

# Virginia State Crime Commission

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## Child Sexual Abuse

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2013

# Child Sexual Abuse

## Executive Summary

House Joint Resolution 595 was introduced by Delegate Manoli Loupassi during the 2013 Session of the General Assembly. The resolution incorporated Delegate David Albo's House Joint Resolution 730. Consequently, the resolution had two distinct parts, dealing with different subjects that were combined into one study resolution during the legislative process. The second part of the resolution specifically directed the Crime Commission to review:

...(v) laws, regulations, policies, and training practices of the Commonwealth and its agencies governing reporting, investigation, and tracking of complaints of suspected child abuse, including suspected sexual abuse of a child and including such laws, regulations, policies, and training practices of or governing the Department of Social Services, local departments of social services, law enforcement agencies, schools, and child welfare agencies; (vi) variations or discrepancies in how the various agencies receive, investigate, and track alleged cases of child sexual abuse, particularly those variations or discrepancies that may create opportunities for individuals who are alleged to have committed child sexual abuse and who are the subjects of investigations to destroy evidence, intimidate victims, or otherwise interfere with the conduct of such investigation; (vii) recommendations for legislative, regulatory, and budgetary changes to reduce or eliminate variations or discrepancies in how the various agencies receive, investigate, and track alleged cases of child sexual abuse in order to increase the quality and effectiveness of child protective services, investigations of alleged child sexual abuse, and prosecutions of individuals alleged to have committed child sexual abuse in the Commonwealth.

In order to address this part of the study mandate, Crime Commission staff examined relevant literature, statutes, and regulations, convened two Work Group meetings, collected available data from relevant agencies, and disseminated surveys to local departments of social services, law enforcement agencies, criminal justice training academy directors, and Commonwealth's Attorneys. In addition, staff attended multiple meetings, trainings and conferences, and met with various individuals and representatives from several organizations and state agencies.

Child sexual abuse is a serious problem that can affect any community. Victims of child sexual abuse can experience many negative short- and long-term consequences. Similar to all sexual offenses, child sexual abuse is a highly underreported crime, making accurate incidence and prevalence rates difficult to estimate. Similarly, attrition rates tend to be high for cases that are reported.

The Virginia Department of Social Services (VDSS) provides oversight to 120 local departments, which operate autonomously. Within each local department, the child protective services (CPS) unit handles reports of child neglect and abuse that involve a caretaker. If a case is accepted by the local department, the case can either receive a family assessment or an investigation. Cases involving

sexual abuse must receive an investigation, and cannot be handled through a family assessment. If a case is investigated, the burden of proof for a case to be considered founded is preponderance of the evidence. If the evidence does not meet this burden of proof, the case is considered unfounded. Retention times vary for founded, unfounded, and family assessment cases.

By statute, local departments are required to report all cases of child sexual abuse immediately to law enforcement and the Commonwealth's Attorney. The timeframe and burden of proof for investigations is very different for CPS and law enforcement. These differences can lead to investigatory concerns for both groups. Also, caseload levels are very high for both local departments and law enforcement. Staff turnover is a concern for both. Based on survey results, it appears that the vast majority of law enforcement and local DSS have a "very good" to "excellent" working relationship.

While basic law enforcement training appears to be adequate, it does appear that in-service/specialized training could be offered more frequently. On-line training in particular was highly desired. It was noted that there is currently no requirement for newly assigned detectives to complete any type of certification or specialized training. Findings also indicated that the mandated VDSS training for newly hired CPS workers needs to be made more available across the state, as well as specialized or continuing education for existing local DSS staff.

Teachers are required to complete mandatory training on child abuse and neglect as part of their licensure. School divisions are required to have a Memorandum of Understanding (MOU) with their local DSS concerning the investigation of child sexual abuse cases; however, it appears that compliance with this requirement is problematic. An additional concern is that the MOU is only required to address reports made *against* school personnel.

Child advocacy centers (CAC) have been shown to provide numerous positive outcomes in child sexual abuse cases by coordinating the investigation and promoting a child-focused environment. There are currently 16 CACs in Virginia. Local DSS reported that forensic interviews are being provided in most child sexual abuse cases, but there is a need to train additional personnel to increase availability in localities. The multi-disciplinary team (MDT) is the foundation of the CAC model. The need to implement MDTs, at a minimum, across the state was strongly encouraged by the Work Group, survey respondents, and others during the course of the study.

The Crime Commission reviewed study findings at its November and December meetings and directed staff to draft legislation for several key issues. As a result of the study effort, the Crime Commission endorsed the following legislative recommendations at its December meeting:

**Recommendation 1:** Statutorily require the creation, maintenance, and coordination of a multi-disciplinary response to child sexual abuse under proposed new statute, Va. Code § 15.2-1627.5.

**Recommendation 2:** Amend Va. Code § 63.2-1505(B)(5) to extend the requirement for a CPS investigation to be completed from 45 days to 90 days, whenever a joint investigation is being conducted between law enforcement and local DSS, for child sexual abuse investigations.

**Recommendation 3:** Amend Va. Code § 63.2-1514 to extend the length of time unfounded records are maintained from 1 year to 3 years.

**Recommendation 4:** Amend Va. Code § 63.2-1511(D) to extend the scope of MOUs between school divisions and local DSS to include all types of child sexual abuse reports involving a student.

**Recommendation 5:** Amend Va. Code § 63.2-1503 to require a form be completed and signed by both agencies whenever a local DSS reports an incident of suspected child sexual abuse to local law enforcement. It would also require that any local DSS report the receipt of a complaint within *2 hours* to the attorney for the Commonwealth and the local law enforcement agency.

**Recommendation 6:** Amend Va. Code § 63.2-1505 to require that no new local DSS staff member may make any dispositional decisions in a case that involves an allegation of child sexual abuse, until they have received the required training.

## Background

During the 2013 Regular Session of the Virginia General Assembly, Delegate Manoli Loupassi introduced House Joint Resolution 595 (HJR 595), which was amended to incorporate Delegate David Albo's HJR 730.<sup>1</sup> The resolution directed the Crime Commission to study and report on two distinct issues. The first issue dealt with legal, consensual sexual activity between students over the age of eighteen and school personnel. The second issue of the resolution dealt with child sexual abuse investigations, which is the focus of this report. Specific attention was placed on the laws, regulations, policies and training practices of the Commonwealth and its agencies governing the receipt, reporting, investigation, and tracking of complaints of alleged child sexual abuse, as well as examining any variations or discrepancies in such cases.

