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ROBERT L. COWLES

**Wisconsin State Senator
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Justice for Children Package Testimony

October 22, 2015

Senator Rob Cowles

Over the past year, the Department of Justice, the Attorney General's office, advocacy groups and I have collaborated to address some major crimes against children and victims of sexual assault and create a collaborative approach to protect children and sexual assault victims and provide them with an opportunity for better outcomes. I am very pleased today to have the "Justice for Children package" heard.

These bills are aimed to reform major crimes against children and victims of sexual assault to ultimately keep kids safe. In researching these crimes and collaborating with the Department of Justice, it was clear that something needed to be done to address cases of abuse, neglect, and sexual assault and again, and most importantly, to keep kids safe.

In this package we have put together four bills to aid in the fight against these crimes.

Senate Bill 323 allows victim advocates to play a larger role in cases of sexual assault and human trafficking, both against adults and children. Through research, we have found that survivors of sexual crimes who have received services from a victim advocate have experienced better outcomes and are in less distress through such a difficult and trying time. National statistics estimate nearly 23million women in the United States have experienced sexual violence, while child sexual assault is a grossly under reported crime. We needed to address the needs of our victims in this state. This bill, specifically, gives victims greater access to victim advocates during examinations and consultations performed at a hospital, as well as, during preliminary law enforcement interviews. This bill gives victims, free of charge to them, someone who is there, solely, for their needs.

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Senate Bill 324 reforms the neglect statutes and adds substance and clarity. Under current law, you have to prove intent to neglect, in addition to, a felony schedule that is inflexible and leaves out many instances that certainly constitute neglect that is happening in our communities. This bill redefines neglect as the negligent failure to provide necessary care. The bill further defines necessary care as appropriate food, clothing, medical and dental care, shelter, supervision, the opportunity for education, and protection from the exposure to the distribution, manufacture or use of controlled substances; modeled after the statutes governing jurisdiction over children alleged to be in need of protective services (§48.13(10m)). This bill also creates a new felony schedule, while the ceiling and floor remain that same, we have included instances where children are at unreasonable and substantial risk of harm, great bodily harm, or death are included as well as accounting for emotional harm, and if the child neglected becomes the victim of a child sex offense. The new schedule clearly provides greater detail and flexibility to identify neglect while maintaining the discretion District Attorneys and jurors currently have.

Senate Bill 324 also creates the crime of repeated acts of neglect of the same child. This is modeled after the crime of repeated acts of sexual assault of the same child (§948.025). This gives prosecutors a new tool to identify situations in which a very young or non-verbal child has been neglected. For very young or non-verbal children, dates and specific instances maybe challenging to identify. This new crime does not change any of the elements necessary to convict someone of neglect.

Senate Bill 325 is similar to Senate Bill 324 in that it too creates a new crime. The bill creates repeated acts of physical abuse of the same child. Again, modeled after repeated acts of sexual assault of the same child (§948.025) this crime helps prosecutors convict the more grievous cases of physical abuse against children, many of whom are very young or possibly non-verbal. Through our research, the children who are victims of these crimes are very young. In the State of Wisconsin, from 2008-2012, 61% of physical abuse deaths of children were aged 3 or younger, with 35% of the deaths were children under the age of one. We hope that the two new crimes created in this package will save such young children who are victims to these horrible crimes.

Senate Bill 326 expands referral of all reports of suspected or threatened child abuse or neglect to law enforcement. Under current law, suspected cases of child abuse and neglect are referred by mandated reporters to Child Protective Services and not law enforcement. Child abuse and Neglect are the only two felonies not referred to law enforcement. This bill requires that Child Protective Services refer all suspected or threatened cases to law enforcement and coordinate a response if necessary. This legislation lets law enforcement decide if law enforcement needs to be involved. Unfortunately, we have amassed several examples from all over the state where law enforcement was not involved in an investigation of neglect or abuse and the child/children suffered continued maltreatment and, in the saddest cases, death. Law enforcement has different tools available for investigating, such as the ability to obtain search warrants and subpoenas. We feel that this legislation is going to be a vastly improved approach to identifying cases of abuse and neglect and help to keep kids out of harm's way.

It is so important to ensure that victims of such terrible crimes are protected in Wisconsin and receive justice from those who have wronged them. By aligning our District Attorneys, Law Enforcement, Victim Advocates, Child Protective Services and our communities together we can create a proven environment to protect the victims of these crimes and aim towards achieving greater outcomes for these victims.

I want to thank all those involved with these bills especially Attorney General Schimel, and Representatives Heaton, Macco, Murtha and Tranel for their work on this package of bills.

With these bills, I hope we can strive to give kids a violence-free and safe childhood and deter acts of abuse neglect and sexual assault in our communities. I hope that these bills can bring criminals to justice and of course, keep kids safe.



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Governor Scott Walker
Secretary Eloise Anderson
Secretary's Office

Date: October 22, 2015
To: Members of the Senate Committee on Judiciary and Public Safety
From: Sara Buschman, Assistant Deputy Secretary
Re: Information Memo on SB323, SB324, SB325, and SB326

Senator Wanggaard and Senate Committee on Judiciary and Public Safety,

The Department of Children and Families appreciates the opportunity to submit information for your consideration on the following four bills: SB 323, SB 324, SB 325, and SB 326.

The underlying goals of the four proposed bills are to keep children safe from maltreatment and to strengthen the coordination between the child welfare and law enforcement systems in protecting the safety of children. The Department of Children and Families is firmly committed to these goals: protecting the safety of children is a core mission of the Department and effective collaboration with law enforcement is a critical building block in achieving this mission.

A number of the provisions in the bills enhance children's safety and well-being in productive ways. However, a number of the provisions in SB 324 and SB 326 may have unintended negative consequences that will impair the healthy and positive growth and development of children. The Department encourages that further discussion among all stakeholders be pursued to refine SB 324 and SB 326 to avoid unintended negative consequences to the children affected by the bill.

SB 324 changes the standard of neglect for criminal purposes and establishes a criminal penalty for all types of neglect. The proposed changes in the neglect standard of neglect include some criteria that are not well-defined and some criteria that broadens the standard to cover actions that do not necessarily involve safety threats to a child's safety. For example, the criterion "the opportunity for education" as a new category of neglect is not well-defined and does not have a statutory definition and therefore could be interpreted in ways other than which the authors intend. In addition, the proposed new criterion "exposure to the use of controlled substances" could involve a parent using prescription drugs in a responsible manner that does not create a threat to the child.

The Department recognizes that the current criminal neglect statutes may not provide the tools for law enforcement to intervene in circumstances where that is the appropriate intervention. However, SB 324 creates the possibility that a parent may face criminal charges even for low level incidents of neglect. This could have significant negative unintended consequences for children. Many types of neglect that are addressed in the child welfare system and that would be covered by the criminal neglect standard in the proposed bill are situations that involve low to moderate risk to the child that can be ameliorated by providing appropriate supports and services

to the parent, so that the parent is able to provide a safe, stable, and nurturing home. For example, in cases where neglect is occurring due to mental illness, with appropriate intervention and supports and services through the child welfare system, the parent can change their behavior and maintain a safe and loving home for their children without disruption to the children that would be caused due to a parent's incarceration under these provisions.

Furthermore, to the extent that a single parent is incarcerated due to the new criminal penalties in the bill, the child may need to be removed to an out-of-home placement, such as a foster home. In addition to the neglect that the child experienced, separation from a parent and removal from home imposes additional trauma on the child. Scientific research has shown that trauma in childhood impedes the healthy development of the brain, resulting in negative impacts on the child's physical health, cognitive development, behavior, and social and emotional relationships in both the short and long term.

SB 326 also creates the potential for negative unintended consequences for the children impacted by the bill. SB 326 requires child welfare agencies to refer all suspected cases of abuse and neglect to law enforcement within 12 hours and requires that law enforcement coordinate with the child welfare agency on the investigation of all cases. Currently, child welfare agencies refer to law enforcement agencies all sexual abuse cases and other cases as specified in the local Memorandum of Understanding in place between each child welfare agency and local law enforcement agencies. Child welfare agencies already involve law enforcement immediately in high risk cases.

Involvement of law enforcement in all low-moderate risk cases may create negative unintended consequences for the child and family. Many families involved in the child welfare system distrust and/or are intimidated by law enforcement. National research has shown that for low to moderate risk child welfare cases, a non-threatening, supportive approach enhances parental engagement and participation in services, and thereby increases the likelihood that the family can achieve safety and stability. The notification and involvement of law enforcement for all cases of abuse and neglect has the potential to stigmatize the family and hinder the family's future ability to access employment, housing and develop positive social connections. It may also deter non-mandated reporters, such as neighbors and relatives, from reporting concerns about possible abuse and neglect, leaving children at risk.

The requirement in SB 326 that investigations must be coordinated between child welfare agencies and law enforcement may hinder both systems from performing their duties. The child welfare and the criminal justice systems are designed to support different goals that are important to society. The child welfare system is focused on protecting children, preserving family unity and finding permanency for children when the family cannot be preserved. The agency staff, attorneys and court personnel are guided by the best interests of the child. The criminal justice system is focused on investigating and prosecuting crimes on behalf of the state. These two systems overlap in some areas but are governed by completely different statutory provisions and court procedures. The investigatory process used to support each system is necessarily different. Linking the two processes together in all cases may impede the ability of each system to reach the goals that are important to each.

It is important to coordinate in cases where each has a major stake in the outcome and to reduce the burden on those the systems are endeavoring to protect. That coordination exists today in most jurisdictions and could be strengthened. As stated at the outset, the Department supports strong, effective collaboration between the child welfare and law enforcement systems. The

Department would like to work with the authors and stakeholders to discuss how we can strengthen and improve current collaborative mechanisms between the two systems without creating unintended negative consequences such as those described above.

The Department would also like to bring to the attention of the Committee a possible technical revision to SB 323. As currently drafted, SB 323 provides access to a victim advocate for victims of sexual assault, human trafficking, and children who were victims of physical as well as sexual abuse. Given that the bill appears to be focused on victims of a sexually abusive action, it may be appropriate to narrow the scope of child abuse cases covered in the bill to sexual abuse cases.

The Department has no comments on SB 325 which creates stronger criminal penalties for individuals who commit repeated physical abuse to a child. The Department views that the bill provides a useful additional tool to help ensure that children are not subject to egregious abusers.

In summary, the Department appreciates the authors of these bills for opening the conversation on a topic that we all care deeply about: protecting our children and strengthening families. We would like to encourage additional thoughtful discussion among all stakeholders on SB 324 and SB326 to refine the bills so that they achieve their intended goals of protecting the safety of children without creating negative unintended consequences. The Department welcomes participating in any future discussions on these bills.

October 22, 2015

To: Senator Cowles
Senator Wanggaard, Chair
Senator Vukmir, Vice-Chair
Members, Senate Committee on Judiciary and Public Safety

From: Lisa Pugh, Public Policy Director
Kit Kerschensteiner, Managing Attorney

RE: Justice for Children Package: SB 324 and SB 326

Thank you for the opportunity to provide testimony on this important package of legislation. Protecting individuals with disabilities, including children, from abuse and neglect is the core of our work at Disability Rights Wisconsin. We are the state's protection and advocacy agency designated by the Governor to assure that the basic rights of people with disabilities are enforced.

These bills brought to light for our agency disturbing trends in Department of Children and Families child welfare data that indicate something must change. We hope our testimony today can highlight the right intentions in these bills and provide suggestions to avoid unintended consequences. You will hear from us the careful balance between protecting our most vulnerable children from abuse and neglect as well as providing appropriate supports and avoiding the stigma and discrimination often experienced by both parents of children with disabilities and parents with disabilities themselves as they raise their children under difficult circumstances.

These bills were introduced and are being voted on very quickly. We hope you will follow up with our agency to fix some technical issues in these bills to get the appropriate solutions in state statutes. Today we testify for information only.

Background on Abuse and Neglect of Children with Disabilities:

Studies and available data indicate that children with disabilities are three times more likely to be a victim of some type of abuse compared to children without disabilities.¹ Children with intellectual disabilities may be twice as likely to experience physical or sexual abuse as their peers without disabilities.² Legislation to improve oversight and investigation of child abuse cases must improve protections for children with disabilities in Wisconsin.

¹ Davis, L.A.; Abuse of Children with Intellectual Disabilities; The Arc; 2011. <http://www.thearc.org/document.doc?id=3666>

² Smith, N.; Harrell, S.; Sexual Abuse of Children with Disabilities: A National Snapshot; 2013. <http://www.vera.org/sites/default/files/resources/downloads/sexual-abuse-of-children-with-disabilities-national-snapshot-v2.pdf>

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In preparation for this hearing our staff reviewed DCF data including 90-day Summary Reports for Child Death, Serious Injury or Egregious Incidents from 2011 – 2015. It is important to note this data does not include all reports, only the most serious. We noted the following trends:

- Since February 2010, 12 children with special needs of some kind have died due to abuse or neglect in Wisconsin. An additional 8 suffered an egregious injury.
- Many cases involving children with special needs indicate repeated calls to child protective services. In one fatal case there were more than 20 calls.
- Some cases document the inability of the child to provide information or a case involving a non-verbal child. Several children were identified as having Down syndrome or autism.
- Children experiencing abuse ranged from 3 months to 17 years old. Many children in these serious cases were over age 5 and several over age 10, indicating they should have been able to clearly communicate and substantiate what had occurred, but perhaps due to their disability, they were unable to do so. However this conclusion is only an inference.
- There is little specificity on referrals to community supports of any kind, and none indicating specific supports for children with disabilities.

An overarching and disturbing trend in these reports is that most cases do not result in any charges and there are often many contacts before something really bad occurred. In a 2015 Waukesha case involving a 13-year-old child with autism, 40 calls were made to child welfare with repeated allegations of physical, emotional and sexual abuse and only when the police were called was the parent finally arrested and charged. This was a child who had been kept in the basement without access to a bathroom or running water, and no place to sleep.

Just last week our agency took a call in which a Child Protective Services (CPS) worker declined to conduct a forensic interview of a child with autism when there was an allegation of sexual abuse. The CPS worker indicated they would not be able to get enough information from the child due to communication difficulties. They planned no further action.

