

LESS IS MORE

Your first response

Purpose of Less is More



Training is intended for Mandated Reporters



These situations are not as simple as “disclosure then make a call”

- What do you do when you have a gut feeling
- When you overhear something
- When there is not a full disclosure



Why your response is so important



What do you actually need for a report



What happens after you make the call



In some cases, why does nothing happen after making a call



TRAUMA

- **Overwhelms** the individual's ability to use normal coping mechanisms to adapt to a situation.

and

- **Disrupts** an individual's frame of reference (beliefs about themselves and the world).

Sexual Abuse: How Victims Feel

FEAR

- Of or FOR Abuser
- Losing family
- Foster Care
- Being different
- Of gossip
- Getting in trouble/punished

ANGER

- At abuser
- At adults who did not protect / believe
- At adults for punishing
- At selves

ISOLATION

- Alone
- Something taken
- Can't talk about it
- Betrayal
- Self-blame

GUILT / SHAME

- For telling
- For keeping a secret
- About body's response
- For not stopping it
- Feelings for abuser
- Perceived fault
- Self-blame

Sexual Abuse / Trauma : How Victims Respond

Attachment/ Stability (RAD)	Trouble concentrating	Anger & Aggression	Self-harm: Cutting Suicidal comments
Reactive sexualized behaviors	Substance abuse	Promiscuity / lack of boundaries	Lack of emotional regulation
Secretive	Withdrawn	ADHD PTSD Disassociation	Depression Anxiety
Absenteeism	Change in academic performance	Hyperarousal	Emotional Numbing

How we respond can make this better or worse.

Sexual Trauma Victimology

- No two victims are the same
- No normal or acceptable response
- Response impacted by development and cultural factors
- Complex pre-existing relationship with offender
- Not necessarily angry with the offender
- Disassociation can cause gaps in time, lapses in or loss of memories.
Can look like daydreaming or spacing out

Scope of the Problem



73%

Won't
disclose for
at least a
year

20%

Children
abused before
the age of 8

1 in 10

children will be a
victim of sexual
abuse by their 18th
birthday

90%

child sexual
abuse victims
know their
abuser

1 / 3rd

sexually
abused by
other
children

4–8%

Fabricated
Reports

In an “ideal” situation

- A child makes a disclosure directly to you, stating what happened, where, when, and with whom
- You make the report, which gets accepted by the state
- Case gets investigated, and perpetrator goes to jail

But we know, this rarely happens



In Most Cases:

A child may
disclose
limited
information

A child is
displaying
red flags

You overhear,
or see
something

Non-purposeful disclosure

In Most Cases:

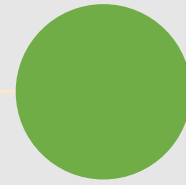
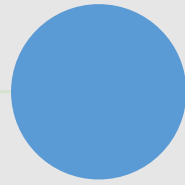
Non-purposeful Disclosure (75%)

- ✓ Disguised/Indirect/Testing Observations by 3rd party
- ✓ Physical injury
- ✓ STDs / pregnancy
- ✓ Age inappropriate behavior
- ✓ Child tells a 3rd party who then discloses
- ✓ Parent reports suspicions
- ✓ Drawings / Journals / Play Mimicking

Purposeful Disclosure (25%)

- ✓ Escape family pressure
- ✓ Fear of pregnancy
- ✓ Concerns for younger siblings
- ✓ Have less loyalty to offender (extra familial)
- ✓ No more ongoing contact with offender
- ✓ Concerns of safety / violence

If you have a concern



If you do not have all of the information, do not question the child

Call the hotline to see if you have enough information

Reach out to your local CAC to talk with an advocate, LE, or CPS about what to do

If someone else brought the concern to you, and you have all the information necessary - make the call

If the report does not get accepted, you can ask for an explanation

Sometimes there may be a law enforcement referral

How Mandated Reporters Can Respond

Tell me what happened.

Then what happened?

Do you know where this happened?

Can you tell me who?

Is there anything else you think I should know that will keep you safe?

Here's how you can be helpful in helping with a potential investigation...

