

Pub. L. 99-401, §104(2), which directed that subsec. (a) be amended by inserting “in order to prevent unnecessary duplication of such programs, to ensure efficient allocation of resources, and to assure that programs effectively address all aspects of the child abuse problem” after “Board” in second sentence, was executed by inserting provision after “Advisory Board” the first time that term appeared in what constituted the second sentence before a new second sentence was added by section 104(1) of Pub. L. 99-401.

1984—Subsec. (a). Pub. L. 98-457, §105(a), (b), struck out “, including the Office of Child Development, the Department of Education, the National Institute of Education, the National Institute of Mental Health, the National Institute of Child Health and Human Development, the Social and Rehabilitation Service, and the Health Services Administration,” before “and not less than three members”, and inserted provision that the Advisory Board may be available, at the Secretary’s request, to assist the Secretary in coordinating adoption-related activities of the Federal Government.

Subsecs. (b), (c). Pub. L. 98-457, §105(c), redesignated subsec. (c) as (b) and struck out former subsec. (b) which required the Board to review the comprehensive plan submitted to it by the Center pursuant to section 5101(b)(7) of this title, make such changes as it deemed appropriate, and submit to the President and the Congress a final such plan not later than eighteen months after April 24, 1978.

1978—Subsec. (a). Pub. L. 95-266, §105(1), (2), inserted requirement for representation from the general public, and “planned,” before “administered” in two places.

Subsec. (b). Pub. L. 95-266, §105(3), substituted provisions relating to review of the plan by the Advisory Board and submission to the President and Congress of a final plan, for provisions relating to a report by the Advisory Board on assisted programs, etc., and submission to the President and Congress.

Subsec. (c). Pub. L. 95-266, §105(3), substituted provisions setting forth compensation and travel expense allowance authorizations for members of the Board, for provisions authorizing use of appropriated funds for required report.

CHILD ABUSE AND DISABILITY

Pub. L. 100-294, title I, §102, Apr. 25, 1988, 102 Stat. 118, directed Director of National Center on Child Abuse and Neglect to conduct a study of incidence of child abuse among children with handicaps, including children in out-of-home placements, the relationship between child abuse and children’s handicapping conditions, and incidence of children who have developed handicapping conditions as a result of child abuse or neglect, and not later than 2 years after Apr. 25, 1988, to report to appropriate committees of Congress with respect to the study, such report to include information and data gathered, an analysis of such information and data, and recommendations on how to prevent abuse of disabled children.

CHILD ABUSE AND ALCOHOLIC FAMILIES

Pub. L. 100-294, title I, §103, Apr. 25, 1988, 102 Stat. 118, directed Director of National Center on Child Abuse and Neglect to conduct a study of incidence of child abuse in alcoholic families and relationship between child abuse and familial alcoholism, and not later than 2 years after Apr. 25, 1988, to report to appropriate committees of Congress with respect to the study, such report to include information and data gathered, an analysis of such information and data, and recommendations on how to prevent child abuse in alcoholic families.

STUDY OF GUARDIAN-AD-LITEM

Pub. L. 100-294, title I, §104, Apr. 25, 1988, 102 Stat. 118, directed Director of National Center on Child Abuse and Neglect to conduct a study of how individual legal representation of children in cases of child abuse or neglect has been provided in each State, and effectiveness

of legal representation of children in cases of abuse or neglect through use of guardian-ad-litem and court appointed special advocates, and not later than 2 years after Apr. 25, 1988, to report to appropriate committees of Congress with respect to the study, such report to include information and data gathered, an analysis of such information and data, and recommendations on how to improve legal representation of children in cases of abuse or neglect.

HIGH RISK STUDY

Pub. L. 100-294, title I, §105, Apr. 25, 1988, 102 Stat. 118, directed the Director of National Center on Child Abuse and Neglect to conduct a study to identify groups which have been historically underserved or unserved by programs relating to child abuse and neglect, and to report incidence of child abuse and neglect among children who are members of such groups, and not later than 2 years after Apr. 25, 1988, to report to appropriate committees of Congress with respect to the study, such report to include information and data gathered, an analysis of such information and data, and recommendations on how to better meet needs of underserved or unserved groups.