Unfortunately national studies verify significant differences in the responses of CPS case workers when the alleged victim of abuse has a disability. Children with disabilities are sometimes seen as contributing to their abuse and CPS workers were found to demonstrate more empathy with abusive parents of children with disabilities, particularly when the child had emotional or behavioral disabilities. Even when severe injuries, such as a concussion or broken bones were involved, the CPS workers in one study responded differently when the child victim had a disability.³

Background on Parents with Disabilities

Historically, individuals with mental disabilities have faced severe societal biases regarding their fitness to serve as parents. For many years the chief governmental response to the challenges of parenting with a mental disability was compulsory sterilization. While societal attitudes have evolved, the stereotypes about the ability of persons with mental disabilities to parent persist. Although recent research has found that parents with disabilities are not more likely to maltreat their children than parents without disabilities, studies demonstrate high rates of termination of the rights of parents with disabilities.⁴

³ Manders, J. E. & Stoneman, Z.; Children with disabilities in the child protective services system: an analog study of investigation and case management. *Child Abuse & Neglect*, 33(4), 229-237. 2007.
<http://www.nationalcac.org/professionals/images/stories/pdfs/disabilities%20bibliography4.pdf>

⁴ Lightfoot, LaLiberte, & Hill; Guide for Creating Legislative Change: Disability in the Termination of Parental Rights and Other Child Custody Statutes_ (2007) <http://cascw.umn.edu/wp-content/uploads/2013/12/LegislativeChange.pdf>

Parents with disabilities, especially psychiatric disabilities are much more likely to be adversely affected by the child welfare and legal systems. The National Council of Disability, an independent federal agency found that the removal rates for parents experiencing mental illness disproportionately high at 70 to 80%.⁵ According to the Council, parents with disabilities are “the only distinct community of Americans who must struggle to retain custody of their children,” citing a study finding that parents with a disability label in their school records were more than three times as likely to have their parental rights terminated than parents without such a label.⁶ The structure of state laws and the failure of the state child welfare system and mental health system to offer these parents the help they need all contribute to the high rate of loss.

We are concerned that the enhanced criminal penalties associated with these bills may have a detrimental and discriminatory impact on parents with disabilities unless the committee takes very specific precautions. Some states are adopting model legislation that addresses concerns related to parents with disabilities and we will suggest these solutions for Wisconsin.

SB 326: Referring cases of child abuse and neglect to law enforcement

This bill has the potential to address concerns about egregious cases that frequently slip through the cracks or when multiple contacts should have led to criminal charges much sooner. The bill does not address our concerns about the ability of law enforcement to handle an increased volume of cases and their capacity – and that of Child Protective Services - to address the unique needs of children with disabilities and parents with disabilities.

According to our calculation using DCF child abuse report data, there were 27,281 maltreatment allegations from mandatory reporters in 2013 and a total of 45,547 allegations of maltreatment from all sources. Adding a new law enforcement referral would be a significant increase in calls for investigation.

While we support increased scrutiny of certain cases, particularly those involving children with disabilities, we are concerned that the involvement of more people in an investigation will not necessarily improve the investigative process. We suggest several improvements to this bill to ensure abuse or neglect of vulnerable children with disabilities is adequately addressed:

Role of the child welfare agency:

1. Problem: Children with intellectual and other developmental disabilities, including autism, may have significant difficulty communicating and participating in the substantiation of an abuse allegation. This puts the child at greater risk of continued abuse and neglect. Clearly cases in the current DCF data and our own experience as a disability advocacy agency show this is a concerning gap in the current system.

⁵ National Council on Disability. Rocking the Cradle; Ensuring the Rights of Parents with Disabilities and their Children 14 (2012). <http://1.usa.gov/VQIE5S>

⁶ Kundra & Leslie B Alexander. Termination of Parental Rights Proceedings: Legal Considerations and Practice Strategies for Parents with Psychiatric Disabilities and the Practitioners Who Serve them. 33 Psychiatric Rehabilitation Journal. 142 143 (2009).

Solutions:

- Other states have developed resources to address this problem. The New York State Office of Children and Family Services provides information to work more effectively with child abuse cases that may involve children with special needs and their families.⁷ The New York resources address best practice interviewing strategies, medical concerns, and disability-specific information. Wisconsin DCF should be directed to develop, share and require policies addressing similar disability-specific resources and information: <http://disabilityabuse.org/>
- Child welfare agencies, including DCF, should be required to develop policies to address the unique issues involved when investigating cases involving a child with a disability or a parent with a disabilities.
- When a child is identified as having an intellectual disability or has a known barrier to communication impacting his/her ability to participate fully in an investigation about an allegation of abuse or neglect the child welfare agency or law enforcement should be required to:
 - access available information about the child's communication modalities (methods), accommodations and documented communication potential as documented through various sources (IEP, medical records);
 - access medical records to determine history of communication interventions and assessment.

2. Problem: When a child with a disability that includes a communication deficit is interviewed regarding an allegation of abuse, the allegation may be determined as “unsubstantiated” merely because of the child’s inability to fully participate in the investigation. This obstacle in the investigatory process puts the vulnerable child at continued risk.

Solutions:

- The investigation process should differentiate the term “unsubstantiated” to clarify a category of “unsubstantiated due to communication difficulties related to disability”
- When “unsubstantiated due to communication difficulties related to disability” is declared – this should trigger an assessment by an individual with expertise related to the child’s specific communication impairment.

3. Problem: Child welfare agency professionals and law enforcement have little training, professional requirements or experience working with children with significant communication disorders or intellectual disabilities or parents with disabilities. Additionally, victim services agencies often do not have therapeutic approaches tailored to children with intellectual disabilities.

Solutions:

- Staff assigned to investigate a case involving a child with an intellectual disability or a known barrier to communication impacting his/her ability to participate fully in an abuse or neglect investigation should be required to have specialized training or certification or be required to access such expertise.

⁷ New York State *Child Advocacy Resource and Consultation Center*; New York State Office of Children and Family Services. Copyright © 2005, 2007, 2014, 2015. <http://disabilityabuse.org/about/>

- Many states require interagency or multidisciplinary teams to be involved in various parts of a child abuse or neglect case, including the investigation. For cases involving parents or guardians with a disability, teams should include people with expertise in parental supports and adaptive equipment. The goal in most cases should be to provide the parent with necessary supports to keep the family together and the child safe. The Disability and Parental Rights Legislative Change Project has developed model language to identify individuals required as part of the investigative team. We suggest that when a parent with a disability is involved in a child abuse or neglect investigation, that Wisconsin statute require the involvement of: "Persons knowledgeable about parental supports and adaptive equipment for parents or guardians with disabilities".

Role of DCF:

4. **Problem:** There is not enough data to assess the status of abuse and neglect of children with disabilities, including specific disabilities. DCF Reporting data does not accurately track data related to disability or special needs. Specifically Wisconsin Child Abuse and Neglect reports that are published annually keep track by gender and race, but not by disability.⁸

Solution:

- Require DCF and related child welfare agencies to specifically report when a child has a known disability. Annual report data should be disaggregated by children with disabilities.

Role of Law Enforcement:

5. **Problem:** Law enforcement will not have sufficient resources to adequately respond to new child abuse and neglect cases referred, including those cases involving children with disabilities. Criminal investigators often lack the skills and knowledge to effectively interview parents with disabilities or children with communication disabilities who use American Sign Language, communication boards or other methods.

Solution:

- Allocate additional resources to ensure that law enforcement are appropriately trained and can respond appropriately.

SB 324: Providing Criminal penalties for neglect of a child

We are concerned that SB 324 casts an overly broad net for child abuse and neglect investigations that will add criminalization to the stigma experienced by parents with disabilities. We also believe the bill has constitutional problems. We would like for the committee to address these concerns.

Constitutional Concerns – Void of Vagueness:

To pass muster on a due process challenge of under the long standing constitutional doctrine of "void for vagueness," a penal statute must define a criminal offense with sufficient definiteness that ordinary people can understand what conduct is prohibited and it must do so in manner that does not encourage arbitrary and discriminatory enforcement.⁹ SP 324, as it currently stands is clearly susceptible to a constitutional challenge on void for vagueness grounds. Under this bill a felony crime of neglect occurs when anyone responsible for a child's welfare should have realized that something does not measure up to the undefined standard of "appropriate" care in certain enumerated areas, even if the child has not actually

⁸ <http://dcf.wisconsin.gov/cwreview/reports/CAN/2013/2013CANReport.pdf>

⁹ U.S. v. Jackson, S.D.N.Y. 1991. 768 F.Supp. 97. vacated on other grounds 968 F.2d 158. certiorari denied 113 S.Ct. 664, 506 U.S. 1024, 121 L.Ed.2d 589, on remand 856 F.Supp.

experienced any harm. It is left unstated who or what is the controlling authority on what should be considered within the bounds of appropriateness and how this will be clearly and unambiguously established. Parents with disabilities already face an uphill climb battling stigma and lack of support services. It is all too predictable that they will face incarceration at a higher rate if such a vague and far ranging standard is enacted when the pressing need is for more preventative services and supports to keep a family intact not send a disabled parent to jail.

At least one study has found that children and youth experiencing similar levels of neglect or abuse who were raised in foster care did not do as well in life as those raised by their biological parents *with supports*.¹⁰ It only follows that children with disabilities could be even more adversely impacted than the population at large if removed from their families. Of course there will always be situations where involvement of the child welfare and criminal justice systems is necessary to keep a child safe. However, it is critical to examine each situation individually and consider whether the child can be safe at home *with appropriate services to the family*. This falls within the area of expertise of human services, not law enforcement.

Constitutional Concerns - Rebuttal Presumption of Guilt:

The bill's rebuttal presumption where a young child with certain disabilities is involved amounts to "guilty until proven innocent" and raises serious constitutional questions on several fronts. First, a fundamental precept of the criminal justice system is that a defendant is presumed innocent until proven guilty. By shifting the burden of proof onto the defendant to prove their innocence the rebuttable presumption, SB 324 flips the presumption of innocence on its head—with the default being that the defendant is guilty unless he or she can prove their innocence. This presumption arises if the child is under 6 years old and has a disability covered by this bill. Nothing more must be proved about the neglect allegation. The defendant can be found guilty on these facts alone unless they present sufficient evidence to persuade the court otherwise. If they can't provide evidence to acquit themselves or choose to exercise their constitutional right to not testify SB 324 requires them to be found guilty on the strength of this statutory presumption alone.

Concerns Related to Specific Disability Types:

DRW is concerned about the singling out of certain disabilities for this protection. Only children with physical, cognitive or developmental disabilities discernible by an ordinary person viewing the child or known to the actor are covered by this added protection. Children with emotional or behavioral disorders or mental illness are completely shut out from protection, despite the fact that studies show they are particularly susceptible to abuse or neglect. Additionally, other children with less visible disabilities, such as deafness or traumatic brain injuries, and even those with covered disabilities that are less obvious would fall outside this protection. This raises clear constitutional questions of equal protection when children are categorized into two classes of disabilities, one that gets protection and one does not.

Possible Solutions:

In our experience, overwhelmed parents of children with disabilities can languish on waiting lists and without access to or knowledge of appropriate supports, leaving their children at risk. Parents are often denied necessary supports and attempt to address issues in the best way they are able.

DRW recently supported a family who had been attempting for years to get the county to approve a backyard fence (an allowable Medicaid expense) for their child with a disability who was a "runner" and a danger to himself if left outside alone. Even if no harm had come to the child, such a case may have been

¹⁰ Doyle, J. Child Protection and Child Outcome Measuring the Effects of Foster Care. American Economic Review 97(5) December 2007 1583-1610.

deemed as not providing “appropriate supervision” on the part of the parent, even though they had asked repeatedly for support.

For these reasons we ask the Committee to consider the following:

- We do not support the new vague definitions for “necessary care” and “appropriate” and advocate that this section be removed from the bill. We do not support the removal of the measure of “intentionally contributes” when assessing criminal penalties.
- When a child with a disability is referred to the child welfare system through an allegation of neglect, prior to any assessment of a felony charge for “negligent failure” or “contribution to negligent failure”, the initial referral should trigger an automatic review of applications and eligibility for community supports. The system should require that a family of a child with a disability be referred to available crisis supports or moved to the top of a waiting list for supports related to the child’s disability.
- It is important to ensure the rights of parents with disabilities in any investigatory process. When a parent is identified as having a disability, the parent should be referred to appropriate available parenting supports prior to escalation of a felony charge. The Disability and Parental Rights Legislative Change Project has developed model language to ensure this:

“If the parent or guardian has a disability, the parent or guardian shall have the right to provide evidence to the court regarding the manner in which the use of accommodations such as adaptive equipment or parental supports will enable the parent to carry out the responsibilities of parenting the child. The agency shall advise parents or guardians of such right as soon as disability is identified. Courts shall also advise parents and guardians of this right.”

- Protocols used during the child abuse or neglect investigation process should be tailored to individuals with varying types of disabilities. Interviews should be based upon the parent’s or guardian’s behavior and not focused on their disability. The Disability and Parental Rights Legislative Change Project has developed model language to address this:

“Investigations of child maltreatment cases involving people with disabilities shall use a protocol that has been modified based on the individual with disabilities’ abilities.”

Thank you for the opportunity to provide input on these bills. We welcome the opportunity to work with committee members to seek improvements to ensure the protection of children with disabilities and the rights of parents where necessary.



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October 22, 2015

TO: Members of the Senate Committee on Judiciary and Public Safety

FROM: Ken Taylor, Executive Director Wisconsin Council on Children and Families

RE: SB 324 and SB 326

My name is Ken Taylor and I am the Executive Director of the Wisconsin Council on Children and Families (WCCF). WCCF is a child and family research and advocacy organization that for 134 years has been advocating for a Wisconsin where every child has the opportunity to thrive. I have spent over 20 years working with child welfare systems here in Wisconsin, and across the country, to help improve outcomes for the children and families they serve. I have a great deal of respect for the professionals and foster parents who work in these systems. They are true heroes who are doing very difficult work on behalf of the most vulnerable in our society.

I appreciate having the opportunity to testify today on SB 324 and SB 326. I know the bill's sponsors and co-sponsors, as well as the Attorney General, all want to help keep Wisconsin's children safe. This is my goal too. However, I have concerns about aspects of SB 324 and SB 326 which are part of the *Justice for Children* package. I believe will these bills create some unintended, negative consequences.

Regarding **SB 324**, one of my main concerns revolves around the definition of "Necessary care," and in particular, the use of the term "appropriate" in the definition. This term is open to wide variation in interpretation, and even though elsewhere in the bill it says that neglect cannot be due to poverty, what might be deemed as appropriate or not appropriate is closely linked to poverty. For example, we know that across Wisconsin, and particularly in our rural areas, there is a significant shortage of dentists who are willing to accept Medicaid patients. Given the definition of "necessary care" in SB 324, a low income parent on BadgerCare who cannot find a dentist for their child could be found "criminally negligent" for lack of appropriate dental care. Another example is family homelessness, which is clearly connected to poverty. Nationally there are 2.5 million homeless children and in Wisconsin there are over 32,000 homeless children. Under this proposal it seems those 32,000 children could be determined to lack "appropriate shelter," and thus trigger a charge of criminal negligence. "Appropriate food" could also be an issue. In Wisconsin there are 256,000 children living in households that are food insecure, which again could trigger a charge of criminal negligence. Adequate access to

food, housing, and medical care are very real challenges for children and families in Wisconsin. These are critical issues that must be addressed, but the vast majority of families struggling with these issues are not being “criminally negligent,” and charging them as such would likely make their situations worse, not better.

In addition, it is important to note that 60% of children in out-of-home care in Wisconsin are reunified with their parents. This is a critical bond and an important connection for a child’s well-being. Reunification will be much more difficult if those parents have a felony record due to the changes in SB324.

It is also clear that in Wisconsin poverty is closely linked to race. Over half of Wisconsin’s African American children live in poverty, as do nearly half of our American Indian children and over a third of our Latino children, as compared to 11% of our White children. So, if what is considered “appropriate” is closely linked to income or poverty, and poverty is closely linked to race, then I cannot help but conclude that SB 324 will have disproportionate impact on Wisconsin’s children of color.

