

Difficult Economic Times Prove Value of Multidisciplinary Approaches to Resolve Child Abuse

BY ROBERT H. GILES

[C]hildren present us with a uniquely compelling motivation for mobilization. Our collective failure to protect children must be transformed into an opportunity to confront the problems that cause their suffering.

—*Graça Machel*¹

CRIMES AGAINST CHILDREN rise during difficult economic times. The current recession is impacting that reality. This assault on our most vulnerable citizens occurs at a time when the criminal justice system is trimming resources, which makes it imperative to utilize proven multidisciplinary approaches to resolve child abuse cases. In the United States, almost one million children were victims of child abuse or neglect in 2006.² Because of the current economic climate the number of child abuse victims can be expected to rise. Child abuse tears at the fabric of our country and exacts a fierce psychological toll on the victims, their families, and our communities.

Anecdotal evidence and media stories indicate this is the worst recession for America in 50 years; thus the threat to children grows as the economy has worsened.³ The potential for staff reductions at police departments and prosecuting offices occurs when children are more at risk than ever. Recent media reports show that the recession may be causing an alarming rise in instances of child abuse.⁴ The Child Protection team at Boston's Children's Hospital saw an

increase of suspected severe child physical abuses cases in the last year.⁵ According to Reuters and CBS, Phoenix, Arizona, has seen a 40 percent rise in child abuse cases from 2008 to 2009, while other cities like Boston, Seattle, Las Vegas, Chicago, and Beaufort, South Carolina, have seen substantial increases in the number and severity of physical child abuse cases.⁶ Illinois reported a 5.8 percent rise in child abuse cases.⁷ Additionally, the cost of child abuse continues to place an extraordinary strain on the economy of the United States. In 2007, Prevent Child Abuse America conservatively estimated that child abuse and neglect has an estimated annual cost of approximately \$103.8 billion.⁸ When financial resources become scarce, the temptation is to cut back on programs, such as special investigation, protection and prosecution units. Unfortunately, these cuts will increase the likelihood that child abuse investigations will return to the dark days of uncoordinated and duplicative investigations—investigations that will result in increased trauma to the children, inconsistent statements, and difficulties in prosecuting cases.

Difficult economic times demand that police, prosecutors, and child abuse prevention professionals increase their



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efforts to stop child abuse through proven, effective, and cost-effective methods. A weak economy gnaws at the criminal justice system's ability to protect children; budget restrictions in many governments are forcing cuts to police departments, prosecutors, and child protective service workers.⁹ Multidisciplinary child abuse investigation teams ("MDTs") in association with child advocacy centers ("CACs") show the greatest potential for cost-efficient and effective prosecution.

HISTORY OF MDTs AND CACs

MDTs are powerful, efficient, and cost-effective. An MDT is minimally comprised of law enforcement, prosecution, and child protective services workers. This composition allows members to utilize the combined talents and resources of organizations tasked to make the investigation of abuse allegations, prosecution of child abusers, and protection of abused children more efficient and less stressful for the victims' families. MDTs, however, should not be limited to law enforcement and child protections workers but should also include a wide range of professionals who are responsible for protecting children from abuse. Mental health providers, medical professionals, school workers, guardians ad litem, and state licensing professionals, to name a few, have an equally important place at the MDT table.¹⁰

MDTs prove effective because they allow team members to collaborate during child abuse investigations, thereby preventing duplication and fostering a sense of teamwork that benefits both the investigation and the child. According to a study by James Kolbo and Edith Strong on multidisciplinary approaches to investigating child abuse, an effective MDT allows "a broader range of viewpoints on problems [to be] considered in the decision-making process, more decisions are made jointly, otherwise unknown resources are identified and, ultimately, better assessments, treatment plans and services are provided."¹¹ In the end, at the very least, the collaborative process spares child abuse victims and their families the trauma of multiple interviews and investigations.

MDTs formed for the investigation of suspected child abuse first appeared in the United States in the mid-1950s.¹² By the late 1990s, more than 1,000 teams across the country worked together to protect children from abuse.¹³ According to the study by Kolbo and Strong, a majority of states utilize a statewide participation model that ensures "each [abused] child is afforded the benefit of a multidisciplinary approach to addressing . . . abuse and neglect, with-

out regard to where the child lives or where the alleged maltreatment occurred."¹⁴

In conjunction with MDTs, child advocacy centers ("CACs") began to emerge in the mid-1980s. MDT members often gather at their local CACs to correlate their investigations in a manner that "improve[s] child abuse investigations and reduce stress on children and families."¹⁵ The National Children's Advocacy Center in Huntsville, Alabama, established the first CAC. The growth of similar centers has exploded, rising from 22 centers in 1992 to more than over 650 in 2007.¹⁶ CACs can be found in urban, suburban, and rural areas of every state.

