Value and Impact of the MDT/CAC Model: Are We Making a Difference?

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Child Abuse in a Global Context
United Nation’s Convention on the Rights of the Child

- Article 3
  - In all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the **best interests of the child shall be a primary consideration**.

- Article 19
  - States Parties shall **take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of maltreatment or exploitation** while in the care of parents, legal guardians or other careers.
  - Such protective measures should, as appropriate, include effective procedures for the **establishment of social programs to provide necessary support for the child** and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment.
Child Abuse in a Global Context
United Nation’s Convention on the Rights of the Child

• Article 34
  ➢ States Parties undertake to **protect the child from all forms of sexual exploitation and sexual abuse**. For these purposes, States Parties shall in particular take all appropriate national, bilateral and multilateral measures to prevent:
    • The inducement or coercion of a child to engage in any unlawful sexual activity;
    • The exploitative use of children in prostitution or other unlawful sexual practices;
    • The exploitative use of children in pornographic performances and materials.

• Article 39
  ➢ States Parties shall take all appropriate measures to **promote physical and psychological recovery and social reintegration of a child victim of: any form of neglect, exploitation, or abuse; torture or any other form of cruel, inhuman or degrading treatment or punishment; or armed conflicts. Such recovery and reintegration shall take place in an environment which fosters the health, self-respect and dignity of the child.**
Why is this work so important?
Adverse Childhood Experiences Study

• 14-year-old study involves 17,337 adults who became members of Kaiser Permanente, a health care maintenance organization in San Diego, between 1995 and 1997.

• After visiting a primary care facility, they voluntarily filled out a standard medical questionnaire that included questions about their childhood.

• The questionnaire asked them about 10 types of child trauma:
  ➢ Three types of abuse (sexual, physical and emotional).
  ➢ Two types of neglect (physical and emotional).
  ➢ Five types of family dysfunction (having a mother who was treated violently, a household member who’s an alcoholic or drug user, who’s been imprisoned, or diagnosed with mental illness, or parents who are separated or divorced).
<table>
<thead>
<tr>
<th>ACE Category*</th>
<th>Women (N = 9,367)</th>
<th>Men (N = 7,970)</th>
<th>Total (N = 17,337)</th>
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<tbody>
<tr>
<td><strong>Abuse</strong></td>
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<td>Emotional Abuse</td>
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<td>7.6</td>
<td>10.6</td>
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<tr>
<td>Physical Abuse</td>
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<td>28.3</td>
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<td>Sexual Abuse</td>
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<td>Physical Neglect</td>
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<td><strong>Household Dysfunction</strong></td>
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<td>Mother Treated Violently</td>
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<td>Household Mental Illness</td>
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<td>Parental Separation or Divorce</td>
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<td>21.8</td>
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<td>Incarcerated Household Member</td>
<td>5.2</td>
<td>4.1</td>
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<tr>
<td>Number of Adverse Childhood Experiences (ACE Score)</td>
<td>Women</td>
<td>Men</td>
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<td>4 or more</td>
<td>15.2</td>
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<td>12.5</td>
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Adverse Childhood Experiences Study

- More than 50 research papers published since 1998
- **Adverse childhood experiences are common** – 64% of the study participants had experienced one or more categories of adverse childhood experiences.
- **Strong link between adverse childhood experiences and adult onset of chronic illness** - those with ACE scores of 4 or more had significantly higher rates of heart disease and diabetes than those with ACE scores of zero.
  - chronic pulmonary lung disease increased 390%
  - hepatitis increased 240%
  - depression increased 460%
  - suicide increased 1,220%
Adverse Childhood Experiences Study

- **Multiple ACEs connected to early death** - people with six or more ACEs died nearly 20 years earlier on average than those without ACEs
  - 60.6 years vs. 79.1 years

- **Child maltreatment has long-term impacts** - those who had experienced child maltreatment were more likely to engage in risky health-related behaviors during childhood and adolescence:
  - early initiation of smoking
  - sexual activity
  - illicit drug use
  - adolescent pregnancies
  - suicide attempts
National Healthcare

What are some issues which increase our healthcare costs? Why should child abuse be important to everyone?
Cost of healthcare for abuse survivors

• Participants - 3,333 women who received insurance from the Group Health Cooperative for at least 12 of the 41 calendar quarters in the study’s time frame.