Regarding **SB 326**, my concern centers on the requirement that all reports of abuse and neglect must be referred to law enforcement. This has the potential to have a chilling effect on the number of reports being made regarding potential abuse or neglect, and consequently children could be placed at additional risk. I am concerned because approximately one-third of reports are made by people who are non-mandated reporters. These reporters (family members, neighbors, friends), who are concerned about a child but who may not want to involve the family with law enforcement, would be less likely report their concerns to CPS. In 2013, there were nearly 69,000 referrals made to child protection services, with 62% of the referrals screened out. As I understand the implications of SB326, this would result in law enforcement using valuable time and resources investigating nearly 43,000 cases that child protection services would not further assess.

I understand that the intent of this bill is to use the greater investigative power of law enforcement to protect kids. Current law requires each county department and licensed child welfare agencies to “adopt a written policy specifying the kinds of reports it will routinely report to local law enforcement authorities.” Based on my experience, these policies likely vary widely across the state, and some of them may not require reports to law enforcement in some cases that SB326’s authors believe they should. Rather than create a blanket requirement that all cases be referred to law enforcement, my suggestion is for DCF to work to create more consistency in these policies, or, in collaboration with SB326’s authors, clearly state what types of reports must be forwarded to law enforcement. There is no question that law enforcement should be involved in some cases. My concern is that a blanket policy to refer all reports will in many cases unnecessarily tax our law enforcement officials,

unproductively add to the stress that the families being investigated already feel, and most importantly, create the risk that some concerns will go un-reported due to reporters not wanting to involve the family with law enforcement. This will result in some children being less safe.

As with SB 324, I also believe that SB 326 will have disproportionate impacts on Wisconsinites who are from communities of color. Currently, in Wisconsin African American children are three times more likely than Whites to have maltreatment substantiated and 4.7 times more likely to enter out-of-home care as White children. Increasing law enforcement involvement with these families, who are already disproportionately from communities of color, is unlikely to have positive effects, and will also likely increase the disproportionality in our justice system, which is already among the most disproportionate in the nation.

I know that the goal of the authors is to improve lives and protect kids. I share that goal. Child welfare systems are very complex and the risk of unintended negative consequences is always present. In summary, I propose taking a pause in the process so that various stakeholders who are committed to improving the child welfare system can be effectively engaged in addressing the challenges identified by the authors. Legislative leaders are currently designing a bi-cameral, bi-partisan Children's Caucus, perhaps these are issues this Caucus could address.

Thanks you for your time and consideration of my perspectives on SB 324 and SB 326. I look forward to the opportunity to partner with members of the legislature to improve the lives of vulnerable children and their families.

MEMORANDUM

TO: Honorable Members of the Senate Committee on Judiciary and Public Safety

FROM: Sarah Diedrick-Kasdorf, Deputy Director of Government Affairs

DATE: October 22, 2015

SUBJECT: Opposition to Senate Bill 326

The Wisconsin Counties Association (WCA) opposes Senate Bill 326, relating to referral of cases of suspected or threatened child abuse or neglect to the sheriff or police department, coordination of the investigation of those cases, and referral of those cases to the district attorney for criminal prosecution.

Counties have three major concerns with the legislation:

- Referral of “all” cases to law enforcement;
- Requirement that child welfare agencies and law enforcement “shall coordinate the planning and execution of the investigation” of all cases;
- Requirement that all reports be referred to law enforcement within 12 hours, with no exclusion for Saturdays, Sundays, and legal holidays.

Referral of “all” cases to law enforcement

Current law requires child welfare agencies to refer all reports of suspected or threatened sexual abuse of a child to law enforcement agencies within 12 hours, exclusive of Saturdays, Sundays, or legal holidays. Senate Bill 326 requires all abuse and neglect referrals to be reported to law enforcement “as soon as practicable, but no later than 12 hours, after receiving a report...” Most county child welfare agencies have an excellent relationship with their local law enforcement agencies. Many counties, in fact, have an MOU in place with their local law enforcement agencies governing the types of cases child welfare refers to law enforcement. If the concern is that the current mechanisms in place governing how law enforcement and child welfare agencies coordinate efforts are not robust enough, then that is an issue counties are willing to discuss. The proposed solution in this bill will have unintended consequences for child welfare and law enforcement agencies by increasing workloads and not allowing for prioritization of the most egregious reports.

For example, law enforcement involvement in “all” cases will hinder current child welfare practice as it relates to alternative response, parent agreement to receive voluntary services, and may also have a negative impact on trauma-informed care. The mere presence of law enforcement, or the possibility of law enforcement involvement, makes it more difficult for families to voluntarily agree to services and accept the help they need to ensure safety for children within the home setting.

Requirement that child welfare agencies and law enforcement “shall coordinate the planning and execution of the investigation” of all cases

Senate Bill 326 requires law enforcement and child welfare agencies “shall coordinate the planning and execution of the investigation of a report...” Counties are uncertain as to what this language requires of child welfare agencies, as the language is unclear. Additionally, once a county child welfare agency screens out a case, the agency no longer has jurisdiction to act on the case. Therefore, it becomes difficult for child welfare agencies to participate in the planning and investigation of a case in which the agency lacks authority to act.

Requirement that all reports be referred to law enforcement within 12 hours, with no exclusion for Saturdays, Sundays, and legal holidays

The legislation requires child welfare agencies to forward all child welfare referrals to law enforcement within 12 hours, including weekends and legal holidays. For frivolous reports, the referral requirement, especially within a strict 12-hour timeframe, is unnecessary. All counties already have staff on call 24-hours a day, seven days a week to respond to crisis situations. Referrals are also made immediately if children are in imminent danger.

Proposed Compromise

Counties understand that law enforcement agencies want to ensure that children are safe. Child welfare agencies have the same goal. However, it appears that the philosophies behind the goals are somewhat different. While it is important that individuals are held accountable for their actions, especially when the safety of children is at stake, child welfare agencies must abide by federal standards that stress family reunification, trauma-informed care, long-term stability for families, etc.

To ensure the bill’s goal is achievable, counties are open to continued discussion with the authors of the bill, the Office of the Attorney General, the Department of Children and Families, law enforcement, as well as additional stakeholders. In the interim, counties ask the committee to consider the following compromise: allowing counties and local law

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enforcement agencies to enter into agreements at the local level governing the types of cases to be referred to law enforcement, as well as the role each agency will play in any ongoing investigation. This language mirrors current law regarding agreements between local law enforcement and district attorneys regarding the types of cases to be referred for prosecution.

Thank you for considering our comments.

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To: Members of the Wisconsin Senate Committee on Judiciary and Public Safety

From: Wisconsin County Human Service Association

Date: October 22, 2015

Re: SB 326

The 71 counties which form the membership of the Wisconsin County Human Services Association (WCHSA) are dedicated to keeping kids safe, and actively providing services that support the federal requirements for child safety, well-being, and permanence. One of the duties of counties is providing child protective services under Statute 48; as such, counties are licensed child welfare agencies by statute.

WCHSA has concerns regarding the requirement within SB 326 that the licensed child welfare agency shall refer a report of *any* suspected or threatened child abuse or neglect to law enforcement within 12 hours. This requirement would seem to apply to cases which would be screened out, in which the child welfare agency has no jurisdiction. By requiring the child welfare agency to refer the reports within 12 hours, there is no distinction made between an actual urgent report and a screened out one. Screened out referrals could contain a report of a situation that is no threat, such as a child being fed a cheese sandwich every day for lunch. Currently, counties provide after-hours/on-call responses to child abuse or neglect reports and coordinate their assessments with law enforcement on sexual abuse and other serious cases. The inclusion of *any* reports in this short time frame places a resource burden on both the child welfare agency and law enforcement and interferes with the prioritization of cases that need immediate intervention.

Counties work collaboratively with law enforcement to ensure the protection and services for children and families. The child welfare agency or Child Protective Services (CPS) routinely co-investigate/assess child safety with law enforcement. While both entities are charged with keeping kids safe, law enforcement's role diverges in that they have sole responsibility for the pursuit of criminal actions in maltreatment cases. The child welfare agency has the exclusive role of providing services to the family that will ensure safety, well-being and permanence for children.

Maltreatment reports which are referred to the child welfare agency are evaluated to determine if the child welfare agency has the responsibility or jurisdiction to investigate by completing a child safety assessment. If the information provided is serious in nature and would indicate child abuse or neglect as defined in the statute, the child welfare agency has jurisdiction to intervene. These cases are screened in for assessment. When the information provided in an alleged maltreatment report does not meet the statutory definition of abuse or neglect the case is screened out and the child welfare agency has no jurisdiction. Although no formal child safety assessment can be made there may be other voluntary services offered.

From 01/01/15-09/30/15 there have been 57,634 CPS reports statewide*:

- 36,724 or 64% were screened out
- 20,910 or 36% were screened in

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Referrals which are screened out are done so because they do not rise to the level of child abuse or neglect. There could be various interpretations for the wording that requires law enforcement and the licensed child welfare agency to “coordinate the planning and execution of the investigation of a report”. The child welfare agency does not have jurisdiction to investigate/assess screened out referrals. Whether or not the intent of the language is to provide reports to law enforcement for their review without child welfare involvement is not clear.

WCHSA is committed to child safety and to collaboration with our valued law enforcement partners. In order to ensure statewide best practice regarding the handling of maltreatment reports in accordance with the statutes and corresponding CPS standards, WCHSA recommends enacting a minor change, noted below in red, to Statute 48.981(3)(a)3 to strengthen provisions on collaboration between child welfare departments and law enforcement:

“3. Except as provided in sub. (3m), a county department, the department, or a licensed child welfare agency under contract with the department shall within 12 hours, exclusive of Saturdays, Sundays, or legal holidays, refer to the sheriff or police department all cases of suspected or threatened abuse, as defined in s. 48.02 (1) (b) to (f), reported to it. For cases of suspected or threatened abuse, as defined in s. 48.02 (1) (a), (am), (g), or (gm), or neglect, each county department, the department, and a licensed child welfare agency under contract with the department shall **collaborate with appropriate county and municipal law enforcement authorities** and adopt a written policy specifying the kinds of reports it will routinely report to local law enforcement authorities.”

WCHSA welcomes any questions regarding the referral or investigation/assessment process, or of the suggested language we have put forth. Please reach out to Jeremy Kral (kral.jeremy@co.calumet.wi.us), WCHSA Board President, or Vicki Tylka (vicki.tylka@co.marathon.wi.us) or Ray Przybelski (przybelr@co.portage.wi.us), co-chairs of WCHSA’s Children, Youth, and Families Policy Advisory Committee, at any time.

*Wisconsin Department of Children and Families Access Dashboard; does not include service reports

Promoting best practice, creating professional alliances, and developing partnerships in service delivery



TO: Senate Committee on Judiciary and Public Safety
FROM: Michelle Mettner, VP of Government Relations & Advocacy, Children's Hospital of Wisconsin
DATE: 10/22/15
RE: SB 326 – Child Abuse or Neglect Case Referral

Good afternoon Chairman Wanggaard and members of the committee. Thank you for the opportunity to provide this testimony. My name is Michelle Mettner and I am the VP of Government Relations & Advocacy for Children's Hospital of Wisconsin. It is because of our experience with child victims in our emergency room and child advocacy centers as well as our intervention with fragile families through our social services work, we offer the following observations and suggestions on this legislation.

Children's Hospital of Wisconsin serves children and families all across the state. We have inpatient hospitals in Milwaukee and the Fox Valley. We care for every part of a child's health, from critical care at one of our hospitals to routine checkups in our primary care clinics. Children's also provides specialty care, urgent care, emergency care, dental care, school health nurses, foster care and adoption services, family resource centers, child health advocacy, health education, child welfare services, family preservation and support, mental health services, pediatric medical research and the statewide poison hotline.

Children's Hospital of Wisconsin is the largest not-for-profit, community-based agency serving children and families in the state, providing family preservation, counseling and advocacy services to more than 15,000 children and families annually. Research has shown that kids who experience adversity are 25 percent more likely to face lifelong physical, emotional, cognitive and behavioral challenges. We are working to break that cycle through our Child Advocacy Centers and our well-being approach, Strong Families, Thriving Children, which is based on physiological and psychological research that is customized to build on each family's unique strengths and address areas of improvement. Children's operates seven of the 14 Child Advocacy Centers (CACs) across the state that bring together professionals from law enforcement, criminal justice, child protective services, victim advocacy agencies and the medical and mental health communities to provide comprehensive services for child victims and their families. The goal of Child Advocacy Centers is to minimize trauma, break the cycle of abuse and, importantly, increase prosecution rates for perpetrators. In 2014, more than 7,000 families and children were served through our child advocacy and child protection centers.

This bill requires dual reporting to child protective services and law enforcement for all cases of child abuse and neglect and suspicions of abuse and neglect reported by mandated reporters. We suggest you consider reports of suspected physical abuse and egregious neglect be included and not all suspected neglect cases. We offer this suggestion is for two reasons. First, the dual reporting for all suspected neglect will significantly increase the volume of reports to law enforcement. We think more appropriate use of competing time and resources is for physical abuse and egregious neglect. In addition, it is our experience in this field that neglect cases are often best handled through a social service approach, and adding law enforcement in all of these cases is not helpful to the work of assisting these families in gaining tools and stability.



The objective of coordinated planning and execution of the investigation makes sense. Left to varying jurisdiction interpretation, it could mean different things to different agencies. Particularly in cases of neglect, an unintended consequence could be that children in medical facilities could languish for hours while Child Protective Services (CPS) awaits a law enforcement response. It would be of value to make clear that a coordinated investigation not delay a CPS decision and hold up their determination for the child.

In addition, given the 72 child welfare jurisdictions and the hundreds of law enforcement jurisdictions, the intent of this bill would benefit from a central intake/hotline for child abuse reports. A central intake and collection of reports would be of significant value to law enforcement, social services and those working in prevention.

Chairman Wanggaard and committee members, I thank you again for the opportunity to submit testimony. If you have any questions, comments or concerns please feel free to contact me via email at mmettner@chw.org or via phone 414-266-5434.

Child Maltreatment Legislation Discussion Points
October, 2015

My name is Julie Ahnen. I am the Manager of Child Protective Services for Dane County Human Services. I've been working as a Social Worker for over 30 years, and have served Dane County as a CPS Social Worker for over 20 years. I'm here to express my opposition to the package of child maltreatment related bills-specifically SB326.

In CPS we spend a great deal of time developing relationships with people who are legally required to report suspected child maltreatment to CPS. We provide trainings regarding the effects of maltreatment, the signs of maltreatment, and the CPS assessment process. Each county has a unique relationship with their mandated reporters. In Dane County, the most frequent reporters to CPS are LE, school personnel, and other social service providers. Our mandated reporters are familiar with our assessment process which is as consistent as possible with all families.

I share this as background for my concerns regarding SB326:

First, I am concerned that people may be hesitant to report to CPS if they know that their information is going to be shared with LE. Their intention in calling CPS was to get help for a family, not punishment. In addition, people who call CPS know that their identity is going to be kept confidential under our statutes and standards. LE is not required to keep the identity of reporters confidential.