This part of the resolution specifically directed the Crime Commission to review:

...(v) laws, regulations, policies, and training practices of the Commonwealth and its agencies governing reporting, investigation, and tracking of complaints of suspected child abuse, including suspected sexual abuse of a child and including such laws, regulations, policies, and training practices of or governing the Department of Social Services, local departments of social services, law enforcement agencies, schools, and child welfare agencies;

(vi) variations or discrepancies in how the various agencies receive, investigate, and track alleged cases of child sexual abuse, particularly those variations or discrepancies that may create opportunities for individuals who are alleged to have committed child sexual abuse and who are the subjects of investigations to destroy evidence, intimidate victims, or otherwise interfere with the conduct of such investigation;

(vii) recommendations for legislative, regulatory, and budgetary changes to reduce or eliminate variations or discrepancies in how the various agencies receive, investigate, and track alleged cases of child sexual abuse in order to increase the quality and effectiveness of child protective services, investigations of alleged child sexual abuse, and prosecutions of individuals alleged to have committed child sexual abuse in the Commonwealth.<sup>2</sup>

## General Literature Review

There are approximately 74.8 million children in the United States.<sup>3</sup> An estimated 3.7 million referrals of children being abused or neglected were received by state and local CPS in 2011.<sup>4</sup> Of this number, it is estimated that there were 681,000 unique child victims of child abuse and neglect:

- 79% involved neglect;
- 18% involved physical abuse;
- 9% involved sexual abuse; and,
- 10% involved other types of maltreatment including threatened abuse, parental drug/alcohol abuse, or lack of supervision.<sup>5</sup>

There are approximately 1.84 million children in Virginia.<sup>6</sup> An estimated 87,300 referrals of children being abused or neglected were received by local CPS departments in Fiscal Year 2013 (FY13). Of this number, it is estimated that 8,612 referrals were determined to be founded:

- 56% involved physical neglect;
- 26% involved physical abuse;
- 12% involved sexual abuse;
- 2% involved mental abuse;
- 2% involved medical neglect; and,
- 1% involved substance exposed infants.<sup>7</sup>

### *Overview of Child Sexual Abuse Trends*

Before discussing the overall trends related to child sexual abuse, it must be emphasized that the discussion within this report is only a summary of the overall trends and patterns of the phenomena rather than an exhaustive discussion. A plethora of research on this topic and collateral subject matter exists. This report can be seen as a starting point to guide the reader in the direction of additional literature that may be of interest.

Child sexual abuse can be defined in many ways. In fact, it is arguably very difficult to find a single, working definition of child sexual abuse.<sup>8</sup> Some definitions are very broad while others are very narrow in scope. Further, it is important to note that there is no one single profile of someone who sexually abuses a child. Offenders can represent every age, socioeconomic status, race, ethnicity, education level, and religion.<sup>9</sup> Likewise, there is not one single profile of a victim.<sup>10</sup> For example, Putnam states “...sexually abused children constitute a very heterogeneous group with many degrees of abuse about whom few simple generalizations hold.”<sup>11</sup>

However, there are some general trends that can be observed. First, in the majority of cases, the offender is known by the victim or the victim’s family.<sup>12</sup> Second, females are more likely than males to experience child sexual abuse.<sup>13</sup> Third, most perpetrators are male.<sup>14</sup> Fourth, juveniles comprise approximately one-third of known perpetrators.<sup>15</sup> Fifth, children with disabilities are at a higher risk of victimization.<sup>16</sup> Some research has noted that children with disabilities are up to at least three times more likely than children without disabilities to be victims of sexual abuse.<sup>17</sup> Finally, victims who are exposed to other forms of abuse, neglect, instability, or conflict in their household are at a higher risk.<sup>18</sup>

More recent research has begun to examine the potential cross-over between internet child pornography and contact sex offenses. The results appear to be mixed, with some research supporting a correlation and others not finding support for the relationship.<sup>19</sup> Additional empirical research with improved methodologies and larger sample sizes is needed to explore this relationship further.

Research has consistently documented the potential short- and long-term physical and mental effects of childhood sexual abuse, including but not limited to: depression, anxiety, anger, fear, sleeping difficulties, STIs, pregnancy, sexualized behaviors, PTSD, poor self-esteem, sexuality issues, self-destructive behaviors, substance abuse, suicidal behavior, and eating disorders.<sup>20</sup> However, it is important to note that children's resiliency levels vary considerably.<sup>21</sup> Some children are well-adjusted due to strong protective factors while others adjust poorly.

Research has found a wide range of variance in disclosure and recantation rates.<sup>22</sup> Failure to disclose is common. If disclosed, it is very common for the disclosure to be delayed and for the disclosure to have a large impact on the victim and those surrounding him or her.<sup>23</sup> Disclosure is more of a process rather than an event. The level of support a child receives from caretakers is crucial to many potential outcomes, including levels of psychological distress, stress, trauma, as well as adjustment, treatment, and assistance in any related criminal investigation.<sup>24</sup> Recantation, when one discloses then retracts statements, may also occur in the disclosure process. This is especially seen when there is a lack of support from the non-offending parent or guardian, or other family members.<sup>25</sup> Lack of maternal support, in particular, has been shown to lead to higher recantation rates.<sup>26</sup> It is important that assistance and support be provided to caregivers as soon as possible as well.

### ***Prosecution and Convictions***

Child sexual abuse, similar to all types of sexually-based offenses, is a highly underreported crime.<sup>27</sup> As such, accurate incidence and prevalence rates are difficult to estimate.<sup>28</sup> There are many factors related to the prosecution of child sexual abuse cases.<sup>29</sup> The incidents that are reported tend to be very complicated, with little evidence, where the child's testimony oftentimes is the only piece of evidence. Even when evidence does exist, the decision to prosecute can still be difficult or controversial. For instance, some prosecutors may decline to prosecute due to insufficient evidence, a recantation, or because the low probability of obtaining a conviction does not justify subjecting the victim and their families to the stresses of prosecution and possibly a trial. As a consequence of these and many other factors, the attrition rate of child sexual abuse cases tends to be high.<sup>30</sup>

Staff requested the total number of circuit court charges and convictions for child sexual abuse-related offenses from the Virginia Criminal Sentencing Commission (VCSC) for FY10-FY13.<sup>31</sup> Figure 1 illustrates the total number of charges and convictions for each offense grouping:

**Figure 1: Circuit Court Charges and Convictions, FY10-FY13\***

Type of Offense	FY10		FY11		FY12		FY13**	
	Charges	Convictions	Charges	Convictions	Charges	Convictions	Charges	Convictions
Forcible Rape	159	74	171	68	162	54	204	66
Forcible Sodomy	313	117	282	110	284	69	238	90
Object Sexual Penetration	183	56	181	73	139	33	127	28
Aggravated Sexual Battery	855	409	646	315	771	299	723	302
Indecent Liberties	904	501	810	404	759	355	811	339
Carnal Knowledge	306	203	322	217	367	241	322	217
Obscenity	2,499 <sup>†</sup>	866	1,959	1,165	3,848 <sup>†</sup>	2,953 <sup>††</sup>	2,916	1,434

Source: Supreme Court of Virginia, Circuit Court Management System; \* FY in which the charge was concluded. \*\* Data do not include charges that were still pending at the end of FY13. <sup>†</sup> One individual was charged with over 800 counts of obscenity in FY10 and two individuals were charged with over 900 counts of obscenity in FY12. <sup>††</sup> Two individuals were convicted of more than 900 counts of obscenity in FY12. Data does not include cases from Fairfax, Va. Beach, or Alexandria. Prince William joined the system in FY09.

As can be seen in the chart, in general, attrition rates are very high. Nearly all offense groupings have less than a 50% conviction rate, with the exception of carnal knowledge and obscenity-related charges, which appear to be slightly higher.

**Child Sexual Abuse Work Group**

The resolution also mandated that Crime Commission staff convene a work group to discuss the topic of child sexual abuse investigations. Representatives from the following agencies participated:

- Rural and urban local department of social services child protective services unit;
- Rural and urban law enforcement agency;
- Rural and urban prosecutor;
- Rural and urban city/county attorney;
- Virginia Department of Social Services, Division of Family Services;
- Virginia Department of Criminal Justice Services;
- Office of the Attorney General;
- Nationally accredited child advocacy center;
- Victim’s rights organizations;
- Virginia Department of Education;
- Virginia Association of School Superintendents;
- Pediatric emergency room physician; and,
- Member of the public.

The Work Group met on June 20, 2013, and July 23, 2013, to discuss the issues delineated in the second part of HJR 595. Both meetings were particularly beneficial in helping staff understand the overall nature, process, and difficulties surrounding child sexual abuse investigations.