• 34% reported a history of childhood abuse:
  ➢ Physical Abuse only – 6.5%
  ➢ Sexual Abuse only – 20.1%
  ➢ Physical and Sexual Abuse – 7.2%
Cost of healthcare for abuse survivors

• **Total annual health care costs were higher** for all groups of women who experienced some form of child abuse:
  - Both physical and sexual abuse – **36%**
  - Sexual abuse only – **16%**
  - Physical abuse only – **22%**

Impact of Child Abuse on Medicaid $

• Children with abuse histories had significantly higher healthcare expenses – $2,635 per year.
  - Significantly higher healthcare costs for:
    • Psychiatric care
    • Inpatient hospital
    • Outpatient – physician and clinic
    • Prescription drugs
    • Targeted case management

• Estimated cost related to child maltreatment - $5.9 billion (9% of all Medicaid expenses)

Economic Impact

Can child abuse and neglect affect our long-term economic stability?
Economic Impact

• The purpose of this study was to determine whether child abuse and neglect affects long-term economic productivity of those directly affected.
  - Part of the only long-term prospective cohort research study with a matched comparison group
  - Prior published research has focused on mental health and behavioral outcomes.

• The data were collected from 1967-2005 in one Midwestern metropolitan county.
  - All child abuse and neglect cases included involved children under the age of 11 and were substantiated in court proceedings.
Economic Impact

• Individuals with a history of child maltreatment:
  ➢ were significantly less likely to own a bank account, stock, a vehicle, or a home;
  ➢ earned almost $8,000 less per year than non-abused subjects.

• Women abused in childhood appear to have greater long-term economic impacts than men who were abused in childhood

Economic Burden of Child Maltreatment

- The estimated average lifetime cost per victim of nonfatal child maltreatment is $210,012 in 2010 USD:
  - $32,648 in childhood health care costs
  - $10,530 in adult medical costs
  - $144,360 in productivity losses
  - $7,728 in child welfare costs
  - $6,747 in criminal justice costs
  - $7,999 in special education costs.

- If there are 1,000,000 confirmed cases of child abuse each year (minimum), this means each year we accumulate $210,012,000,000 of future costs!

- What would that mean if we prevented even 1%?
Economic Burden of Child Maltreatment

• The estimated average lifetime cost per death is $1,272,900:
  ➢ $14,100 in medical costs
  ➢ $1,258,800 in productivity losses

• Total lifetime economic burden from both in 2008:
  ➢ Approximately $124 billion – possibly as large as $585 billion

Challenges of Investigating CSA

- No test to identify offenders
- No symptom presentation which specifically proves CSA
- Rarely any proof that a crime was committed
- Rarely any eyewitnesses
- INTERNAL - Shame and fear commonly seen in those affected
- EXTERNAL - Social stigma/repression of open dialogue
The OLD Way
The Agency Centered Approach

What do I need from this kid and family for my case/agency?
Original CAC/MDT Philosophy

1. The “system” intended to protect children should “help” children, not further traumatize or cause lack of trust

2. The protection of children must involve all agencies involved in the investigation and intervention, and these agencies must work together

Bud Cramer
A community approach to child sexual abuse: The role of the office of the district attorney

Although child sexual abuse is not a new problem, its magnitude as well as its complex character in relation to the criminal justice system has only recently come to the attention of prosecutors. It is a problem that requires a change in the way the criminal justice system responds and in the way it interacts with other systems.

Dealing with child sexual abuse cases has been frustrating for most prosecutors' offices because the traditional criminal justice system and other agencies that respond to child sexual abuse are not equipped for the child victim. However, if our society is ever going to convey the clear message that the sexual abuse of children is not an acceptable behavior, then we must redesign the systems responsible for helping and protecting child victims so that the children indeed do benefit and offenders are held accountable.
The NEW Way
The Child/Family Centered Approach

A collaborative model with a defined mission and unique culture comprised of individuals from diverse agencies

Mission is the “BOSS”
All MDT members are stewards of the mission
The Little House
CACs in the USA
## International CACs in Operation

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### Countries working to develop CACs

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<td>St. Lucia</td>
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<td>Hong Kong, China</td>
<td>Trinidad and Tobago</td>
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<td>India</td>
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<td>Malaysia</td>
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Is the CAC/MDT model a Best Practice?

