

**APPROVAL PAGE**

**Recommendations for Criminal Justice Agencies to Minimize the Long-term Effects of Child Abuse**

Approved: Susan Hilal    Date: 11-28-2007  
Advisor

Recommendations for Criminal Justice Agencies to Minimize the Long-  
Term Effects of Child Abuse

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Johnnie Diamante

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## **Abstract**

### **Recommendations for Criminal Justice Agencies to Minimize the Long - Term Effects of Child Abuse**

Johnnie Lee Diamante

Under the Supervision of Dr. Susan Hilal

#### Statement of the Problem

According to the Office of Juvenile Justice and Delinquency Prevention (OJJDP) child abuse is a nationwide health and safety issue. In 2002 alone, state child protective services agencies throughout the country received reports alleging the child abuse of approximately 4.5 million children. Over half of these reports were received from community professionals, while the remainder was received from family, friends, relatives, or neighbors of these children.

Criminal justice agencies and community support agencies are clearly not doing enough to stop this problem of child abuse. Criminal justice agencies and community support programs must spend more time, energy, and resources focusing on the education and rehabilitation of the victims as opposed to only focusing on arresting the responsible party(ies). There needs to be more programs that specifically target three major areas: recognition of child abuse and neglect, law enforcement's response to suspected cases of abuse and neglect, and community support. Fortunately, "with time and intervention, the mental and emotional consequences

associated with the trauma of a criminal act may be lessened or alleviated” (Wallace, 2005, p. 365). As a result, further support for child advocacy centers should exist to direct victims away from a more damaging road that could lie ahead.

Child abuse is a serious and rapidly growing problem in the United States, yet the response to this problem is inadequate. A three-pronged approach, consisting of treatment, prevention, and education for both the victim and the offender, is one viable approach to addressing this problem.

#### Methods of Approach

In using secondary data, a review of related empirical, theoretical, and practical findings will be analyzed to address minimizing the long-term effects of child abuse and child re-victimization. Furthermore, information stemming from past child abuse victim research and data from accredited journals and websites to include the US Department of Justice will be presented. The rational choice theory details the short and long-term effects of child abuse and paints a clearer picture of how damaging child abuse can truly be, and therefore will be used in this study. Conclusions and recommendations to reduce the long-term effects of child abuse and child victimization will be based on the collective information presented.

#### Assumptions

The assumption will be made that child abuse victims can be helped to reshape their lives by preventing repeat victimization. The assumption will also be made that child abuse victims can recover from the abuse or

neglect, and live productive lives without letting the effects of the abuse control their future. A final assumption is made that more can be done to protect the rights and improve the treatment of all child victims.

### Results of the Study

Empirical and theoretical data support the proposition that early intervention programs for child abuse victims do work. More specifically, empirical and theoretical data support the need for multidisciplinary teams, child advocacy centers, law enforcement agencies and other community support programs to work collaboratively to combat this issue by using a three-pronged approach, which includes treatment, prevention, and education for both the offender and the victim.

Few jurisdictions currently offer any multi-discipline approaches, which are designed to minimize the long-term effects of child abuse. As a result, recommendations have been made regarding legal and medical policies that could minimize the revictimization of child abuse victims. A three-pronged approach is vital to minimizing the long-term effects of child abuse, reducing the potential for revictimization, and should help to reduce the number of victims that become at-risk juveniles as a result of their victimization. The rational choice theory which implies that violence begets violence provides a valuable insight on the impact of child abuse. Child abuse is can be an extremely traumatizing experience that is often detrimental to the victim. Few jurisdictions provide meaningful intervention for child abuse victims (Siegfried, 2000). As a result, recommendations

have been made regarding legal and medical policies that could help child abuse victims and minimize the frequency of revictimization, thus reducing the long-term effects.

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## **Section I. Introduction: Recommendations for Criminal Justice Agencies to Minimize the Long-Term Effects of Child Abuse**

Victimization is a serious threat to America's children and youth. Each year, hundreds of children write to the President, First Lady, and the Attorney General about being abused. They ask to be protected and for police officers and judges to intervene. They harbor hope that somebody who is "in charge" will help them (Department of Health and Human Services, 2004). Numerous state and federal laws now exist to protect children from physical and sexual abuse, and to provide an array of rights and services for child victims who participate in the criminal or juvenile justice process. More can be done, however, to protect their rights and improve the treatment of child victims.

According to the National Child Abuse and Neglect Data System (2002) victimization was highest among the youngest children. In 2002, 16 percent of victims were newborns to age three, while 6 percent were 16 to 17 years old. Among the estimated 1,400 children who died of abuse and neglect, children under 1 year of age accounted for 41.2 percent of fatalities and all children under 7 years accounted for 87.9 percent. Some children suffered multiple types of maltreatment such as sexual abuse, physical assault, and neglect. Of the child fatalities that occurred in 2002, 79 percent involved a parent as a perpetrator.

Long-term child abuse can have a lasting impact on the victim. In 1992, the National Institute of Justice released a report, *The Cycle of Violence*, by Cathy Spatz Widom. The study revealed a significant link

between victimization in childhood and later involvement in violent crimes, signifying a cycle of violence. The study found that for some children, violence does, indeed, beget violence. Those who had been abused or neglected as children were more likely to be arrested as juveniles and as adults for a violent crime. On average, abused and neglected children begin committing crimes at a younger age, they commit nearly twice as many offenses as non-abused children, and they are arrested more frequently.

A recent U.S. Department of Health and Human Services study (2005) examined the mid-life physical and mental health impact of childhood abuse among a population-based sample of men and women. Results indicated that the sibling respondents who reported experiencing childhood physical abuse were more likely than their non-abused siblings to report more diagnosed illnesses, physical symptoms, anxiety, anger, and depression up to 40 years following the abuse. These results remained significant even after controlling for sex, age, family background, and childhood adversities. These findings are consistent with previous research that has found associations between childhood physical abuse and adult psychiatric problems. The findings are important because they begin to illuminate the mechanisms through which childhood maltreatment influences adult health. The new finding of increased anger among adults who suffered childhood physical abuse could indicate an additional mechanism through which childhood maltreatment might impact adult physical health (Springer & Knoedel, 2007).

According to Siegfried (2000), being victimized increases the likelihood of committing later offenses, as well as engaging in aggressive and violent behavior. It also increases the likelihood of being victimized again. There is much more that could be done to interrupt this cycle of violence and ensure the safe and successful transition from adolescence to adulthood. Protecting youth against violent victimization of all types needs to be a priority for communities, including policymakers. In preventing future problems, such as substance abuse, suicide, and mental health problems, as well as reducing rates of victimization and responding early to young victims in order to offset the adverse consequences of victimization, the severity of juvenile violence and crime may actually lessen in society as a whole.

Adolescent victimization is common. Actually, teenagers experience rates of violent crime far higher than other age groups. While most adolescents survive victimization with relatively few adverse consequences, victimization can disrupt the course of child development in fundamental ways and contribute to problems over the course of a lifespan. Past research studies have provided support for this statement. While it is agreed that no single risk factor or experience leads a young person to delinquency, the chances of offending increase when a teenager is a witness to or a victim of violence and experiences traumatic stress as a result (Siegfried, 2000).