§5106. Grants to States, Indian tribes or tribal organizations, and public or private agencies and organizations

(a) Grants for programs and projects

The Secretary may make grants to, and enter into contracts with, entities that are States, Indian tribes or tribal organizations, or public agencies or private agencies or organizations (or combinations of such entities) for programs and projects for the following purposes:

(1) Training programs

The Secretary may award grants to public or private organizations under this subsection—

(A) for the training of professional and paraprofessional personnel in the fields of health care, medicine, law enforcement, judiciary, social work and child protection, education, child care, and other relevant fields, or individuals such as court appointed special advocates (CASAs) and guardian ad litem, who are engaged in, or intend to work in, the field of prevention, identification, and treatment of child abuse and neglect, including the links between domestic violence and child abuse and neglect;

(B) to improve the recruitment, selection, and training of volunteers serving in public and private children, youth, and family service organizations in order to prevent child abuse and neglect;

(C) for the establishment of resource centers for the purpose of providing information and training to professionals working in the field of child abuse and neglect;

(D) for training to enhance linkages among child protective service agencies and health care agencies, entities providing physical and mental health services, community resources, and developmental disability agencies, to improve screening, forensic diagnosis, and health and developmental evaluations, and for partnerships between child protective service agencies and health care agencies that support the coordinated use of existing Federal, State, local, and private funding to meet the health evaluation needs of children who have been sub-

jects of substantiated cases of child abuse or neglect;

(E) for the training of personnel in best practices to meet the unique needs of children with disabilities, including promoting interagency collaboration;

(F) for the training of personnel in best practices to promote collaboration with the families from the initial time of contact during the investigation through treatment;

(G) for the training of personnel regarding the legal duties of such personnel and their responsibilities to protect the legal rights of children and families;

(H) for the training of personnel in childhood development including the unique needs of children under age 3;

(I) for improving the training of supervisory and nonsupervisory child welfare workers;

(J) for enabling State child welfare agencies to coordinate the provision of services with State and local health care agencies, alcohol and drug abuse prevention and treatment agencies, mental health agencies, other public and private welfare agencies, and agencies that provide early intervention services to promote child safety, permanence, and family stability;

(K) for cross training for child protective service workers in research-based strategies for recognizing situations of substance abuse, domestic violence, and neglect;

(L) for developing, implementing, or operating information and education programs or training programs designed to improve the provision of services to infants or toddlers with disabilities with life-threatening conditions for—

(i) professionals and paraprofessional personnel concerned with the welfare of infants or toddlers with disabilities with life-threatening conditions, including personnel employed in child protective services programs and health care facilities; and

(ii) the parents of such infants; and

(M) for the training of personnel in best practices relating to the provision of differential response.

(2) Triage procedures

The Secretary may award grants under this subsection to public and private agencies that demonstrate innovation in responding to reports of child abuse and neglect, including programs of collaborative partnerships between the State child protective services agency, community social service agencies and family support programs, law enforcement agencies, developmental disability agencies, substance abuse treatment entities, health care entities, domestic violence prevention entities, mental health service entities, schools, churches and synagogues, and other community agencies, to allow for the establishment of a triage system that—

(A) accepts, screens, and assesses reports received to determine which such reports require an intensive intervention and which require voluntary referral to another agency, program, or project;

(B) provides, either directly or through referral, a variety of community-linked services to assist families in preventing child abuse and neglect; and

(C) provides further investigation and intensive intervention when the child's safety is in jeopardy.

(3) Mutual support programs

The Secretary may award grants to private organizations to establish or maintain a national network of mutual support, leadership, and self-help programs as a means of strengthening families in partnership with their communities.

(4) Kinship care

The Secretary may award grants to public and private entities to assist such entities in developing or implementing procedures using adult relatives as the preferred placement for children removed from their home, where such relatives are determined to be capable of providing a safe nurturing environment for the child and where such relatives comply with the State child protection standards.

(5) Linkages among child protective service agencies and public health, mental health, substance abuse, developmental disabilities, and domestic violence service agencies

The Secretary may award grants to entities that provide linkages among State or local child protective service agencies and public health, mental health, substance abuse, developmental disabilities, and domestic violence service agencies, and entities that carry out community-based programs, for the purpose of establishing linkages that are designed to ensure that a greater number of substantiated victims of child maltreatment have their physical health, mental health, and developmental needs appropriately diagnosed and treated, in accordance with all applicable Federal and State privacy laws.