## Virginia Department of Social Services and Local Departments

### *Overview*

The Virginia Department of Social Services (VDSS) is a state supervised and locally administered social services system. It provides oversight and guidance to 120 local departments, which operate autonomously. It is a decentralized system where the local departments are independent in how they carry out the policies and procedures set by VDSS. Child Protective Services (CPS) is one of the many division programs that fall under VDSS. The goal of CPS is to “identify, assess, and provide services to children and families in an effort to protect children, preserve families, whenever possible, and prevent further maltreatment.”<sup>32</sup>

The 120 local departments are responsible for receiving reports of abuse and neglect that involve a caretaker, conducting investigations to determine the validity of CPS reports, and providing services that enhance child safety and prevent further abuse and neglect to families and children.<sup>33</sup> A caretaker is defined as any individual having the responsibility of providing care for a child, to include the following:

- Parent or other person legally responsible for the child’s care;
- Any other person who has assumed caretaking responsibility by virtue of an agreement with the legally responsible person;
- Persons responsible by virtue of their positions of conferred authority; and,
- Adult persons residing in the home with the child.<sup>34</sup>

Thus, the definition is broader than implied in that it includes not only parents and guardians, but also teachers, coaches, babysitters, child care facilities, clergy, and others who have a caretaker role. It does not include, for example, a complete stranger, Internet-based facilitation, or a neighbor with no authority from a parent or guardian to care for the child.

Under Va. Code § 63.2-100, a sexually abused child is *one* type of “abused or neglected child.” Specifically, it includes any child under 18 whose parent, or any other person responsible for the care of the child, does any or all of the following: commits or allows to be committed any illegal sexual act upon a child including incest, rape, fondling, indecent exposure, prostitution; or, allows a child to be used in any sexually explicit visual material.

### *Referral Process*

In general, local departments either receive referrals directly or through the VDSS Child Abuse and Neglect Hotline. A referral is defined as any report of suspected child abuse or neglect made to the local department or the VDSS Child Abuse and Neglect Hotline.<sup>35</sup> A referral is also called a complaint.

Referrals can come from a variety of sources, with most coming from schools and law enforcement, as shown in Figure 2 below:



**Figure 2: Source of Referrals, FY12**

Source of Referral	Number of Referrals	Percentage of Referrals
Schools (public and private), school staff, teachers	14,918	20%
Law enforcement	11,412	16%
Parent	7,110	10%
Counselor/therapist	5,422	7%
Relative	4,965	7%
DSS, social services, social workers	4,555	6%
Hospital, clinic, medical personnel	4,499	6%
Court probation	1,141	2%
Neighbor	1,065	1%
Mental Health	1,021	1%
Other/Unknown	17,218	23%
<b>TOTAL</b>	<b>73,326</b>	<b>100%</b>

Source: Va. Department of Social Services, Annual Report- Referral Reporter Source, Va. OASIS data.

A referral is accepted, or considered to be valid, if it meets the following four criteria:

- The victim is less than 18 years of age at the time of the report;
- The alleged abuser is the child's parent or other caretaker;
- The local department receiving the report has jurisdiction; and,
- The circumstances reported described alleged suspected child abuse or neglect.<sup>36</sup>

There are two different responses that can stem from a referral that has been accepted: a family assessment or an investigation. Family assessments are conducted when there is no statutory requirement to conduct an investigation and/or when there is no immediate concern for child safety.<sup>37</sup> For example, these types of cases could involve inadequate parenting or life management issues rather than dangerous practices or actions. There is no disposition made in a family assessment.

Unlike a family assessment, investigations are undertaken when there is an immediate concern for child safety or when required by Va. Code § 63.2-1506(c)(i), such as reports involving sexual abuse, a child fatality or cases involving non-familial caretakers. An investigation is also required upon the third valid CPS report in 12 months. The main point is that all accepted child sexual abuse cases should receive an investigation rather than a family assessment.

Virginia Code § 63.2-1505(B)(5) requires a CPS investigation to be completed within 45 days from the date of the report, with a possible extension to 60 days. In certain sexual abuse investigations or child fatalities, this timeframe may be suspended pending receipt of necessary reports. Unlike family assessments, investigations can have one of two dispositions: founded or unfounded. The burden of proof in CPS investigations is preponderance of the evidence. A founded disposition means that a review of the facts shows by a preponderance of the evidence that child abuse or neglect has occurred.<sup>38</sup> The level of severity for a founded case determines the length of its retention time within the Child Abuse and Neglect Central Registry, as will be discussed later. An unfounded disposition means that a review of the facts does not show by a preponderance of the evidence that child abuse or neglect occurred.<sup>39</sup>

When the disposition of a case is founded, the subject of the investigation may appeal the finding. There are three levels of administrative appeal.<sup>40</sup> First, the subject has 30 days to write to the local department for a conference. If not satisfied with the outcome at the local conference, the subject can then appeal for a review by a hearing officer by writing the Commissioner of VDSS for a state appeal hearing. Finally, if not satisfied by the results of the hearing, the subject can then petition for a judicial review in circuit court.

As mentioned earlier, there are varying retention times for each type of disposition, determined by the level of severity. The retention time for each is set by VDSS and the Library of Virginia. The length of retention time for each type of record is illustrated in Figure 3.

**Figure 3: VDSS Record Retention Time**

Type of Record	Length of Retention
<b>Founded, Level 1 cases, involving sexual abuse</b>	<b>25 Years</b>
<b>Founded, Level 1 cases, not involving sexual abuse</b>	<b>18 Years</b>
<b>Founded, Level 2 cases</b>	<b>7 Years</b>
<b>Founded, Level 3 cases</b>	<b>3 Years</b>
<b>Family Assessments</b>	<b>3 Years</b>
<b>Unfounded*</b>	<b>1 Year*</b>

\* Unless there is a subsequent complaint involving the same parties within that 1 year time frame, per Va. Code § 63.2-1514.

Source: Va. Department of Social Services and the Library of Virginia.

Founded cases are classified into three tiers. Level 1 cases are the most serious, as they involve incidents that are likely to result in serious harm to the child, such as genital contact, multiple incidents of abuse over time, physical abuse requiring medical attention or neglect where the minimal needs of the child are rarely met. Level 2 cases involve incidents that are likely to result in moderate harm to the child. Level 3 cases involve incidents that are likely to result in minimal harm to the child. Family assessments are maintained for 3 years, whereas, unfounded cases are maintained for only 1 year unless there is a subsequent complaint involving the same parties within that 1 year time frame per Va. Code § 63.2-1514. There was concern expressed over the length of retention time for unfounded records by Work Group members and survey respondents. Reasons to extend the retention time for unfounded records included:

- Unfounded cases are typically more serious than family assessments and may involve alleged sexual abuse, but did not meet the preponderance of evidence standard.

- Family assessments, which are typically less serious, are kept for three years with no disposition.
- There is no history to reference, and collateral contacts are lost if same or similar subsequent allegations occur, which can impact a child's safety.

### **Data Tracking**

Referrals to local departments are documented and tracked through a state automated system known as OASIS (Online Automated Services Information System). Figure 4 illustrates the breakdown of referrals by type of abuse or neglect in FY13.

