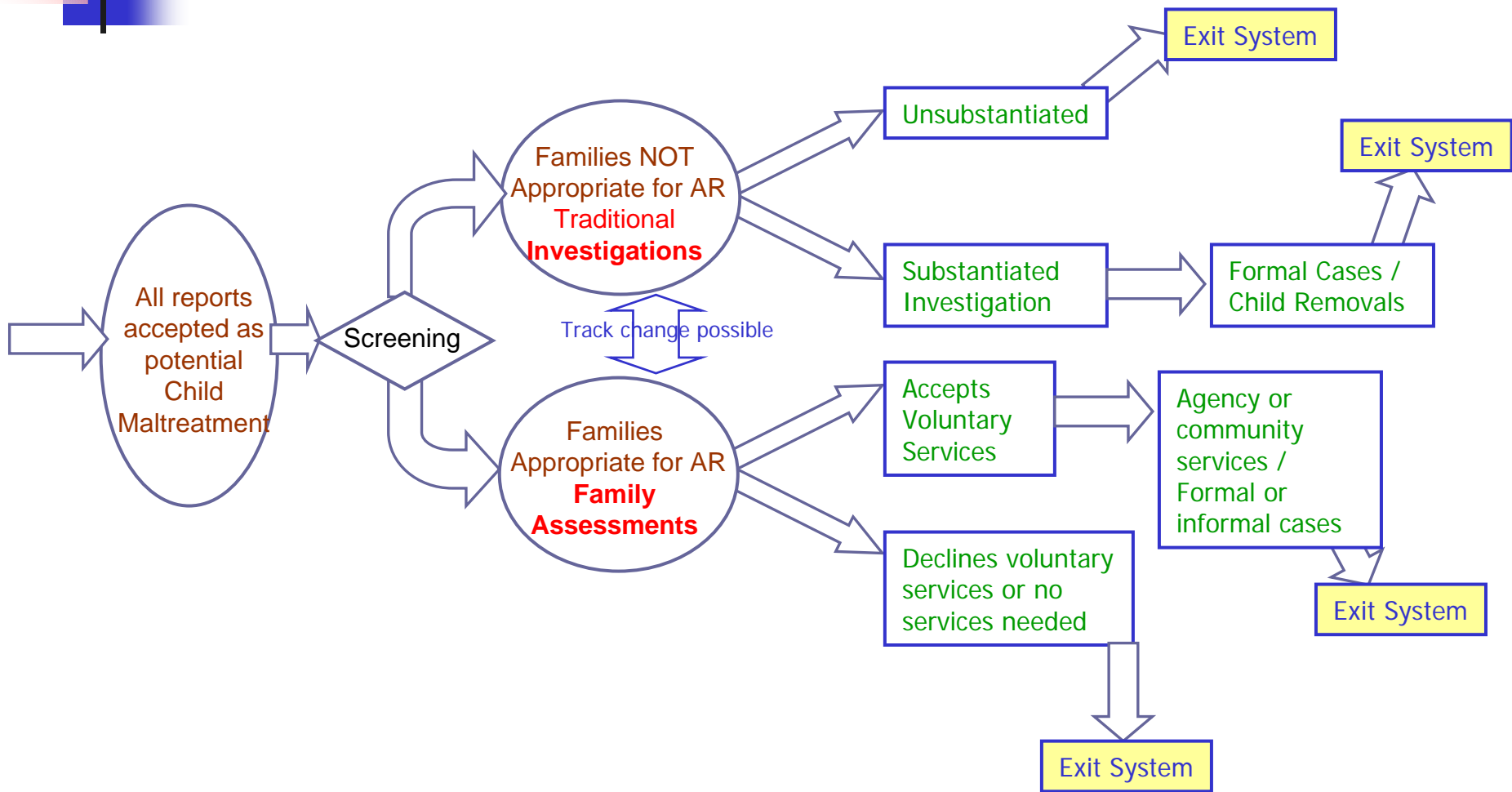


For Further Information

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- AR Research website www.iarstl.org
 - Institute of Applied Research
- Minnesota Website www.dhs.state.mn.us
 - 2000 Guidelines Bulletin #00-68-04
 - 2003 Guidelines Bulletin #03-68-02
- Minnesota legislative website www.leg.state.mn.us
 - Statutes 626.5551 and 626.556



The Alternative Response System





Minnesota Context

- State Supervised; County Administered
- Primarily locally funded child welfare
- Disproportionately involves poor, single mom and their children
- Disproportionately involves families of color
- 60% are Reports from Metro area
- Statewide Structured Decision Making System
- MN Child Welfare Training System
 - Strength Based Intervention training
- Social Service Information System (SACWIS)



Minnesota 2004 Data Overview

- Total Children 1.3 million
- Reports Accepted 18,000
 - AR Family Assessments 38%
 - Traditional Investigation 62%
- Of those Traditional Investigations 47% are Determined
- 35% of ALL accepted reports are opened for services
- Determined Child Victims by Type of Report *(2003 data)
 - Neglect 74%
 - Physical Abuse 2%
 - Sexual Abuse 10%
 - Mental Injury <1%
- ⌘ Total percent exceeds 100% due to multiple types/children



MN Child Protection Continuum

Tracks of
Child
Protection



- **Alternative Response**
- Response for less serious cases
 - No determination of maltreatment
 - Comprehensive
 - Strength-based community-focused
 - Enhances Family Stability
- No licensed childcare facilities allowable in AR
- Flexibility is Key
 - Reports may move between the responses as needed
- **Traditional Investigation**
- Response for substantial child endangerment cases
 - Did maltreatment occur?
 - Are Child Protective Services Needed?
- Incident based with a focus on fact finding
- Forensic in nature; coordinated with law enforcement
- May be perceived as intrusive and adversarial by family



AR Approach Overview

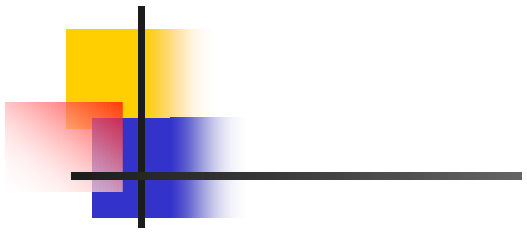
- Basic assumptions and practice values
 - Focused on establishing safety not blame
 - Safety through engagement of family strengths and community resources
 - Parent as partner using collaborative practices
 - Non-judgmental, genuine, honest, attentive
 - More families served more broadly; child safety addressed within the context of family well being





Minnesota Differential Response Reform Steps

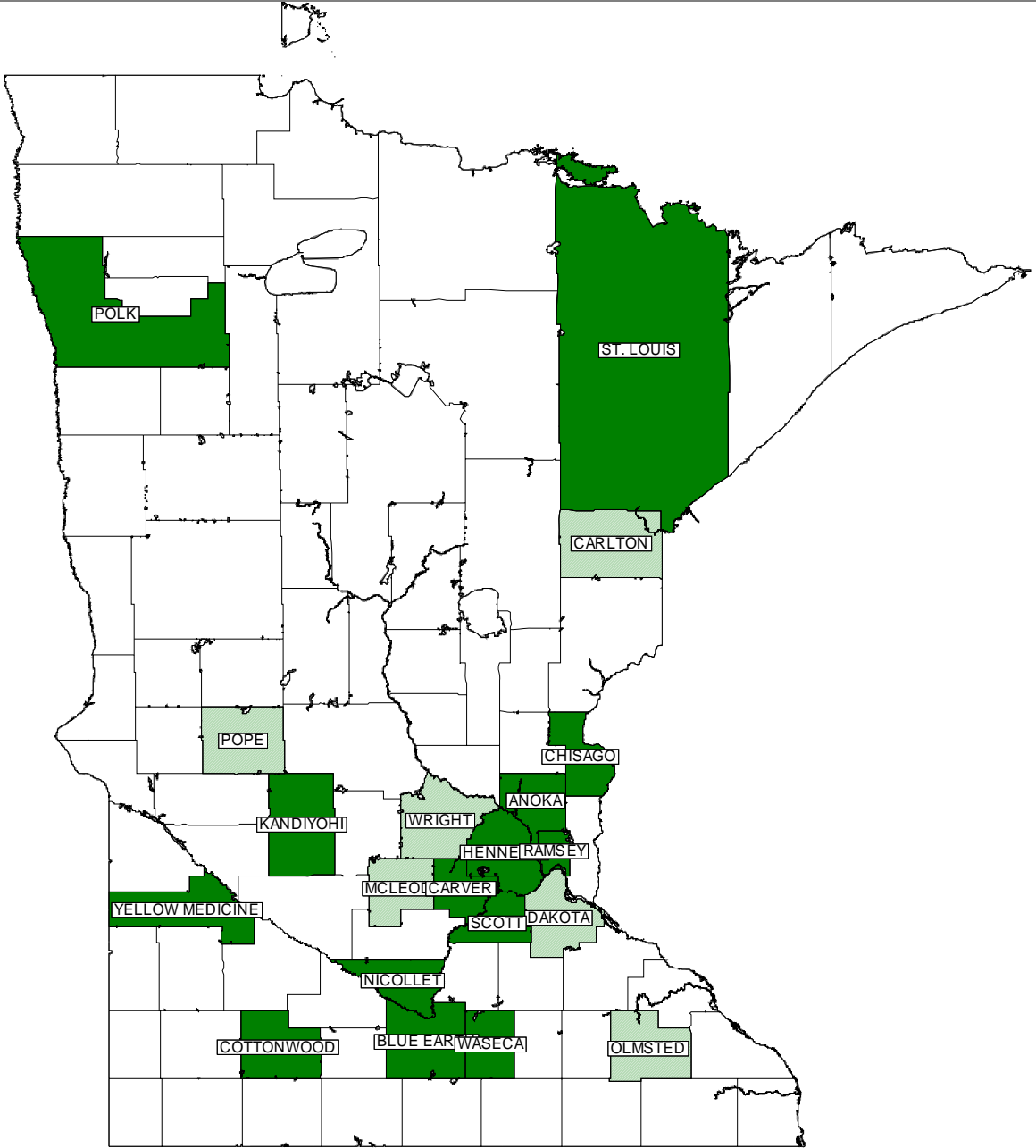
- Pilot Project
 - 20 Counties representing 70% of all CPS in the state
- Public Sector and Private Foundation Collaboration
 - The McKnight Foundation and MN DHS
- Statutory Permission
 - 1999 permissive legislation
- Policy/Practice Guidelines
 - Stakeholder committee April 2000
- Research and Practice Integration
 - Experienced Researchers
 - Experimental research design implemented 2001
- Training and Technical Assistance
 - Strength based intervention training ongoing
 - Lessons Learned Sessions ongoing