(6) Collaborations between child protective service entities and domestic violence service entities

The Secretary may award grants to public or private agencies and organizations under this section to develop or expand effective collaborations between child protective service entities and domestic violence service entities to improve collaborative investigation and intervention procedures, provision for the safety of the nonabusing parent involved and children, and provision of services to children exposed to domestic violence that also support the caregiving role of the non-abusing parent.

(b) Discretionary grants

In addition to grants or contracts made under subsection (a) of this section, grants or contracts under this section may be used for the following:

(1) Respite and crisis nursery programs provided by community-based organizations under the direction and supervision of hospitals.

(2) Respite and crisis nursery programs provided by community-based organizations.

(3) Programs based within children's hospitals or other pediatric and adolescent care facilities, that provide model approaches for improving medical diagnosis of child abuse and neglect and for health evaluations of children for whom a report of maltreatment has been substantiated.

(4)(A) Providing hospital-based information and referral services to—

- (i) parents of children with disabilities; and
- (ii) children who have been victims of child abuse or neglect and their parents.

(B) Except as provided in subparagraph (C)(iii), services provided under a grant received under this paragraph shall be provided at the hospital involved—

- (i) upon the birth or admission of a child with disabilities; and
- (ii) upon the treatment of a child for child abuse and neglect.

(C) Services, as determined as appropriate by the grantee, provided under a grant received under this paragraph shall be hospital-based and shall consist of—

- (i) the provision of notice to parents that information relating to community services is available;
- (ii) the provision of appropriate information to parents of a child with disabilities regarding resources in the community, particularly parent training resources, that will assist such parents in caring for their child;
- (iii) the provision of appropriate information to parents of a child who has been a victim of child abuse or neglect regarding resources in the community, particularly parent training resources, that will assist such parents in caring for their child and reduce the possibility of child abuse and neglect;
- (iv) the provision of appropriate follow-up services to parents of a child described in subparagraph (B) after the child has left the hospital; and
- (v) where necessary, assistance in coordination of community services available to parents of children described in subparagraph (B).

The grantee shall assure that parental involvement described in this subparagraph is voluntary.

(D) For purposes of this paragraph, a qualified grantee is an acute care hospital that—

- (i) is in a combination with—
 - (I) a health-care provider organization;
 - (II) a child welfare organization;
 - (III) a disability organization; and
 - (IV) a State child protection agency;
- (ii) submits an application for a grant under this paragraph that is approved by the Secretary;
- (iii) maintains an office in the hospital involved for purposes of providing services under such grant;
- (iv) provides assurances to the Secretary that in the conduct of the project the confidentiality of medical, social, and personal information concerning any person described in subparagraph (A) or (B) shall be main-

tained, and shall be disclosed only to qualified persons providing required services described in subparagraph (C) for purposes relating to conduct of the project; and

(v) assumes legal responsibility for carrying out the terms and conditions of the grant.

(E) In awarding grants under this paragraph, the Secretary shall—

- (i) give priority under this section for two grants under this paragraph, provided that one grant shall be made to provide services in an urban setting and one grant shall be made to provide services in rural setting; and
- (ii) encourage qualified grantees to combine the amounts received under the grant with other funds available to such grantees.

(5) Such other innovative programs and projects that show promise of preventing and treating cases of child abuse and neglect as the Secretary may approve.

(c) Evaluation

In making grants for projects under this section, the Secretary shall require all such projects to be evaluated for their effectiveness. Funding for such evaluations shall be provided either as a stated percentage of a demonstration grant or as a separate grant or contract entered into by the Secretary for the purpose of evaluating a particular demonstration project or group of projects. In the case of an evaluation performed by the recipient of a grant, the Secretary shall make available technical assistance for the evaluation, where needed, including the use of a rigorous application of scientific evaluation techniques.