Many child abuse and neglect cases involve simultaneous responses by child protection agencies and law enforcement agencies. Professionals

have come to recognize the benefits to be gained not only by the investigating agencies but also by the child victims when their investigations are better coordinated. Multidisciplinary teams have been developed in hundreds of communities (based in hospitals, police departments and prosecutors' offices, and child protection and nonprofit agencies) to improve coordination and communication among the personnel involved in these cases. One of the most important reforms brought about by multidisciplinary teams is the ability to conduct joint interviews of child victims, reducing the number of interviews and interviewers to which child victims are exposed in the course of an investigation. Minimizing the repeated interviewing of the victim is imperative.

### **Purpose of Study**

The purpose of this research paper is to address the effects of long-term child abuse and minimize the impact on the victim(s). The criminal justice system and the community must work together to improve resources and community support programs. Education must not be overlooked and the treatment of offenders has to be seriously addressed. Subsequently, theoretical, empirical, and practical data and research will be explored to obtain a better grasp of the necessary strategies to minimizing the long-term effects of child abuse and conquering child abuse re-victimization. This research paper will be an educational tool for law enforcement, child protection workers, and other related professionals who are involved in the child abuse investigative and treatment stages.

Numerous state laws now exist to protect children from physical and sexual abuse and to provide an array of rights and services for child victims who participate in the criminal justice process. The Federal Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C.A. §5106g), as amended by the Keeping Children and Families Safe Act of 2003, provide federal guidelines for the protection of children from abuse and neglect. More can be done, however, to protect the rights and improve the treatment of all child victims. As a first step, special protections for child victims participating in the criminal justice system must be made consistent nationwide. In using secondary data, a review of related empirical, and theoretical findings that are currently in practice will be analyzed to address methods to minimize the long-term effects of child abuse and child re-victimization. The rational choice theory implies that family violence is determined by a system of cost and rewards (Clark, 1993), will be reviewed. The rational choice theory argues that family violence leads to maltreated children and those children often end up with serious psychological problems to include stress disorders and depression. The rational choice theory will be used to paint a clearer picture of why child abuse is so damaging.

## **Section II. Literature Review**

The following section is divided into six parts. The first part provides definitions of the types and symptoms of various forms of child abuse, which is followed by a section that reviews the statistics and prevalence of child abuse in the U.S. The third part is a discussion of relevant child abuse legislation. The fourth part explains the need for supporting and improving current victim services programs. The fifth part reviews the importance of preventing child abuse, and the final part explains the use of multidisciplinary teams.

### **Types of Abuse**

Federal legislation provides a foundation for states to utilize in identifying a minimum set of acts or behaviors that define child abuse and neglect. The Federal Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C.A. §5106g), as amended by the Keeping Children and Families Safe Act of 2003, defines child abuse and neglect as, at minimum:

- Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or
- An act or failure to act which presents an imminent risk of serious harm.

This definition of child abuse and neglect refers specifically to parents and other caregivers. A "child" under this definition generally means a person who is under the age of 18 or who is not an emancipated minor. While CAPTA provides definitions for sexual abuse and the special cases related to withholding or failing to provide medically indicated treatment, it

does not provide specific definitions for other types of maltreatment such as physical abuse, neglect, or emotional abuse. While this term emphasizes on carrying out wrong acts, a related term is child neglect which can be defined as not doing what is necessary, in other words, being negligent. The combined problem area is often called child abuse and neglect. Child maltreatment involves the physical abuse, neglect, sexual abuse, and emotional abuse of a child.

The Child Abuse Prevention and Treatment Act (CAPTA) defines child abuse and neglect as any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm. For CAPTA, the term *child* is someone who has not reached the age of 18; or (except in the case of sexual abuse) the age specified by the child protection law of the state in which the child resides.

Within the minimum standards set by CAPTA, each state is responsible for providing its own definitions of child abuse and neglect. Most states recognize seven major types of maltreatment: neglect, physical abuse, sexual abuse/exploitation, emotional abuse, parental substance abuse, abandonment, and satanic or ritualistic child abuse (Child Welfare Information Gateway, 2007). Although any of the forms of child maltreatment may be found separately, they often occur in combination. All states, the District of Columbia, American Samoa, Guam, the Northern

Mariana Islands, Puerto Rico, and the Virgin Islands provide definitions of child abuse and neglect in statute. As applied to reporting statutes, these definitions determine the grounds for state intervention in the protection of a child's well-being. States recognize the different types of abuse in their definitions, including physical abuse, neglect, sexual abuse, and emotional abuse. Some states also provide definitions in statute for parental substance abuse and/or for abandonment as child abuse (Child Welfare Information Gateway, 2007).

### **Physical Abuse**

Physical abuse is generally defined as "any nonaccidental physical injury to the child" and can include striking, kicking, burning, shaking or biting the child, or any action that results in a physical impairment of the child. In approximately 36 states and American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the Virgin Islands, the definition of abuse also includes acts or circumstances that threaten the child with harm or create a substantial risk of harm to the child's health or welfare.

### **Neglect**

Neglect is frequently defined in terms of deprivation of adequate food, clothing, shelter, medical care, or supervision. Approximately 21 states and American Samoa, Puerto Rico, and the Virgin Islands include failure to educate the child as required by law in their definition of neglect. Seven states further define medical neglect as failing to provide any special medical treatment or mental health care needed by the child. In addition,

four states define as medical neglect the withholding of medical treatment or nutrition from disabled infants with life-threatening conditions. Neglect can be physical, educational, or emotional. Neglect causes almost as many child fatalities as abuse does. Physical neglect includes driving with the child while intoxicated, abandonment, expulsion from the home or refusal to allow a runaway to return home, and inadequate supervision. Educational neglect includes the allowance of chronic truancy, failure to enroll a child of mandatory school age in school, and failure to attend to a special educational need. Emotional neglect includes such actions as marked inattention to the child's needs for affection, refusal of or failure to provide needed psychological care, spouse abuse in the child's presence, and permission of drug or alcohol use by the child. The assessment of child neglect requires consideration of cultural values and standards of care as well as recognition that the failure to provide the necessities of life may be related to poverty (Child Welfare Information Gateway, 2007).

### **Sexual Abuse/Exploitation**

All states include sexual abuse in their definitions of child abuse. Some states refer in general terms to sexual abuse, while others specify various acts as sexual abuse. Sexual exploitation is an element of the definition of sexual abuse in most jurisdictions. Sexual exploitation includes allowing the child to engage in prostitution or in the production of child pornography. Sexual abuse includes fondling a child's genitals, intercourse, incest, rape, sodomy, exhibitionism, and commercial exploitation through

prostitution or the production of pornographic materials (Child Welfare Information Gateway, 2007).

### **Emotional Abuse**

All states and territories except Georgia and Washington include emotional maltreatment as part of their definitions of abuse or neglect.

Approximately 22 States, the District of Columbia, the Northern Mariana Islands, and Puerto Rico provide specific definitions of emotional abuse or mental injury to a child. Typical language used in these definitions is "injury to the psychological capacity or emotional stability of the child as evidenced by an observable or substantial change in behavior, emotional response, or cognition," or as evidenced by "anxiety, depression, withdrawal, or aggressive behavior" (Child Welfare Information Gateway, 2007).