- If you have the necessary information, just make the call
- If you have a concern but do not have enough information, do not question the child. Instead, call your local CAC to see if they can point you in the right direction about next steps to take.
- If a child makes a disclosure to you, make the call.
- Providing support to the child during and after they have made their disclosure.
- If a report does not get accepted you have the right to ask why. If you are not satisfied with an outcome, ask to speak with a supervisor to understand why something did not go a certain way.

What do you need to make a report?

Reasonable Cause to Suspect

Reasonable cause to suspect means that, based on rational observations, professional training and experience, you suspect a parent, guardian or other person 18 years or older who is responsible for the care of a child is harming or placing a child in danger of harm

YOU DO NOT NEED PROOF

Institutional/agency policies *do not* take precedence over mandated reporting laws

**Mandated Reporters Hotline for child abuse
and maltreatment reports:**

1-(800)635-1522

IF THE CHILD IS IN IMMINENT DANGER CALL 911

CPS 101

CPS or LER Case?

PLR: If the suspected abuser of a “child” is 18 years and OLDER and has regular and consistent contact with that child. ie: parents, babysitters, day care or adults living in the home.

What is needed to make a report?

Reasonable Cause to Suspect

When should a report be made?

Immediately

KEY Statement “I suspect ____ child has been physically or sexually abused because.....”



We have to remember

**It is not our job as mandated reporters to question a child when there is a concern of sexual exploitation.
We must leave that to the professionals at the child advocacy center.**

Child sex abuse cases are difficult to investigate because:

- Limited corroborating evidence
- Relationship to the alleged offender
- Developmental and cognitive level impact the disclosure
- Victim may not recognize victimization as abuse
- Impact of trauma on the child's memory, their willingness to tell and their ability to tell

The least amount of discussion with the alleged child abuse victim is critical.

Disclosures

- Talking about sexual abuse is not “natural”
- A child’s first disclosure may have lasting effects
- A child is more likely to “shut down” if s/he senses you are uncomfortable
- You do not need all the details to be supportive
- The more people in the room, the less the child will tell
- Do not sit in on an interview unless student indicates they want you there.
- Can and will compromise / change support role
- Can be subpoenaed – contact with child restricted
- Liability implications
- The more people the child must tell the higher likelihood child will recant or shut down

If a child
discloses
to you

DO:

Remain calm

LISTEN more than you talk

Let them know you are proud of them for reporting; they are not alone; believed

Reflect back what you hear

Ask open-ended questions: "tell me more;" "is there anything else you think I should know?"

Talk about next steps; Is there anything I can do to make you feel safer? How can I best support you?

ABOVE ALL:

Respect confidentiality

Focus on their needs not yours

If a child
discloses
to you

**DO
NOT:**

Make a child re-tell statement to multiple adults /
allow multiple adults to interview or talk to the child.

Make promises you can't keep: "Everything will be
ok;" "I wont report/tell anyone"

Investigate, ask a lot of questions or suggest
answers (reasonable suspicion ALL you need)

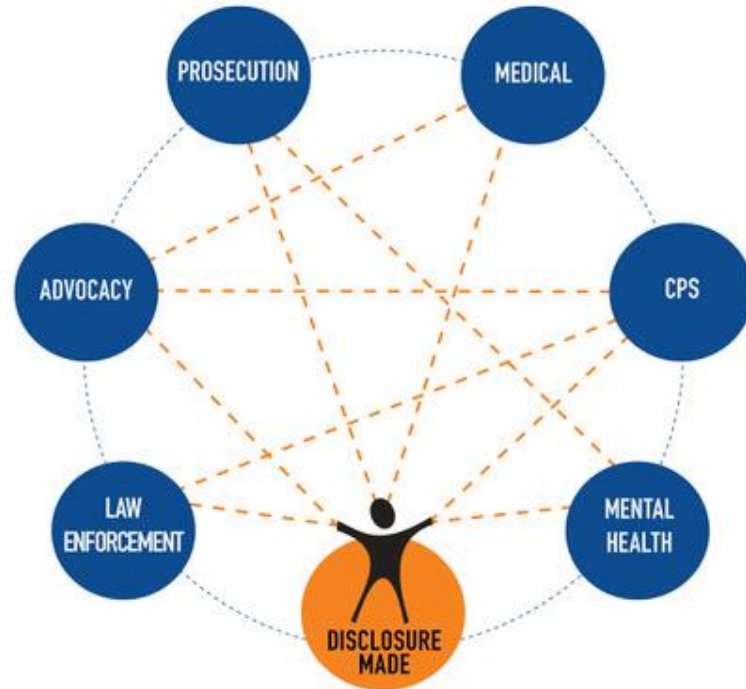
Sterilize the disclosure in report

Ask WHY questions such as "why did this happen";
why didn't you tell, why are you acting this way?