**Figure 4: Referrals by Disposition and Type of Abuse or Neglect, FY13**

Type	Referrals	Accepted	Family Assessment	Investigated	Founded	Unfounded	Appealed
Medical neglect	2,731	2,126	1,504	500	201	268	26
Mental abuse	6,266	4,287	3,475	615	204	366	25
Physical abuse	22,150	16,884	10,772	5,253	2,205	2,789	180
Physical neglect	50,117	40,008	28,514	9,346	4,833	4,116	260
Sexual abuse	5,093	3,533	8	3,166	1,043	1,942	107
Substance Exposed Infants	955	850	668	127	80	39	1
<b>Total</b>	<b>87,312</b>	<b>68,210</b>	<b>45,293</b>	<b>19,126</b>	<b>8,612</b>	<b>9,590</b>	<b>600</b>

Source: Va. Dept. of Social Services, Va. OASIS and Va. Child Welfare Outcome Reports data. This table represents a count of the allegations contained in referrals. A referral can have more than one type of allegation.

Physical neglect comprises the largest referral category. In regards to child sexual abuse, there were nearly 5,100 referrals of which 3,533, or 69%, were accepted. At this point, the data appears to become unreliable. For instance, as discussed earlier, a family assessment should never be conducted for a sexual abuse case. Further, columns that should add up, do not. The number of family assessments should add to the total number of accepted, but does not. And, the number of founded and unfounded referrals should add to the total number investigated, but does not. It should be kept in mind that this statewide data collection system relies on the individual reporting practices, discretion, and decision making of 120 local departments using an antiquated data system. While there are significant data integrity concerns, it is the best available data. However, since these figures are used to inform public policy and other decisions, data integrity should be of utmost concern.

### **Law Enforcement Investigation Considerations**

The purpose of this section is not to outline in detail the steps of a law enforcement investigation, but rather to highlight where CPS and law enforcement investigations intersect and where some difficulties can potentially arise between the two types of investigations.

Regardless of whether a referral is accepted, Va. Code § 63.2-1503(D)(i) requires local CPS departments to immediately report all cases of child sexual abuse to law enforcement and the Commonwealth's Attorney.<sup>41</sup> It is important to understand that there are key differences in the burdens of proof, timeframes and objectives of CPS and law enforcement investigations. First, the burden of proof for CPS is preponderance of evidence; whereas, the burden for law enforcement investigations in the most complete sense and with a view towards conviction as the final goal, is proof beyond a reasonable doubt. Second, CPS is bound to complete their investigation in 45 days, unless a limited extension is granted. Law enforcement is under no such time constraints to complete their investigation. Third, CPS' objective is to determine the safety needs of the child and whether there is a need for services or alternative living arrangements. Law enforcement's primary objective is to gather evidence in preparation for a possible criminal trial. These key differences can lead to potential difficulties and misunderstandings between CPS and law enforcement, and emphasize why communication between the two agencies is extremely vital to the successful outcome of cases.

Law enforcement's authority to investigate child sexual abuse cases is broader than CPS' in Virginia: they carry out both caretaker *and* non-caretaker child sexual abuse investigations. Many law enforcement agencies reported that they conduct joint investigations with CPS for caretaker cases. It should be noted that in most joint investigations, cooperation between the two agencies appears to exist. However, even with cooperation some issues can still occasionally arise. Based on survey results and in speaking with practitioners, staff discovered that joint investigations involving child sexual abuse typically require more in-depth and collateral interviews, easily taking longer than 45, or even 60 days. Investigations, which often begin only with a child's testimony, can require a great deal of effort in substantiating such testimony with multiple interviews, visits to alleged location(s) of abuse, collection of any existing physical evidence, and the request of various types of employment, medical, and mental health records. While law enforcement is attempting to complete these efforts, CPS is often forced to make a disposition of unfounded or founded within 45 days without having all of the available evidence. An additional concern with this forced disposition date is that once a CPS disposition of founded is made, the CPS appeal process begins regardless of whether the law enforcement investigation is still pending. If an appeal is made, the appellant then has access to CPS investigatory records, which include victim testimony, the identity and statements of witnesses, and medical evidence, despite any efforts by CPS to redact information to protect prosecutorial evidence.<sup>42</sup>

There are additional investigatory concerns related to destruction of evidence, victim intimidation, interference and the loss of "element of surprise." While there are many different ways such concerns can appear in an investigation, perhaps the best way to illustrate this is with a vignette that aptly summarizes and combines the fact scenarios staff repeatedly received:

*For instance, a child discloses an act of sexual abuse at school to a teacher. The teacher may then confer with a guidance counselor and/or principal who may also talk with the child. CPS will be called and law enforcement notified. Let us assume that the disclosure occurred towards the end of the school day and the alleged perpetrator resides with the child. Should the child be sent home? At this point in time, the non-offending parent may be contacted. Depending on what time of day it is and the availability of a child advocacy center may determine whether the child receives a forensic interview. As such, at this point in time, minimal fact interviews may be the only thing law enforcement has to know what to include in a search warrant, which specific questions to ask or which items to look for. Minimal facts may also be what CPS is using to develop the safety plan for the child. In the meantime, the non-offending parent may contact the alleged abuser, which destroys the "element of*

*surprise” for law enforcement. Consequently, the abuser may destroy existing evidence, intimidate victim(s), and witness(es), and have time to prepare their story. Once the child is back with the non-offending parent, the child may be getting pressure or not believed. Recantations by the child may occur at this point. The child may then be subject to additional interviews by the Commonwealth’s Attorney or medical personnel, if applicable.*

*It is during this time, before a forensic interview, that there is ripe opportunity for victim intimidation, destruction of evidence and interference, and recantation especially if the non-offending parent does not support the child.*

Again, there are many scenarios that can unfold; the above vignette is just one. Other concerns mentioned in survey results and discussions include continuances by defense counsel,<sup>43</sup> as well as CPS conducting interviews after a suspect is arrested. Under Va. Code § 63.2-1503(M), if *Miranda* warnings are not given, any testimony given to the CPS worker is inadmissible in a court of law. Further, given all of the above, CPS investigators must also be concerned with respecting parental rights.

## **Survey Results**

In order to gain a better understanding of child sexual abuse investigations, staff disseminated surveys to all directors of local departments, chiefs and sheriffs of primary law enforcement agencies, and all criminal justice training academy directors that provide law enforcement training.<sup>44</sup> Staff also informally surveyed Commonwealth’s Attorneys. The formal survey response rates were as follows:

- 75% (90 of 120) of local department directors;
- 69% (93 of 135) of primary law enforcement agencies; and,
- 76% (22 of 29) of criminal justice training academy directors.
  - 80% (8 of 10) of regional training academies; and,
  - 74% (14 of 19) of independent training academies.

## ***Law Enforcement Training***

Recruits receive anywhere from 500 to over 1,500 hours of basic law enforcement training before becoming certified.<sup>45</sup> Of the total hours of training received, recruits receive approximately anywhere from 1.5 to 16 hours of training devoted to child sexual abuse. The median number allocated was 4 hours. The majority of responding academy directors, 76% (16 of 21), believe the minimum standards and training related to child sexual abuse is adequate for basic law enforcement training. However, academy directors and law enforcement agencies stressed the need for additional in-service and specialized training related to child sexual abuse investigations. Only 45% (10 of 22) of responding academies provided any in-service training to law enforcement relating to child sexual abuse over the past 5 years. Respondents emphasized the desire for more on-line training opportunities relating to this subject.

