How CACs and Multidisciplinary Team Members Can Better Serve Children and Non-Offending Caretakers

A Research-to-Practice Summary

of


September 2010

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Article


Summary

The purpose of this article was to explore the results of an analysis of open ended responses by non-offending caregivers and youth victims about whether they found the sexual abuse investigation process better or worse than expected.

Subjects

A total of 203 caregiver interviews and 75 interviews with victims, ages 8-18 years old, who were a part of sexual abuse cases investigated through the Children’s Advocacy Center, which were conducted to analyze the responses to open-ended questions. It is important to note that this was part of a multi-site evaluation of Children’s Advocacy Centers.

Design

*Independent variables*

1. Caregiver and youth responses were presented in two tables
2. Identity of caregiver (sex, relationship to child)
3. Demographics of child (sex, age, and race)
4. Characteristics of the reported abuse (does or does not involve penetration)
5. Characteristics of alleged offender (relationship to victim, sex, and age)
6. Agency Involvement (CPS, Law Enforcement, and CAC)
7. Case outcomes (removal of child from home and charges filed)

Dependent variables

1. Investigation process – viewed as worse/better than expected overall
2. Level of satisfaction with investigators’ abilities
3. Level of support given by investigators

Confounding variable

1. Percentage of youth participants that responded to open-ended questions.

Findings

1. There was found to be an overall satisfaction with the efforts of investigators involved in the sexual abuse investigation process.
   a. Law enforcement involvement and criminal justice outcomes increased respondents’ satisfaction with the investigator.
   b. Specifically, investigators’ emotional supportiveness, kindness, and sensitivity towards the case were noted.
2. Investigation process
   a. Worse than expected
      i. The thoroughness of evidence collection, perceived failures by investigators to pursue justice fully, and problematic investigation procedures, such as perceived lack of commitment.
      ii. 55% of youth respondents viewed the investigators’ child interviewing skills as a place for improvement.
      iii. Timeliness of interviews in relation to the investigation should be closer to the incident.
   b. Better than expected
      i. The level of emotional support provided by investigators.
ii. Youth respondents praised the interviewers for their patience and helpfulness in allowing them to take their time responding and answering questions.

3. Level of satisfaction with investigators’ abilities
   a. Worse than expected
      i. Respondents felt as though there was a lack of communication about the case with the victim and caregiver. Caregivers expressed dissatisfaction about not knowing information about the case, missed and not returned phone calls, and being out of contact with the investigator for long periods of time (32%).
      ii. 20% of youth respondents saw a lack of commitment and skill from the investigators during their case.
   b. Better than expected
      i. 27% of caregiver respondents viewed the investigators’ ability of interviewing a child was a positive experience.
      ii. 20% of youth respondents felt the investigator was skilled and committed to their case.
      iii. The investigators’ supportiveness of the victim and helpfulness with the case and outcomes was better than expected for the youth respondents.

4. Level of support given by investigators
   a. Worse than expected
      i. Caregivers experienced a slow investigation process (18%).
      ii. 15% of youth respondents felt as though the investigator could have been more supportive throughout the investigation process.
   b. Better than expected
      i. 25% of caregiver respondents viewed the investigator as skilled and committed to their case.
      ii. Youth respondents praised the investigators’ emotional supportiveness during the interviewing process (20%).
Recommendations:

1. Research has shown that quantitative satisfaction scales usual result in higher rates by participants when compared to open-ended questions which result in more dissatisfied responses.
   • It is recommended to use both units of measurements to ensure a full range of understanding from the respondent.
   • Youth respondents seemed to have focused more on the investigation when answering open-ended questions.
   • Caregivers tended to focus more on the actual outcome given by investigators about the case.

2. It is suggested that, “investigators or support staff, such as victim advocates, can also do a better job of explaining to caregivers the limits that investigators face in prosecuting offenders.”
   • This would help caregivers better understand the process and better evaluate their experiences.

3. A lack of communication between the client and the investigator has been found to cause concerns by the client about the dedication of the investigator to their case.
   • It is recommended that “regularly timed verbal or written updates” be given to the client by a responsible party involved in the case to reassure the client of progress within the case.

4. This study has found that the overall emotion status and “next-step reforms on the concerns of the non-offending caregivers” is the most influential factor when evaluating the victim’s well-being and emotional status.
   • It is recommended that the child abuse professionals take a more direct approach to addressing the needs of the non-offending caregiver and evaluating their emotional status in relation to the case is crucial for the child’s well-being.
Research-to-practice

This article discusses children’s and caretaker’s perceptions of their experiences interacting with investigators and staff from four CACs across the country once suspected child abuse had come to the attention of child protective workers or law enforcement. While the majority of participating children and caretakers felt the experience was more positive than expected, their feedback did indicate behaviors that CACs and multidisciplinary team members should more closely scrutinize in regards to the impact of their interactions with children and families. The study illustrates that efforts intended to improve child abuse investigations should routinely incorporate information gleaned from feedback from children and caretakers.

Caretakers expressed disappointment with case outcomes and felt they were not adequately informed as to the progress of the investigation. Caretakers did not understand that team members are often constrained by high case loads and other responsibilities. When calls were not returned or contact provided on a routine basis, caretakers often believed that the investigators did not care about the outcome or did not believe the child. Providing information about the investigation and prosecution is crucial. Planning discussions between team members prior to the interview should cover possible outcomes and consider implications for the child and family. Research has shown that children and their caretakers are often unsupported following the interview and this can be a source of great stress. Early consideration by the multidisciplinary team may alleviate some of the child’s and caretaker’s anxieties. Planning should anticipate various outcomes, and the team should prepare explanations for the child and their caretakers.

In order to alleviate these concerns, the victim advocate should be an integral part of the multidisciplinary team process from the beginning of an investigation and through judicial proceedings. When identified as the contact person for the caretaker(s), the victim advocate can respond to additional queries, concerns, and a wish to “just talk.” If not able to provide specific information or answer questions, the victim advocate can assist the parent in gaining that information. If a case proceeds past an investigation, support will also be necessary through the court process and its aftermath. A victim advocate is a person that could insure that comprehensive and coordinated education and support services are provided to the family.
In addition to providing crisis intervention to the caretaker and child, the client advocate should assist in scheduling a mental health evaluation. Assisting with scheduling provides a continuity of service to families undergoing a major crisis.

In the study, children were more likely to focus on the experience of the forensic interview. There was both praise and criticism in regards to the interviewer’s skill. Almost a quarter of the children reported feeling worse after talking with the investigators, and more than a third felt they had to explain what happened too many times. One child said “Instead of starting with what happened, they could ask how I was and talk and ask about my life first.” One of the goals of rapport building in a forensic interview is to demonstrate a sincere interest in the child’s day-to-day activities. Rapport is the opportunity for relationships to be established, trust and mutual understanding developed, and the aims and conventions of the interview explained. Though the interviewer may have conducted hundreds or thousands of interviews, this interview may be the one opportunity for a child to speak with a professional concerning their uniquely personal experience. Initial discussions should focus on events and interests not thematically related to the investigation. The child should be given every opportunity to become comfortable with the interviewer and the interview process before moving into a discussion regarding the alleged abuse.

The victim advocate serves as an integral part of the multidisciplinary team. Ensuring non-offending caretakers are regularly informed throughout investigative and judicial proceedings may facilitate better cooperation and ultimately, better support the child.