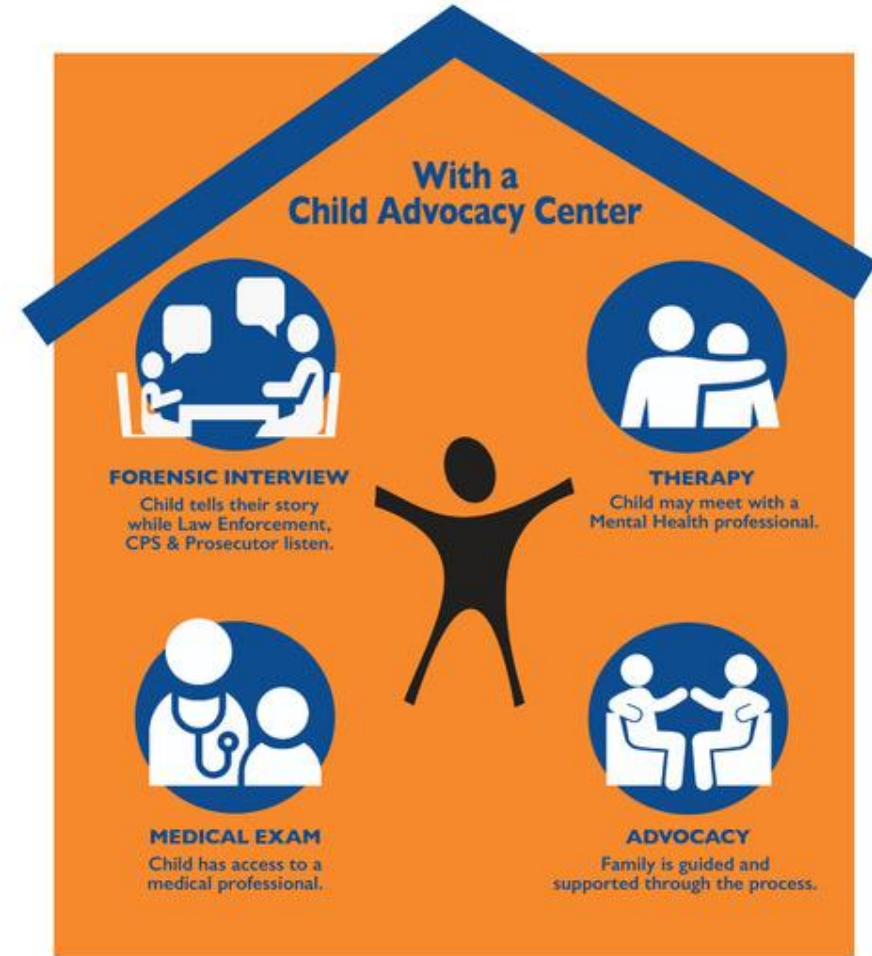
Re-question child after report made/investigation
ensues. SUPPORT ROLE

Tell the child how to feel

Without a Child Advocacy Center



With a Child Advocacy Center



At the Child Advocacy Center

A child may receive

An interview by a
trained forensic
interviewer

Support from a
family advocate

A medical exam

Referrals for
services, such as
mental health

Support through
criminal justice
system

All of these services are
provided in a child friendly
environment at no cost to
the family

Waiting Room



The Forensic Interview

A forensic interview is a structured conversation with a child intended to elicit detailed information about a possible event(s) that the child may have experienced or witnessed.