The AR pilot project took place in 20 counties. In 14 of these, families screened as appropriate for AR were randomly assigned to experimental or control groups. Cases from these 14 counties (shown as solid green) were analyzed for the impact evaluation.



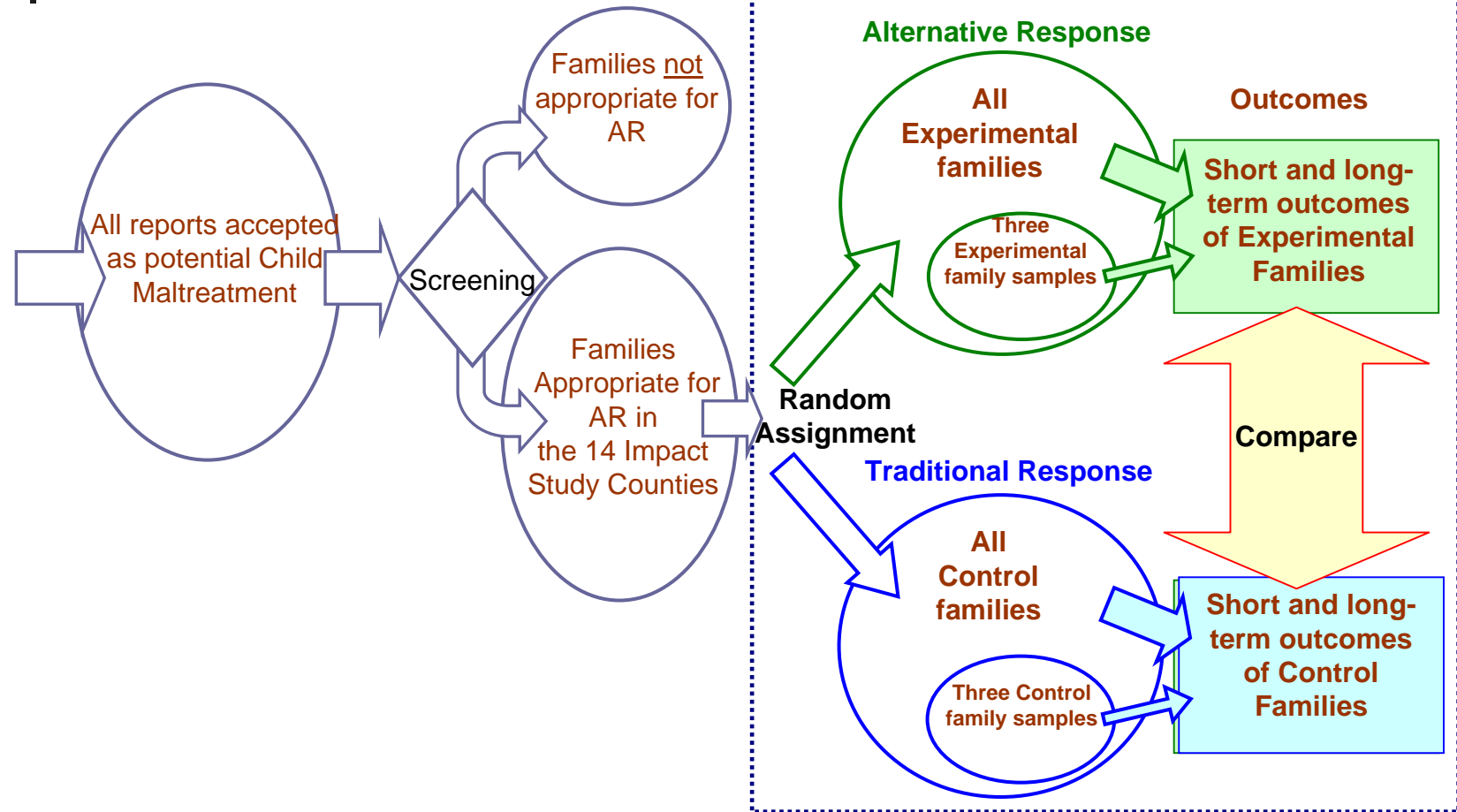
Minnesota Counties Participating in Alternative Response Project

-  Counties with control groups
-  Counties without control groups



This diagram shows the impact and cost-effectiveness study design. Notice that only AR appropriate families were included in the study. Families that were screened as not appropriate were investigated in the traditional manner and were not included in the study. Experimental families all received an AR family assessment while control families all received a traditional CPS investigation. Samples of families were selected from within the experimental and control groups, as shown. These includes a case-specific sample to collect more detailed info on families, a family feedback sample to collect information from families, and a cost-study sample for which cost data were collected from local bookkeepers.