New York City established an Instant Response Team in 1998 to better coordinate how police, prosecutors, and child protective service workers respond to cases of child abuse and neglect.¹⁷ This system resulted in a dramatic reduction in the response time to severe case of child maltreatment. According to a study published in 2004 by the Vera Institute of Justice, in 1998 child abuse prevention professionals took more than two hours to respond to a report of severe child abuse in 26 percent of cases.¹⁸ By 2008, only eight percent of cases waited for more than two hours for the team to respond.¹⁹ The improvement in response time demonstrates how the cooperation of agencies tasked with protecting children can improve their reaction to child abuse through coordination and cooperation.

Some communities are taking the MDT/CAC model a step further by incorporating child abuse services and investigations and focusing those resources on the whole family. The Family Justice Center Alliance accredits organizations that provide services to victims of a wide range of family violence: domestic partner violence, child abuse, and computer-facilitated crimes against children, etc. Family justice centers recognize the well-established connection between domestic partner violence and child abuse.²⁰

One example is in Harford County, Maryland. The Harford Family Justice Center houses, within one building, office space for local law enforcement, prosecuting attorneys who handle domestic violence and child abuse cases, children's protective service workers, forensic interviewers, and even the Federal Bureau of Investigation. While at the Harford Family Justice Center, a family victimized by domestic violence will be provided with a range of services. This partnership enables child abuse prevention professionals in that county to coordinate closely and monitor their investigations. The process improves the services to the community and creates stronger cases for the judicial system, while reducing stress and trauma on families during

the investigative process.

HOW MDT/CACs MAKE JUSTICE FOR ABUSED CHILDREN MORE EFFECTIVE AND EFFICIENT

MDTs are effective because they marshal the limited resources toward the common goal of child protection. According to Tanya Beran's article on evaluating multidisciplinary child abuse training, "[a]n effective multidisciplinary team has a shared purpose, clear goals, standards for performance [and has] a collaborative climate, external support and recognition and fair and impartial leaders."²¹ Such collaboration is improved when CACs are the facilitators, members of the MDT are cross-trained, MDT members are housed in the same location, and when a well-trained child interview team is a part of the investigation.²² This cooperation prevents economically wasteful duplication of investigation efforts.

Recent studies have shown that the use of MDTs and CACs produce an effective child abuse prosecution that reduces the trauma to child victims and their families. These studies demonstrate that collaborative efforts at child protection and prosecution produce positive results: timelier charging of suspects, more effective involvement of law enforcement and child protective services, greater vitality in child protective proceedings and child abuse prosecutions, reduced stress on victims and families, and an increased likelihood of longer sentences for those convicted of abusing children.

The MDT/CAC model strengthens cases as they pro-

ceed through the criminal justice system. Cross, et. al. found that the Dallas MDT/CAC was able to obtain convictions "more often at trial than in the comparison communities" that did not coordinate their efforts in the same manner.²³ The comparison community that did not use a MDT/CAC model had to rely on pleas or plea bargaining at a greater percentage.²⁴ This suggests that when cases are charged following a coordinated MDT/CAC investigation, the coordinated MDT investigation presented a stronger case enabling prosecutors to avoid accepting plea bargains. This finding is bolstered by the fact that those convicted of child sexual abuse crimes following a MDT investigation are incarcerated for substantially longer periods of time—an average of 331 months for the MDT/CAC communities as opposed to an average of 157 months for the non MDT/CAC communities.²⁵

In addition to strengthening investigations and prosecutions, communities using the MDT/CAC approach to child abuse investigations also find that victim families forced to endure an investigation are far more satisfied with their treatment during the process. A recent study found that caregivers were significantly more satisfied with the investigation and interview process in MDT/CAC communities when compared to non-MDT/CAC communities.²⁶ "Seventy percent of caregivers in CAC communities reported high levels of satisfaction versus 54 percent of the caregivers from comparison communities."²⁷ The level of satisfaction with the interview process is even greater for the MDT/CAC communities where 83 percent report high satisfaction.²⁸ In addition to increased levels of satisfaction by caregivers, CAC communities are positioned to

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support child victims with mental health services at a higher rate. MDT/CAC communities referred abuse victims for mental health services at a rate of 72 percent as compared with a referral rate of 31 percent for the comparison communities.²⁹ In addition to increased level of satisfaction by non-offending caregivers, MDT/CAC communities have the ability to reduce the trauma to families by facilitating the speed at which crimes against children are charged. According to Walsh, et. al., “[c]ases that were seen at the [MDT/]CAC had a significantly quicker charging time than cases at . . . the comparison [non MDT/]CAC communities.”³⁰

It is the responsibility of those charged with protecting children and prosecuting those who harm them to muster our resources to provide the most effective means of responding to instances of child abuse. Through the cooperative utilization of MDTs and CACs, law enforcement, prosecutors, and child abuse prevention professionals can successfully and efficiently protect children from abuse.