(Pub. L. 93-247, title I, §105, formerly §7, Jan. 31, 1974, 88 Stat. 8; Pub. L. 98-457, title I, §106, Oct. 9, 1984, 98 Stat. 1751; Pub. L. 100-294, title I, §101, Apr. 25, 1988, 102 Stat. 108; renumbered title I, §106, Pub. L. 101-126, §3(a)(1), (2), Oct. 25, 1989, 103 Stat. 764; Pub. L. 102-295, title I, §§113, 141(1), (2), (5), May 28, 1992, 106 Stat. 191, 199, 200; renumbered §105 and amended Pub. L. 104-235, title I, §§106, 113(a)(1)(A), Oct. 3, 1996, 110 Stat. 3069, 3079; Pub. L. 108-36, title I, §113, June 25, 2003, 117 Stat. 805; Pub. L. 111-320, title I, §114, Dec. 20, 2010, 124 Stat. 3465.)

PRIOR PROVISIONS

A prior section 105 of Pub. L. 93-247 was renumbered section 104 and is classified to section 5105 of this title.

AMENDMENTS

2010—Pub. L. 111-320, §114(1), substituted "States, Indian tribes or tribal organizations," for "States" in section catchline.

Subsec. (a). Pub. L. 111-320, §114(2)(A), substituted "entities that are States, Indian tribes or tribal organizations, or" for "States," and "such entities" for "such agencies or organizations" in introductory provisions.

Subsec. (a)(1). Pub. L. 111-320, §114(2)(B)(i), substituted "this subsection" for "this section" in introductory provisions.

Subsec. (a)(1)(A). Pub. L. 111-320, §114(2)(B)(ii), inserted "health care," before "medicine," "child care," before "and other relevant fields," and "and neglect" before semicolon at end.

Subsec. (a)(1)(B). Pub. L. 111-320, §114(2)(B)(iii), inserted a comma after "youth".

Subsec. (a)(1)(D). Pub. L. 111-320, §114(2)(B)(iv), substituted “enhance linkages among” for “support the enhancement of linkages between”, “entities providing physical and mental health services, community resources, and developmental disability agencies, to improve screening, forensic diagnosis, and health and developmental evaluations, and for partnerships” for “including physical and mental health services, to improve forensic diagnosis and health evaluations and for innovative partnerships”, and “support the coordinated use of” for “offer creative approaches to using”.

Subsec. (a)(1)(E) to (M). Pub. L. 111-320, §114(2)(B)(v) to (xi), added subpars. (E), (H), and (M), redesignated former subpars. (E) to (J) as (F), (G), and (I) to (L), respectively, in subpar. (J), substituted “other public and private welfare agencies, and agencies that provide early intervention services” for “and other public and private welfare agencies”, and, in subpar. (L), substituted “infants or toddlers with disabilities” for “disabled infants” in two places.

Subsec. (a)(2)(C). Pub. L. 111-320, §114(2)(C), substituted “when” for “where”.

Subsec. (a)(3). Pub. L. 111-320, §114(2)(D), inserted “, leadership,” after “mutual support”.

Subsec. (a)(4). Pub. L. 111-320, §114(2)(E), (F), struck out subpar. (A) designation and heading “In general” and struck out “in not more than 10 States” after “public and private entities”.

Subsec. (a)(5). Pub. L. 111-320, §114(2)(G), in heading, substituted “among” for “between” and “substance abuse, developmental disabilities, and domestic violence service” for “and developmental disabilities” and, in text, substituted “among” for “between”, “mental health, substance abuse, developmental disabilities, and domestic violence service agencies, and entities that carry out community-based programs, for” for “mental health, and developmental disabilities agencies, for”, and “ensure” for “help assure”.

Subsec. (a)(6). Pub. L. 111-320, §114(2)(H), added par. (6).

Subsec. (b)(4)(A)(ii). Pub. L. 111-320, §114(3)(A), substituted “victims of child abuse or neglect” for “neglected or abused”.

Subsec. (b)(4)(B)(ii). Pub. L. 111-320, §114(3)(B), substituted “child abuse and neglect” for “abuse or neglect”.

Subsec. (b)(4)(C)(iii). Pub. L. 111-320, §114(3)(B), (C), substituted “has been a victim of child abuse or neglect” for “has been neglected or abused” and “possibility of child abuse and neglect” for “possibility of abuse or neglect”.

Subsec. (b)(4)(D). Pub. L. 111-320, §114(3)(D), substituted “grantee is an” for “grantee is a” in introductory provisions.

2003—Pub. L. 108-36, §113(d), substituted “Grants to States and public or private agencies and organizations” for “Grants to public agencies and nonprofit private organizations for demonstration programs and projects” as section catchline.