Based on survey results and discussions with practitioners, it was determined that not all newly assigned detectives (general or specialty detectives) are *required* to complete any specialized training or certification. In fact, 54% (50 of 92) of responding law enforcement agencies reported that they do not require any specialized training for newly assigned detectives. Further, only 45% (10 of 22) of responding academies currently offer any courses that are designed specifically for

newly appointed detectives. Virginia, however, requires certification or completion of specialized training for law enforcement in many other areas, such as general and specialty instructors, field training officers, school resource officers, K-9 handlers, child safety seat technicians and for the use of specific equipment including TASER, RADAR/LIDAR, patrol rifles and other firearms.<sup>46</sup>

### ***Internet Crimes Against Children (ICAC) Investigations***

While the focus of ICAC investigations was not directly within the purview of this study, the survey did address the topic due to some literature suggesting a potential correlation between contact offenses and internet child pornography among some offenders. Most responding law enforcement agencies, 88% (73 of 83), indicated that their detectives investigating “contact” child sexual abuse cases routinely searched and seized offenders’ computers, digital recording devices, cell phones, and other sources of technology for evidence of child sexual exploitation and/or child pornography. Only 34% (32 of 93) of responding law enforcement agencies indicated that they had a specialized unit or division that handled ICAC-related cases. However, 70% (64 of 92) of law enforcement agencies indicated they were a member of an ICAC Task Force. Many agencies expressed the desire for more resources, funding, and training in this area to assist with the successful investigation and prosecution of these offenders.

### ***CPS Worker Training***

Newly hired CPS workers are required to complete a series of approximately 15 instructor-led courses within their first 24 months of employment. Specific training related to sexual abuse and sexual abuse investigations must be completed no later than the first 12 months of employment.<sup>47</sup> However, there appears to be some difficulty in readily meeting these requirements. Over one-third, or 36% (33 of 90), of local departments reported that CPS workers had to investigate child sexual abuse cases before completing all of the required VDSS training on sexual abuse. For those that did report this, the vast majority indicated that the worker was under the supervision of someone who had completed the training.

Based upon survey results, many local departments reported concerns with the availability and quality of the required training for CPS workers. The main concern was that the mandatory VDSS training was not provided frequently enough within a reasonable proximity. Training needs are high due to high staff turnover, and the local departments must often absorb the costs of travel for their staff when no trainings are available in close proximity within the one year time frame. Results also indicated that many local departments felt that specialized/continuing education for existing CPS workers, supervisors and directors was lacking. However, it should be noted that VDSS recently implemented a requirement that 24 hours of yearly continuing education must be completed beginning in the third year of employment.<sup>48</sup>

### ***Caseloads and Staff Turnover***

Both law enforcement and CPS workers handle extremely high caseloads and often handle many different types of cases or investigations in addition to child sexual abuse. Survey results indicated that law enforcement agencies handled anywhere from 0 to 570 child sexual abuse cases per agency in FY12. This range gives a clear indication that some law enforcement agencies investigate very few, if any, cases; whereas, the larger jurisdictions handle much higher case loads. The caseload per detective ranged from 20 to 379 cases across agencies in FY12. Local departments also had high caseloads with anywhere from 0 to 280 referrals involving child sexual abuse per local

department that were accepted in FY12. The caseload per CPS worker ranged from 12 to 360 referrals across departments in FY12.

Staff turnover can be an issue within some local departments. When asked if staff turnover was a problem, 44% (40 of 90) of local departments indicated that it was. The primary reasons cited for high turnover rates were low salaries, heavy caseloads, long hours, and burnout. Similar reasons can be cited for any issues with staff turnover in law enforcement agencies. Research has consistently demonstrated that CPS workers and law enforcement can experience vicarious trauma as a result of listening and being involved in traumatic events or wanting to help those who have experienced trauma.<sup>49</sup> Yet, based on survey results, only 38% (34 of 89) of local departments and 27% (25 of 93) of law enforcement agencies indicated that any debriefing or secondary traumatic stress prevention services were provided to their workers or detectives.

### ***School Personnel Training***

Teachers and other school personnel who have daily contact with students are in a key position to recognize indicators of child maltreatment. Under Va. Code § 63.2-1509, teachers are required to report suspected child abuse and neglect as a mandated reporter. They must only report their suspicions, rather than attempt to prove that such abuse or neglect occurred. Teachers are required to complete mandatory reporter training as part of their licensure. Reports can be made on the hotline, directly to a local department or via a school designee who makes the report to the local department. The school designee must then report back to the original mandated reporter on the status of the report. Teachers are immune from any civil or criminal liability in making a report, unless it is proven that such person acted in bad faith or with malicious intent. The failure to file a report as soon as possible, but not longer than 24 hours after having reason to suspect a reportable offense of child abuse or neglect, requires a fine of not more than \$500 for the first failure and not less than \$1,000 for any subsequent failure. There is a higher penalty, a Class 1 misdemeanor, if the person knowingly and intentionally fails to make a report in cases evidencing acts of rape, sodomy, or object sexual penetration.

### ***Working Relationships***

Survey results and Work Group discussions pointed to concerns with the handling of child sexual abuse reports by schools. Per Va. Code § 63.2-1511, local departments and local school divisions are required to have MOUs with each other. However, only 62% (53 of 85) of responding local departments reported having a MOU with local schools. Of further concern, the MOU is only required to address reports made *against* school personnel rather than all types of disclosures made by students.

When looking at the relationship between law enforcement and local departments, 92% (81 of 88) of local departments and 88% (82 of 93) of local law enforcement agencies reported having “very good” to “excellent” working relationships with one another. While not required by statute, 61% (56 of 91) of law enforcement and 61% (52 of 85) of local departments reported having a formal MOU with one another. It appears that law enforcement and CPS often respond together to allegations of child sexual abuse. Based on survey results, 74% (69 of 93) of law enforcement agencies and 78% (69 of 89) of local departments indicated that detectives “almost always” accompany CPS workers in responding to allegations of child sexual abuse. Some law enforcement agencies assist other law enforcement as well, with 33% (30 of 92) of law enforcement indicating that they conducted child sexual abuse investigations for other law enforcement agencies. The circumstances for when this is done varies, but examples include courtesy interviews for when a

victim, witness or perpetrator is out-of-state or in a distant locality, for small departments that have no detectives to handle the investigation, and when there is a conflict of interest.

In short, collaboration and communication are important to successful child sexual abuse investigations. Virginia has long recognized this importance per Va. Code § 63.2-1507, which was enacted in 1975:

*All law enforcement departments and other state and local departments, agencies and authorities and institutions shall cooperate with each child-protective services coordinator of a local department and any multi-discipline teams in the detection and prevention of child abuse.*

## **Child Advocacy Centers (CAC) and Multi-disciplinary Teams (MDT)**

### ***Child Advocacy Centers***

Building upon a multi-disciplinary approach, in the mid-1980s, CACs were developed with the aim of improving for children the process of criminal investigations by coordinating the efforts of the different investigators and making the experience more child-friendly. A child advocacy center can be defined as “a child focused, facility-based program in which representatives from many disciplines, including law enforcement, child protection, prosecution, mental health, medical, victim advocacy, and child advocacy work together to conduct interviews and make team decisions about investigation, treatment, management and prosecution of child abuse cases.”<sup>50</sup> In other words, CACs can be seen as packaging all of the best practices and responses for child sexual abuse investigations under one umbrella. This approach helps to avoid fragmentation and miscommunication in the investigation, which can have negative effects on the child, the child’s family, and the prosecution of the case.