Does using the CAC really help?
Evaluating Children’s Advocacy Centers’ Response to Child Sexual Abuse

Theodore P. Cross, Lisa M. Jones, Wendy A. Walsh, Monique Simone, David J. Kolko, Joyce Szczepanski, Tonya Lippert, Karen Davison, Arthur Cryns, Polly Sosnowski, Amy Shadoin, and Suzanne Magnuson

Children’s Advocacy Centers (CACs) play an increasingly significant role in the response to child sexual abuse and other child maltreatment in the United States. First developed in the 1980s, CACs were designed to reduce the stress on child abuse victims and families created by traditional child abuse investigation and prosecution procedures and to improve the effectiveness of the response.
Coordinated Response

• CAC communities demonstrated:
  ➢ significantly higher rates of coordinated investigations between law enforcement and CPS
  ➢ Team forensic interviews
  ➢ Case Review
  ➢ Recording of forensic interview
  ➢ Interviews in child-friendly settings

Client Satisfaction

• Caregivers whose children were seen at the CAC:
  ➢ **Higher** rates of satisfaction than caregivers whose children were seen at the comparison sites
  ➢ **Significantly more satisfied** with the interview experience than caregivers from the comparison samples

• Children who were seen at the CAC:
  ➢ **Significantly more described themselves as being “not at all” or “not very” scared** versus kids from the comparison communities

Healing
95% of caregivers agree that CACs provide them with resources to support their children.

Justice
98% of team members believe clients benefit from the collaborative approach of the MDT.

Trust
If caregivers knew anyone else who was dealing with a situation like the one their family faced, 97% would tell that person about the center.
Access to Medical Care

- Children served at CAC were much more likely to receive forensic medical exam:
  - No penetration in abuse disclosure - 4 times more likely
  - Penetration in abuse disclosure - 1.5 times more likely

Case Processing Time

• Charging decision in child sexual abuse cases:
  ➢ Cases seen at the CAC had a significantly faster charging decision:
    • CAC – 80% within 1-60 days
    • Comparison A – 49% within 1-60 days
    • Comparison B – 58% within 1-60 days

Impact on Prosecution Rates

• Significant use of the CAC approach for all cases:
  ➢ **Dramatic increase in number of felony prosecutions**
    of child sexual abuse
    • District 1 –196% increase
    • District 2 - 1% decrease
  ➢ Despite increased prosecutions, the *conviction rate*
    *did not change* significantly between the districts over
    this time period.

advocacy centers to felony prosecutions of child sexual
NCAC Therapy Impacts (2012-present) Pre vs. Post-Treatment Scores

- **UCLA Post Traumatic Stress Disorder Index**
  - Pre-Treatment: 65.8
  - Post-Treatment: 54.7

- **Child Behavior Checklist - Parent**
  - Pre-Treatment: 62.5
  - Post-Treatment: 54.4

- **Child Behavior Checklist - Youth Self-Report**
  - Pre-Treatment: 20.4
  - Post-Treatment: 11.2
Cost-Benefit Analysis

• Traditional investigations were 36% more expensive than CAC investigations. The average per-case cost:
  - CAC investigation - $2,902
  - Non-CAC investigation - $3,949

Decline of Child Sexual Abuse in the USA

• Are we making progress?
  ➢ Are 1 in 4 girls and 1 in 7 boys still accurate?
  ➢ Where did we get these numbers?
  ➢ Why do we believe these?

• What does the more recent research say?
  ➢ Why should we believe it?
  ➢ What is it based upon?
Decline of Child Sexual Abuse in USA

• Four studies with qualifying criteria:
  – Data collected after 2000
  – Did not use adult self-report
  – Sufficiently defined CSA through the questions asked of participants
  – Included 1,000 or more individuals
  – Involved citizens of the USA

**These studies are not based on self-reports to official authorities**
Decline of Child Sexual Abuse in USA

• Approximately a 50% reduction of child sexual abuse over the past 20 years!


Decline of Child Sexual Abuse in USA

- Approximately a 50% reduction of child sexual abuse over the past 20 years!


When you stop here, you are really loved.
When you stop here, you are not afraid.
When you stop here, you have hope.
When you stop here, you have faith.
Chris Newlin, MS LPC
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