Experimental Design



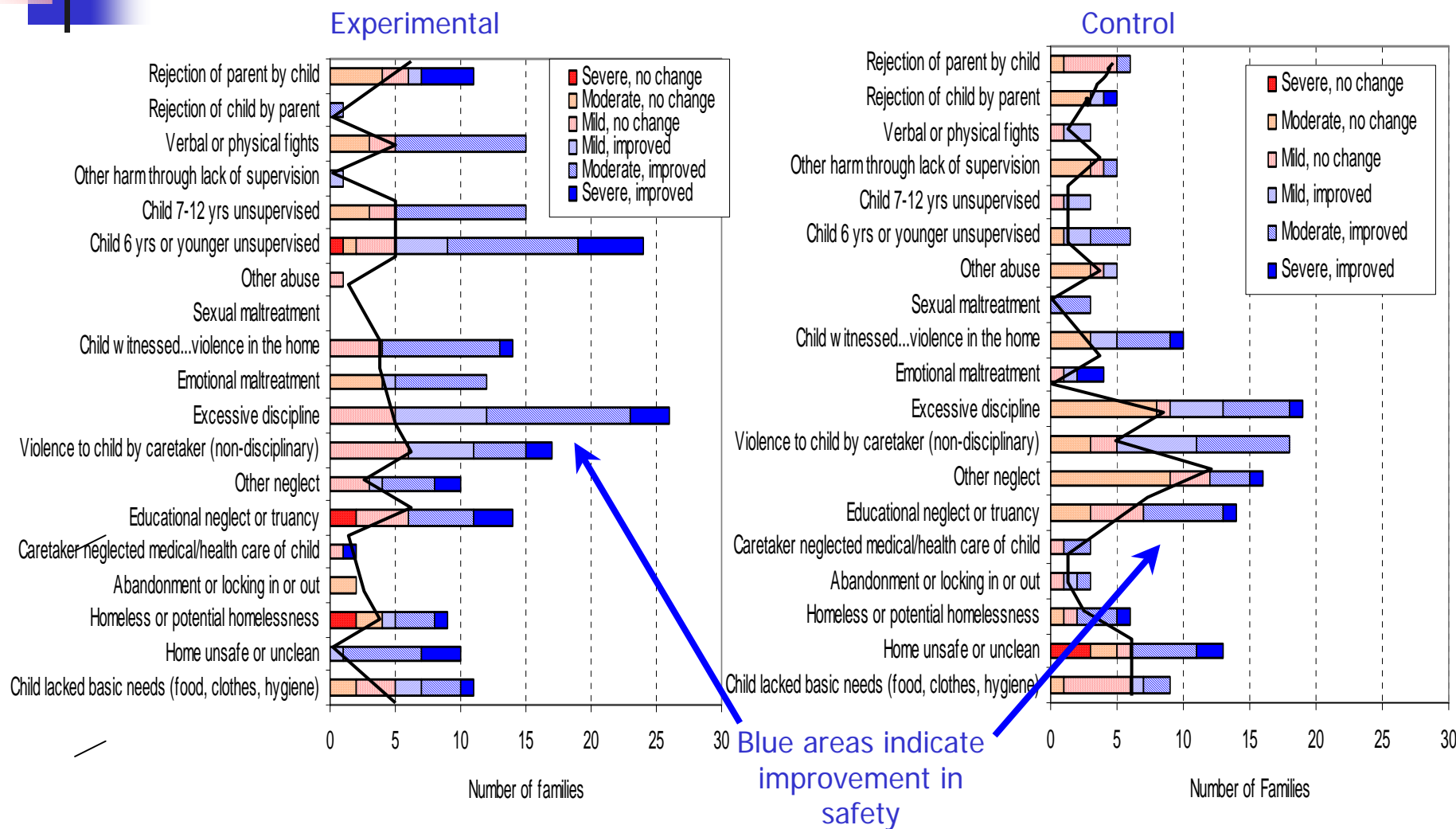


General Areas to be Considered

- **Child Safety (slides 12 and 13)**
 - Can child safety be maintained under Alternative Response (AR) at the same levels as in traditional investigations?
- **Family Engagement (slides 16-20)**
 - Does the non-adversarial approach of AR lead to improved participation and satisfaction of families?
- **Services to Families (slides 21-26)**
 - Are services made available to more families under AR and do the types of services change?
- **Recurrence of Maltreatment (slides 27-31)**
 - Does AR lead to reduced abuse and neglect reports and reduced removal of children?
- **Cost Effectiveness (slides 32-35)**
 - Is AR more or less cost effective over time?

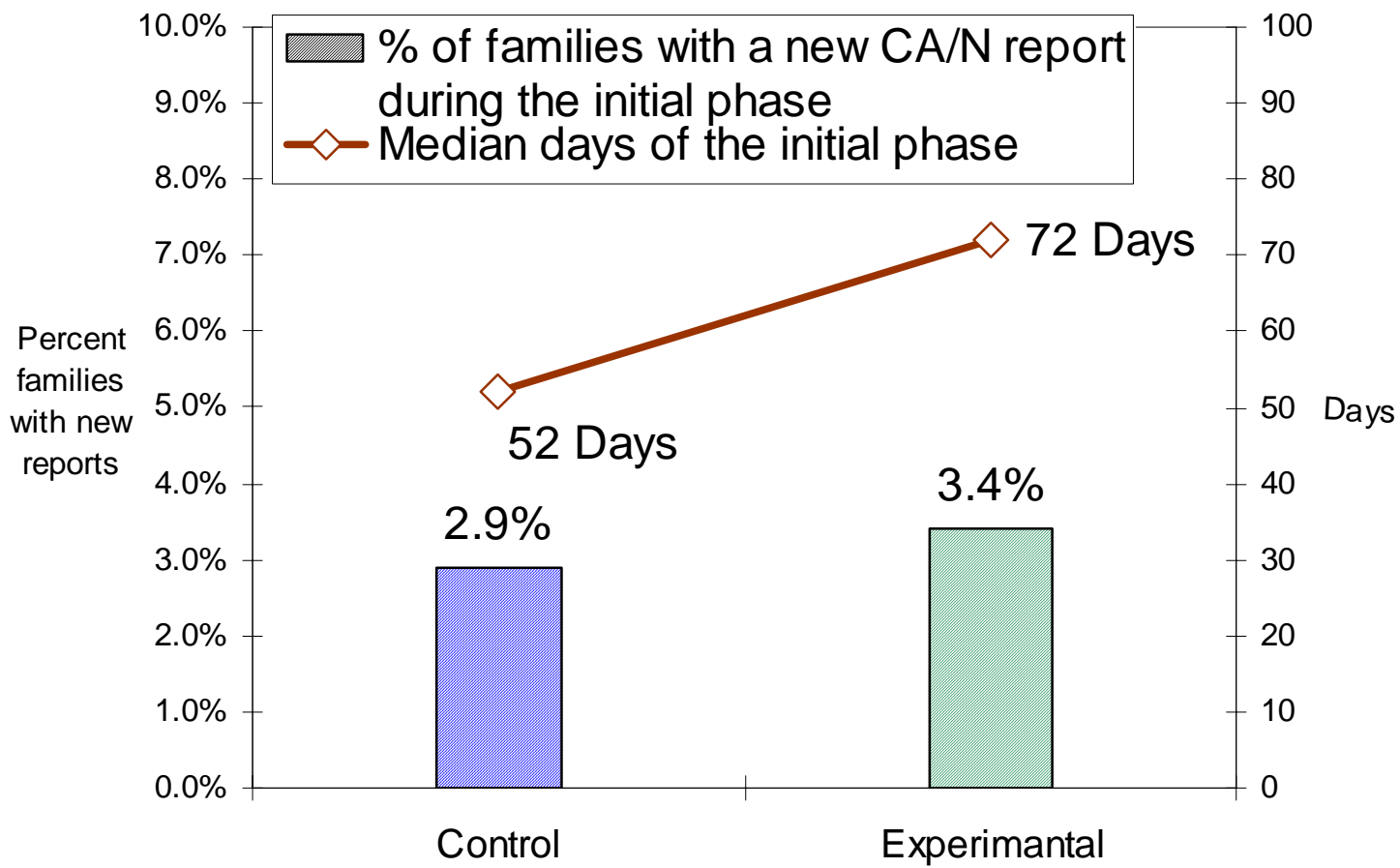
The blue areas in each graph represent the proportion of families with each specific safety problem at the time of the initial report that showed improvement while workers were in contact with families. A greater proportion of experimental families showed *improvements in child safety* before the end of agency contact. The differences are likely due to the fact that workers in the experimental group spent more time with more families. Control families were more often set aside as unfounded investigations or as low-risk with no further action. Also, there were higher levels of uncooperative attitudes and behavior among control families. In such cases there was no opportunity to detect safety improvements.

Number of Safety Problems by Outcome (reported by the workers in the case)



Another measures of child safety—new maltreatment reports while workers were with families. There was no significant difference between experimental and control families. The average days of the initial phase (from the beginning to the end of contacts with workers and the agency) are shown. Taking this into account, there were 5.5 percent reports per 100 days for control families compared to 4.7 percent for experimental families. This is an indication of *no reduction in child safety* as a result of replacing investigations with AR family assessments.

