

# Harvard's Elizabeth Bartholet Takes on Differential Response

By Daniel Heimpel, November 19, 2014

**In her latest paper**, Harvard Law School professor Elizabeth Bartholet does her best to dismember the widely popular child welfare strategy known as Differential Response, or simply DR.

Bartholet's argument has some limitations, and includes statements that will surely rankle the child welfare establishment.

The paper is selective, focused almost exclusively on DR's shortcomings. It relies heavily on her earlier work criticizing what she calls "extreme" family preservation policies. And, in the absence of "radical social change," it provides an unpopular solution to the existing child maltreatment threat: matching increased resources for families with an increased use of the coercive powers of the state to impose rehabilitative services, and when that fails, faster termination of parental rights.

But as controversial as her ideas may be, Bartholet's "Differential Response: A Dangerous Experiment in Child Welfare" is a notable contribution to the growing debate around DR, and the chronic battle fought in a resource-starved child welfare field over family preservation and child safety.

In terms of full disclosure, Bartholet and I have worked together on investigating DR, which was designed to keep families together by offering voluntary services in lower risk incidents of abuse and neglect. On my end, this has entailed overseeing two graduate students and one policy consultant to synthesize available DR research and analyze how DR plays into child protection financing.

Personally, I have conducted scores of interviews with researchers, child welfare leaders, advocates, front-line social workers and others standing on either side of the chasm that separates the practice's proponents from the critics. While much of this research was available to Bartholet as she wrote her article, the views expressed therein are entirely her own.

In the most unequivocal language to date, she describes DR as yet another iteration of family preservation policies that amount to "a cheap version of the war on poverty."

From the abstract:



*Credit: Harvard Law School  
Elizabeth Bartholet*

*“This article describes the serious risks DR poses for children, and the flawed research being used to promote DR as ‘evidence-based.’ It puts the DR movement in historical context, as one of a series of extreme family preservation movements supported by a corrupt merger of advocacy with research. It argues for reform that would honor children’s rights, confront the problems of poverty underlying child maltreatment in a serious way, and expand rather than reduce the capacity of CPS to address child maltreatment.”*

Bartholet’s most stinging assertion is that DR’s proponents, including Seattle-based Casey Family Programs, have co-opted a cadre of researchers to produce skewed “advocacy research” to support the spread of DR across the country. This echoes concerns voiced by Ron Hughes and Judith Rycus of the North American Resource Center for Child Welfare who published their own concerns in an article entitled “Issues in Differential Response,” which ran in the September 2013 edition of *Research on Social Work Practice*.

My independent reporting also indicates close alignment between research and policy advocacy. In a July Op-Ed that ran in *The Baltimore Sun*, I described how Casey Family Programs played a critical role in designing DR in Maryland, and was also granted the final decision on who would research its efficacy. Importantly, the firm that was finally selected, the Institute of Applied Research (IAR), conducted many of the seminal studies that have been used to promote DR.

To be fair, my analysis did not go uncontested. Shortly thereafter, one of IAR’s principals, Tony Loman, wrote an Op-Ed for *The Sun* defending Differential Response, concluding that DR “is not a magic bullet and does not always work perfectly, but most see it as a reasonable change to help prevent child abuse and neglect.”

That a social scientist would defend a program he is meant to be studying objectively lends some credibility to Bartholet’s claim that the research is “designed to *persuade* policy makers to adopt DR rather than enable them to decide whether they *should* do so.”

The most vexing question that Bartholet brings up is this: To what degree does the expansion of Differential Response come at the expense of the traditional child protection system?

This was apparently the case in Illinois, where the DR program was discontinued. In 2012, the state’s Department of Children and Family Services Acting Director Denise Gonzalez sent a letter explaining her rationale for cutting the program to two state lawmakers who had passed legislation authorizing DR back in 2009.

“DR required transferring staff out of frontline child protection positions and into the DR pilot, creating vacancies in investigations that DCFS was unable to fill, and thus driving up caseloads for investigative staff that contributed to high caseloads that put children at risk,” Gonzalez wrote.

In Connecticut, the court monitor tasked with enforcing a consent decree stemming from a decades-old lawsuit lodged against the Department of Children and Family Services there found in his October 2013 report that:

“Front line staffing levels are inadequate given the complexity of cases that now make up the pool of investigation and ongoing service cases that social workers have on their caseloads since the implementation of the Differential Response System (DRS). DRS results in the diversion of low-risk cases from workers’ caseloads, leaving staff with caseloads made up of only complex cases.”

And in Minnesota, where a recent newspaper exposé on the death of a four-year-old boy who had received two Differential Response “family assessments,” has shaken the entire state and may cause the discontinuation of DR there; state budgets show ever increasing allocations to DR, while the overall budget has dwindled.

Alternative Response, as it has been called in Minnesota, does not appear in the child services budget until 2001. Three line items – alternative response case management, alternative (or family) assessment and family services for alternative response — made up 1.1 percent, or \$4.7 million of the \$404 million annual budget that year. By 2013, Minnesota was spending seven times that amount on DR, with the program costing roughly \$28.9 million, or 7.5 percent of the state’s since-reduced \$387 million child services budget.

While a deeper budget analysis would be needed, simple math suggests that something had to be cut to pay for the increased expenditures on DR.

This appears consistent with Bartholet’s argument that in Differential Response, cash-strapped child protection systems are supposed to move their very limited resources from their traditional foster care and potentially coercive traditional systems to an entirely voluntary system, one in which parents accused of maltreatment are free to walk away from and thus escape any monitoring.

She calls this, and the related financial subsidies offered to those on the voluntary track, a “pathetically limited anti-poverty strategy.”

This is a point for further investigation. It may be that DR programs spread limited resources more thinly across a wider swath of families, which could also be compromising child safety throughout the system.

While some readers may see Bartholet’s paper as a call to dismantle DR and thus reduce resources devoted to troubled families, that is not really the point. Rather, Bartholet argues that to implement programs like DR will require greater investment in child protection across the land.

“We also need to do some version of Differential Response,” Bartholet writes, “but within the framework of the traditional CPS system. For this we need new resources devoted to CPS, since a large part of the reason that it provides so little in the way of services to the families on its caseload has to do with the inadequacy of resources.”

Bartholet goes on to write that “additional resources are also needed to enable CPS to protect the children at highest risk through monitoring, mandated rehabilitative programs for parents, removal to foster care, and adoption.”

While many will recoil from Bartholet’s prescription, the diagnosis is basically sound.

In the absence of “a true war on poverty” equipped to tackle “unemployment, substance abuse, mental illness [and] blighted neighborhoods,” family preservation strategies rooted in child protective services may be a case of too little, too late.

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TAGS: Alternative Response, Casey Family Programs, child protective services, child protection, Child Safety, CPS, Differential Response, Elizabeth Bartholet, family preservation, Harvard Law School, IAR, Institute for Applied Research, Ron Hughes, Tony Loman