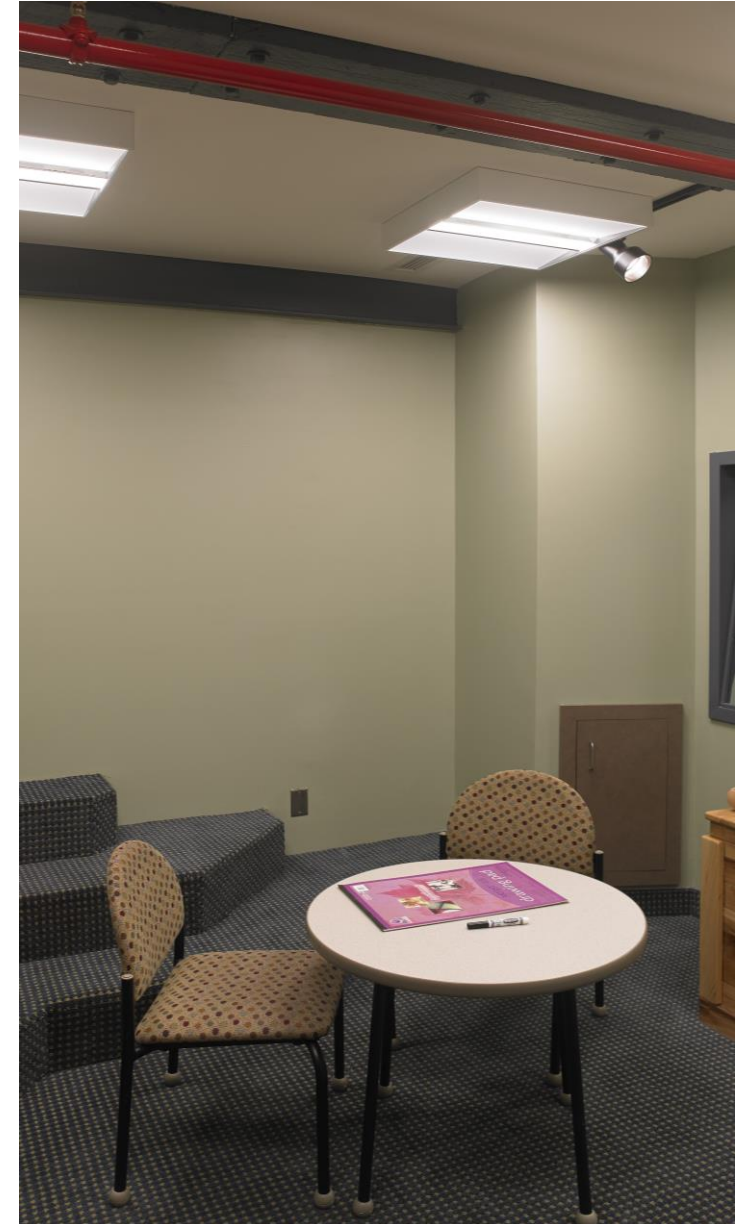
The purposes of a forensic interview are:

- ✓ Assess Safety of the child.
- ✓ Obtain information for a criminal investigation.
- ✓ Obtain information that can corroborate or refute allegations.



- ✓ To be conducted MINIMAL # of times
- ✓ To be conducted by trained professionals
- ✓ Are trauma-informed and developmentally appropriate