### **Parental Substance Abuse**

Parental substance abuse is an element of the definition of child abuse or neglect in 48 out of the 50 states; in fact Connecticut, Delaware, New Jersey and Vermont are the only states that do not have a parental substance abuse law. Circumstances that are considered abuse or neglect in most states include:

- Prenatal exposure of a child to harm due to the mother's use of an illegal drug or other substance
- Manufacture of a controlled substance in the presence of a child or on the premises occupied by a child
- Allowing a child to be present where the chemicals or equipment for the manufacture of controlled substances are used or stored
- Selling, distributing, or giving drugs or alcohol to a child
- Use of a controlled substance by a caregiver that impairs the caregiver's ability to adequately care for the child (Child Welfare Information Gateway, 2007).

## **Abandonment**

Many states and territories now provide definitions for child abandonment in their reporting laws. Approximately 18 states and the District of Columbia include abandonment in their definition of abuse or neglect. Approximately 13 states, Guam, Puerto Rico, and the Virgin Islands provide separate definitions for establishing abandonment. In general, it is considered abandonment of the child when the parent's identity or whereabouts are unknown, the child has been left by the parent in circumstances in which the child suffers serious harm, or the parent has failed to maintain contact with the child or to provide reasonable support for a specified period of time (Child Welfare Information Gateway, 2007).

## **Satanic or Ritualistic Child Abuse**

Satanic or ritualistic child abuse refers to physical, sexual, and psychological abuse involving the use of rituals. Each of these abuses is repeated over an extended period, and they are often intermingled so that the victim is exposed to psychological, sexual, and physical abuse simultaneously. Ritualistic abuse is a critical aspect of this form of family violence. What may appear to be a rather simple form of child abuse or child sexual abuse may turn out to be just the tip of the iceberg. The emotional, behavioral, and medical indicators present in a child who has been sexually abused may also indicate that the child has been ritualistically victimized. Law enforcement officers, social workers, medical personnel, or teachers often observe these symptoms (Wallace, 2005).

Some of these symptoms include but are not limited to the belief in the supernatural, rituals, occult symbols, and religion, a preoccupation with death and dying and a fear of enclosed or small spaces. The consequences of this type of family violence are still being researched. The victims in many of these cases are very fragile and may have been drugged during much of the abuse, which would leave him/her in a position of having very limited and/or poor recall of the abuse (Wallace, 2005). Dissociative disorders are very likely to develop within victims of ritualistic abuse, which there are four types: multiple personality disorder (MPD), depersonalization disorder, psychogenic amnesia, and psychogenic fugue (Wallace, 2005). The perpetrators of these violent acts often go unpunished, but the effects of this abuse can have a significant impact on the victim for years to come.

Victimization and perpetration of family abuse can begin at an early age. A national survey of women and sexual abuse found that approximately one-third of women reported sexual abuse before age nine, with more than half reporting their first sexual abuse experience before the age of 12 (Mignon, 2002).

Parents and caretakers also neglect children and subject them to very unsanitary conditions and treatment and in extreme cases, the children are exposed to drugs and have to observe their parents substance abuse additive behavior take control and ruin the family structure and harmony in the home (Mignon, 2002).

## **Prevalence of Child Abuse - National and State Statistics**

According to *Child Maltreatment 2005*, the most recent report of data from the National Child Abuse and Neglect Data System, approximately 899,000 children were found to be victims of child abuse or neglect in Federal fiscal year 2005. The maltreatment rate was 12.1 per 1,000 children in the population (Child Maltreatment, 2005).

The 2006 Juvenile Offenders and Victims National Report indicate that neglect was the most common form of maltreatment for victims in 2003. Many children were the victims of more than one type of maltreatment, but if categories of maltreatment are considered independently, 61% of victims experienced neglect (including medical neglect), 19% were physically abused, 10% were sexually abused, 5% were emotionally or psychologically maltreated, and 17% experienced other forms of maltreatment such as threats of harm, abandonment, and congenital drug addiction.

The rates of most types of abuse remained relatively stable from 1998 through 2003. The real world implications of this reports indicates that child maltreatment is very prevalent in the U.S. and the laws that have been put into place to protect children are alive and well. There is a system in place that parents, care givers, and law enforcement personnel can use to reports all forms of abuse. Child protective services agencies receive 50,000 maltreatment referrals weekly—18% are substantiated. In 2003, CPS agencies in the U.S. received an estimated 2.9 million referrals alleging that children were abused or neglected. An estimated 5.5 million children were

included in these referrals. This translates into a rate of 39 referrals for every 1,000 children younger than 18 in the U.S. population. The child maltreatment referral rate for 2003 was up slightly from the 2002 referral rate of 36 per 1,000 children (2006 Juvenile Offenders and Victims National report).

According to the Juvenile Offenders and Victims 2006 National Report Girls' victimization rate was higher than the rate for boys in 2003, and girls made up a slightly greater share of maltreatment victims than did boys (52% vs. 48%). The victimization rate for girls was 13.1 per 1,000 girls younger than age 18, and the rate for boys was 11.6 per 1,000 boys younger than age 18. More than half of all victims of child maltreatment were white in 2003, white children made up the largest share of child maltreatment victims (54%), followed by black children (26%) and Hispanic children (12%). American Indian/Alaska native children (2%) and Asian/ Pacific Islander children (1%) made up substantially smaller proportions of maltreatment victims. Although they accounted for a small share of victims, Pacific Islanders and American Indians had higher child maltreatment victimization rates than other race/ethnicity groups—nearly double the rate for white children. Similarly, the rate for black children was well above the rate for white children.

There is still no national repository of all child victimization statistics, meaning the nation lacks precise data on the number of children who are

victimized each year. Without accurate data, the national debate often turns to the accuracy of the numbers rather than focusing on the problem itself.

In spite of the lack of exact data, recent statistics from the U.S. Department of Justice (2005) on child victimization suggests it is a crisis of national importance. Each year in America it is estimated that:

- 1 million children are substantiated victims of abuse or neglect.
- 130,000 children are sexually abused.
- 2,000 children die as a result of abuse or neglect.
- 450,000 children are considered runaways.
- 127,100 children are considered "throwaways."
- 354,100 children are abducted by parents.
- 3,200 to 4,600 children are abducted by strangers.
- 3 million children witness violence in their homes.
- Large proportions of inner-city children witness violence in their communities.

Approximately 3.3 million allegations of child maltreatment and neglect involving 6 million children were made to Child Protective Services (CPS) agencies. About 62 percent of those allegations reached the report stage and either were investigated or received an alternative response, which include the following types of responses:

*Alternative Response Nonvictim-*: A conclusion that the child was not identified as a victim when a response other than investigation was provided.

*Alternative Response Victim*: A conclusion that the child was identified as a victim when a response other than investigation was provided.

*Indicated:* An investigation disposition that concludes that maltreatment could not be substantiated under State law or policy, but there was reason to suspect that the child may have been maltreated or was at risk of maltreatment. This is applicable only to States that distinguish between substantiated and indicated dispositions.