Subsec. (a). Pub. L. 108-36, §113(a)(2), in introductory provisions, inserted “States,” after “contracts with,” and struck out “nonprofit” after “private” and “time limited, demonstration” after “organizations for”.

Pub. L. 108-36, §113(a)(1), substituted “Grants for” for “Demonstration” in heading.

Subsec. (a)(1). Pub. L. 108-36, §113(a)(3)(A), struck out “nonprofit” after “public or private” in introductory provisions.

Subsec. (a)(1)(A). Pub. L. 108-36, §113(a)(3)(B), substituted “law enforcement, judiciary, social work and child protection, education, and other relevant fields, or individuals such as court appointed special advocates (CASAs) and guardian ad litem,” for “law, education, social work, and other relevant fields”.

Subsec. (a)(1)(B). Pub. L. 108-36, §113(a)(3)(C), substituted “children, youth and family service organizations in order to prevent child abuse and neglect;” for “nonprofit children, youth and family service organizations in order to prevent child abuse and neglect through collaborative analysis of current recruitment,

selection, and training programs and development of model programs for dissemination and replication nationally; and”.

Subsec. (a)(1)(D) to (J). Pub. L. 108-36, §113(a)(3)(D), (E), added subpars. (D) to (J).

Subsec. (a)(2). Pub. L. 108-36, §113(a)(5), added par. (2). Former par. (2) redesignated (3).

Subsec. (a)(3). Pub. L. 108-36, §113(a)(6), substituted “organizations” for “nonprofit organizations (such as Parents Anonymous)”.

Pub. L. 108-36, §113(a)(4), redesignated par. (2) as (3). Former par. (3) redesignated (4).

Subsec. (a)(4). Pub. L. 108-36, §113(a)(7), added par. heading and struck out former heading “Other innovative programs and projects”, redesignated subpar. (B) as (A), substituted “In general” for “Kinship care” in subpar. heading, and struck out “nonprofit” before “entities” and former subpars. (A) and (C), which related, respectively, to general issues of awarding grants and grants to promote safe, family-friendly physical environments for visitation and exchange.

Pub. L. 108-36, §113(a)(4), redesignated par. (3) as (4).

Subsec. (a)(5). Pub. L. 108-36, §113(a)(8), added par. (5).

Subsec. (b). Pub. L. 108-36, §113(b)(1), substituted “subsection (a)” for “subsection (b)” in introductory provisions.

Subsec. (b)(1) to (3). Pub. L. 108-36, §113(b)(2)–(4), added par. (3), redesignated former pars. (2) and (3) as (1) and (2), respectively, and struck out former par. (1) which read as follows: “Projects which provide educational identification, prevention, and treatment services in cooperation with preschool and elementary and secondary schools.”

Subsec. (b)(4)(D). Pub. L. 108-36, §113(b)(5), struck out “nonprofit” before “acute care hospital” in introductory provisions.

Subsec. (c). Pub. L. 108-36, §113(c), struck out “demonstration” before “projects” in first sentence, inserted “or contract” after “or as a separate grant” in second sentence, and inserted at end “In the case of an evaluation performed by the recipient of a grant, the Secretary shall make available technical assistance for the evaluation, where needed, including the use of a rigorous application of scientific evaluation techniques.”

1996—Pub. L. 104-235, §106(1), struck out “or service” after “demonstration” in section catchline.

Subsec. (a). Pub. L. 104-235, §106(2), amended heading and text of subsec. (a) generally. Prior to amendment, text consisted of pars. (1) and (2) which related to general authority of Secretary to make grants and enter into contracts for demonstration or service programs and projects and to evaluate the effectiveness of those demonstration projects.

Subsec. (b). Pub. L. 104-235, §106(3), (4), redesignated subsec. (c) as (b) and pars. (3) to (7) thereof as (1) to (5), respectively, struck out former pars. (1) and (2) which related to training programs and other innovative programs, respectively, and struck out heading and text of former subsec. (b). Text read as follows: “The Secretary shall, directly or through grants or contracts with public or private nonprofit organizations under this section, provide for the establishment of resource centers—

“(1) serving defined geographic areas;

“(2) staffed by multidisciplinary teams of personnel trained in the prevention, identification, and treatment of child abuse and neglect; and

“(3) providing advice and consultation to individuals, agencies, and organizations which request such services.”