Families struggling with parenting issues often have struggles related to poverty, social isolation, mental health, and substance abuse. They need education and support around basic child development and basic parenting skills. LE and the Criminal Justice system are not equipped to provide those kinds of services. I applaud the attention that this Legislature has paid to MH and Substance Abuse treatment, but we have not adequately funded community-based supports for families struggling with MH and AODA issues, and we have put barriers in place for low income families to access the assistance that they need to support their children.

A fact that needs to be considered in your decision-making around these bills is that in Dane County, you are at least 7 times more likely to be referred to CPS if you are an African American parent versus a white parent, and at least twice as likely to be referred to CPS if you are a Hispanic parent versus a white parent. In Counties with a tribal presence, Native American families are disproportionately referred to CPS as well. The neighborhoods that receive the most referrals are our neighborhoods with high concentrations of poverty. By requiring CPS to refer ALL reported cases to LE, we are subjecting these parents of color to more scrutiny by LE, and furthering the disproportionate involvement of people of color in the criminal justice system.

I believe that this legislation has emerged out of a desire to improve the safety and well-being of children, and to strengthen communities. I would like to point out that there is a great deal of research-past and ongoing-supporting social change efforts that utilize supportive and motivational methods to encourage change, as opposed to punitive efforts that rely on punishment as an incentive to change. Extensive research has shown that people engage in change and healing within the context of trusting relationships. That trust is built through addressing barrier needs, often linked to poverty. Researchers have stated that a prescriptive ("tough on crime") approach for or against certain parenting practice may be perceived by parents as being naïve, judgmental, or disempowering. This approach of criminalizing parents does not take into account the negative impact of police contact, arrests, criminal prosecutions, parental incarceration, and community supervision on children, families, and the community. True diversion involves the investment in strategies that keep families out of the CPS, Juvenile Justice, and criminal justice system all together.

The existing Child Protective Services system *works*. It can always be improved, but these measures are not the way to go. They are steps backwards rather than forward. Child protective services is a highly specialized profession that requires intensive training for workers. The CW system receives significant oversight from the State and Federal Government, as well as oversight from local and national organizations. This intensive training and oversight is in place to ensure consistency in policy, practice, and outcome measures. National outcome standards are in place and individual counties and states are held accountable to these outcomes. All decisions made by CPS Social Workers are documented in a statewide computer system, and outcomes are monitored to ensure that practice standards are upheld and that best practices are in place to ensure the safety, well-being and permanency of children. CPS data is shared openly with the public, and agencies welcome public input and inquiry. CPS outcomes are accessible to University personnel to allow for further research into best practices leading to advances in the field. Efforts to portray LE and criminal justice system interventions as comparable to CPS do not recognize the legitimate and important role that CPS plays in the community. If this legislation is enacted, how will LE and criminal court decisions be monitored and studied over time to determine if they are effective? What entity will establish best practice standards for LE and the criminal justice system, and expectations for the outcomes of these significantly increased interventions?

Finally, these bills seem to run counter to messages being communicated to the Child Welfare system by the State Government of WI. I applaud the First Lady's efforts to promote and champion Trauma-Informed Practices around the state. Less than a month ago, close to 500 people from all over the State attended a Conference focused on moving the CW system toward more trauma-informed practices. We learned about the scientific evidence showing the impact of traumatic events and chronic stress on brain development. People with trauma histories may exhibit impaired decision-making and behaviors that can be perceived as oppositional when they are triggered. Professionals attending the conference were encouraged to interact with families in a trauma-

informed manner by being open to listening to their stories, and to engage families in restorative practices. In Dane County, our Criminal Justice and Juvenile Justice systems are moving into more restorative practices. It does not make sense to me that we would agree to the referral of tens of thousands of families to LE for potential criminal prosecution and at the same time promote our State as one that embraces trauma-informed, and restorative practices.



October 22, 2015

To: Members of the Senate Committee on Judiciary and Public Safety

From: Police Chief Greg Leck and Police Chief Steve Riffel, WCPA Legislative Co-Chairs

RE: Support Senate Bill 326

The Wisconsin Chiefs of Police Association represents 580 law enforcement members throughout Wisconsin. Our professional oath when we take the badge is to protect and serve. Law enforcement cannot think of anyone more deserving of protection than any of our most vulnerable citizens and this of course, includes children.

Law enforcement across Wisconsin already works closely with schools, the medical community and other professionals who have reason to suspect that a child who they have seen in the course of their professional duties may be either abused or neglected to the point of causing harm to the child. We view our partnerships across the state with these key stakeholders as critical in protecting children and these partnerships will continue. This proposed legislation makes a modest change in current law and will improve the ability of law enforcement to protect kids who are in harm's way in a much quicker fashion.

This proposed legislation will require that all reports where child abuse or the neglect of a child is suspected to be received by the appropriate law enforcement agency *within 12 hours* or as soon as practical upon obtaining the information. Sensitivity to time is important. Why? Because a report that sits on someone's desk for an indefinite period of time does not help the child. During this delayed time, bruises heal and abusers have time to convince children they deserved to be beaten or neglected. Abusers are frequently adept manipulators who scare children into denying anything is wrong and children can be terrified into not telling the truth for fear of repercussions to themselves or those they love. The result of delays is that perpetrators get away with abuse.

Law enforcement respects that well-intentioned people who are not trained investigators may not understand the urgency of the information they possess. Their delay in referring information to a law enforcement agency can hurt an investigation and negatively impact the end results. School officials, social workers, medical providers and others do not have access to all the other information that may be relevant to a situation of abuse or neglect that law enforcement has at its fingertips. A single incident that caused lasting bruises may not in and of itself be called child abuse. But factored with repeated calls to that home for domestic violence, new bruises over older healing ones may be indicative of a lot more going on in that home for that child or other children in the home. Our officers have the training, tools and skills needed to decipher what is critical information in reports and what is not. Timely responses will increase our chances of success in helping abused kids.

We urge inconvenience to be less important than the ultimate goal we should all have whenever the welfare and safety of a child is at stake. We urge this committee to vote yes to this proposal.

Thank you in advance for your consideration.


The Racial Justice Improvement Project
AMERICAN BAR ASSOCIATION
Criminal Justice
Section

Racial Justice Improvement Project: Dane County, Wisconsin

***Evaluation of the Dane County
Deferred Prosecution Child Abuse Initiative (DPCAI)***

***June 2015 Report
to the American Bar Association***

***Prepared by Kit R. Van Stelle and Janae Goodrich
University of WI Population Health Institute***



<http://uwphi.pophealth.wisc.edu/>



<https://www.countyofdane.com/>

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Introduction

Governments across the country are developing initiatives to address racial inequities that exist in employment, housing, health, education, and criminal justice system involvement. Dane County, Wisconsin has been focusing on reducing racial disparities across the criminal justice spectrum from arrest to incarceration to re-entry. Achieving racial equity will require intentional strategies with measurable activities necessitating both sound program design and program evaluation.

The Dane County District Attorney's Office, led by District Attorney Ismael Ozanne, developed an effort to explore whether a paradigm shift from the use of corporal punishment to alternative parenting methods could impact racial disparities in both the short and long term. The DA's Office reached out to the larger Dane County system, the community, and national experts in search of answers and solutions. In late 2013, the Dane County Executive devoted a full-time specialized position to the child abuse and racial disparities initiative which marked the beginning of a new effort within the Deferred Prosecution Program (DPP) to address the parental use of corporal punishment.

As the larger community explores non-violent parenting practices and the cultural context of corporal punishment, the Dane County DA's Office launched an enhanced deferred prosecution program designed to protect children and strengthen families. Because a disproportionate number of minorities are referred to the DA's Office, it is expected that the multi-generational **Deferred Prosecution Child Abuse Initiative (DPCAI)** will impact short-term and long-term racial disparities in the criminal justice system. This initiative fills a current service gap by providing timely and culturally responsive programming to eligible individuals who have been referred for charges as a result of excessive physical punishment of a child (see Appendix 1 for an in-depth description of local racial disparities and the DPCAI model). Additionally, the DA's Office supports professional education opportunities that teach culturally responsive service delivery, as well as community education that encourages healthy parenting practices.

The Racial Disparities Subcommittee of the Dane County Criminal Justice Council is dedicated to reducing the current inequalities within our criminal justice system. As a part of the larger subcommittee, the Racial Justice Improvement Project (RJIP) Team met monthly to review the progress of the DPCAI and move towards greater collaboration and transparency. It is critical to form a cross-jurisdiction team to address the root causes of racial disparities and the policy changes that impact them. Although not originally identified as a RJIP Team member in the proposal, the Dane RJIP Team added a Child Protective Services representative. The RJIP Task Team in Dane County currently includes:

- ❖ Colleen Clark, RJIP Site Coordinator
- ❖ Ismael Ozanne, District Attorney
- ❖ Shelia Stubbs, County Board Supervisor
- ❖ Nicholas McNamara, Dane County Judge
- ❖ Richelle Anhalt, Captain, Dane County Sheriff's Office
- ❖ Dee Dee Watson, Public Defender
- ❖ June Groehler, Lieutenant, City of Madison Police Department
- ❖ Julie Ahnen, Dane County Human Services – Child Protection Services Manager

The Task Force regularly discussed the implementation and evaluation of the DPCAI – its goals and objectives, eligibility criteria, successes, and challenges. Central to this effort has been the system-level change that requires collaboration and input from numerous agencies and stakeholders to create partnerships between the criminal justice and human services systems.

In June 2013, the Racial Disparities Subcommittee of the Dane County Criminal Justice Council applied for and received a \$24,000 American Bar Association grant for a Racial Justice Improvement Project to evaluate the Child Abuse Initiative. The RJIP team used the grant funds to contract with the University of Wisconsin Population Health Institute (UWPHI) to provide technical assistance with the evaluation from January 2014 through June 2015.

Description of Pilot Program

The Deferred Prosecution Child Abuse Initiative (DPCAI) is currently offering Deferred Prosecution Agreements (DPA) to eligible individuals facing charges related to their use of excessive corporal punishment. Successful completion of DPA requirements results in a reduced or dismissed sentence, and in some cases no charge is issued. In the long term, it hopes to reduce the collateral consequences of early trauma and criminal justice involvement for families. A description of the current program model is presented in Appendix 1.

Beginning in January 2014, the Dane County DA's Office enhanced their existing deferred prosecution program to better serve individuals referred for charges as a result of excessive physical punishment of a child. These program enhancements included:

- ❖ Hired a Child Abuse Specialist within the DA's Office
- ❖ Developed intake system where each case is evaluated for deferred prosecution eligibility immediately, rather than waiting for the pre-trial conference
- ❖ All participants sign a "no corporal punishment" contract
- ❖ The "Adults and Children Together (ACT): Parents Raising Safe Kids" Parenting Program - staff were trained and the curriculum was integrated into services in August 2014 and offered free of charge to those who could not afford parenting skills classes
- ❖ "Adverse Childhood Experiences" tool used with all participants
- ❖ Enhanced use of forensic interviews with child victims
- ❖ A participant-level data system to document participant and child victim characteristics
- ❖ Increased collaboration with Child Protective Services and other system partners.

The Dane County Department of Human Services Child Protection Unit (CPS) is responsible for assessing safety when a report of intra-familial physical abuse is received. Because child safety is the mission of CPS, immediate interventions are implemented to address alternative parenting approaches and family reunification. However, a service gap exists because the criminal justice system does not currently operate this swiftly and can miss opportunities to:

- ❖ Coordinate services that will help families when they need it.
- ❖ Efficiently utilize scarce county resources by minimizing replication of services.
- ❖ Support the work of CPS by providing an incentive for parents to embrace services.

- ❖ Immediately address child protection without implementing a bail order prohibiting contact between parents and their children.
- ❖ Offer offenders a less punitive and more productive response to criminal conduct.
- ❖ Collaborate with CPS to structure meaningful services.
- ❖ Send a unified, clear and consistent systemic message to families.
- ❖ Spare defendants high legal costs that further stress families.

The DA's Office works collaboratively with CPS to expedite processing of cases in which offenders have contact with law enforcement and are referred for charges where excessive physical punishment is the presenting issue. Both parents and their children are likely to receive short-term and long-term benefits from a deferred prosecution model which provides timely intervention focusing on alternative, non-violent parenting practices. Additionally, the DPCAI takes into account the fact that in most low-level child abuse cases the defendant will not be incarcerated nor will children be permanently removed from a parent's care. This program creates and monitors Deferred Prosecution Unit (DPU) caregiver contracts that utilize community-based services, education, and support to ensure that the child victims will be safe.

Wisconsin Statutes Chapter 950.055(2)(d) pertains to child victims' rights to services and states that child victims have the right to information and referral to appropriate services to assist the child and the child's family in coping with the emotional impact of the crime and subsequent proceedings in which the child is involved. With this in mind, the DPCAI utilizes forensic interviews, when appropriate, to better preserve the case and provide linkages to needed services for child victims. The forensic interviews conducted by Safe Harbor Child Advocacy Center are designed so that a child can talk about their experience through a video recorded interview with a highly trained facilitator to minimize the need for additional interviews. Safe Harbor interviews also bring together professionals from all the agencies involved with a case, providing an opportunity for multidisciplinary communication and case planning. If charges are filed, the recorded statement can be used in court in place of the child's testimony. This process also allows for increased service coordination and referral of children and families to mental health services that may not otherwise be accessible to them.

All individuals referred by law enforcement for charges related to physical abuse of a child are screened for eligibility for the DPCAI. Upon screening, prosecutors in the DA's Office are notified of the eligibility status of each individual through the agency-wide computer system, PROTECT. The assigned prosecutor may then make an offer to an eligible individual's defense attorney regarding the option to participate in the DPCAI. This offer for participation can be made via fillable forms developed for this initiative that are available to prosecutors through the PROTECT system (Appendix 2). Use of these preformatted offer letters enhances the speed with which attorneys can inform defendants of the deferred prosecution opportunity. If the individual does not currently have a defense attorney the prosecutor may extend an offer of potential participation in the DPCAI, while also encouraging the individual to seek counsel and providing information on the avenues by which to obtain counsel. The defense bar and the State Public Defender's Office have been made aware of the DPCAI and are able to discuss this option with their clients. Each potential participant is provided with an introduction to the program in the form of a program brochure and is directed to the Deferred Prosecution Program website for additional information.

After a defendant is deemed eligible and is referred to the Deferred Prosecution Program (DPP) they begin the intake process which includes a screening or pre-screening with a DPP specialist to learn more about the individual and their family, culture, beliefs, needs, strengths, abilities, goals, and challenges. Those accepted are then invited to sign a DPP contract, which includes individualized conditions (or requirements) necessary for program completion. In addition to conditions that are standard to all DPP contracts, other conditions may be required based on their identified needs and goals.

Participants are referred to a variety of parenting, treatment, and support services that have been identified as culturally responsive. DPCAI staff indicated that these providers reported their commitment to cultural responsiveness both as an agency and as individual practitioners. Cultural responsiveness is achieved in different ways at different agencies, but includes ongoing in-house training and participation in local and national trainings. A formal assessment of provider cultural responsiveness was outside the scope of the current evaluation and has not yet been conducted. The vast majority of deferred prosecution agreements include treatment services for the defendant (and children if needed) and all treatment providers utilized have been confirmed by DPCAI staff to use best practices in their area of expertise.