*Substantiated:* A type of investigation disposition that concludes that the allegation of maltreatment or risk of maltreatment was supported or founded by State law or State policy.

*Unsubstantiated:* A type of investigation disposition that determines that there was not sufficient evidence under State law to conclude or suspect that the child was maltreated or at risk of being maltreated.

Nearly 30 percent (28.5%) of the investigations that reached the report stage determined that at least one child was a victim of child abuse or neglect (Child Maltreatment Report, 2005). Reports of child abuse come from a variety of sources. According to the Child Maltreatment Report of 2005, case-level information is received by CPS agencies regarding all reports that received a disposition or finding within the year. The information includes the report source, the number of children in the investigation, and the disposition of the report. Professionals submitted more than one-half (55.8%) of the reports. "Professional" indicates that the person encountered the alleged victim as part of the report source's occupation. State laws require most professionals to notify CPS agencies of suspected maltreatment. The categories of professionals include teachers, legal staff or

police officers, social services staff, medical staff, mental health workers, child daycare workers, and foster care providers. The three most common sources of reports in 2005 were from professionals, specifically teachers (16.3%), lawyers, or police officers (15.8%), and social services staff (10.0%).

In examining state statistics, there is a wide range. For example, the State of California had the highest number of substantiated child maltreatment cases, a whopping 54,250, out of 173,752 reported cases that were unsubstantiated. New York ran a close second with 42,728, and 97,486. Texas had 38,787 of their reported cases substantiated, and 92,508 cases unsubstantiated. Wisconsin had 7,851 substantiated cases of child maltreatment in 2005, with 20,610 unsubstantiated cases, and 1,199 cases that were closed with no findings.

### **Relevant Legislation**

For most of American history, children were rarely involved in the legal system. The notion of children's legal rights is a modern one, as historically children have been viewed as property, without rights of their own. That began to change with the industrial revolution of the 19th century and the founding of juvenile courts at the beginning of the 20th century. In the 21st century, children do have legal rights, defined by complex state and federal law. Children are also the subjects of millions of judicial proceedings each year. Children are involved in the court system as victims of abuse and neglect, as juvenile offenders, as subjects of custody, visitation and adoption

proceedings, and as participants in civil damages litigation (National Association of Counsel for Children).

The 1980s witnessed the emergence of many new legal rights and protections for child victims. Nationally publicized cases involving child abduction, sexual abuse, and chronic physical abuse leading to death gave the nation and its legislators a wake-up call to the plight of abused children. Much of the legislation that followed focused on protecting children from abuse and reducing the trauma of children participating in the criminal justice system (U.S. Department of Justice, 2000).

In every state, the following people are required by law to report suspected abuse: doctors, nurses, dentists, mental health professionals, social workers, teachers, day care workers, law enforcement personnel. In some states, clergy, foster parents, attorneys, and camp counselors also are required to report abuse. In about 18 states, any person who suspects abuse is required to report it.

The 1982 Final Report of the President's Task Force on Victims of Crime voiced a special concern for child victims of sexual abuse, calling for a response to child victimization in two general areas: (1) protecting children through legislation requiring or permitting child-serving institutions and agencies to check for criminal records of prospective candidates for employment or volunteer positions, and (2) treating child victims with sensitivity by calling on prosecutors and judges to recognize "the profound impact that sexual molestation and sexual violence has on young victims and

their families and to treat it as a crime that should result in punishment, with treatment available when appropriate." The legal rights issue in the 80's sparked new child abuse and/or maltreatment legislation, such as the Jacob Wetterling Crimes Against Children and Sexually Violent Offender Registration Act, Megan's law, and the Pam Lychner Sexual Offender Tracking and Identification Act.

In response to the 1988 amendments to the Child Abuse Prevention and Treatment Act, the Children's Bureau in the U.S. Department of Health and Human Services developed the National Child Abuse and Neglect Data System (NCANDS) to collect child maltreatment data from state child protective services (CPS) agencies

At this point there was still no law that requires states to create and implement a sex offender and crimes against children registry. Up until 1994, suspects could commit such crime and live in areas adjacent to school and playgrounds without the public having any knowledge of their past crimes. In 1994, the Jacob Wetterling Crimes Against Children and Sexually Violent Offender Registration Act was passed as part of the Federal Violent Crime Control and Law Enforcement Act of 1994. This law requires states to implement a sex offender and crimes against children registry. In 1996 Megan's Law amends the Wetterling Act. It requires states to establish a community notification system.

The Pam Lychner Sexual Offender Tracking and Identification Act of 1996 becomes an amendment to the Wetterling Act. It requires lifetime

registration for recidivists and offenders who commit certain aggravated offenses. In 1998, provisions contained in Section 115 of the General Provisions of Title I of the Commerce, Justice, and State, the Judiciary, and Related Agencies Appropriations Act (CJSA) amend the requirements of the Wetterling Act to include heightened registration requirements for sexually violent offenders, registration of federal and military offenders, registration of nonresident workers and students, and participation in the National Sex Offender Registry (NSOR). In 2000, the Campus Sex Crimes Prevention Act amends the Wetterling Act, requiring offenders to report information regarding any enrollment or employment at an institution of higher education and to provide this information to a law enforcement agency whose jurisdiction includes the institution (Bureau of Justice Assistance).

In 1996, Megan's Law amended the Jacob Wetterling Act to provide for the notification of a community regarding the presence of a registered sex offender. The law was passed to better protect children from known sex offenders. State legislation protecting child victims are designed to protect children but there are a number of systematic and structural problems with our treatment and rehabilitation process. More funding and better-trained personnel are needed to improve the current situation relating to child protective services agencies.

Numerous state laws now exist to protect children from physical and sexual abuse and provide an array of rights and services for child victims who participate in the criminal justice process. Reforms on behalf of

children have taken place at every step of the criminal justice process, from the initial reporting of abuse through the investigation, prosecution, and disposition of convicted offenders (Mignon, 2002). Many of these reforms expediting the adjudication of child abuse cases, limiting the number of investigative interviews with child victims, and providing advocacy for child victims in criminal courts that were considered radical a decade ago but are now common practice in many communities. More can be done, however, to protect the rights and improve the treatment of all child victims. As a first step, special protections for child victims participating in the criminal justice system must be made consistent nationwide.

### **The Need for Victim Services**

Among the various forms of child abuse, sexual exploitation is by far one of the more violent and severe. The effects of sexual exploitation can be devastating. The emotional consequences of child sexual abuse can range from low self-esteem to serious mental health problems. Children and youth who become involved in other forms of sexual exploitation often have additional emotional burdens to bear.

Many exploited youth suffer from having been manipulated rather than explicitly coerced into these activities. As a result, they may feel responsible for, or at least complicit in, the sexual behaviors. Young victims of pornography have lost control over images of themselves in print, on film, or in computer memories. These images may surface to haunt them at any time in their lives.