Child Maltreatment Reports while Workers were in Contact with Families

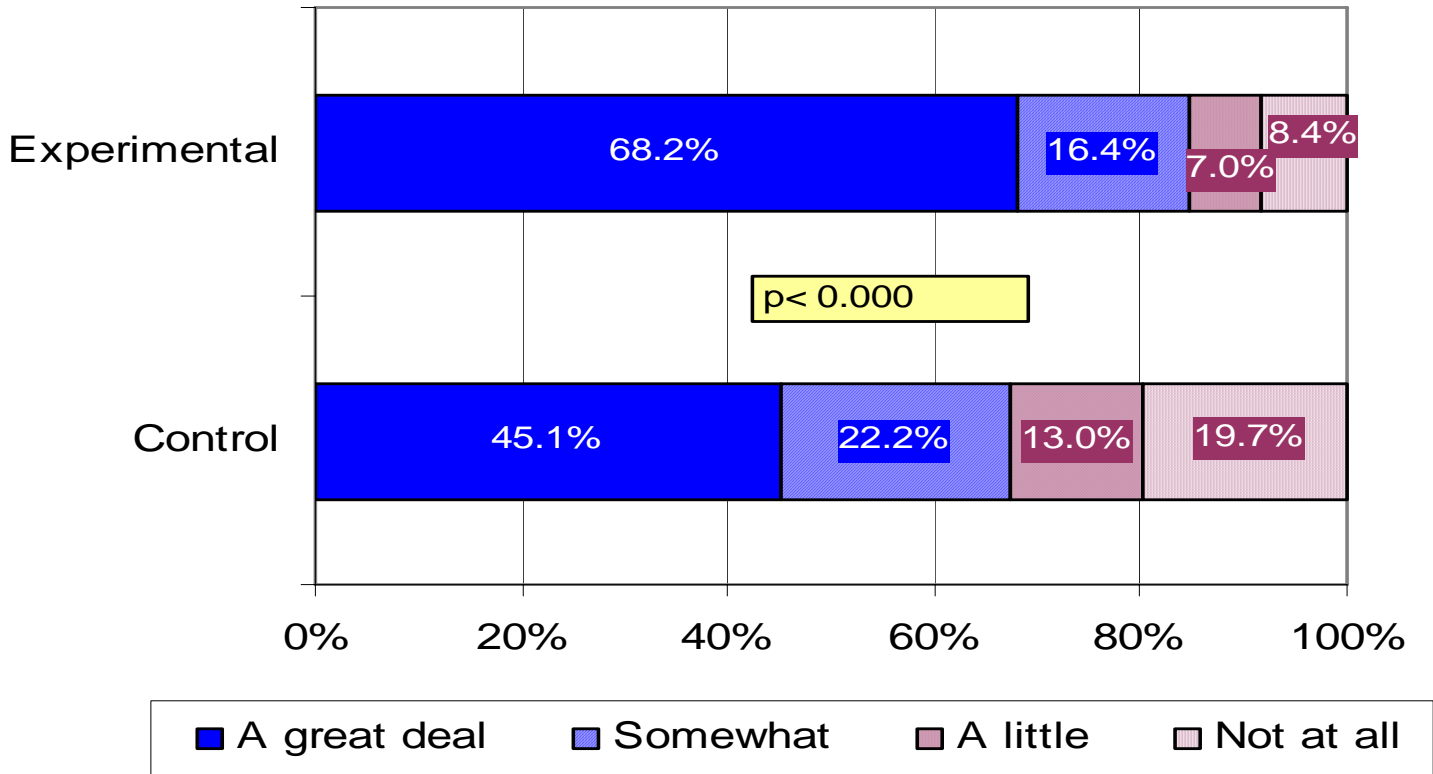




Family Engagement

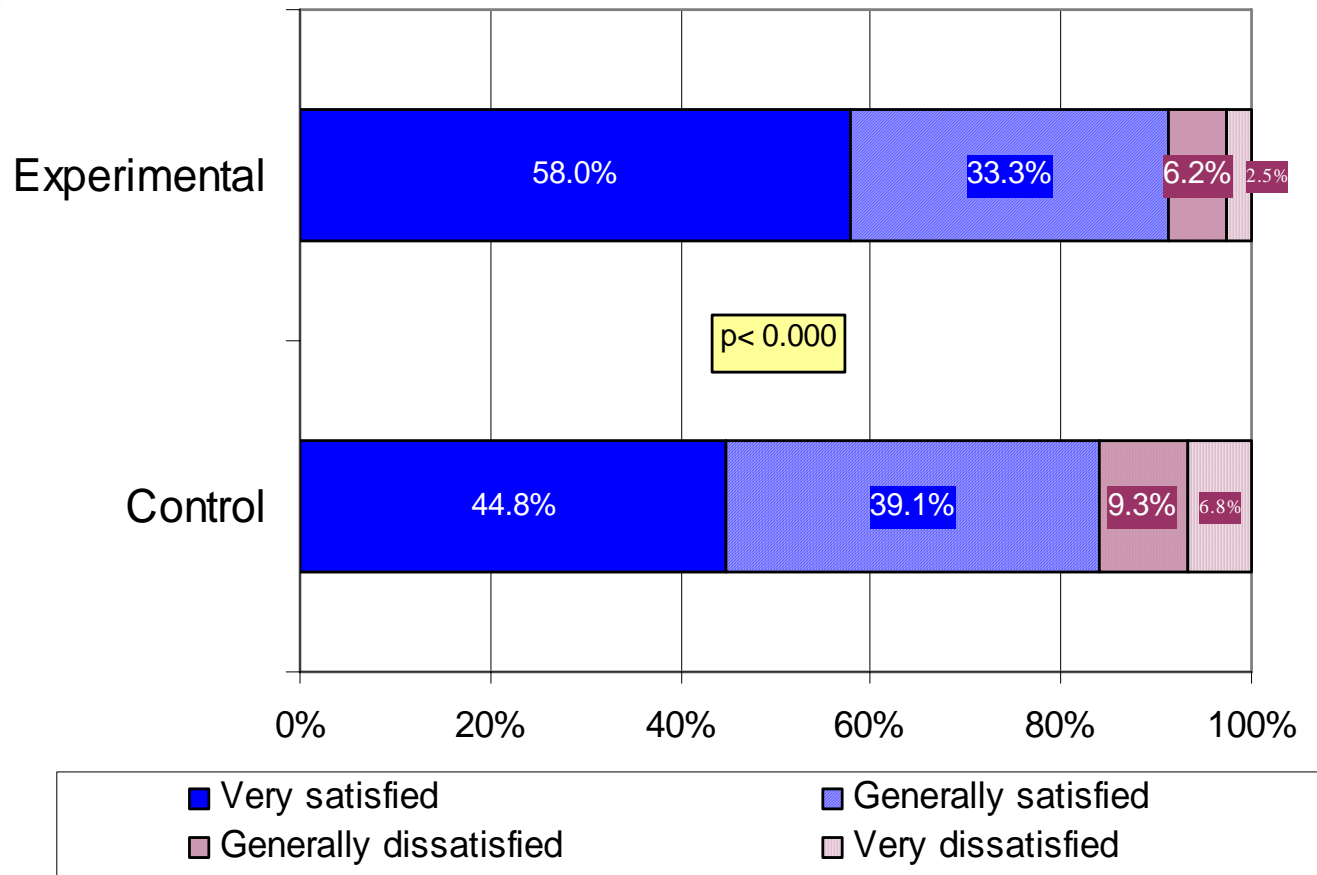
- Engagement of families was a factor in improved safety outcomes and increased services to families.
- Because the AR approach was non-adversarial, family friendly and voluntary, families were more engaged and responded more positively.
 - Family satisfaction improved
 - Families' sense of participation in decision making increased
 - Families emotional responses were more positive under AR
 - Workers rated families as more cooperative and less hostile

Families felt they had greater involvement in decision making



Level of Involvement in Decision Making

Families were more satisfied with the way they were treated



Satisfaction of Families with Treatment by Worker



Family Emotional Response

- Differences in engagement and alienation were demonstrated in the reported emotional responses of families.
- Experimental families more often reported being
 - relieved, hopeful, satisfied, helped, pleased, reassured and encouraged.
- Control families more often reported being
 - angry, afraid, irritated, dissatisfied, worried, negative, pessimistic and discouraged.



AR Families More Likely to Report:

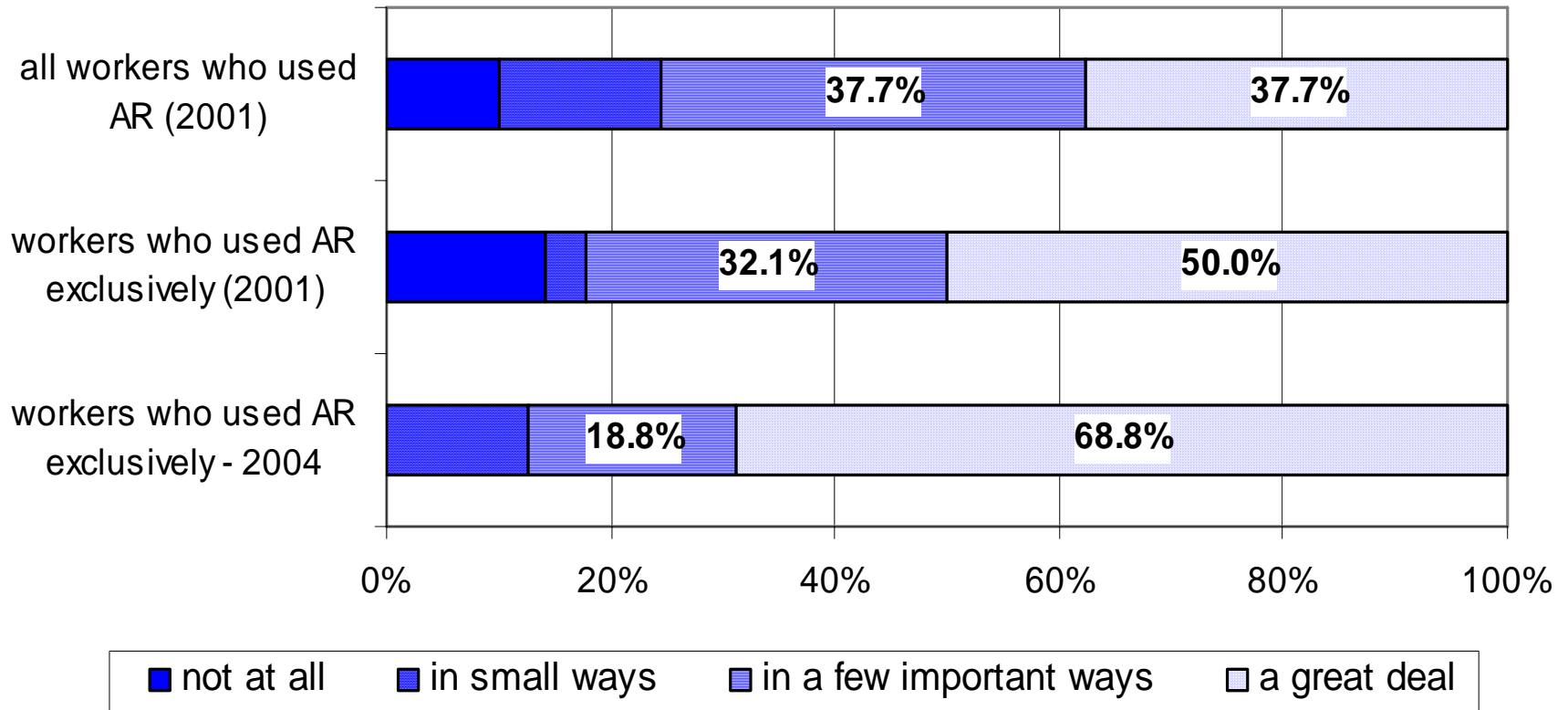
- Greater satisfaction with the way they were treated by child protection workers.
- That they were treated in a friendly manner
- That they were treated fairly
- That they were more involved in decision making
- That all matters important to them were discussed
- That CPS workers listened to what they had to say
- That CPS workers tried to understand their situation and needs
- That workers provided direct assistance themselves to families
- That workers connected them to other community resources
- That their family was better off because of the experience



Worker Assessments of Cooperation

- Items related to family attitudes on the Minnesota SDM Family Risk Assessment instrument were significantly more positive.
 - Workers rated the primary caregiver as uncooperative in 44 percent of TR control families, while less than 2 percent of primary caregivers in AR experimental families were rated as uncooperative.
 - Both primary and secondary caregivers in the control group were rated as less motivated and as viewing the situation that led to the report less seriously than the agency.
- When workers were asked by researchers to rate specific families they had worked with on cooperation:
 - The average levels of cooperation of families during the first visit and last visit were significantly greater for experimental families.
 - Moreover, workers were more likely to report that control parents were hostile throughout the case.