Every DPCAI participant is required to participate in a parenting program. Participants may also have requirements related to mental health, substance abuse, anger management, aggression, trauma services, involvement with Court Appointed Special Advocates (CASA), family therapy, facilitation of treatment for the child, participation in a victim impact circle, employment, literacy, housing stabilization, or education services. The program also focuses on ensuring that the child victim has access to appropriate treatment services and is involved in services as appropriate. The length of the deferred prosecution agreement is determined by both the length of time necessary to fulfill requirements, and by the severity and chronicity of the offense behavior. Participants are monitored by a DPP specialist through monthly (or more frequent) contacts, and feedback from providers, victims, and other collateral contacts.

All DPCAI participants are referred to parenting skills services, regardless of their ability to pay. Participants are referred for services within one week of signing the deferred prosecution agreement (or DPCAI confirms that they are already participating in parenting enhancement). Participants without access to insurance or financial resources to pay for a parenting program required as a condition of their deferred prosecution agreement are enrolled in the *"Adults and Children Together (ACT): Parents Raising Safe Kids"* parenting curriculum. ACT Parenting is an evidence-based program developed by the American Psychological Association and was selected to provide eligible defendants with parenting skill enhancement through the DA's Office. The ACT Parenting Program serves as a no/low cost alternative for program participants who cannot afford to participate in other parenting program options. After being trained in the curriculum, DPCAI staff began offering ACT in August 2014. Historically, participants who could not afford to pay for the services required by their deferred prosecution contract did not successfully complete their contract due to that inability to complete a mandatory requirement. Now participants who may not have been able to complete their contract in the past may be able to do so successfully because of elimination of one financial barrier.

Method

The University of Wisconsin Population Health Institute (UWPHI) provided technical assistance with program evaluation for the project from January 1, 2014 through June 30, 2015. Located in the School of Medicine and Public Health, UWPHI evaluators possess expertise in the evaluation and development of diversion programming and behavioral health programs.

The initial evaluation plan included the administrative collaborative tasks of monthly teleconferences with the RJIP Coordinator, collaboration with the DPCAI team, quarterly progress updates to the Racial Disparities Subcommittee of the Dane County Criminal Justice Council (CJC), and a final project report in August 2015. It also included the planning tasks of meeting with stakeholders to review program needs, identifying appropriate data for collection, and the development of a data collection approach. The plan further included the design of a database to capture both DPCAI program services and participant-level data, and support for the implementation of the data system. Quality improvement support tasks included ongoing evaluative feedback for program improvement based on both qualitative and quantitative evaluation data available. Analyses of available participant outcomes and comparison data were also included as measures of disparities reduction.

However, upon contract start it became apparent that changes to the original evaluation workplan above were necessary. The pilot program was in need of technical assistance to develop a solid program foundation before a valid evaluation of outcomes could be conducted. UWPHI staff, DPCAI staff, and the RJIP team worked together during the entirety of 2014 to further develop the program, reach consensus on goals and objectives, revise eligibility criteria, define and operationalize data elements, design a data collection system, select assessment tools, and integrate evidence-based practices into service delivery. In addition, process evaluation was needed to strengthen program implementation, incorporate evaluation feedback for program improvement, and document system-level and community-level efforts. The evaluation workplan was further modified to accommodate the addition of qualitative analyses of conference participant feedback and the unforeseen addition of the February 2015 ABA data analysis and reporting requirement.

Thus, UWPHI took a multi-pronged approach to the evaluation, simultaneously helping to clarify DPCAI goals/objectives and structure, while collaborating to develop data systems and analyzing both qualitative and quantitative data. The resulting plan to create a solid foundation for project evaluation and implementation included collaboratively partnering to:

- ❖ Define and articulate the project goals, objectives, and activities
- ❖ Identify evidence-based assessment tools to be used with participants
- ❖ Identify and operationalize measures as part of developing a Microsoft Access database on District Attorney's network to collect and document participant-level data, and assure that data elements address the goals and objectives
- ❖ Summarize participant data for presentation to the RJIP Team and for ABA reporting
- ❖ Analyze participant feedback from the Spring 2014 Corporal Punishment Conference
- ❖ Provide program development and implementation support with program measures, data collection, and evidence-based practices

- ❖ Entry, management, and summary of ACT parenting program pre/post survey data and satisfaction data (for program improvement)
- ❖ Collaborate with DA Office staff, DPCAI staff, RJIP Coordinator, RJIP team, RJIP cross-site evaluator, and ABA staff

Data System Development: When UWPHI evaluation staff joined the project team in February 2014, information technology staff in the DA’s Office had already begun to develop a participant-level database specifically for the DPCAI. However, without clearly articulated goals and measurable objectives at that time it was necessary to reach team consensus on the goals and objectives before proceeding to further develop the data system. The development, pilot testing, and revision of the database continued throughout the project period to assure the accurate operationalization of measures to address the objectives.

The resulting Access database is a high quality data system that resides on the DA’s network, with links to statewide criminal justice data systems to auto-populate some measures. DPCAI staff is responsible for collecting data and maintaining the database, with data quality review/support provided regularly by evaluators. The database also includes automated reports to allow DPCAI staff to independently assess progress toward program objectives without external assistance. The expertise of Information Technology staff within the Dane County DA’s Office was critical to the successful development of the data system. Information Technology staff spent an estimated 1,200 hours during the grant period to design, program, and support the DPCAI data system. Appendix 3 contains example screens and reports from the DPCAI database.

Results

Both qualitative and quantitative data were analyzed to assess progress toward program goals and objectives and to document impacts of the Deferred Prosecution Child Abuse Initiative at the program, participant, system, and community levels.

Program-Level Results

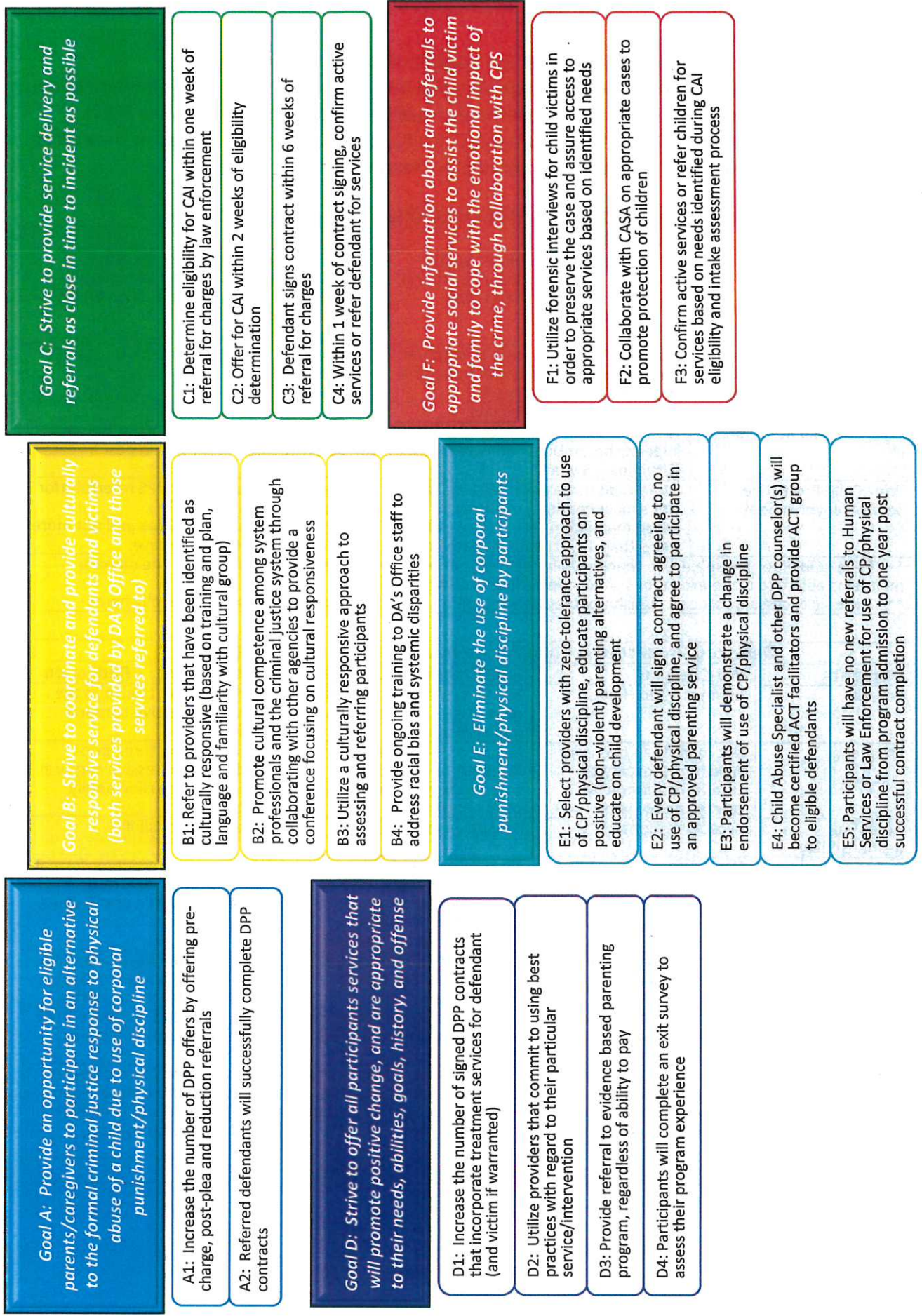
Clarification of DPCAI Goals and Objectives: The DPCAI project staff and RJIP team worked collaboratively throughout 2014 to reach consensus on program goals and objectives for the multi-generational effort. Significant time and effort were expended to develop the goals and measurable objectives in Figure 1 to further the following program mission:

Mission

To provide meaningful criminal justice diversion programming for parents who have been arrested for child abuse following an incident of excessive use of corporal punishment.

This multi-generational initiative will strive to have a short and long-term impact on child safety and protection, racial disparities, belief systems regarding violent parenting practices, and decreasing future criminal behaviors.

Figure 1
DANE COUNTY DEFERRED PROSECUTION CHILD ABUSE INITIATIVE GOALS AND OBJECTIVES



Eligibility Criteria: Reaching consensus on the eligibility criteria required ongoing communication, particularly between the prosecution and defense. The public defender played an effective advocacy role for the RJIP Task Force in reaching a compromise with the district attorney related to the DPCAI eligibility criteria. The eligibility criteria were revised in December 2014 with the goal of increasing the number of pre-charging (direct) referrals.

General Deferred Prosecution Child Abuse Initiative Guidelines*		
Elements	Not Eligible	Eligible
Severity	Intentional: torture, burns, broken bones, internal head trauma, internal organ damage, bite marks, poly victimization	Bodily harm as the result of excessive corporal punishment, with the exception of Intentional: torture, burns, broken bones, internal head trauma, internal organ damage, bite marks, poly victimization
Frequency	History of chronic excessive corporal punishment causing bodily harm to a child within past ten years**	Lacks chronic history of excessive corporal punishment
Accepting Responsibility	Not accepting responsibility	Is accepting responsibility
Prior Criminal Behavior	History of criminal convictions, formal supervision, or Deferred Agreements within past 5 years	No criminal convictions, formal supervision, or Deferred Agreement within past 5 years
Prior Child Protective Services Involvement	More than three prior CPS referrals (for similar conduct) resulting in recommendations for services, or more than 1 prior substantiated case	Not more than three prior CPS referrals (for similar conduct) resulting in recommendations for services and not more than 1 prior substantiated case.
* These guidelines are subject to change while the program continues to develop. Additionally, the director maintains ability to make exceptions when compelling circumstances exist.		
** Chronic excessive corporal punishment: evidence of more than three incidents resulting in bodily harm		

Deferred Prosecution Child Abuse Initiative Three-Tier Eligibility***			
Elements	Pre-Charging	Post Charging - Dismissal	Post Charging - Reduction
Severity	Minimal bodily harm	Moderate harm as the result of excessive corporal punishment	More significant harm as the result of excessive corporal punishment
Frequency	Not more than two prior incidents of excessive corporal punishment causing bodily harm	Not more than three prior incidents of excessive corporal punishment causing bodily harm	Not more than three prior incidents of excessive corporal punishment causing bodily harm
Accepting Responsibility	Accepts responsibility	Accepts responsibility	Accepts responsibility
Prior Criminal Behavior	None	No criminal convictions, formal supervision, or Deferred Agreement within past 5 years; no history of assaultive convictions	No criminal convictions, formal supervision, or Deferred Agreement within past 5 years
Prior Child Protective Services Involvement	Not more than two prior CPS referrals (for similar conduct) resulting in recommendations for services and no substantiated cases	Not more than three prior CPS referrals (for similar conduct) resulting in recommendations for services and no substantiated cases.	Not more than three prior CPS referrals (for similar conduct) resulting in recommendations for services and not more than 1 prior substantiated case.
Child Protection	No formal court order; defendant agrees to DPU contract terms of no use of physical punishment	Court ordered signature bond agreeing to minimum of no use of physical punishment	A minimum of Court ordered signature bond agreeing to no use of physical punishment – could involve no contact provision
*** Contingent on compliance with WI State Statutes Chapter 950 victim's rights			

The American Bar Association facilitated expert review of the DPCAI's eligibility criteria by the Pretrial Justice Institute (PJI) who stated, "...As you know, District Attorney offices have very wide discretion in the area of pretrial diversion, including whether to offer any kind of diversion opportunity at all for various offenses and, if so, establishing the program eligibility criteria. Having said that, the criteria that the Dane County task force worked out seem very reasonable as a starting point."

ACT Parents Raising Safe Kids Parenting Program: Some participants engage in their required parenting services directly through an in-house parenting group that provides parenting education for those who lack insurance or are unable to pay out of pocket. This program is facilitated by DPP specialists who have been trained in "Adults and Children Together (ACT): Parents Raising Safe Kids" (<http://www.apa.org/pi/prevent-violence/programs/act.aspx>).

The standard ACT program is an 8-week curriculum (eight 2-hour sessions) that focuses primarily on educating parents and other caregivers to create early environments that protect children from violence. The DPCAI team has customized the curriculum to their specific target population by offering 13 weeks of 90 minute sessions, and plans to further expanded the service to offer 2-hour sessions for 12-14 weeks going forward.

The ACT curriculum is based on research demonstrating that intervening early in life and developing effective parenting skills are critical ways to prevent violence in the lives of children. The program is designed to be delivered by trained ACT Facilitators, professionals who work for organizations and agencies that provide educational, social and/or mental health services to families and children, and those who are college professors, advocates, and others.

The purpose is to help parents understand developmentally appropriate behavior, the impact of child imitation and observation of caregiver behavior, and the impact of early experiences. The program also teaches parents positive skills and strategies to use with and model for children. They include:

- Dealing with children's difficult behaviors with developmentally appropriate responses;
- Controlling their own anger;
- Helping children control their anger;
- Teaching children how to resolve conflicts without using violence;
- Using positive discipline methods that fit the children's age; and
- Reducing the influence of media violence on children.