Children and youth who are involved in prostitution are often runaways who have left abusive homes for the perceived benefits of independence on the streets. Some have consciously chosen the excitement of the street over the boredom or restrictions of their homes. Lacking formal education or job skills, they survive by whatever means they can, which are often illegal. They may steal, sell drugs, or trade their bodies for a meal or a place to stay. As a result, they may enter the criminal justice system as offenders rather than as victims. However, these young people are additionally burdened by their early problems and/or victimization in their homes, by the exigencies of life on the street, and by the compounded trauma of having been exploited by a number of adults over a long period of time. They are also at high risk for contracting the HIV and other serious health hazards.

In sum, sexual exploitation carries with it a number of serious short- and long-term consequences for its young victims. There is a variety of public and private agencies whose purpose is to provide medical, emotional, and legal support to these children and youth, including child protection agencies, victim assistance agencies, mental health centers, medical facilities, runaway shelters, drop-in centers, outreach projects, independent or transitional living programs, and youth services programs (Massachusetts Child Exploitation Network, 1995).

State child maltreatment victimization rates varied substantially in 2003. Child maltreatment victimization rates ranged from a low of 1.6 to a

high of 42.2 per 1,000 children ages 0-17. Half the states had child maltreatment victimization rates lower than 10.4 per 1,000 children ages 0-17. It should be noted that for the purposes of this study a child was counted as a victim each time he r she was found to be a victim of maltreatment (Walter R. McDonald and Associates' Child maltreatment, 2003).

The youngest children are the most vulnerable child maltreatment victims. Although children younger than 1 year old were just 10% of all maltreatment victims in 2003, they accounted for 44% of maltreatment fatalities. Similarly, children younger than 4 were 28% of all victims but 79% of maltreatment fatalities. Mothers were the most common perpetrators in child maltreatment fatalities Nearly 4 in 10 maltreatment fatalities resulted from neglect alone. Physical abuse accounted for 3 in 10 fatalities, and about the same proportion resulted from multiple forms of maltreatment in combination. Mothers were involved in 59% of maltreatment fatalities. Fathers were involved in 39% of maltreatment fatalities.

### **The Importance of Preventing Child Abuse**

The term "prevention" is typically used to represent activities that stop an action or behavior. It can also be used to represent activities that promote a positive action or behavior. Research has found that successful child abuse interventions must both reduce risk factors and promote protective factors to ensure the well-being of children and families.

The Child Welfare Information Gateway provides access to information and resources to help protect children and strengthen families

and is a service of the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. The Child Welfare Information Gateway reports that protective factors are conditions in families and communities that, when present, increase the health and well-being of children and families. They are attributes that serve as buffers, helping parents who might otherwise be at risk of abusing their children to find resources, supports, or coping strategies that allow them to parent effectively, even under stress.

The impact of child maltreatment can be profound. Research shows that child maltreatment is associated with adverse health and mental health outcomes in children and families, and those negative effects can last a lifetime. In addition to the impact on the child, child abuse and neglect affect various systems including physical and mental health, law enforcement, judicial and public social services, and nonprofit agencies as they respond to the incident and support the victims. One analysis of the immediate and long-term economic impact of child abuse and neglect suggests that child maltreatment costs the nation as much as \$258 million each day, or approximately \$94 billion each year (U.S. Department of Health and Human Services [DHHS], 2007).

On average, abused and neglected children begin committing crimes at a younger age, they commit nearly twice as many offenses as nonabused children, and they are arrested more frequently. Widom also conducted interviews with a large number of people 20 years after their childhood

victimization. Preliminary findings from this follow up study suggest that the long-term consequences of childhood victimization may also include mental health concerns, educational problems, alcohol and drug problems, occupational difficulties, and in some cases death. Children younger than 4 years are at greatest risk of severe injury or death. In 2003, children younger than 4 years accounted for 79% of child maltreatment fatalities, with infants under 1 year accounting for 44% of deaths (DHHS, 2004).

### **Multidisciplinary Teams**

The Federal Victims of Child Abuse Act also directs the court and attorneys for the government to work with state and local governments that have established multidisciplinary teams to assist young victims and witnesses. Such teams are defined to include representatives from health, social service, law enforcement, and legal service agencies. The role of multidisciplinary teams is to provide a range of services to young victims as witnesses, including,

- medical diagnoses and evaluation services
- telephone consultations in emergencies
- medical evaluations related to abuse or neglect
- psychological and psychiatric diagnoses and evaluations
- expert medical, psychological, and related professional testimony
- case service coordination and assistance
- training for judges, litigators, court officers and others

Where there is no existing multidisciplinary team, the U.S. Attorney General Guidelines accompanying the Victims of Child Abuse Act instructs federal investigators to coordinate with existing child protective service agencies. Child victims and witnesses who reside on military installations or Indian reservations can also expect services from multidisciplinary teams. Family Advocacy Case Management Teams on military installations coordinate medical, dental, legal, law enforcement, social service reporting, identification, investigation, and treatment functions for all child abuse cases. Likewise, on Indian reservations, the Indian Child Protection and Family Violence Prevention Act requires the development and implementation of multidisciplinary child abuse investigation and prosecution programs and stresses coordination of law enforcement, courts, and other tribal, federal, and state agencies (Massachusetts Child Exploitation Network, 1995).

As of December 1993, 31 states had enacted statutes mandating or authorizing the creation of multidisciplinary child protection teams. In many communities, these teams meet as soon as possible after a report is received so they can coordinate their investigative activities, e.g., by arranging joint interviews with young witnesses or the timing of an interview with the suspect. Coordinating in this way allows each participating agency to perform its respective role most effectively while enhancing the overall quality of investigations (Massachusetts Child Exploitation Network, 1995).

In Maurine Proctor's article, "Combating Child Exploitation-A Supreme Statement, it was related that the Internet is a cesspool of child pornography, and in an attempt to stop the exploitation of children, our society's most innocent and vulnerable, in 2003 Congress passed the PROTECT Act, a provision of which was then overturned by the U.S. Court of Appeals for the Eleventh Circuit (Proctor, 2007).

In 2000, the state of Florida implemented a child protection team program called the Department of Health Children's Medical Services Child Protection Team (CPT). Section 39.303, Florida Statutes, authorizes the Children's Medical Services Program in the Department of Health to develop, maintain, and coordinate child protection team services through contracts with local community-based programs. Twenty-four Child Protection Teams, some with satellite offices, provide these services to all children in the state meeting criteria for referral.

CPT is a medically directed, multidisciplinary statewide program designed to supplement the child protective investigation activities of local Sheriff's offices and the Department of Children and Family Services in complex cases of child abuse and neglect. It operates on the premise that child abuse and neglect is a multifaceted problem requiring multidisciplinary evaluation. Child protection teams provide expertise in evaluating alleged maltreatments of child abuse and neglect, assessing risk and protective factors, and providing recommendations for interventions to protect children

and enhance their caregiver's capacity to provide a safer environment when possible (Florida Department of Health, 2000).

Minnesota Statute 626.558 requires county agencies to establish a multidisciplinary child protection team that may include, but not be limited to, the director of the local welfare agency or designees, the county attorney or designees, the county sheriff or designees, representatives of health and education, representatives of mental health or other appropriate human service or community-based agencies, and parent groups. A community-based agency may include, but is not limited to, schools, social service agencies, family service and mental health collaboratives, early childhood and family education programs, Head Start, or other agencies serving children and families (Carver County Health Department, 2003).