Subsec. (c). Pub. L. 104-235, §106(6), added subsec. (c). Former subsec. (c) redesignated (b).

1992—Subsec. (a). Pub. L. 102-295, §113(a), designated existing provisions as par. (1), inserted heading, and added par. (2).

Subsec. (c)(1)(B). Pub. L. 102-295, §141(5), substituted “disabilities” for “handicaps”.

Pub. L. 102-295, §113(b)(1), inserted “culturally specific” before “instruction”.

Subsec. (c)(1)(C). Pub. L. 102-295, § 113(b)(2), added subpar. (C).

Subsec. (c)(6)(A)(i). Pub. L. 102-295, § 141(5), substituted "children with disabilities" for "children with handicaps".

Subsec. (c)(6)(B)(i). Pub. L. 102-295, § 141(1), substituted "child with disabilities" for "handicapped child".

Subsec. (c)(6)(C)(ii). Pub. L. 102-295, § 141(2), substituted "child with disabilities" for "child with handicaps".

1988—Pub. L. 100-294 amended section generally, substituting provision authorizing grants to public agencies and nonprofit private organizations for demonstration or service programs and projects for provision directing the Secretary to ensure coordination among Federal programs related to child abuse and neglect. See section 5106e of this title.

1984—Pub. L. 98-457 substituted "among programs" for "between programs".

§ 5106a. Grants to States for child abuse or neglect prevention and treatment programs

(a) Development and operation grants

The Secretary shall make grants to the States, from allotments made under subsection (f) for each State that applies for a grant under this section, for purposes of assisting the States in improving the child protective services system of each such State in—

(1) the intake, assessment, screening, and investigation of reports of child abuse or neglect;

(2)(A) creating and improving the use of multidisciplinary teams and interagency, intra-agency, interstate, and intrastate protocols to enhance investigations; and

(B) improving legal preparation and representation, including—

(i) procedures for appealing and responding to appeals of substantiated reports of child abuse or neglect; and

(ii) provisions for the appointment of an individual appointed to represent a child in judicial proceedings;

(3) case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families;

(4) enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols, including the use of differential response;

(5) developing and updating systems of technology that support the program and track reports of child abuse and neglect from intake through final disposition and allow interstate and intrastate information exchange;

(6) developing, strengthening, and facilitating training including—

(A) training regarding research-based strategies, including the use of differential response, to promote collaboration with the families;

(B) training regarding the legal duties of such individuals;

(C) personal safety training for case workers; and

(D) training in early childhood, child, and adolescent development;

(7) improving the skills, qualifications, and availability of individuals providing services

to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers;

(8) developing, facilitating the use of, and implementing research-based strategies and training protocols for individuals mandated to report child abuse and neglect;

(9) developing, implementing, or operating programs to assist in obtaining or coordinating necessary services for families of disabled infants with life-threatening conditions, including—

(A) existing social and health services;

(B) financial assistance;

(C) services necessary to facilitate adoptive placement of any such infants who have been relinquished for adoption; and

(D) the use of differential response in preventing child abuse and neglect;

(10) developing and delivering information to improve public education relating to the role and responsibilities of the child protection system and the nature and basis for reporting suspected incidents of child abuse and neglect, including the use of differential response;

(11) developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level;

(12) supporting and enhancing interagency collaboration between the child protection system and the juvenile justice system for improved delivery of services and treatment, including methods for continuity of treatment plan and services as children transition between systems;

(13) supporting and enhancing interagency collaboration among public health agencies, agencies in the child protective service system, and agencies carrying out private community-based programs—

(A) to provide child abuse and neglect prevention and treatment services (including linkages with education systems), and the use of differential response; and

(B) to address the health needs, including mental health needs, of children identified as victims of child abuse or neglect;¹ including supporting prompt, comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports; or

(14) developing and implementing procedures for collaboration among child protective services, domestic violence services, and other agencies in—

(A) investigations, interventions, and the delivery of services and treatment provided to children and families, including the use of differential response, where appropriate; and

(B) the provision of services that assist children exposed to domestic violence, and that also support the caregiving role of their nonabusing parents.

¹ So in original.