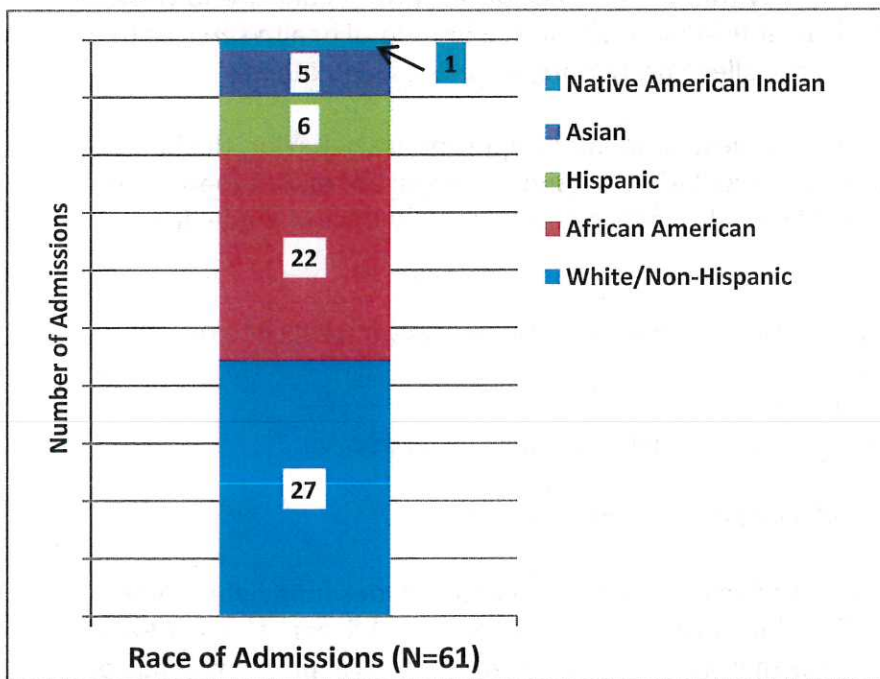
The ACT Facilitator Kit is available in both English and Spanish and includes homework sheets and powerpoint slides, brochures, TV public service announcement, and flyers. The ACT Parent Handbook includes sets of fact sheets with information on children's typical problem behaviors and outlines basic child development information. The handbook is available in both English and in Spanish and includes handouts on anger management, positive discipline, media literacy, and positive ways to resolve conflicts.

Participant-Level Results

Appendix 4 presents participant characteristics and services for all participants, as well as a comparison of results for White/non-Hispanic and Persons of Color (African American, Hispanic, Asian, and Native American Indian). None of the comparisons between the two groups revealed a statistically significant difference on any of the measures with the exception of employment status at admission (White/non-Hispanic participants were more likely to be employed at the time of admission). A brief overview of highlights is presented below.

Overview of DPCAI Target Population and Program Activity: As of May 14, 2015 there were 69 defendants who had been identified as eligible for the DPCAI. The DPCAI has admitted 61 participants, with 55 currently active. There are 7 individuals pending eligibility determination or assessment who have not yet signed a deferred prosecution contract. Five participants have successfully completed the requirements of their deferred prosecution agreements and one had their agreement revoked. While 67 children were directly provided with services through the DPCAI, the project will likely have a broader impact on other children in the homes of participants. A total of 141 children resided in the households of the 61 participants at the time of the child abuse incident and these children will likely benefit from DPCAI services as well. The DPCAI aims to provide meaningful services that will impact families beyond the specific benefits that they receive while active in the initiative.

Figure 2: Race of DPCAI Program Admissions

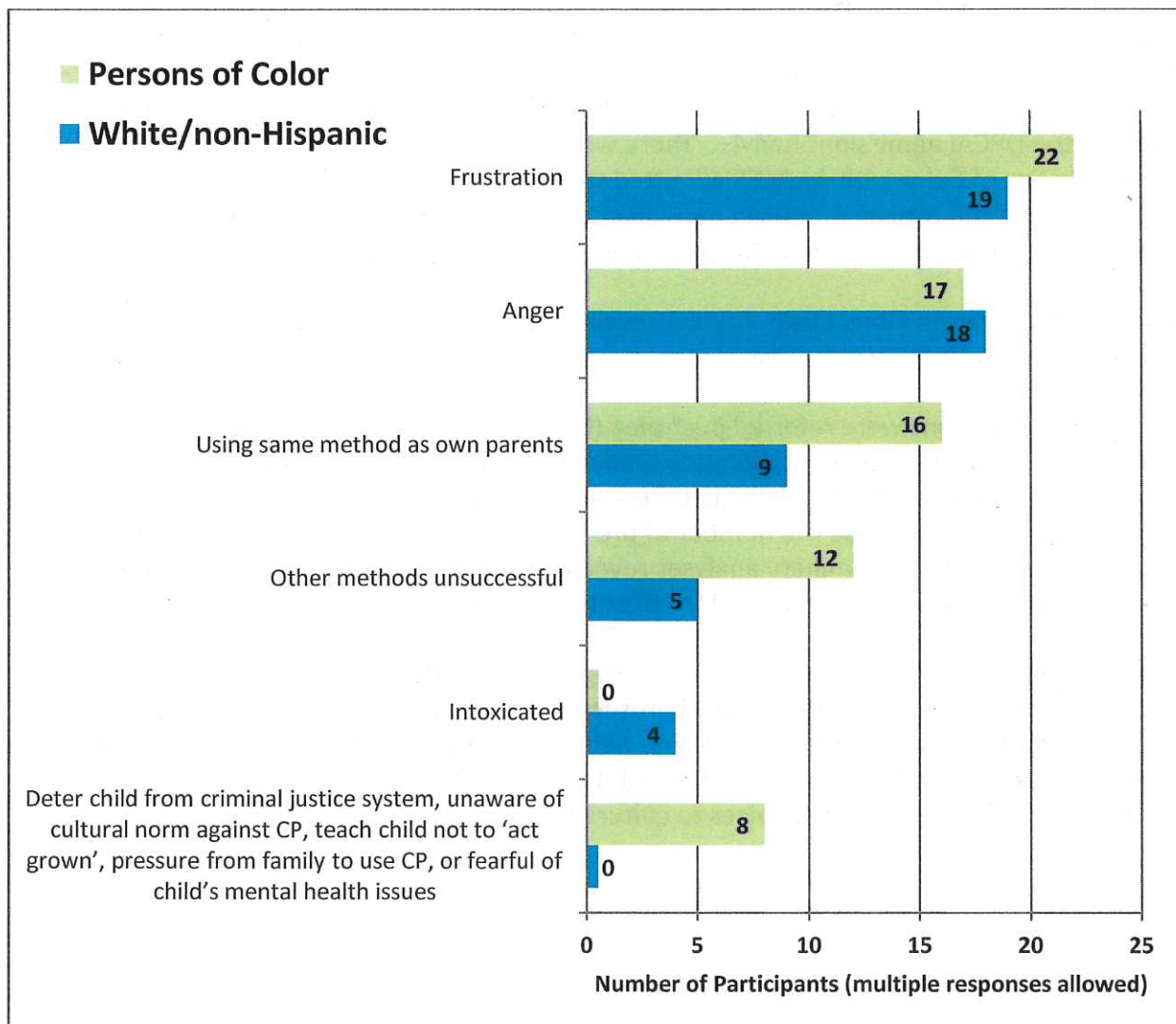


Of the 61 admissions to date, 56% were persons of color and 44% were White/non-Hispanic based on self-report at admission (Figure 2). Participants were an average of 36 years old, had an average of 2.6 children, and more than three-quarters reside in their own apartment or home. The education level of participants is quite high, with 70% having post-high school educational experience and 20% possessing a secondary degree. The

vast majority of participants were employed, and 63% had an annual income of less than \$30,000, 22% had an income of \$30,000-50,000, and 15% had an income of \$50,000 or more. Nearly one-half had no prior child protective services (CPS) reports and three of the participants for whom data were available had prior substantiated CPS reports.

More than one-half of all participants indicated that they used corporal punishment with their children because they were angry or frustrated, or because they were using the same physical discipline methods as their own parents (Figure 3). It is interesting to note that only parents of color indicated that they used corporal punishment to deter their child from the criminal justice system, they were unaware of any cultural norm against it, they were teaching their child not to 'act grown', they felt pressure from family to use corporal punishment, or they felt fearful of their child's mental health issues. None of the White/non-Hispanic parents gave any of these reasons for using corporal punishment. It is also interesting to note that only White/non-Hispanic participants cited intoxication as a reason for using corporal punishment.

Figure 3: Participant Reasons for Using Corporal Punishment (CP)



Each DPCAI program participant completed the Adverse Childhood Experiences Survey (ACES) which helps to document experiences with family dysfunction, abuse, and neglect. The rate of adults with 3 or more ACES (on a ten-point scale) in a community powerfully predicts lower child test scores, low neighborhood attachment, more positive attitudes towards drug use, and lower levels of the social skills needed to succeed in school and adulthood.

Table 3 in Appendix 4 reveals an overall average ACES score of 1.8, with White/non-Hispanics scoring 2.0 and Persons of Color scoring an average of 1.5. The White/non-Hispanic group had a higher average ACE score than the Persons of Color group, but this obscures the fact that both the White/non-Hispanics and African Americans had similar average scores of 2, Asians had zero, and Native American Indians and Hispanics both had an average of 1.

Compared to the Wisconsin Behavioral Risk Factor Survey (BRFS) results from 2011-2013, DPCAI program participants are much less likely to report zero ACES (47% BRFS vs 27% DPCAI) and more likely to report 4+ ACES (11% BRFS vs. 19% DPCAI). Thus, DPCAI program participants report life experiences that put them at risk of poor mental and physical health, heavy alcohol use, and social problems. Compared to the overall Dane County rate of 10-15% who have 4+ ACES, 19% of the DPCAI admissions had 4+. There were 25% of the White/non-Hispanics and 15% of the Persons of Color with 4+ ACES admitted to the DPCAI to date. Again, this obscures the fact that 22% of the African American participants had 4+ ACES while none of the Asian, Native American Indian, or Hispanic participants had 4+ ACES (none had more than two ACES).

Progress Toward Program Objectives: Table A reveals that the DPCAI has made consistent progress toward their primary objectives.

The majority of admissions were referred post-plea (64%), nearly one-third were direct pre-charge referrals (29%), and a small group were referred for a reduction in charges (7%) (Objective A1). The revision of the eligibility criteria in December 2014 led to an immediate programmatic change to increase the number of pre-charging (direct referral) cases referred to the DPCAI program. Initial preliminary analyses revealed that the proportion of direct referrals increased from 25% before the change to 41% after the change (N=44 and N=17, respectively).

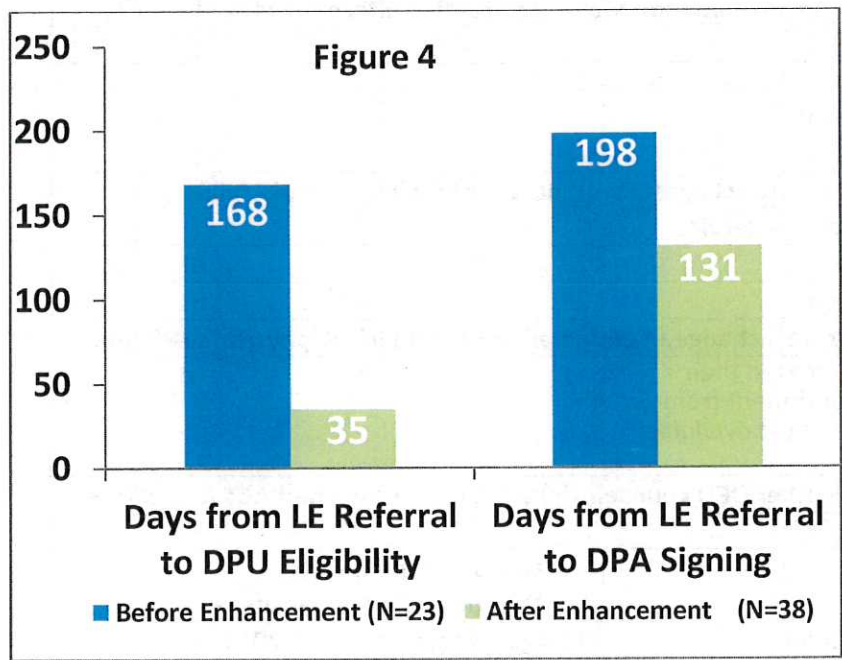
Four of the five participants discharged from the program successfully completed DPA requirements (Objective A2). As the deferred prosecution agreements (DPA) range from 12-24 months in length, the program enhancement has not been operational for a sufficient length of time to generate a large group of successful completers. In addition, the DPCAI program has successfully made 133 referrals for services to culturally responsive providers (Objective B1).

Table A: DPCAI Progress Towards Program Objectives			
As of May 14, 2015	Defendant Race		
	White/ Non-Hispanic (N = 27)	Persons of Color (N = 34)	Overall (N = 61)
Objective A1: Increase the number of offers for DPP by offering pre-charge, post-plea, and reduction referrals			
Pre-charge (direct) referrals	12	6	18
Post-plea referrals	13	26	39
Charge reduction referrals	2	2	4
Objective A2: Referred defendants will successfully complete DPP contracts			
# Of Signed Contracts (Admissions)	27	34	61
# Discharged	2	3	5
Contracts completed	2	2	4
Contracts not completed	0	1	1
Objective B1: Refer to providers that have been identified as culturally responsive (based on training and plan, language, and familiarity with cultural group)			
# Service Referrals To Providers (Duplicated Count)	59	74	133
Objective C1: Determine eligibility for DPCAI within 1 week of referral for charges by Law Enforcement			
Days from LE Referral to Eligibility Determination			
Within One Week (0-7 days)	11	19	30
2-4 Weeks (8-30 days)	3	0	3
1-2 Months (31-60 days)	0	0	0
2-4 Months (61-120 days)	3	3	6
More Than 4 Months (121+ days)	10	12	22
<i>Average number of days</i> <i>[Note. Average for all participants, including those referred prior to the enhancement]</i>	<i>96 days</i>	<i>77 days</i>	<i>86 days</i>
Objective C2: Offer for DPCAI within two weeks of eligibility determination			
Weeks from Eligibility Determination to DPCAI offer			
Within Two Weeks (0-14 days)	14	15	29
2-4 Weeks (15-30 days)	2	6	8
1-2 Months (31-60 days)	4	4	8
2-4 Months (61-120 days)	5	5	10
More Than 4 Months (121+ days)	2	4	6
<i>Average number of days</i>	<i>35 days</i>	<i>45 days</i>	<i>40 days</i>
Objective C3: Defendant signs contract within 6 weeks of law enforcement (LE) referral for charges			
Weeks from LE Referral to Signed DPU Contract			
Within Six Weeks (0-42 days)	4	5	9
6-12 Weeks (43-84 days)	3	4	7
12-24 Weeks (85-168 days)	9	12	21
More Than 24 Weeks (169+ days)	11	13	24
<i>Average number of days</i>	<i>164 days</i>	<i>150 days</i>	<i>156 days</i>
<i>[continued next page]</i>			