How Workers said AR Affected Their Approach to Families and Their Work



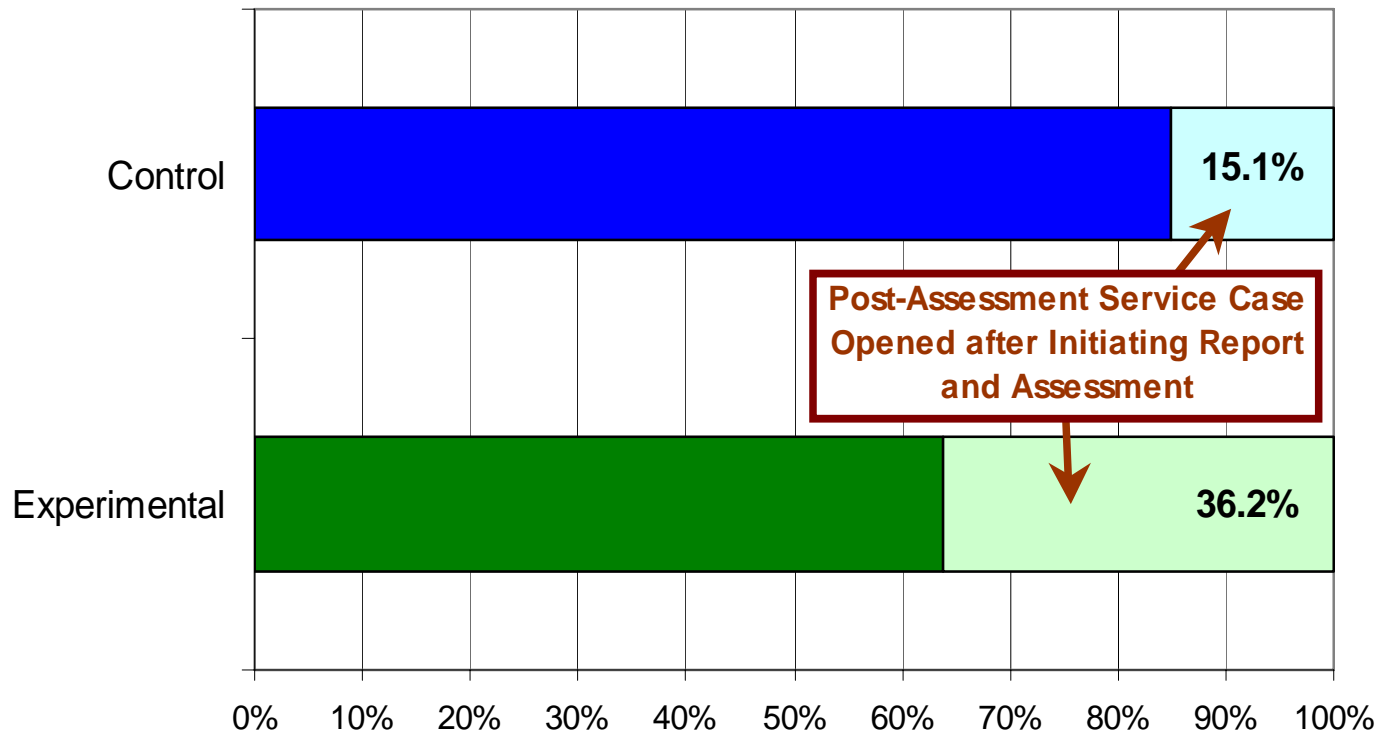
Services to families increased under AR. Partly because of extra funding for the project from the McKnight Foundation. But equally importantly, the AR approach led workers to explore together with the family a broader array of needed services. Differences in the *amount of services* are illustrated in slides 22 to 24.



Services to Families

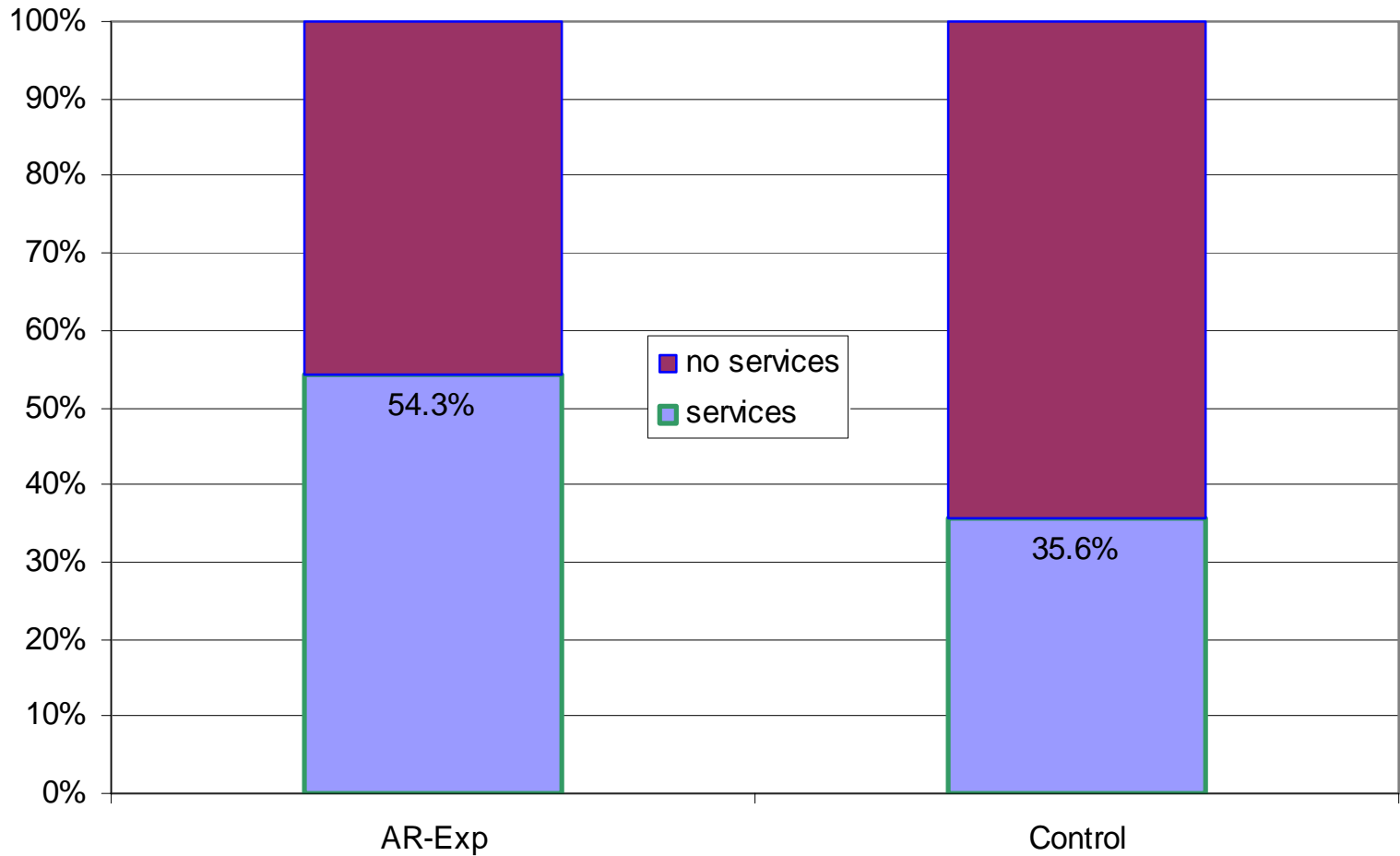
- In Minnesota, additional funds were available for the demonstration
- Temporary funding was received from the McKnight foundation for the duration of the 20-county demonstration project only.