Today, child abuse is considered to be the most serious criminal act against children in our society (Department of Justice Canada, 2005). Due to the complex and sensitive nature of child abuse, treatment must be comprehensive to meet the needs of children and their families. According to Burgess (1979), "Abuse does not occur within a vacuum, but within a social matrix that consists of recurring transactions taking place between various members of the family" (p. 789). This social matrix extends to the broader community where children affect and are affected by interactions with others at school, in their neighborhoods, and the larger society. Thus, treatment is unlikely to be effective if it occurs within a vacuum. As a result, multidisciplinary child protection teams began to form in the late

1950s and are now commonly used. Indeed, failure to include a multidisciplinary approach is considered a form of malpractice.

According to the Juvenile Offender and Victim 2006 National Report, neglect was the most common form of maltreatment for victims in 2003. Many children were the victim of more than one type of maltreatment, but only if categories of maltreatment are considered independently. Fifty-one percent of victims experienced neglect including medical neglect. Nineteen percent were physically abused. Ten percent were sexually abused. 5% were emotionally or psychologically maltreated. And 17% experienced other forms such as threats to harm, abandonment, and congenital drug addiction. The rates of most types of abuse remained relatively stable from 1998 through 2003 (OJJDP, 2004).

### **Current Law Enforcement Child Abuse Investigative Practices**

In protecting our children from criminal predators, law enforcement professionals are serving their communities and their Nation. Child abuse is a community problem. No single agency has the training, manpower, resources, or legal mandate to intervene effectively in child abuse cases. No one agency has the sole responsibility for dealing with abused children. When a child is physically beaten or sexually abused, the ideal set of events is that doctors treat the injuries, therapists counsel the child, social services works with the family, police arrest the offender, and attorneys prosecute the case. To promote this response, effective community intervention involves the formation of a child protection team that includes professionals from

medicine, criminal justice, social work, and education who understand and appreciate the different roles, responsibilities, strengths, and weaknesses of the other team members but cooperate and coordinate their efforts. The skills of each person are viewed as different but equally important.

The role of law enforcement in child abuse cases is to investigate to determine if a violation of criminal law occurred, identify and apprehend the offender, and file appropriate criminal charges. The response of law enforcement to child abuse needs to be consistent. The intent of this guide is to provide officers who respond to this type of crime with information that will ensure this consistency. It is also to help law enforcement understand the importance of developing procedures and protocols and ways they can work with other professions to ensure that the needs of children are met.

State-mandated reporting laws require a referral when there is a suspicion of abuse. In most child abuse cases, law enforcement becomes involved in one of two ways: by a referral from a school, a physician, or an agency such as social services, or by a direct call for service from a parent, a child, or a neighbor. Because of increased reporting of child abuse, it is critical that police officers be trained to handle cases involving child maltreatment.

Child abuse cases have unique characteristics that make them different from other types of cases. For a number of reasons, children make "perfect" victims, and crimes involving child abuse, particularly sexual abuse, are among the most difficult investigated by law enforcement.

Child abuse is a multidimensional problem that requires a multidisciplinary, multiagency team approach for successful intervention. This means that all professionals involved in law enforcement, child protective services, mental health, medicine, and the law communicate and coordinate with one another. A child best interest can be served only when the various professionals that are involved understand their respective roles, possess knowledge of their State statutes and local guidelines, and have adequate training in their respective fields. Sensitive and consistent application of policies and procedures established in written protocols is essential for an effective alliance to combat child maltreatment (Hammond, C., 2001).

### **Section III. Theoretical Framework**

Child abuse can be looked at from a variety of theoretical perspectives; however, the focus of this paper will be narrowed to the rational choice and routine activities theories. The following section is divided into two parts. The first part is an overview discussion of child abuse causation from the rational choice theoretical perspective. The second section links child abuse causation to the perspective of the routine activities theory.

#### **Rational Choice Theory**

The rational choice theory has several inherent assumptions, which include:

1. Humans are purposive and goal oriented;
2. Humans have sets of hierarchically ordered preferences, or utilities; and
3. In choosing lines of behavior, humans make rational calculations with respect to:
  - a. utility of alternative lines of conduct with reference to the preference hierarchy,
  - b. the costs of each alternative in terms of utilities foregone, and
  - c. the best way to maximize utility (Turner, 1991, p. 354).

The earliest roots of rational choice theory go all the way back to the classical school theory, which include the theorists Jeremy Bentham and Cesare Beccaria (Lilly, Cullen, and Ball, 1995, p. 216). The central points of the classical school theory are:

- (1) The human being is a rational actor,
- (2) Rationality involves an end/means calculation,

- (3) People (freely) choose behavior, both conforming and deviant, based on their rational calculations,
- (4) The central element of calculation involves a cost benefit analysis: Pleasure versus Pain [or as Bentham termed it the hedonistic calculus],
- (5) Choice, with all other conditions equal, will be directed towards the maximization of individual pleasure,
- (6) Choice can be controlled through the perception and understanding of the potential pain or punishment that will follow an act judged to be in violation of the social good, the social contract,
- (7) The state is responsible for maintaining order and preserving the common good through a system of laws (this system is the embodiment of the social contract),
- (8) The Swift, Severe, and Certain of punishment are the key elements in understanding a law's ability to control human behavior (Keel, 1997, p. 51 ).

Both the classical school and rational choice theory proceed on the assumption that individuals make reasoned decisions based on maximization of pleasure or profits. However, contemporary rational choice theorists differ from the more rationalistic exponents of classicism by making allowances for factors such as morality, inaccurate information and fear "that might distort the hedonistic calculus of classical theory" (Lilly, Cullen & Ball, 1995, p. 216).

The rational choice perspective of criminology expounded by Clarke and Cornish in 1985 insists that "crime is behavior designed to meet the offender's commonplace needs for such things as money, status, sex, excitement, and that meeting these needs involves the making of decisions and choices, constrained as they are by limits of time and ability and the availability of relevant information" (Clarke, 1997, p. 9-10). In sum,

criminal offenders make decisions that appear rational, to the offenders at least, to engage in specific criminal acts.

Rational Choice theory describes law-violating behavior as an event that occurs when an offender decides to risk violating the law after considering his or her own need for money, personal values or learning experiences and how well a target is protected, how affluent the neighborhood is or how efficient the local police are. Before committing a crime, the reasoning criminal weighs the chances of getting caught, the severity of the expected penalty, the value to be gained by committing the act, and his or her immediate need for that value (Siegel, 1992, p 131). This perspective was being adopted by a number of social scientists in various disciplines with an interest in criminal behavior. Hence, the term "reasoning criminal" was coined (Cornish & Clarke, 1986: 1).

### **Routine Activities Theory**

The Routine Activity Theory (RAT) is one of the main theories of "environmental criminology". It was developed by criminologists Lawrence Cohen and Marcus Felson, who have worked for a number of years on crime prevention theory. RAT states that for a predatory crime to occur, 3 elements must be present when any crime is committed. RAT incorporates the crime triangle, sometimes referred to as the "problem analysis triangle" (PAT). RAT states that when a crime occurs, 3 things happen at the same time and in the same space:

- a suitable target is available

- there is the lack of a suitable guardian to prevent the crime from happening
- a likely and motivated offender is present

The first condition for crime is that a suitable target must be available.