Forensic Interview Rooms



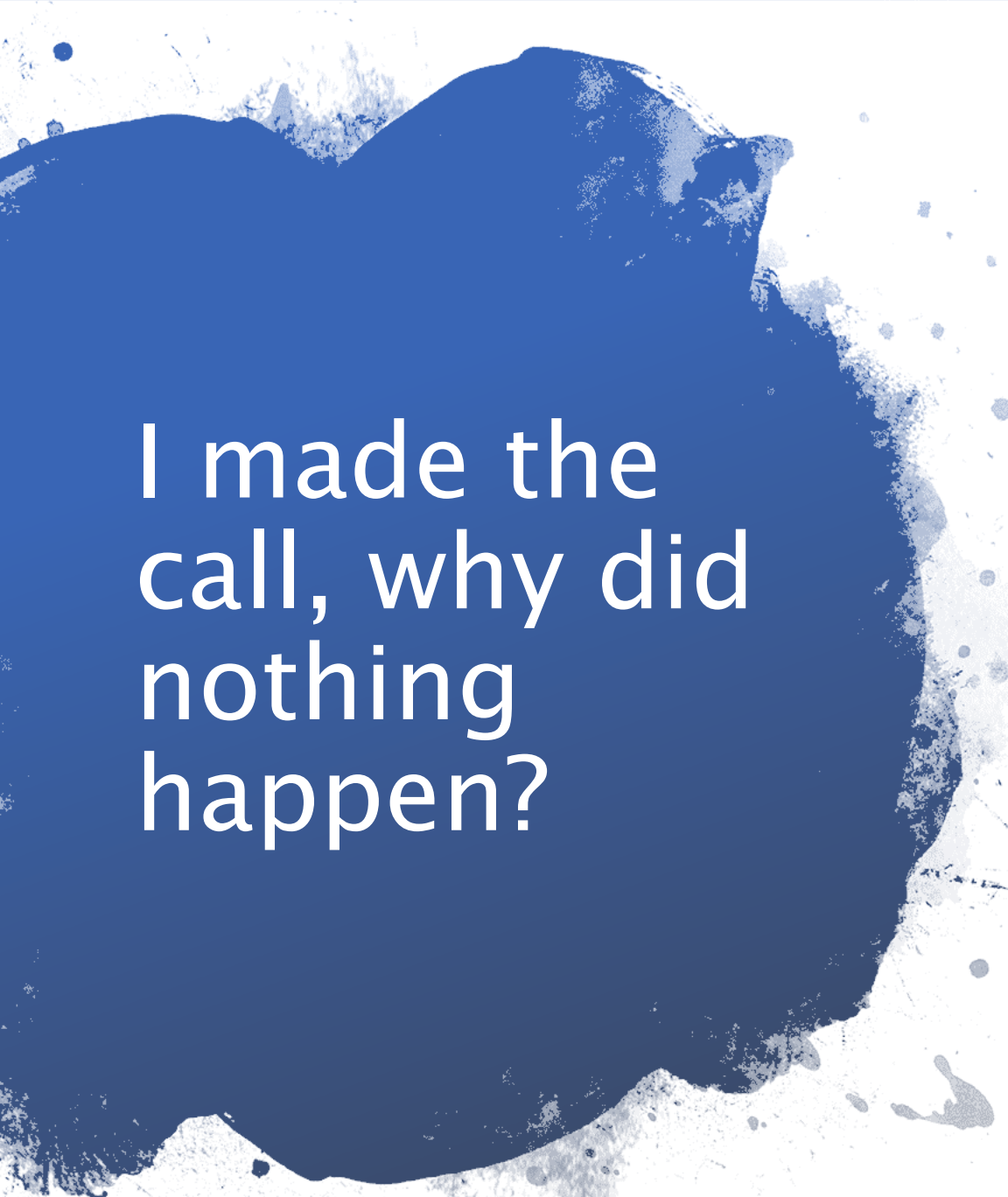
Medical Suite



How Mandated Reporters can successfully impact an investigation



- When you have a concern, but unsure if you have enough information, call your local Child Advocacy Center to see what to do next
- Offering support to the child and letting them know that you are proud of them, and that they are brave for sharing may help them to feel more confident to speak with an investigator
- If you have a concern, but a report was not accepted or investigated, follow up. Ask why it did not move forward.
- If you have the necessary information, make the call to the hotline



I made the
call, why did
nothing
happen?

- A child may not have been ready to share their story with a professional
- There may not be enough evidence to move forward
- Sometimes there may even be evidence but a child is still not ready to share their story
- Even if the case does not move forward with law enforcement or CPS, services can still be provided

If you have a concern, continue reporting

How can I support a student?

Maintain usual routine/"normalcy" (sense of safety)

Give choices when appropriate (helps w/loss of control over life)

Designate a support adult

Validate feelings, even when they erupt via behaviors

Safe zone to talk about anxiety, triggers, etc.

Be sensitive to triggers in environment – disruptive behavior often trauma related

Protect child's confidentiality – especially from peers

Some cope through negative interactions with others or through negative repetition of the trauma

Academic modifications– 504

**What's HAPPENED
to you
vs
What's WRONG
with you?**



Bivona

CHILD ADVOCACY CENTER

trust. healing. justice.™

935-7800