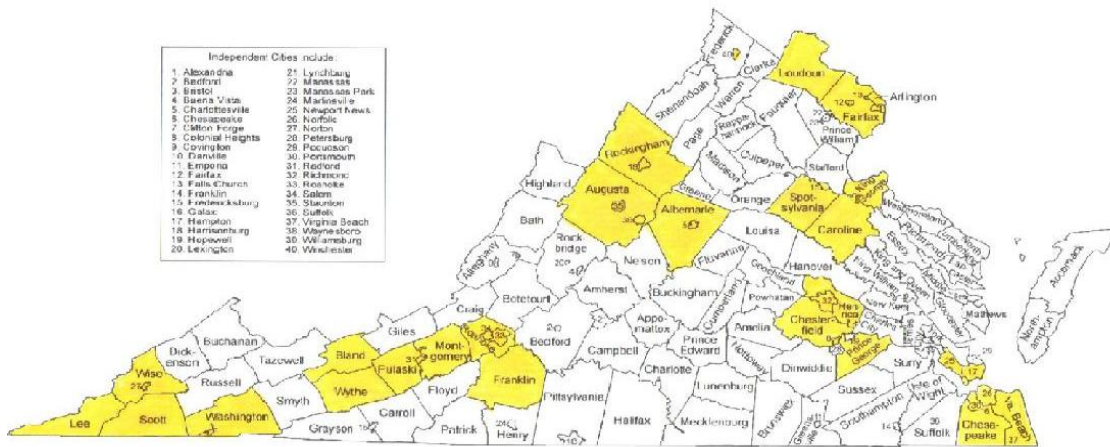
The services provided by CACs generally include a MDT approach, forensic interviewing services, child and family friendly facilities, victim advocacy and support, specialized medical evaluation and treatment, specialized mental health services, training, education and support for child abuse professionals, and community outreach and education.<sup>51</sup> This report will focus primarily on the first two listed services: MDTs and forensic interviewing.

Research has consistently demonstrated a number of positive outcomes with CAC implementation, including better coordinated response and investigations, cost savings, increased prosecution and conviction rates, increased forensic medical exams (when appropriate), increased referrals to mental health services, and increased satisfaction by caregivers.<sup>52</sup>

There are over 750 CACs nationwide, which serve children under the age of 18 who have suffered reported sexual or severe physical abuse. Accreditation standards for the CACs are set by the National Children’s Alliance. Virginia’s first CAC was established in 1998. Virginia now has 16 CACs that serve 30% (40 of 135) of Virginia’s localities. Ten of these centers are accredited and six are associate members. Coordination and assistance to the 16 CACs is provided by the Children’s Advocacy Centers of Virginia (CACVA), an accredited chapter of the National Children’s Alliance. Figure 5 below illustrates the areas serviced by the 16 CACs. As one can see, there are still many areas that are underserved.



**Figure 5: Localities Served by Virginia CACs**



Source: Children’s Advocacy Centers of Virginia, 2013.

In FY13, Virginia’s CACs had 3,192 new children’s cases referred to them. Of this number:

- 76% (2,414 of 3,192) for sexual abuse;
- 18% (577 of 3,192) for physical abuse;
- 9% (286 of 3,192) for physical neglect;
- 6% (211 of 3,192) for witness to violence; and,
- 2% (68 of 3,192) for other investigations.<sup>53</sup>

It should be noted that CACs will handle both caretaker and non-caretaker cases, and will complete courtesy interviews for other localities, states and the federal government.

**Multi-disciplinary Teams (MDT)**

Child advocacy centers emphasize the coordination of investigation and intervention services by bringing together professionals and agencies as a MDT to create a child-focused approach to child abuse cases. A MDT can be defined as “a group of professionals who represent various disciplines and work collaboratively to promote a thorough understanding of case issues and assure the most effective system response possible.”<sup>54</sup> The MDT approach has been nationally accepted as a best response to child sexual abuse investigations for over a decade and can include representation from the following: prosecution, law enforcement, child protective services, mental health services, medical professionals, victim advocacy services, children’s advocacy center (if applicable), and others as necessary.<sup>55</sup> For instance, some MDTs will include school personnel and military family services. Case review is one of the most important functions of the MDT process. MDTs will meet to share information on cases in an efficient manner, determine if any additional information or services are needed regarding the child or the child’s family, and will assign specific tasks to appropriate members of the group. Staff completed a cursory 50-state review and discovered that *at least* 25 states statutorily require the establishment of MDTs.

Under Va. Code § 63.2-1503(K), local departments may develop MDTs for purposes of investigating child sexual abuse cases and to aid in recommendations regarding the prosecution of such cases. Based on survey responses, 57% (49 of 86) of local departments indicated they were a member of a MDT. Of the 49 teams, 34 indicated that they met monthly; others reported meeting weekly, bi weekly, bi-monthly, quarterly, or as needed depending on the number of cases being investigated or prosecuted. The Work Group and survey results all emphasized the importance of developing a MDT approach in all localities. The federal Children’s Justice Act fund has been awarded to Virginia since 1990 thru DCJS. Since 1990, these funds have provided training and on-site technical assistance to localities wishing to establish MDTs. Further, CACVA, VDSS and DCJS have partnered together to offer pilot training and programming for localities interested in developing a MDT in their locality.

### ***Forensic Interviews***

A forensic interview is an approach to interviewing children where information is gathered in a child-sensitive, developmentally-appropriate and legally-defensible manner.<sup>56</sup> It is imperative to schedule a forensic interview as soon as possible after a disclosure of child sexual abuse so that CPS, law enforcement and other involved parties can proceed as effectively as possible. This type of interview is distinct from the minimal fact interviews that CPS and/or law enforcement will gather for essential information. Forensic interviews are ideally completed at a CAC, but if one is not available they can be completed at local departments, police departments, sheriff’s offices, hospitals, schools, or a child’s home by an individual who is trained in conducting such interviews.

Because a child’s testimony is often the only piece of initial evidence in a case, the success of a case can be largely dependent on proper interviewing procedures; otherwise, the case may end up not being tried in court. In Virginia, CACVA and DCJS coordinate multiple *ChildFirst* forensic interviewer trainings, which are 40-hour courses. Nearly all, 91% (81 of 89), of responding local departments reported that forensic interviews were conducted for most of their child sexual abuse cases. Exceptions would include cases involving infants or other very young children. In regards to availability, 70% (62 of 89) of local departments and 57% (52 of 92) of law enforcement agencies reported having at least one worker or officer who was qualified to conduct child forensic interviews. However, survey results and Work Group discussions emphasized the desire to increase the funding for and the availability of forensic interviewer training for more individuals across the state.

## **Summary and Conclusion**

Child sexual abuse is a serious problem that affects all types of communities and families. The impact of child sexual abuse on victims is considerable with many experiencing various short- and long-term effects. Similar to all sexually-based offenses, child sexual abuse is a highly underreported crime, thus making prevalence and incident levels difficult to estimate. Similarly, prosecution and conviction rates are also low due to high attrition rates for the cases that are reported.

The Virginia Department of Social Services provides oversight to 120 local departments, which operate autonomously. Within each local department, the CPS unit handles reports of child neglect and abuse that involve a caretaker. If the case is accepted by the local department, the case can either receive a family assessment or an investigation. If investigated, the burden of proof for

founded cases is preponderance of the evidence. If the evidence does not meet this burden of proof, the case is considered unfounded. Retention times vary for founded, unfounded, and family assessment cases. There is a concern by some that unfounded cases should be retained for a longer period of time.

Local departments are required to report all cases of child sexual abuse immediately to law enforcement and the Commonwealth's Attorney. The timeframe and burden of proof for investigations is very different for CPS and law enforcement. These disparities can lead to investigatory concerns. Caseload levels are very high for both local departments and law enforcement. Staff turnover is also a concern for both. Based on survey results, it appears that the vast majority of law enforcement and local DSS have a "very good" to "excellent" relationship.