The word target has been chosen carefully, rather than other words such as victim.

There are 3 major categories of target. A target can either be:

- a person
- an object
- a place

There are plenty of potential targets around us, but not all of them are suitable. Two acronyms are sometimes used to describe suitable targets:

- **VIVA:** Value, Inertia, Visibility, Access
- **CRAVED:** Concealable, Removable, Available, Valuable, Enjoyable, Disposable

Targets may also be repeat targets. No matter how suitable a target is, an offense will not occur unless a capable guardian is absent and a likely offender is present. The second condition is that a capable guardian whose presence would discourage a crime from taking place must be absent. A capable guardian has a 'human element', that is usually a person that by their mere presence would deter potential offenders from perpetrating an act. A capable guardian could also be CCTV, providing that someone is monitoring it at the other end of the camera.

Some examples of capable guardians:

- police patrols
- security guards
- Neighborhood Watch schemes
- door staff
- vigilant staff and co-workers
- friends
- neighbors

RAT introduces an important tool in crime analysis, the crime triangle (which has also been called the problem analysis triangle (PAT)). In the past the Crime Reduction Centre has presented these 2 triangles separately with PAT being used in the analysis of a crime problem (victim, location, offender) and RAT use to develop the interventions (target/victim, location and absence of a capable guardian). The latest formulation of the crime triangle sees a combination of the 2 helping to think about responses as well as analysis. (Clarke, & Felson, 1993).

#### **Section IV. Applying Theory to Explain Revictimization Through Child Abuse**

Child abuse has gained a great deal of public attention in the past few decades. Various factors in the recent years have generated such a public hysteria regarding child abuse that it has become one of the most high-profile crimes, especially in America. Since the 1970's the sexual abuse of children and child molestation has transformed into a highly publicized and culturally intolerable crime. While child abuse has been prevalent throughout history, it has only become the object of such public attention in recent times. Family violence is one of the main contributors of child abuse and child sexual abuse. A Child victim of family violence will often commit crimes at an early age and in some cases they become child abusers themselves, (Clark, 1993).

##### **Application of the rational choice theory**

The rational choice theory implies that family violence is determined by a system of cost and rewards (Clark, 1993). The rational choice theory argues that family violence is determined by a system of cost and rewards. The rational choice theory seems to also fall in line with the exchange theory, both of which detail the major contributing factors of family violence.

Long-term child abuse can have a lasting impact on the victim. Widom (1992) conducted a study that revealed a significant link between victimization in childhood and later involvement in violent crimes, signifying a cycle of violence. On average, abused and neglected children begin committing crimes at a younger age, they commit nearly twice as many

offenses as non-abused children, and they are arrested more frequently (National Institute of Justice, 2001).

One of the most important family risk factors is parental physical or sexual abuse. The Rochester Youth Development Study found that “subjects who had experienced maltreatment during childhood were significantly more likely to display a variety of problem behaviors during adolescence including serious and violent delinquency, teen pregnancy, drug use, low academic achievement, and mental health problems” (Kelley, Thornberry & Smith, 1997, p. 1). Early childhood incidents can and do play a large role in placing a child at risk.

The rational-choice theory details situational approaches to offending that focus on the relationship between offender and victim and why specific crimes are committed. Situational analyses aim to predict high-risk times, places, and persons, based on personal choices that increase the likelihood that an individual with certain characteristics will engage in risky and criminal behavior. Routine-activities theory and the rational-choice theory are based in this view of criminal behavior. Routine activities theory proposes that three factors must be present for a crime to occur: a likely offender, a suitable target, and the absence of a capable guardian to deter or challenge the offending behavior. Sexual predators or child abusers often look for suitable targets, young children that have little or no parental supervision.

In addition to the immediate and short-term harm of maltreatment, there are long-term ramifications of childhood victimization. Research has shown that the consequences of child maltreatment extend into adolescence and beyond (Wallace, 2005). Survivors of child maltreatment experience many problems in the course of adolescent development. A variety of negative teenage outcomes, such as, delinquency, pregnancy, alcoholism and drug abuse, school failure and emotional and mental health problems have been identified.

The Rochester Youth Development Study, conducted by researchers at the University of Albany, State University of New York, is one of three longitudinal projects under OJJDP's (Office of Juvenile Justice and Delinquency Prevention), program of research on the causes and correlates of delinquency as it relates to the rational choice theory. To determine how maltreated youth differ from the general adolescent population, the researchers asked:

- What is the range and extent of problems found among adolescents who were maltreated as children, compared with those who were not?
- To what extent is child maltreatment a risk factor for the development of multiple problems in adolescence?

The researchers found that maltreatment during childhood significantly increases the risk for a variety of adolescent problem behaviors, including delinquency, teen pregnancy, drug use, low academic achievement, and mental health problems. Also, youth who had been victims of child maltreatment were more likely than nonmaltreated youth to exhibit multiple

problem behaviors. Subsequent analysis are planned to address additional research questions:

- What key risk factors appear to increase the likelihood that a maltreated child will become a troubled youth?
- What protective factors serve to enhance youth resilience despite a history of child maltreatment?

This research clearly has implications for policy and intervention efforts that target those challenging cases of adolescents who have problems in more than one area of life. The findings should be of interest to all persons in a position to prevent child maltreatment and those who could intervene in the lives of victimized children and youth. Since the rational choice theory implies that family violence is determined by a system of cost and rewards. Clark indicated that "crime is behavior designed to meet the offender's commonplace needs for such things as money, status, sex, excitement, and that meeting these needs involves the making of decisions and choices, constrained as they are by limits of time and ability and the availability of relevant information. The application of the rational choice theory to child maltreatment implies that the home environment plays a significant role in adolescent behavior. Therefore, this paper is intended not only for policy makers and practitioners but also for parents, who are in the best position to protect and nurture their children's development. Parents need to teach their children to make sound rational choices early in life and ensure that they value hard work and in order to make an honest living.

Routine activity theory, also called opportunity theory or exposure theory, holds that the more an individual's everyday routines expose the individual to a stimulus for a given outcome, the more of that outcome will be associated with the individual. For instance, the more an individual goes to drinking establishments at night, the more exposure to risk of robbery, and the more likely that individual will report having been robbed. In crime studies based on routine activity theory, victimization is seen as a function of exposure to risk, where risk has three main dimensions: degree of exposure of the potential victim to potential criminals, environmental deterrents which reduce the opportunity for crime, and deterrent traits of the potential victim him/herself. The routine activities theory (RAT) (Cohen & Felson, 1979), which is a proposed general theory of crime in relation to child sexual abuse, examines the utility of this theory, which implies that exposure to risk increases the potential to be victimized and report the abuse.

Routine activity theory is common in studies of victimization, where demographic variables (age, race, education, gender, etc.) are often used as proxies for unmeasured risk variables (living in high crime neighborhoods, frequenting high-crime establishments, work in areas low in police protection, low personal capacity to resist, etc.). Researchers uphold routine activity theory by demonstrating the correlation of exposure to risk (measured directly or by proxy) to actual victimization. There is some evidence that direct measurement of exposure to risk is more revealing than use of proxy demographic measures (Clark & Felson, 1993).