¹ Graça Machel is the chancellor of the University of Cape Town; has spent much of her life working with child victims of armed conflict and is the wife of Nelson Mandela. This quote comes from her report at the International Conference on War-Affected Children, Winnipeg, Canada, September 2000.

² *Long-term Consequences of Child Abuse and Neglect*, CHILD WELFARE INFORMATION GATEWAY (2008).

³ Floyd Norris, *It's Official: Worst Recession in Five Decades*, N.Y.TIMES, May 21, 2009.

⁴ Jason Szep, *Child Abuse Spikes as U.S. Economy Founders*, REUTERS NEWS SERVICE, available at <http://www.reuters.com/article/domesticNews/idUSTRE53F00Y20090416>.

⁵ *Id.*

⁶ *Id.*; see also, *Recession Puts Children in Harm's Way*, CBS NEWS, available at <http://www.cbsnews.com/stories/2009/06/20/business/childrenofrecession/main5029133.shtm>; see also Timothy Pratt, *Child Abuse Escalates with Money Woes*, LAS VEGAS SUN, June 26, 2009.

⁷ *Child Abuse Spikes as U.S. Economy Founders*.

⁸ Wang CT, Holton J, *Total Estimated Cost of Child Abuse and Neglect in the United States*, Prevent Child Abuse America, Economic Impact Study, at 2 (September 2007).

⁹ George Houde and Brian Cox, *Police Feel the Sting of Recession: Departments Pare Programs, Purchases to Keep Cops on the Street*, CHICAGO TRIBUNE, April 22, 2009; Sherryl M. Peters, *Citing Concerns, Mayor says Town May Close its Police Department*, THE TIMES & DEMOCRAT, December 6, 2009; Molly McDonough, *Ky. Prosecutors Warns of Layoffs, Cases Being Dropped*, ABA JOURNAL, December 4, 2008.

¹⁰ Wendy Walsh, Lisa Jones & Theodore Cross, *Children's Advocacy Centers: One Philosophy, Many Models*, ASPSAC Advisor Summer 2003 at 7.

¹¹ Jerome Kolbo & Edith Strong, *Multidisciplinary Team Approaches to the Investigation and Resolution of Child Abuse and Neglect: A National Survey*, 2 Child Maltreatment 1 at 61 (1997).

¹² *Id.* at 67.

¹³ *Id.* at 61.

¹⁴ *Id.* at 64.

¹⁵ Walsh et al at 3.

¹⁶ Lisa Jones, Theodore Cross, Wendy Walsh & Monique Simone, *Do Children's Advocacy Centers Improve Families' Experiences of Child Sexual Abuse Investigations?* Child Abuse & Neglect 31, at page 1070.

¹⁷ Timothy Ross, Francesca Levy & Robert Hope, *Improving Responses to Allegations of Severe Child Abuse: Results from the Instant Response Program*, Vera Institute of Justice, August 2004, at page 1.

¹⁸ *Id.* at 13.

¹⁹ *Id.*

²⁰ See Office of Juvenile Justice and Delinquency Prevention, *Safe from the Start: Taking Action on Children Exposed to Violence*, November 2000.

²¹ Tanya Beran, *Evaluating Multidisciplinary Child Abuse Training: A Comprehensive Program and Questionnaire*, IPT JOURNAL VOLUME 15 (2005).

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²⁴ *Id.*

²⁵ *Id.*

²⁶ Jones L, Cross T, Walsh W & Simon M, *Do Children's Advocacy Centers Improve Families' Experiences of Child Sexual Abuse Investigations?*, 31 CHILD ABUSE & NEGLECT 1069, 1079 (2007).

²⁷ *Id.* Cross, et. al., at 6.

²⁸ *Id.*

²⁹ *Id.*, at 5.

³⁰ Walsh W, Lippert T, Cross T, Maurice D, & Davison K, *How Long to Prosecute Child Sexual Abuse for A Community Using a Children's Advocacy Center and Two Comparison Communities?*, 13 CHILD MALTREATMENT 3, 8 (2008).

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