Table A: DPCAI Progress Towards Program Objectives			
As of May 14, 2015	Defendant Race		
	White/ Non-Hispanic (N = 27)	Persons of Color (N = 34)	Overall (N = 61)
Objective C4: Within one week of contract signing, active services are confirmed or defendant is referred for services			
Days from Signed Contract to DPCAI Referral for Services			N = 50
Within One Week (0-7 days)	25	30	50
More than One Week (8+ days)	0	0	0
<i>Average number of days</i>	<i>0.0 days</i>	<i>0.0 days</i>	<i>0.0 days</i>
Objective D1: Increase the number of signed DPP contracts that incorporate treatment services for defendant (and victim if warranted)			
# Contracts That Include Treatment:			
Number for defendants	27	34	61
Number for children <i>[Treatment services ordered when needed and when possible (services cannot be ordered for those over the age of 18, if a no contact order was in place, or if the child moved out of the area.)]</i>	18	26	44
Objective D2: Utilize providers that commit to using best practices with regard to their particular service/intervention			
# Referrals to Providers That Use EBPs <i>(duplicated count)</i>	59	74	133
Objective D3: Provide referral to evidence-based parenting program for all participants, regardless of ability to pay			
# of Participants REFERRED for Parenting Services <i>(Duplicated count – parents can be referred to more than one parenting service)</i>			
DPCAI ACT Parenting	2	3	5
Family Services	20	22	42
Triple P	0	2	2
Journey Mental Health Center	1	1	2
Rainbow Project	0	2	2
Marriage and Family Solutions	1	1	2
ATTIC Parenting	0	1	1
Center for Families – Parent’s Place	0	1	1
Prairie Counseling	0	1	1
CORE Psychoeducational Parenting	1	0	1
Stoughton Family Counseling	0	1	1
Ocean Hawk Counseling	0	1	1
Catholic Charities	0	1	1
Dean Medical Center	1	0	1
Meriter Medical Center	1	0	1
<i>[continued next page]</i>			

Table A: DPCAI Progress Towards Program Objectives			
As of May 14, 2015	Defendant Race		
	White/ Non-Hispanic (N = 27)	Persons of Color (N = 34)	Overall (N = 61)
Objective D4: Participants will complete an exit survey to assess their program experience			
# Participants Completed DPCAI Program Exit Survey	TBD	TBD	TBD
<i>[satisfaction survey to be designed by staff in future]</i>			
Objective E1: Select providers with zero-tolerance approach to use of corporal punishment (CP)/ physical discipline, educate participants on positive (non-violent) parenting alternatives, and educate on child development			
# Referrals to Parenting Providers with Zero Tolerance Approach to Use of CP/Physical Discipline <i>(duplicated count)</i>	27	37	64
Objective E2: Every defendant will sign a contract agreeing to no use of CP/physical discipline, and agree to participate in an approved parenting service			
# Participants Signed "No CP" Contract	27	34	61 100%
# Participants Agree to Parenting Service	27	34	61
Objective E3: Participants will demonstrate a change in endorsement of use of CP/physical discipline			
# of ACT Parenting participants that decreased their endorsement of the use of corporal punishment from class start to class end <i>(pre/post data not yet available for other parenting programs)</i>	1	3	4
Objective E4: Child Abuse Specialist and other DPU counselor(s) will become certified ACT facilitators and provide ACT group to eligible defendants			
# Staff Certified (and when certified)	2 staff trained in June 2014 <i>[certification occurs after site review]</i>		
# of ACT Class Sequences/Cohorts Provided	Cohort #1 completed Fall 2014 Cohort #2 in process		
Objective E5: Participants will have no new referrals to Human Services or Law Enforcement for use of CP/physical discipline from program admission to one year post successful contract completion			
# Participants 1 Year or More Post-Completion	1	1	2
# With New Referral Within 1 Year of Completion <i>[cannot yet be determined due to small sample]</i>	NA	NA	NA
Objective F1: Utilize forensic interviews for child victims in order to preserve the case and assure access to appropriate services based on identified needs			
# Forensic Interviews Conducted With Children	7	11	18
Objective F2: Collaborate with Court Appointed Special Advocate (CASA) on appropriate cases to promote protection of children			
# Contracts That Include CASA	1	10	11
Objective F3: Confirm active services or refer children for services based on needs identified during DPCAI program eligibility and intake assessment process			
Child Victims Reviewed for Service Need	28	38	66
Child Victims In Need Of Services	26	32	58
Child Victims Active In or Referred For Needed Services	18	26	44*
<i>*Services were included for victims when it was determined appropriate and could be ordered by the District Attorney's Office. Services for victims could not be ordered or required by the District Attorney's Office if the victim relocated, the victim was over the age of 18, or there was a no contact order in place.</i>			

While it is too early in the program implementation process to determine impact on participant recidivism outcomes, progress toward Objectives C1 and C2 related to improving the speed of initial processing can be assessed. Analyses were conducted to compare the speed of initial processing for (a) 23 participants that were referred for charges prior to the January 2014 enhancement with (b) 38 participants who were referred for charges after the enhancement. For these purposes, enhancement refers to the change in eligibility screening and referral to the DPCAI program after law enforcement referral. Figure 4 suggests that the DPCAI’s efforts to change the old procedures of “business as usual” show a pattern of positive impacts.



Preliminary results show that the DPCAI enhancement has significantly reduced the average time between law enforcement (LE) referral and eligibility determination, and between LE referral and signing the deferred prosecution agreement.

Reducing the length of time between law enforcement referral and eligibility determination is essential for providing services to families when they most need them. Prior to the DPCAI enhancement, a Deferred Prosecution Agreement was offered after charges were issued which could take several months. With the DPCAI enhancement, the DA’s Office has been able to respond to cases and provide services to families more quickly after the incident. This also allows the DA’s Office to coordinate with other services such as the Family Preservation Program and to ensure that families receive necessary services at a time when they need them. This reduces the detrimental effects that long case processing times have on families and it allows for a coordinated, system-wide response to corporal punishment incidents.

In addition, due to different legal standards in the child protection and criminal justice systems, the DPCAI enhancement allows the DA's Office to provide services to families at a time when Child Protective Services (CPS) may not. Of the 61 DPCAI cases for which CPS status was available, 20% were screened-out by CPS because the incident did not meet the legal threshold for risk of harm or child maltreatment. DPCAI filled this service gap by providing assessment and services for these families.

DPCAI is also successfully meeting their objectives related to treatment service provision and use of providers using best practices (Objectives D1-D4). Participants have benefited from a variety of service referrals with 98% referred for parenting services (2% of participants were already involved in parenting services prior to starting the DPCAI program so did not require referral), 59% for family/in-home therapy, and 26% for aggression, domestic violence, or abuse services. All participants sign a “no corporal punishment” contract and the DPCAI uses providers with zero tolerance for corporal punishment (Objectives E1-E4). The program has also enhanced services for child victims through forensic interviews, use of Court Appointed Special Advocates when necessary, and referral to appropriate treatment services (Objectives F1-F3). The DPCAI Child Abuse Specialist reviews each case and refers the child victims for appropriate services when possible (some victims are determined to need services, but DPCAI cannot require them as part of the deferred prosecution agreement because there is a no contact order, the victim leaves the area, or the victim is over 18 years and declines services).

Discussion of Program and Participant Outcomes: The preliminary plan to assess program-level outcomes includes (a) reaching consensus on how the DPCAI can be a part of system change to decrease racial disparities in Dane County, and (b) measures of positive impacts on families. The outcome measures could include changes in belief systems and use of corporal punishment, as well as resulting reductions in criminal justice and human service systems involvement for both the caregiver and the child victim. Initially, this measure could include the number of new child abuse referrals to human services and law enforcement. Later, it could examine juvenile justice and criminal justice system involvement for the child victim, as well as child abuse reports for the victim and caregiver.

As these are long-term outcome measures, impact cannot be measured until more participants have completed the DPCAI and these data are available. After approximately two years of the enhancement, recidivism outcomes and changes in racial disparity could be estimated. Barring case extensions or delays, the 55 currently active DPCAI program participants will complete their diversion agreements by May 2017. Projections based on current admission rates reveal that it could take approximately two years to admit 100 participants to the enhanced intervention (until the end of 2017). Given that diversion agreements average 12-24 months in length, it appears that the DPCAI will be able to begin to measure one-year post-program recidivism and other outcomes for at least 100 DPCAI discharges during 2019.

ACT Parenting Program Change in Attitudes and Knowledge: Although the impacts on long-term individual outcomes cannot yet be determined, the preliminary effects of the Child Abuse Initiative on attitude change for those participants completing the ACT Parenting Program were examined as an example.

The first cohort of four participants completed the ACT Parenting curriculum in Fall 2014 and Appendix 5 contains a detailed summary of the pre/post-test and satisfaction survey results. Analysis of the pre-survey and post-survey responses showed improvement in summary scale scores for DPCAI participants involved in the ACT Program (Table B). While the changes were not statistically significant (using paired *t*-tests) due to the small sample size of just four participants, the results are in the expected direction. These results were seen across all areas including prosocial parenting, media violence, ages and stages knowledge, and violence

prevention skills. Analyses by race could not be performed at this time due to the small sample of four participants. Average scores from the Humboldt University multi-site evaluation of the ACT curriculum are also provided in Table B as a point of comparison.

Table B: ACT Parenting Knowledge and Attitude Scale Scores (N =4)		
	Pre-Test Average	Post-Test Average
Prosocial Parenting Scale for DPCAI	43.92	47.67
Prosocial Parenting Scale from Multi-site Evaluation	39.18	41.20
Media Violence Scale for DPCAI	18.00	25.00
Media Violence Scale from Multi-site Evaluation	21.41	23.61
Ages and Stages Knowledge Scale for DPCAI	64.25	69.75
Ages and Stages Knowledge Scale from Multi-site Evaluation	59.98	63.70
Violence Prevention Skills Scale for DPCAI	37.25	38.33
Violence Prevention Skills Scale from Multi-site Evaluation	33.19	34.56
<i>*Non-shaded fields include comparison data from a national, multi-site study (Weymouth and Howe, 2011, "A Multi-Site Evaluation of 'Parents Raising Safe Kids' Violence Prevention Program")</i>		

System-Level and Community-Level Results

System Collaboration: Significant system-level collaborations involve the courts, district attorney’s office, public defender, the faith community, RJIP taskforce and Criminal Justice Council-Racial Disparities subcommittee, child protective services, and local service and treatment providers. The Dane County District Attorney’s Office continues to collaborate with the RJIP Task Force Team, systemic multidisciplinary team (MDT) members, faith leaders, national experts, and the community to further develop the DPCAI and continue a larger community conversation about the negative outcomes associated with corporal punishment.

The Dane County District Attorney’s Office has received repeated requests to present the DPCAI program model at professional conferences. For example, the DPCAI received requests to present at the “20th International Summit & Training on Violence, Abuse & Trauma across the Lifespan” in San Diego in August 2015 and at the “American Professional Society on the Abuse of Children 23rd Annual Colloquium” in Boston in July 2015. DA’s Office staff have also shared information about the Initiative at conferences and seminars at the YWCA Racial Justice Summit, the University of WI-Madison, the University of WI-Platteville, and Loyola University.

In February 2014 the American Bar Association enacted a policy directly related to Wisconsin’s child abuse initiative that “Urges the development and adoption of trauma-informed, evidence-based approaches and practices on behalf of justice system-involved children and youth who have been exposed to violence, including victims of child abuse and neglect or other crimes and those subject to delinquency or status offense proceedings” (2014_MM_109B).

Website Development: The DA’s Office has also disseminated information about the Child Abuse Initiative activities through their website. A description of the Deferred Prosecution Unit and Child Abuse Initiative program, eligibility requirements, and benefits is available on the website (https://www.countyofdane.com/da/deferred_prosecution.aspx) as are links to other positive parenting models (https://www.countyofdane.com/da/community_resources.aspx).

Public Service Announcement (PSA): American Family Children’s Hospital and the Dane County District Attorney’s Office collaborated to create a public service announcement educating the public about the negative outcomes associated with parental use of corporal punishment. This PSA aired on local radio stations for two weeks in the summer of 2014. In the fall of 2014, the *US Alliance to End the Hitting of Children* assumed sponsorship and today the PSA can be heard on national and local websites, during professional training conferences, and on the DA’s Office website at [https://www.countyofdane.com/DA/audio/US Alliance PSA.mp3](https://www.countyofdane.com/DA/audio/US_Alliance_PSA.mp3).

*“Hi my name is Ismael Ozanne and many of you may know me as the Dane County District Attorney. I am also a husband and father of two young daughters. I am asking you to make the choice my wife and I made - to not use physical punishment with your children. Many of us are not aware that over 16 years ago, the American Academy of Pediatrics urged doctors to recommend that parents not use physical punishment on their children. Today, over 100 years of research on children and families supports this recommendation. Well-meaning parents may use physical discipline intending to teach their children to make good choices. But we now know that physical discipline actually leads to **more** disobedience and aggressive behaviors in children. We all want what is best for our kids. Today, we know what is best for kids is parenting based on respect, mutual understanding and logic rather than fear of physical pain. Please join me in learning more about positive parenting and creating a violence-free home.”*

Creation of “No Hit Zone”: Adults who present to the DA’s Office often experience high levels of stress, anxiety, fear, or uncertainty resulting in lower frustration tolerance, especially when faced with perceived problematic behaviors by their children. Adults in this type of situation may become angry, raise their voice, or hit a child or another adult. Following in the footsteps of Children’s Hospitals across the United States such as the University of Louisville Kosair Children’s Hospital, the DA’s Office sought to be the first government agency to develop clear guidelines for their office staff to follow when encountering these situations.

DA’s Office staff, an investigator, and a critical incident responder received in-depth training on the “No Hit Zone” (NHZ) concept in August 2014. Staff were taught that when hitting is observed, all staff should be responsible to intervene and communicate the office NHZ policy. An example might include “For the safety and protection of everyone in our offices, we participate in a ‘No Hit Zone’. I am obligated to say something when I see physical contact like hitting occur. What can I do to help you or your family?” In addition, brochures, magnets, and signs related to the NHZ were developed, and can be found throughout the lobbies of the DA’s Office public spaces (Appendix 6). The NHZ magnet has proven to be exceptionally popular, with many children and families taking one for their own home. The office announced the NHZ on their website (<https://www.countyofdane.com/da/nohit.aspx>). In addition to training of in-house staff, the DA’s Office has provided training on the NHZ to local law enforcement agencies – some of whom are moving forward with their own No Hit Zones.

Since October 2014, the DA’s Office has responded to requests for information about instituting NHZs from many professionals around the nation. In addition, DA’s Office staff are active advocates for the NHZ, participating in national workgroups facilitated by the University of Kentucky Department of Pediatrics and disseminating materials that they have developed to places such as the Jefferson County Kentucky Family Court, the Michigan Children’s Hospital, and Wisconsin’s Great Lakes Intertribal Council.