Proportion of Families with a Service Case

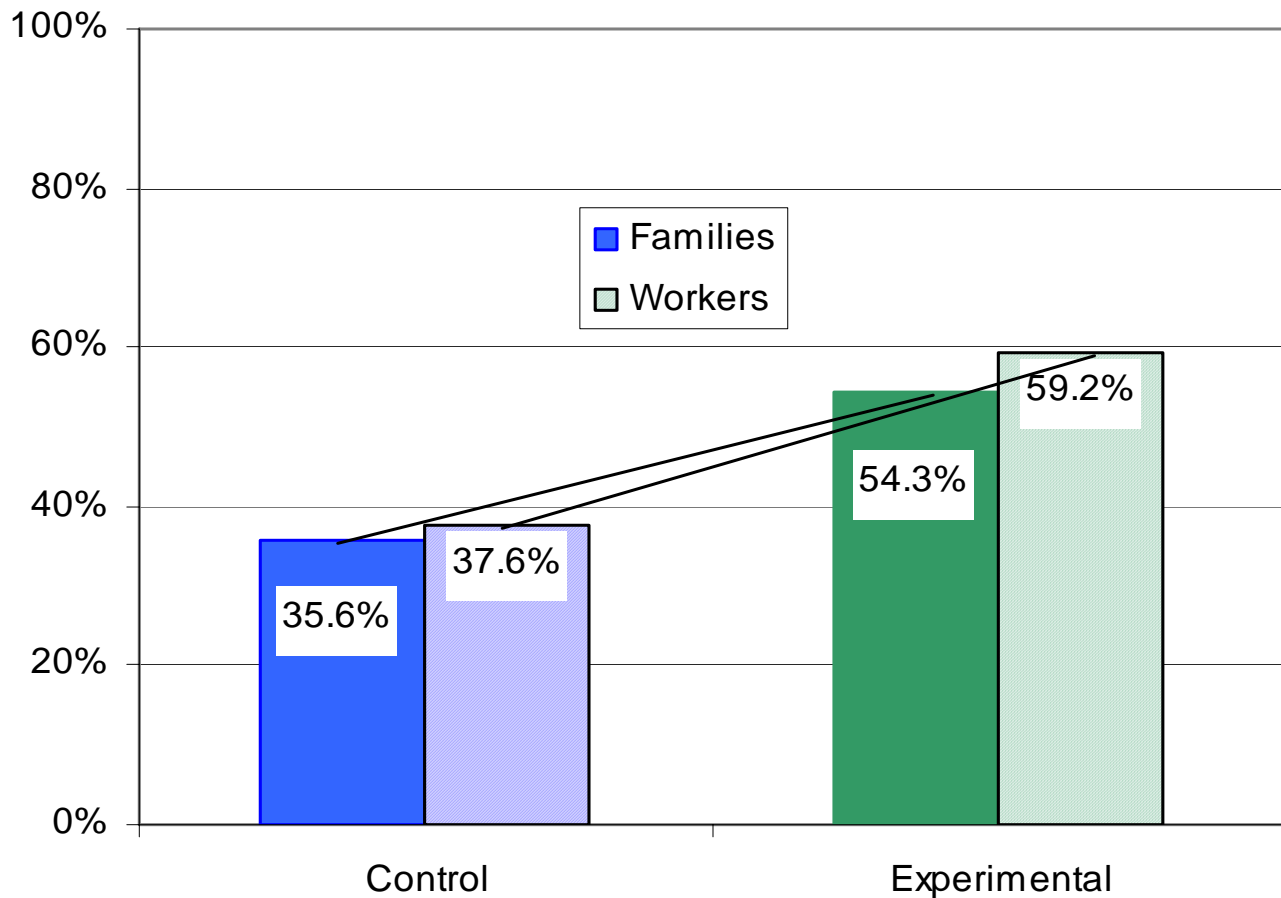


Over twice as many experimental families had a case-management workgroup opened (the condition for provided paid services)

Percent of Families Reporting they Received Services



Percent of Families that Received Services According to Families and Workers

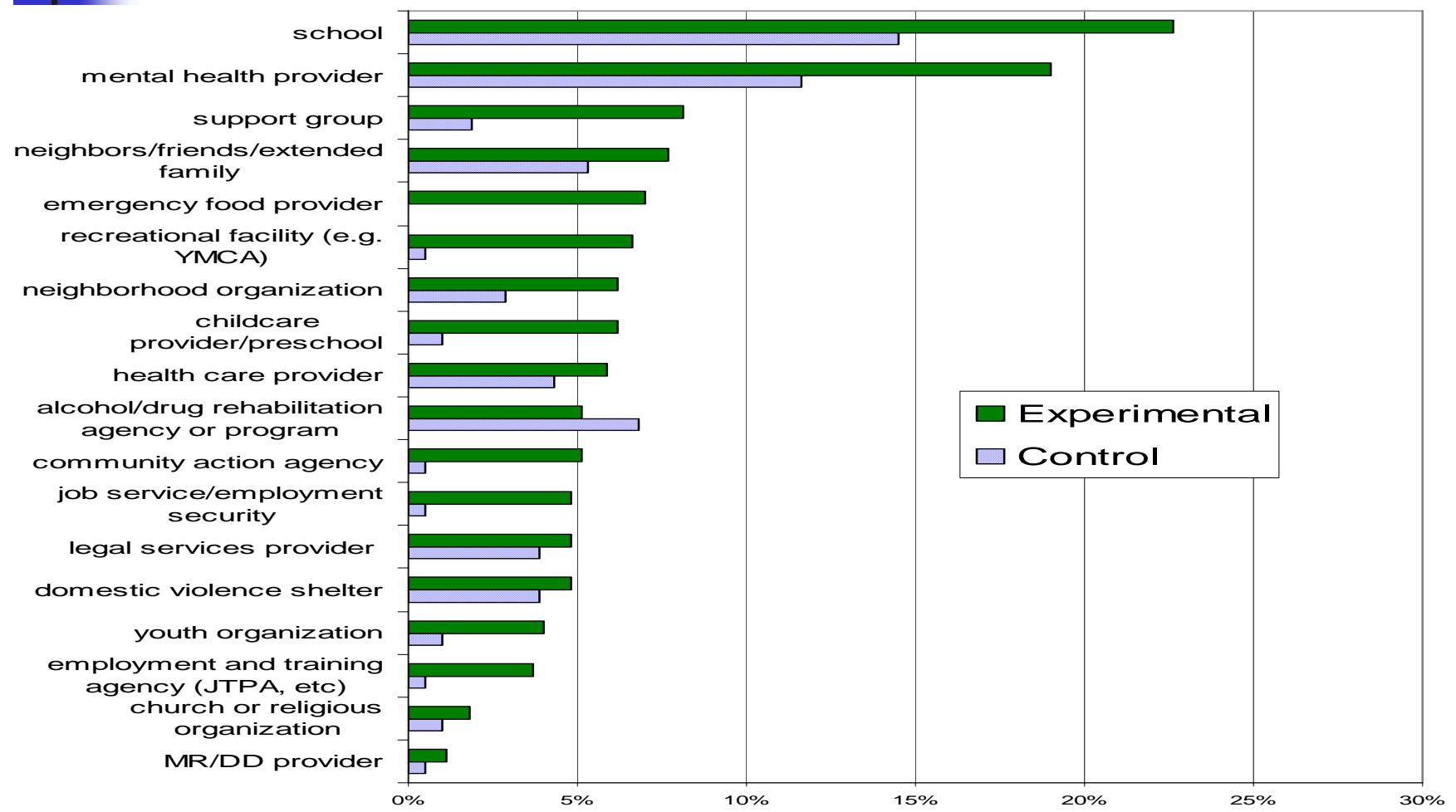




AR families were more likely to report that they received the following services:

- Food or clothing for their family
- Home repair, appliances, or furniture
- Help in looking for employment or in changing job
- Help paying utilities
- Other financial help
- Respite care