While basic law enforcement training appears to be adequate, it does appear that in-service/specialized training could be offered more frequently. On-line training in particular was highly desired. It was noted that there is currently no requirement for newly assigned detectives to complete any type of certification or specialized training. Findings also indicated that the mandated VDSS training for newly hired CPS workers needs to be made more available across the state, as well as specialized or continuing education for existing CPS workers. Teachers are required to complete mandatory training on child abuse and neglect as part of their licensure. School divisions are required to have a MOU with their local DSS; however, it appears that this requirement is not being fully complied with. An additional concern is that the MOU is only required to address reports against school personnel.

Child advocacy centers have been shown to provide numerous positive outcomes in child sexual abuse cases by coordinating the investigation between CPS, law enforcement, and other entities and promoting a child-focused environment. There are currently 16 CACs in Virginia. Local DSS reported that forensic interviews are being provided in most child sexual abuse cases, but there is a need to train additional personnel to increase availability in some localities. The MDT is the foundation of the CAC model. The need to implement MDTs, at a minimum, across the state was strongly encouraged.

The Crime Commission reviewed study findings at its November and December meetings and directed staff to draft legislation for several key issues. As a result of the study effort, the Crime Commission endorsed the following legislative recommendations at its December 2, 2013, meeting:

**Recommendation 1:** Statutorily require the creation, maintenance, and coordination of a multi-disciplinary response to child sexual abuse under proposed new statute, Va. Code § 15.2-1627.5.

Recommendation 1 was introduced by Delegate Robert Bell as House Bill 334 during the 2014 General Session of the Virginia General Assembly. It was passed by the General Assembly and signed by the Governor on April 23, 2014.

**Recommendation 2:** Amend Va. Code § 63.2-1505(B)(5) to extend the requirement for a CPS investigation to be completed from 45 days to 90 days, whenever a joint investigation is being conducted between law enforcement and local DSS, for child sexual abuse investigations.

Recommendation 2 was introduced by Delegate C. Todd Gilbert as House Bill 709 during the 2014 General Session of the Virginia General Assembly. It was passed by the General Assembly and signed by the Governor on April 3, 2014.

**Recommendation 3:** Amend Va. Code § 63.2-1514 to extend the length of time unfounded records are maintained from 1 year to 3 years.

Recommendation 3 was introduced by Delegate Charniele Herring as House Bill 682 during the 2014 General Session of the Virginia General Assembly. It was left in the House Health, Welfare, and Institutions Committee.

**Recommendation 4:** Amend Va. Code § 63.2-1511(D) to extend the scope of MOUs between school divisions and local DSS to include all types of child sexual abuse reports involving a student.

Recommendation 4 was introduced by Delegate Charniele Herring as House Bill 683 during the 2014 General Session of the Virginia General Assembly. It was passed by the General Assembly and signed by the Governor on March 31, 2014.

**Recommendation 5:** Amend Va. Code § 63.2-1503 to require a form be completed and signed by both agencies whenever a local DSS reports an incident of suspected child sexual abuse to local law enforcement. It would also require that any local DSS report the receipt of a complaint within *2 hours* to the attorney for the Commonwealth and the local law enforcement agency.

Recommendation 5 was introduced in both the Virginia Senate and House of Delegates. Senator Janet Howell introduced Senate Bill 332 and Delegate Robert Bell introduced House Bill 405 during the 2014 General Session of the Virginia General Assembly. Senate Bill 332 was passed by the General Assembly and signed by the Governor on March 24, 2014. House Bill 405 was passed by the General Assembly and signed by the Governor on April 4, 2014.

**Recommendation 6:** Amend Va. Code § 63.2-1505 to require that no new local DSS staff member may make any dispositional decisions in a case that involves an allegation of child sexual abuse, until they have received the required training.

Recommendation 6 was introduced in both the Virginia Senate and House of Delegates. Senator Janet Howell introduced Senate Bill 331 and Delegate Robert Bell introduced House Bill 404 during the 2014 General Session of the Virginia General Assembly. Senate Bill 331 was passed by the General Assembly and signed by the Governor on March 24, 2014. House Bill 404 was continued to the 2015 Session by the House Courts of Justice Committee.

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Criminal Justice Academy Directors

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Virginia Association of Chiefs of Police

Virginia Criminal Sentencing Commission

Virginia Department of Criminal Justice Services

Virginia Department of Social Services

Virginia Law Enforcement Agencies

Virginia Sheriffs’ Association

Virginia State Police

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<sup>1</sup> H.J.R. 595, 2013 Gen. Assemb., Reg. Sess. (Va. 2013); H.J.R. 730, 2013 Gen. Assemb., Reg. Sess. (Va. 2013).

<sup>2</sup> Id.

<sup>3</sup> U.S. Department of Health and Human Services, Administration for Children and Families, Child Maltreatment, 2011 (2012).

<sup>4</sup> Id.

<sup>5</sup> Id. Note: Figures total to more than 100% as a child can be a victim of multiple types of abuse in a case.

<sup>6</sup> Id.

<sup>7</sup> Virginia Department of Social Services, Online Automated Services Information System (OASIS) data.

<sup>8</sup> See, for example, Haugaard, J.J., The challenge of defining child sexual abuse. *American Psychologist*, 55, 1036-1039 (2000).

<sup>9</sup> See Putnam, F.W., Ten-year research update review: Child sexual abuse. *American Academy of Child & Adolescent Psychiatry*, 42(3), 269-278 (2003) and Toledo, A.V., & Seymour, F., Interventions for caregivers of children who disclose sexual abuse: A review. *Child Psychology Review*, 33, 772-781 (2013) for further overview of topics.

<sup>10</sup> Id.

<sup>11</sup> Putnam, *supra* note 9, at p. 269.

<sup>12</sup> See, for example, Babatsikos, G., Parents’ knowledge, attitudes and practices about preventing child sexual abuse: A literature review. *Child Abuse Review*, 19, 107-129 (2010); Finklehor, D., et al., Victimization of children and youth: A comprehensive, national survey. *Child Maltreatment*, 10(1), 5-25 (2005).

<sup>13</sup> Putnam, *supra* note 9; Snyder, H.N., Sexual assault of young children as reported to law enforcement: Victim, incident and offender characteristics, in *A NIBRS Statistical Report*, U.S. Dep’t of Justice: Washington, D.C. (2000).

<sup>14</sup> Snyder, *supra* note 13.

<sup>15</sup> Finklehor, D. et al., Juveniles who commit sex offenses against minors. *Juvenile Justice Bulletin*, Office of Juvenile Justice and Delinquency Prevention, U.S. Dep’t of Justice (2009).

<sup>16</sup> See McEachern, A.G., Sexual abuse of individuals with disabilities: Prevention strategies for clinical practice. *Journal of Child Sexual Abuse*, 21(4), 386-398 (2012) and Putnam, *supra* note 9 for literature overview.

<sup>17</sup> Id.

<sup>18</sup> *See*, for example, Saunders, B.E., Understanding children exposed to violence: Toward an integration of overlapping fields. *Journal of Interpersonal Violence*, 18(4), 356-376 (2003); Walker, E.C., et al., Childhood sexual abuse, other childhood factors, and pathways to survivors' adult relationship quality. *Journal of Family Violence*, 24, 397-406 (2009).