Community and Professional Education: Conversations about the DPCAI and corporal punishment led to the creation of a professional conference entitled “The Cultural Context of Corporal Punishment—Keeping Kids Safe” which was held on June 10-11, 2014 in Madison, Wisconsin. This conference was a collaborative effort among the Dane County District Attorney’s Office, University of WI Department of Pediatrics, Office of Continuing Professional Development, Dane County Criminal Justice Council, Dane County Board of Supervisors, Bureau of Justice Assistance, American Bar Association, and American Family Children’s Hospital.

On June 10, 2014, the Dane County Task Force held a corporal punishment and positive parenting conversation open to the community at the Fountain of Life Church. The meeting was led by Dr. Stacey Patton, who connected historical information on slavery practices and principles with modern forms of punishment and abuse. The event created a safe forum for candid conversations about race, religion, and parenting practices.

At the conference the following day, national experts on corporal punishment and culture explained the impact of corporal punishment on child development in the context of research, history and culture, and implicit bias, and facilitated subsequent audience discussions. The conference offered a forum where participants examined their own experiences, cultural beliefs, and personal biases to identify at least one strategy to move personal and community approaches toward non-violent parenting strategies.

The Conference was well attended and received overwhelmingly positive reviews from those attending. The conference gathered participants from across Wisconsin and other parts of the Midwest, including: local and state leaders, community advocates, faith-based leaders, human services and medical professionals, law enforcement, victim/witness specialists, corporation counsel, counselors/therapists, prosecutors, social workers and guardian ad litem. It garnered a high level of leadership support with attendees including the Dane County District Attorney Ismael Ozanne, and County Executive Joe Parisi. Local media also covered the event.

Appendix 7 contains a summary of conference participant feedback and supporting information related to the 2014 Corporal Punishment conference. A survey of “Intent to Change” was distributed at the conference to assess the degree to which participants could apply the information to enhance their professional practice.

Based on the positive feedback from 2014 conference participants, a second conference is planned for November 19 and 20, 2015 (<http://www.pediatrics.wisc.edu/education/continuing-professional-development-quality-improvement/continuing-education/live-events/cultural-context-corporal-punishment/>). The goal will be for participants to understand how ethnic and religious cultures affect caretakers’ use of corporal punishment, and how to work responsively with culturally diverse families. Conference participants will also be encouraged to examine how personal biases may influence their work and to learn how corporal punishment affects physical and emotional development. The 2015 conference will include two full days of structured learning, as well as an evening community conversation to enlist community leaders in thoughtful dialog regarding their experiences and belief systems.

Community Outreach: The DA's Office invited community members to conversations prior to and throughout the development process of this initiative. During 2013, community members and area professionals participated in an informal dialog with staff regarding the issue of corporal punishment in the Dane County community, and obtained a baseline of perspectives on what corporal punishment is, how it affects people, whether it is acceptable, and what the community can or should work to change regarding the use of this type of punishment.

To date, DA's Office staff also conducted 42 outreach and education presentations to court personnel, middle and high school groups, classes at University of Wisconsin and Edgewood College, numerous community service agencies, hospitals, faith-based community leaders, domestic violence intervention staff, and law enforcement agencies. During these contacts, staff elicited feedback from participants regarding attitudes toward corporal punishment and this valuable feedback assisted the DA's Office in determining steps to take as this initiative, and the community, moved forward in addressing disparities and corporal punishment.

In addition, the ABA recommended the development of a project brochure. A first draft of this brochure prepared by the ABA is included as Appendix 8. Numerous discussions among the ABA, RJIP team members, DPCAI staff, and evaluators occurred over the course of the project related to the purpose of the brochure, appropriate target audience, content, cost, and methods of dissemination.

Challenges and Barriers

The Dane County RJIP project differs from some other RJIP projects nationwide in that its focus is not implementation of a checklist or new assessment tool, but rather system-level change through development of a model to address the root of a problem. However, it is similar to other RJIP-funded projects in that the evaluation focused on the development of a pilot program, identification of participant measures to be used in future evaluation efforts, development of data collection processes, and planning for future outcomes evaluation.

At this time it is unknown the level to which the current project design will impact overall racial disparities in the criminal justice system. However, it is expected that over time the project will be able to reduce corporal punishment and criminal recidivism for participants, enhance service coordination for child victims, and lower levels of future juvenile/adult justice involvement for the victims. The hope is that the participant, community, and system-level impacts will work in concert with other local disparity reduction efforts to demonstrate systemic change in the current racial disparity present in the criminal justice system. External resources and funding will be necessary to support further efforts to evaluate the effectiveness of the DPCAI.

While the current short-term evaluation effort could not be expected to produce findings related to participant outcomes for deferred prosecution agreements that are 12-24 months in length, it will inform future iterations of the project and potential expansion/replication of the model. When the program has been fully implemented and stable for two years and is ready for outcomes evaluation, participant outcomes related to recidivism and system-level impacts related to disparity reduction should be measured.

An additional challenge was that the DPCAI program required some assistance to implement and stabilize the project in preparation for future outcomes evaluation. The revision of the original evaluation plan was in the best interest of the program and RJIP initiative, but the increased evaluation and reporting workload is estimated to have required nearly double the time/budget allocated. The UW Population Health Institute donated the additional time and resources to accommodate these changes during the course of the project. The Dane County DA's Office, Dane County Equity and Criminal Justice Council Coordinator, and the RJIP Task Force members also donated significant staff resources to support this RJIP project.

Summary/Highlights

The DPCAI has effectively enhanced Dane County's Deferred Prosecution Program for those individuals facing charges as a result of the use of excessive physical punishment of a child. It encourages parents to challenge their belief systems related to the use of physical punishment and to embrace healthier parenting skills, leading to behavior change and a reduction in the use of corporal punishment. Completion of Deferred Prosecution Agreement requirements allows participants to avoid the stigma and associated negative societal outcomes associated with a criminal conviction by having their charges reduced, dismissed, or avoided altogether. Initial analyses suggest that DPCAI has increased the speed of case processing for participants, and that enhanced collaboration has improved service coordination for both program participants and their child victims. The enhancements have improved services for child victims through enhanced coordination with Child Protective Services, timely use of forensic interviews, use of Court Appointed Special Advocates, and referrals to necessary treatment and support services. DPCAI stakeholders collaborated to clarify project goals and objectives, and the evaluation results reveal that the DPCAI program has made consistent progress toward their objectives. The DPCAI program has served 61 participants to date, 56% were persons of color and 44% were White/non-Hispanic. Five participants successfully completed program requirements. There were 67 children that received referrals/services through the DPCAI and 141 children resided in the homes of the 61 participants at the time of the child abuse incident and can be expected to benefit from services parents receive in the DPCAI. White/non-Hispanic and African American participants tend to report a history of life experiences that put them at great risk of poor mental and physical health, heavy alcohol use, and social problems. The DPCAI refers participants and child victims to a wide array of treatment and support services. The project offers the *ACT Parents Raising Safe Kids* Parenting Program, with an initial cohort of four participants completing the curriculum in Fall 2014 and a second cohort to begin soon.

The District Attorney's Office and Office of the State Public Defender collaborated to modify program eligibility criteria to increase the number of direct pre-charge referrals. Overall, the majority of admissions were referred post-plea (64%), nearly one-third were direct pre-charge referrals (29%), and a small group were referred for a reduction in charges (7%). However, the proportion of direct referrals increased from 25% before the December 2014 change in eligibility criteria to 41% after the change (N=44 and N=17, respectively).

In addition to these individual-level factors, the DPCAI also initiated a variety of system-level and community-level efforts to impact racial disparities and the use of corporal punishment. The Dane County DA's Office became the first non-hospital government institution in the nation to establish a "No Hit Zone" (NHZ) based on a model used by children's hospitals across the country. A NHZ team was created and they provided training to staff members throughout the DA's Office who were most likely to encounter issues that the NHZ addresses.

The extraordinary effort of the DA's Office staff also created a public service announcement denouncing the use of physical discipline that is now used nationwide, also facilitated a professional conference with national experts in 2014, and conducted extensive community outreach. The conference also included a community conversation focused on initiating dialogue with the faith based community about corporal punishment and its intersections with culture, particularly African American culture. A second, more extensive conference is planned for November 2015. More than 40 presentations to community groups of all types have encouraged community- and system-level change. Extensive collaboration with the local faith-based community and other organizations that are working collaboratively to reduce racial disparities has also occurred to maximize the impact of the Initiative.

The extent to which the DPCAI reduces disparities cannot be determined at this early date, but it is expected that the impacts of this initiative will be seen in longer term positive outcomes for the children, improvements to the system of care for these parents and families, community education to impact attitudes and norms related to corporal punishment, and integration of the DPCAI into the larger county-wide efforts to reduce disparities.

Evaluation Recommendations for Consideration

The current examination of the DPCAI resulted in a series of recommendations developed by the UW Population Health Institute to facilitate both the continued successful implementation of the program and ongoing efforts to reduce racial disparities in Dane County. These recommendations are grouped topically and are not presented in any specific order.

Recommendations for DPCAI Improvement

- A. The program model would benefit from a designated district attorney (prosecutor) assigned to DPCAI cases. Currently, the program coordinates with dozens of individual prosecutors with varying levels of support/interest/knowledge about the program in particular, and about family violence in general. A single, designated prosecutor on the team would improve speed of processing, level of communication, and overall efficiency for the entire team, as well as further enhancing the program model to benefit parents and child victims. While it would be ideal in the long-term to have a dedicated specialized prosecutor who would handle only family violence and DPCAI cases, in light of current budget challenges it may be more feasible in the short-term to limit assignment of DPCAI cases to 1-2 designated prosecutors to improve the efficiency of current case handling processes.

- B. Further increase public defender and defense bar knowledge of DPCAI eligibility criteria and participation benefits. While the Office of the Public Defender is well-represented on the RJIP team, public defender staff should be informed about DPCAI eligibility criteria and program requirements to better serve eligible families. The brochure drafted by ABA could be used as a starting point to develop a brochure for system stakeholders (Appendix 8).
- C. Continue to explore the use of evidence-based practices and tools related to criminal risk assessment and initial needs assessment for eligibility and case planning.
- D. Develop measures and data collection processes for the objectives that do not yet have them defined. For example, the database does not yet include a measure of "payment source" for Objective D3 nor a way to document the number of participants that completed a program satisfaction survey for Objective D4. These are important measures, but the development of the automated reports was assigned higher priority at the current time.
- E. Regularly (possibly quarterly) use the database to document program successes and use the data/results to improve the program through a continuous feedback loop. The DPCAI should use the evaluation data to make any necessary mid-course corrections and to regularly inform stakeholders about progress toward program goals and objectives.
- F. Use the ACT Parenting Program participant satisfaction feedback to inform and improve the provision of these services going forward. The team should review the participant input at the end of each cohort and determine whether any program modifications are necessary based on participant suggestions.
- G. External funding will be sought to take the DPCAI from pilot to full implementation and to adequately support a future assessment of program implementation and outcomes when the program has stabilized. In preparation for future evaluation:
 - 1) The DPCAI should seek to ensure that the parenting skills enhancement intervention is comparable for all participants. Currently, the DPCAI can control the content and quality of the ACT Parenting intervention it provides in-house, but most participants to date have engaged in a variety of parenting programs through other area providers. Although program requirements are customized to the specific needs of each case, the DPCAI will need to achieve consistency of content across parenting interventions in order to reliably assess any impacts on attitudes and behaviors related to physical discipline. If not, there could be systematic differences among groups of participants related to the type of parenting services they receive that could bias the results.
 - 2) The DPCAI should develop procedures to systematically obtain pre/post data for other (non-ACT) parenting programs to document attitude change related to corporal punishment. Currently, the DPCAI cannot document attitude change for participants referred to other area parenting skills programs.
 - 3) The DPCAI should also develop procedures to obtain satisfaction feedback from all program participants and use their input to improve the program. It is recommended that an annual satisfaction survey be administered to all participants at a single point-in-time (snapshot) rather than only at program discharge in order to capture feedback from participants at all stages of participation.
- H. Conduct evaluation of program and participant outcomes only after the program has stabilized. Outcomes evaluation could be conducted during 2017 when a large enough sample of participants who have received the enhancement will have completed their 12-24 month long deferred prosecution agreements. In addition, a large enough group of participants must have at least one year post-discharge for valid assessment of criminal

recidivism outcomes and subsequent CPS incidents. Finally, caution should be used during analysis to either exclude or analyze separately the 23 defendants who did not receive the enhanced intervention or received only a portion of the enhancement. The currently active participants have received all/some/none of the enhancements because they were either admitted prior to the January 2014 enhancement start or prior to the Summer 2014 implementation of the ACT Parenting Program.

- I. Develop an approach for responding to continued state and national interest in the DPCAI model. Reach team consensus on criteria for determining when the DPCAI model has achieved adequate stability for dissemination and replication, as well as at what point it will be appropriate to advance the model through professional networks and conferences.
- J. Garner the support of high level leaders within the criminal justice system, service system, and community through engagement in partnerships to advance racial equity.
- K. Determine how the current effort best fits into other ongoing Dane County efforts to reduce racial disparities and maximize impacts.

Recommendations for RJIP Team Continued Support of the DPCAI

- L. The RJIP Team should provide support for the November 2015 conference on corporal punishment through engagement in planning, promoting, volunteering, etc.
- M. Support community outreach and education efforts related to the DPCAI.
- N. Expand the conversation beyond the CPS and criminal justice system partners through community conversations, conferences, billboards, written materials, continued meetings with the faith based community, and “world café” engagement sessions.
- O. Continue the efforts to increase transparency and communication among agencies that began with discussions of program design, goals and objectives, and eligibility criteria. In the coming years, it will be critical for the project to both conduct a robust program evaluation and to support the increased system collaboration.

Recommendations for Improving Future RJIP Efforts

- P. Assure that RJIP-funded projects have a solid foundation and have stabilized prior to initiating evaluation of outcomes. Considered in terms of the “stages of evaluation” outlined by Inga James during a presentation to RJIP sites, the DPCAI would be in Stage 1 (preparation). Prior to subjecting a program to outcomes evaluation, assure that the intervention is stable and there is consensus on goals/objectives, policies and procedures, use of evidence-based assessment tools, effective interventions, and stakeholder buy-in.
- Q. Allow sufficient time to conduct a valid evaluation. This report on program effectiveness is being required a little more than one year after the 12-24 month DPCAI intervention enhancement began and no participants have yet completed the enhanced services.
- R. Provide sufficient time/resources in funding cycles to accomplish necessary system-level collaboration to integrate program processes into the service system.
- S. Provide sufficient resources to fund the necessary program and intervention activities. The current RJIP funding was designated to support the program evaluation, but no resources were provided to the DA’s Office to operate the enhancement, participate in collaborative meetings, support DA Information Technology staff to collaborate in data system design (estimated at nearly 1,200 hours), or fund a larger systems-level communications strategy.

Appendices

- Appendix 1 DPCAI Program Description April 2015
- Appendix 2 Deferred Prosecution Offer Letters
- Appendix 3 Database and Automated Report Screen Shots
- Appendix 4 Summary of Participant Characteristics
- Appendix 5 ACT Parenting Scoring Method and Data Summary
- Appendix 6 "No Hit Zone" Materials
- Appendix 7 Corporal Punishment Conference Materials
- Appendix 8 DPCAI Brochure (drafted by American Bar Association)