Utilization of Community Resources Increased



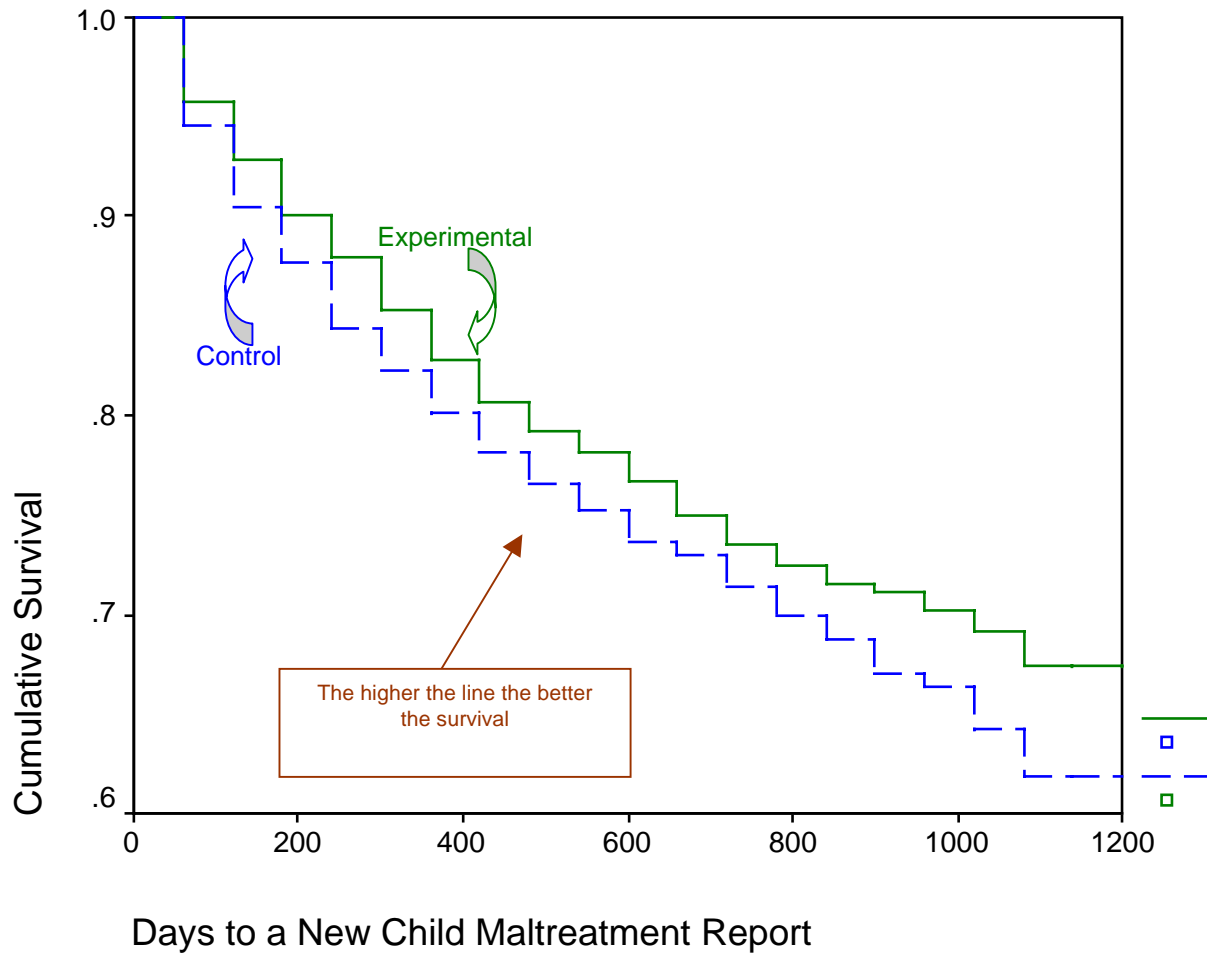


Recurrence of Child Maltreatment

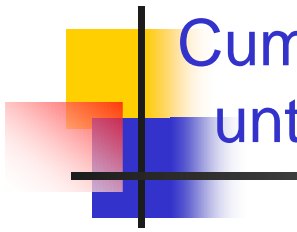
- Recurrence of child abuse and neglect was measured indirectly:
 - Families with new CA/N reports **after final contact following the initial report.**
 - Families with later removal and placement of children.
- Report recurrence declined under AR
- Later removals of children declined

This is a life table analysis showing reduced recurrence for experimental families. This analysis was limited to families with no prior cases in CPS (the majority of families). Such families are lower-risk families. This is a type of survival analysis that was necessary because different periods of time were available for tracking each family in the study. In the 2004 report (see www.iarstl.org) this and other analyses are explained in greater detail.

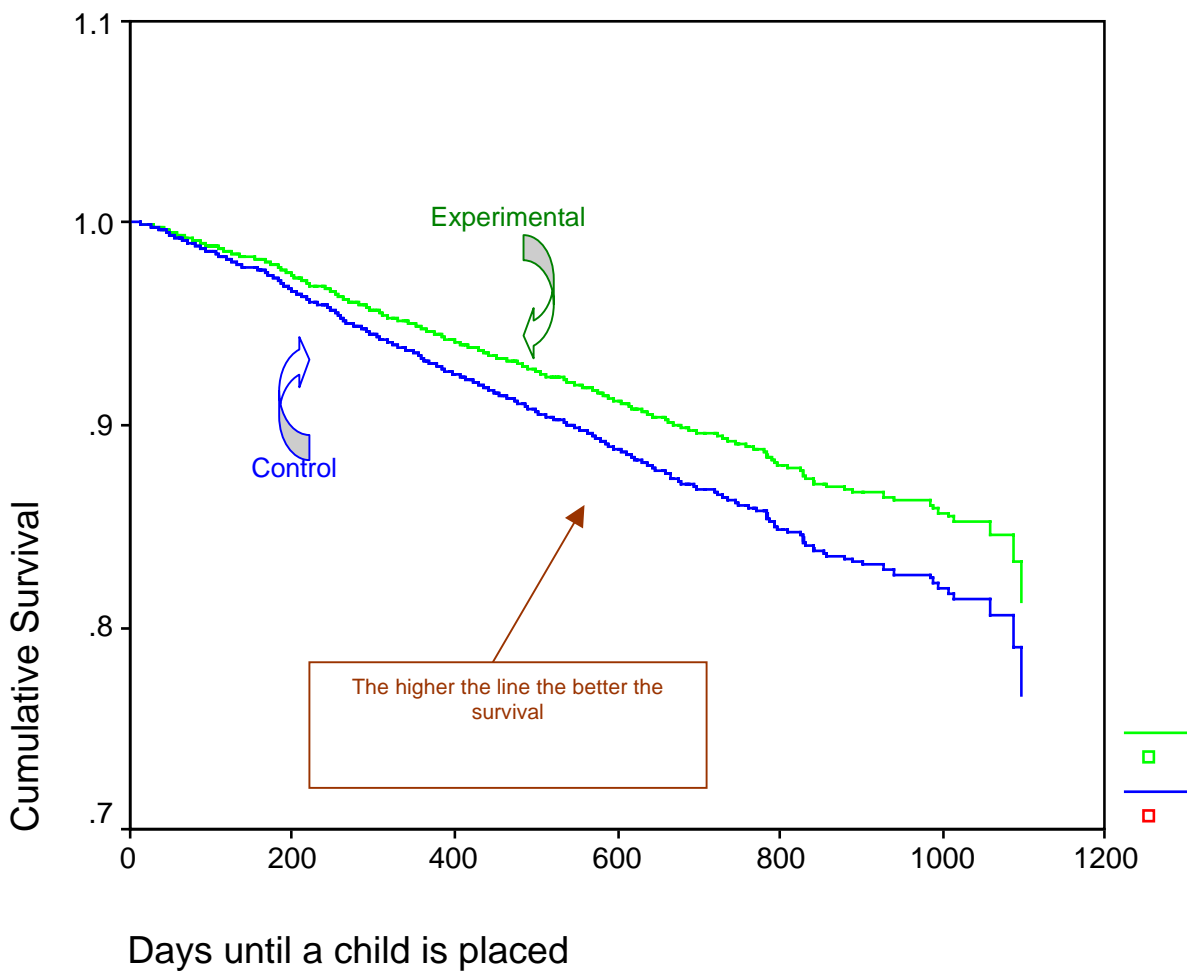
Cumulative Survival of Experimental and Control Families until a New Accepted Child Maltreatment Report Occurs



Similar findings occurred for placement. This analysis is called proportion hazards and shows that experimental families were significantly less likely to have a child removed and placed (after a later report). The analysis controls for a measure of risk and is also described in greater detail in the 2004 report.



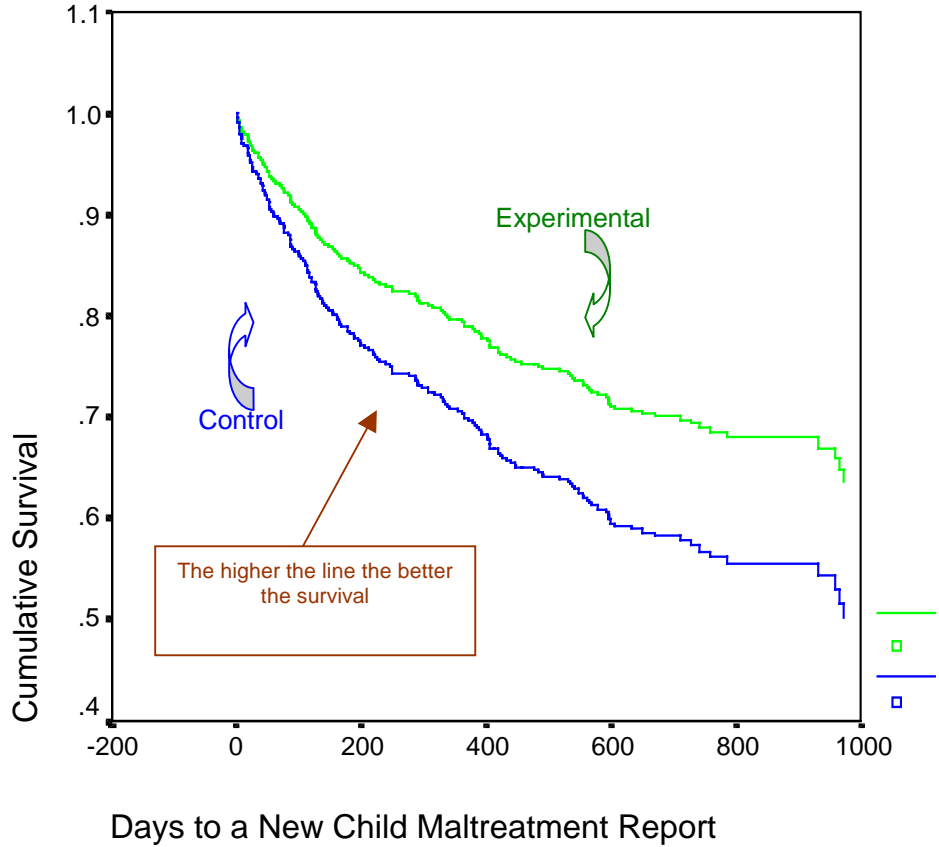
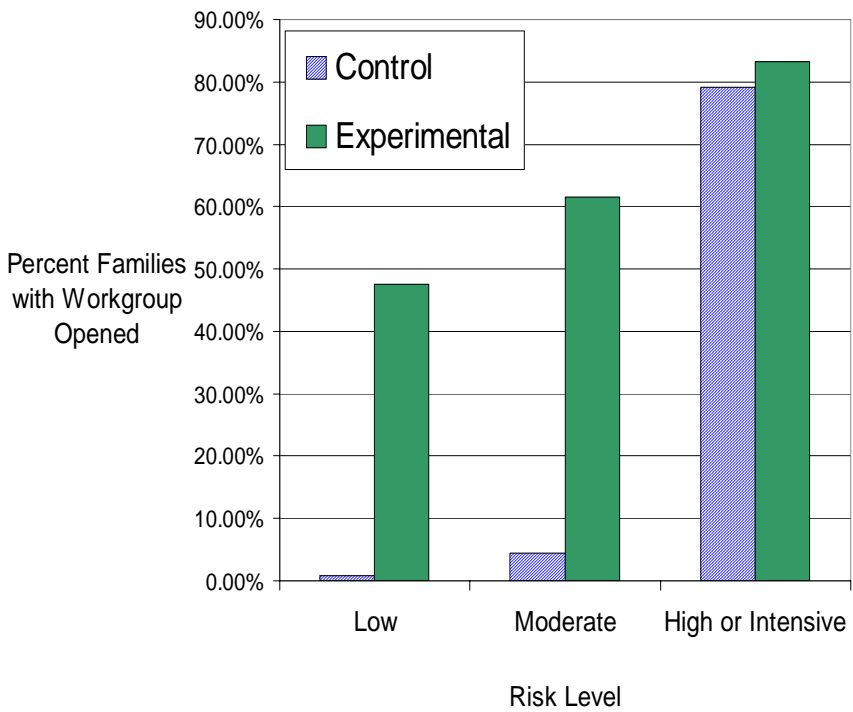
Cumulative Survival of Experimental and Control Families until a Child is Removed and Placed Outside the Home