<sup>19</sup> *See*, for example, Bourke, M.L., & Hernandez, A.E., The "Butner Study" redux: A report on the incidence of hands-on child victimization by child pornography offenders. *Journal of Family Violence*, 24, 183-191 (2009); McCarthy, J.A., Internet sexual activity: A comparison between contact and non-contact child pornography offenders. *Journal of Sexual Aggression*, 16(2), 181-195 (2010); Seto, M.C., & Eke, A.W., The criminal histories and later offending of child pornography offenders. *Sexual Abuse*, 17, 201-210 (2005); Webb, L., et al., Characteristics of internet child pornography offenders: A comparison with child molesters. *Sexual Abuse*, 19, 449-465 (2007); Wolak, J., et al., Child pornography possessors arrested in internet-related crimes: Findings from the *National Juvenile Online Victimization Study*. National Center for Missing and Exploited Children (2005).

<sup>20</sup> Putnam, and Toledo, *supra* note 9, for existing overviews of topics.

<sup>21</sup> Id.; McClure, F.H., et al., Resilience in sexually abused women: Risk and protective factors. *Journal of Family Violence*, 23, 81-88 (2008); McElheran, M., et al., A conceptual model of post-traumatic growth among children and adolescents in the aftermath of sexual abuse. *Counseling Psychology Quarterly*, 25(1), 73-82 (2012).

<sup>22</sup> London, K., et al., Disclosure of child sexual abuse: What does the research tell us about the ways that children tell? *Psychology, Public Policy, and Law*, 11(1), 194-226 (2005); Malloy, L.C., & Lyon, T.D., Caregiver support and child sexual abuse: Why does it matter? *Journal of Child Sexual Abuse*, 15(4), 97-103 (2006).

<sup>23</sup> *See* Toledo, *supra* note 9, for a more in-depth review.

<sup>24</sup> Id.

<sup>25</sup> *See*, for example, Malloy, *supra* note 22.

<sup>26</sup> Id.

<sup>27</sup> *See*, for example, National Crime Victimization Survey.

<sup>28</sup> *See*, for example, Putnam, *supra* note 9.

<sup>29</sup> *See*, for example, Brewer, K.D., et al., Factors related to prosecution of child sexual abuse cases. *Journal of Child Sexual Abuse*, 6(1), 91-111 (1997); Cross, T.P, et al., Prosecution of child abuse: A meta-analysis of rates of criminal justice decisions. *Trauma, Violence, & Abuse*, 4(4), 323-340 (2003); Stroud, D., et al., Criminal investigations of child sexual abuse: A comparison of cases referred to the prosecutor and those not referred. *Child Abuse & Neglect*, 24(5), 689-700 (2000).

<sup>30</sup> This trend in attrition rates tends to be apparent in nearly all sexually-based offenses.

<sup>31</sup> Total Circuit Court charges and convictions are presented for the following statutes: **Forcible Rape**: § 18.2-61(A)(iii), § 18.2-67.5:1; **Forcible Sodomy**: § 18.2-67.1(A)(1); **Object Penetration**: § 18.2-67.2(A)(1); **Aggravated Sexual Battery**: § 18.2-67.3(A)(1)-(3)-(4)(a); **Indecent Liberties**: § 18.2-370(A)-(B)-(C)-(D)(i)-(ii), § 18.2-370.1(A)-(B); **Carnal Knowledge**: § 18.2-63(A)-(B); and, **Obscenity/Child Pornography Offenses**: § 18.2-379, § 18.2-386.1, § 18.2-356(ii), § 18.2-374.4, § 18.2-374.1(b)(1)-b(2)-(b)(3)-(b)(4), § 18.2-374.1:1(A)-(B)-(C)(i)-(C)(ii), § 18.2-374.3(b)-(c)-(d)-(e).

<sup>32</sup> Virginia Department of Social Services, 2013.

<sup>33</sup> Id.

<sup>34</sup> 22 VA. ADMIN. CODE § 40-705-10, (2013).

<sup>35</sup> 22 VA. ADMIN. CODE § 40-705-50, (2013).

<sup>36</sup> 22 VA. ADMIN. CODE § 40-705-50, (2013).

<sup>37</sup> 22 VA. ADMIN. CODE § 40-705-50, (2013).

<sup>38</sup> 22 VA. ADMIN. CODE § 40-700-30, (2013).

<sup>39</sup> 22 VA. ADMIN. CODE § 40-705-10, (2013).

<sup>40</sup> 22 VA. ADMIN. CODE § 40-705-190, (2013).

<sup>41</sup> Note: Some local departments have a MOU with law enforcement indicating that law enforcement is responsible for contacting the Commonwealth's Attorney.

<sup>42</sup> Information compiled from survey results, Work Group meetings and discussions with practitioners.

<sup>43</sup> *See also*, for example, American Prosecutors Research Institute, *Investigation and prosecution of child abuse* (3<sup>rd</sup> ed.). Thousand Oaks, CA: Sage (2004).

<sup>44</sup> Copies of the Law Enforcement Academy Director, Law Enforcement Agency, and Local DSS Director Survey are available upon request.

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<sup>45</sup> Virginia Department of Criminal Justice Services' (DCJS) minimum standard is 480 hours. Recruits are also required to complete an additional 100 hours minimum of field training.

<sup>46</sup> Certification or specialized training is typically either required by DCJS and/or by the specific law enforcement agency.

<sup>47</sup> They are required to complete a 2-day course on sexual abuse and a 3-day course on child sexual abuse investigations.

<sup>48</sup> Per Title 1.5.2 of the Va. Dept. of Social Services Child & Family Services Manual, Effective March 1, 2013.

<sup>49</sup> See, for example, Sprang, G., Secondary traumatic stress and burnout in child welfare workers: A comparative analysis of occupational distress across professional groups. *Child Welfare*, 90(6), 149-168 (2011); Tovar, L.A., Vicarious traumatization and spirituality in law enforcement. *FBI Law Enforcement Bulletin*, (July 2011).

<sup>50</sup> National Children's Alliance, 2013.

<sup>51</sup> Id.

<sup>52</sup> See, for example, Crime Against Children Research Center. Executive summary: Findings from the UNH multi-site evaluation of children's advocacy centers (2006); Miller, A., & Rubin, D., The contribution of children's advocacy centers to felony prosecutions of child sexual abuse. *Child Abuse & Neglect*, 33, 12-18 (2009); Formby, J., et al., Cost-benefit analysis of community responses to child maltreatment: A comparison of communities with and without child advocacy centers. Research Report No. 06-3, National Children's Advocacy Center, Huntsville, AL (2006); Bonach, K., et al., Exploring nonoffending caregiver satisfaction with a children's advocacy centers. *Journal of Child Sexual Abuse*, 19(6), 687-708 (2010); Cross, T.P., et al., Child forensic interviewing in child advocacy centers: Empirical data on a practice model. *Child Abuse & Neglect*, 31(10), 1031-1052 (2007); Walsh, W.A. et al., Which sexual abuse victims receive a forensic medical examination? The impact of children's advocacy centers. *Child Abuse & Neglect*, 31, 1053-1068 (2007).

<sup>53</sup> Data from Children's Advocacy Centers of Virginia, FY13. Figures are larger than 100% due to cases involving more than one type of abuse or neglect.

<sup>54</sup> Chandler, N., Children advocacy centers: Making a difference one child at a time. *Journal of Public Law & Policy*, 28(1), 315-338 (2006).

<sup>55</sup> Ells, M., Forming a multi-disciplinary team to investigate child abuse: Portable guides to investigating child abuse. Office of Juvenile Justice & Delinquency Prevention, U.S. Dept. of Justice (2000).

<sup>56</sup> National Children's Advocacy Center, 2013.