This is a new analysis for a report on Hennepin County (Minneapolis) that will appear on our website (www.iarstl.org) shortly. These charts show the radical change that AR represented in Minneapolis. It led to large increases in the proportions of *low and moderate risk families receiving post assessment services*. This in turn led to the biggest difference in CPS report recurrence of all 20 counties in the study. The greater the *relative increase* in prevention services to low-risk families, the large of positive outcome for the system.

Cumulative Survival of Experimental and Control Families until a New Child Maltreatment Report is Received (Hennepin County)

Post-Assessment Services by Risk Level of Family





The Effects of Service versus Approach on Recurrence of Child Maltreatment

- The experimental design permitted analysis of the relationship of services to families as well as the family-friendly approach of AR to reduction of later recurrence of reports
 - Services to families lowered recurrence. This might be expected but is a very difficult thing to prove outside the context of a controlled study. The increase in family support services addressing financially related needs may have been an important component of this effect.
 - The non-adversarial and participatory approach to families reduced recurrence whether or not services were delivered. One possible explanation centers on family engagement, family cooperation, improved communication and participation. The exact mechanisms, however, are unknown and should be studied further.



The Costs of Alternative Response

- The evaluation included a cost-effectiveness component. Data are still be collected but interim results have been positive.
 - Costs related to case management and other services during the time the initial case was open were greater for AR than control cases.
 - Costs for case management and other services following the closing of the initial case through the end of the follow-up period were greater for control cases.
 - Total costs for case management and other services, both separately and combined, were less for AR cases than control cases.
 - Effectiveness: The mean cost per family of achieving the goal of recurrence avoidance with AR was \$398 less than with the traditional approach.



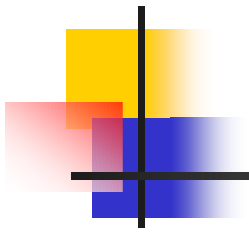
Cost Data Matrix

Service \$	Period 1	Period 2	Total
Experimental			
Control			
Staff \$	Period 1	Period 2	Total
Experimental			
Control			
Total \$	Period 1	Period 2	Total
Experimental			
Control			

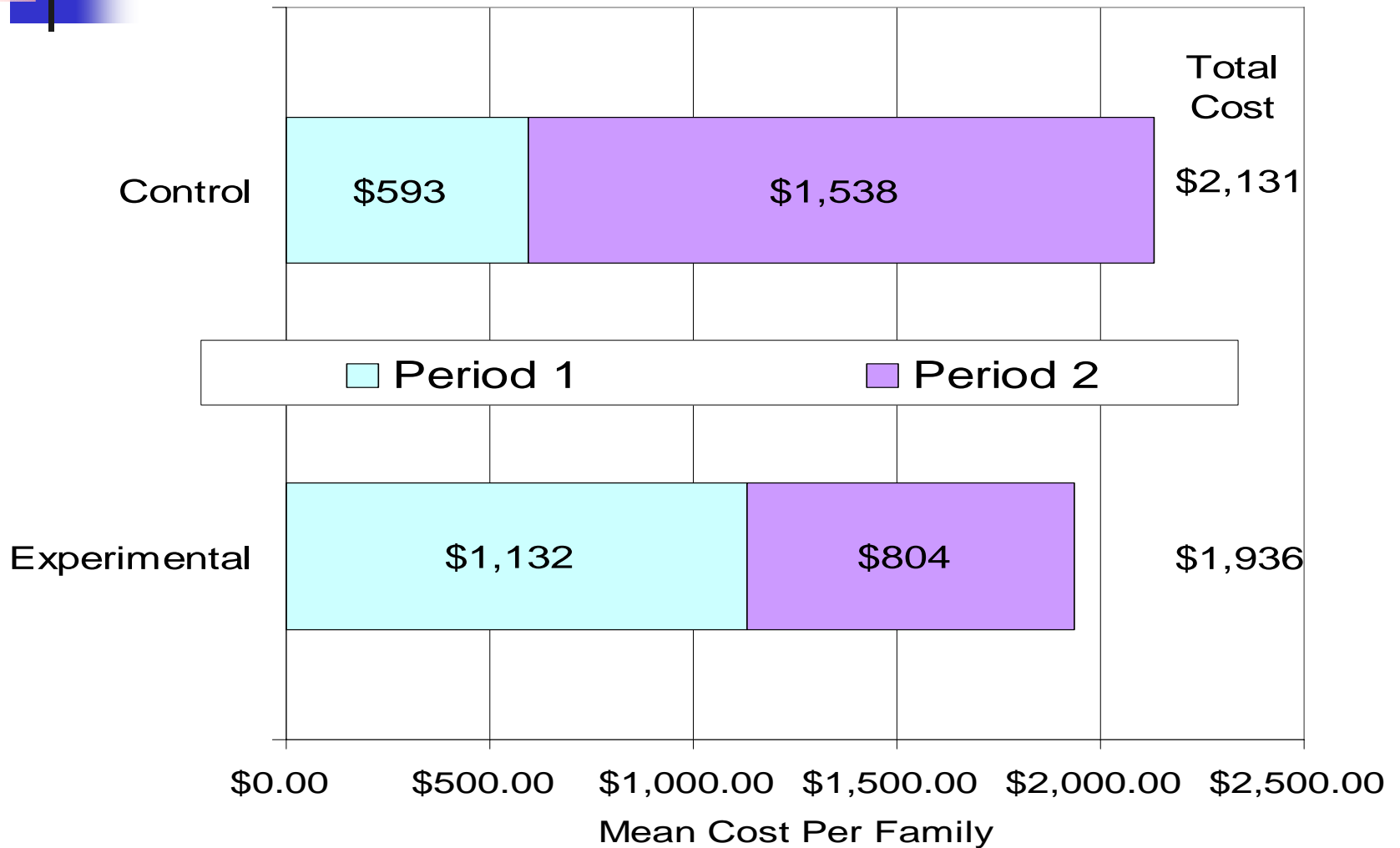
Initial costs were higher for both services and staff under AR (Period 1 from the initial report to the final contact with the family). However, later costs were greater for control families provided with the traditional approach (Period 2 from the final contact with the family until the end of tracking). Later costs for control cases were associated with higher reporting levels (and new cases) and higher removal and placement of children. Overall, therefore, AR cost less as can be seen in the lower right cells of the table.

Cost Data (mean per family)

Service \$	Period 1	Period 2	Total
Experimental	493	563	1,055
Control	152	1,210	1,362
Staff \$	Period 1	Period 2	Total
Experimental	639	242	881
Control	441	328	769
Total \$	Period 1	Period 2	Total
Experimental	1,132	804	1,936
Control	593	1,538	2,131



The Costs of Alternative Response





Next Steps

- Continued research following Child maltreatment recurrence (re-reporting); out-of-home placement rates; cost-effectiveness
- Integration of statutory authority
- Parent Support Outreach Project for early intervention