## **Section V: Recommendations, Summary, and Conclusions**

This section is divided into six parts. The first part contains the recommendations for improving child advocacy centers. The second section suggests recommendations for legislative support and education that would help victims of child abuse better cope with and eventually overcome the effects of abuse. The third section offers recommendations for teaming and multidisciplinary teams and polices. The fourth section addresses the need for improving current law enforcement interview and/or investigative procedures. The fifth part list specific recommendations for law enforcement agencies. The last section includes the summary and conclusion.

### **Child Advocacy Centers**

Victims' rights and services have evolved over the years, yet consequently there is an increased need for more enhanced victim services and rights for the nation's children who are touched by crime. To address the need for increased victim services and rights for victims of child abuse, the first step would be to review the recommendations as set forth by the .Department of Justice. To see the specific wording of each of the recommendations see Appendix A. Furthermore, a three-pronged approach, i.e., treatment, prevention, and education for both the victim and the offender should be considered as another viable approach to addressing this problem. Criminal justice agencies and child advocacy centers should follow the lead of experts in the field as one of their primary functions is to provide policy

direction and guidance to law enforcement agencies. Their suggested three-pronged approach is vital to minimizing the long-term effects of child abuse, reducing the potential for revictimization, and should help to reduce the number of victims that become at-risk juveniles as a result of their victimization. The ability to enhance current child abuse treatment efforts hinges on the effectiveness of child advocacy centers and the proper use of multi-disciplinary teams.

### **Legislative Support and Education**

The enactment of the nation's first State Bill of Rights for crime victims in 1980 ushered in an era of dramatic progress for victims' rights. Since that time, state actions in legislating rights for crime victims within the criminal and juvenile justice systems have been remarkable. Laws extending rights to victims of federal crimes have also been passed by Congress. Despite this record of success, too many crime victims are still being denied fundamental rights in the federal, state, tribal, and military justice systems. Many victims' rights laws are not being implemented and few jurisdictions require proof of compliance from justice agencies mandated to carry out these important rights. To enhance victims' rights implementation efforts and improve legislative compliance across all justice systems requires adherence to several key recommendations.

The first recommendation is to suggest that the U.S. Constitution be amended to guarantee fundamental rights for victims of crime. Constitutionally protected rights should include the right to notice of public

court proceedings and to attend them; to make a statement to the court about bail, sentencing, and accepting a plea; to be told about, to attend, and to speak at parole hearings; to notice when the defendant or convict escapes, is released, or dies; to an order of restitution from the convicted offender; to a disposition free from unreasonable delay; to consideration for the safety of the victim in determining any release from custody; to notice of these rights; and to standing to enforce them.

This legislation includes other recommendations such as providing crime victims the right to notice of public court proceedings, including pretrial release hearings, plea agreements, sentencing, appeals, and appropriate post conviction release proceedings such as probation and parole hearings. Victims should also have the right to notice of any significant change in the status of defendants and to receive timely notice, upon request, of inmates' temporary or permanent release, or inmates' escape or death. Federal and State laws should be strengthened to ensure that victims have the right to be present throughout all public court proceedings.

Prosecutors should provide victims an opportunity for meaningful consultation prior to major case decisions such as dismissal, reduction of charges, or acceptance of plea agreements. Judges should not accept plea agreements without first asking prosecutors on the record if they have consulted the victim, and judges should take the views of the victim into account before making a final sentencing decision. Special procedures should be developed for cases involving multiple crime victims, such as acts of mass

violence, massive antitrust or telemarketing cases, where consultation may be difficult.

Introductory and continuing education for all criminal and juvenile justice professionals should address victims' rights, needs, and services, and incorporate involvement from crime victims themselves. New funding mechanisms must be developed to support the expansion and implementation of victims' rights and services nationwide. Crime victims should have the right to be heard in major court proceedings including pretrial release hearings, bail hearings, at sentencing, and before the disposition of plea agreements, probation, parole, and commutation. Input should be permitted through both oral and submission of written, videotaped, or audio taped statements thus reducing the potential for revictimization.

States should review their victims' rights statutes and constitutional amendments to determine if fundamental rights are extended to all crime victims. States that have not already done so should adopt truth in sentencing reforms to ensure that victims know how long offenders will actually be incarcerated. Federal and State laws should prohibit employers from taking adverse action against victims who must miss work to participate in the criminal or juvenile justice process.

Lastly, victims and witnesses of crime should have the right to reasonable protection, including protection from intimidation. The safety of victims and witnesses should be considered in determining whether offenders should be released from custody prior to completing their full sentence. All crime

victims should have the right to a full range of services and support to help them recover physically, psychologically, and in practical ways from the effects of crime, whether or not they report the crime or become involved in related criminal prosecutions or juvenile adjudications.

In June 2006, State of New York Assembly Speaker, Sheldon Silver, and Children and Families Committee Chair William Scarborough announced significant committee action on a package of bills aimed at strengthening New York's child protection system by enhancing child protective worker standards and training; making it easier to terminate parental rights in cases where a homicide has been committed against a parent or sibling; and providing critical services for the rising number of youth who suffer sexual exploitation.

These measures are expected to be considered on the floor of the Assembly before the conclusion of the 2007 session. Silver and Scarborough state that these are important measures that would codify the Assembly's Child Protective and Abuse Prevention Package, which was part of the bipartisan budget adopted by the Legislature in April 2007. The lawmakers noted the package was the direct result of a series of statewide public hearings conducted by the Assembly committees on Children and Families and Oversight, Analysis and Investigation.

### **Teaming and Multidisciplinary Policies**

The bills, which were reported out of the Children and Families Committee would reduce caseloads of child protective workers, enhance

training and education for the thousands of mandated reporters who trigger entry into the child protective system, improve communication and establish better protocols for multidisciplinary responses among law enforcement and child protection agencies throughout the state and create a new, executive Office of the Child Advocate to ensure that vulnerable children have a strong and effective watchdog to monitor this vitally important system. Although most states have laws that pertain to multidisciplinary teams and collaborative responses to child abuse, the New York model is one that I would recommend that all states follow.

The New York model clearly establishes guidelines for improved child protective services worker training and addresses the issue of terminating parental rights, which is important since a considerable amount of child abuse is committed by a family member. The fact the State of New York requires multidisciplinary teams to provide a full range of services and support to help child abuse victims recover physically, psychologically, and in practical ways from the effects of crime, whether or not they report the crime or become involved in related criminal prosecutions or juvenile adjudications sets the stage for a successful program that is designed for continuous assessment and improvement.

There are a number of laws and policies that govern the State of Virginia's multidisciplinary teams, other professionals need to work together to ensure the best possible outcome for the children they serve. In 1975, the Virginia General Assembly enacted legislation requiring multidisciplinary

teams. Multidisciplinary teams are essential to minimizing the effects of child abuse. Professionals working with abused and neglected children generally agree that a multi-disciplinary approach to child maltreatment has the greatest potential for success, (Virginia Juvenile Services, 2006).

This Multidisciplinary Team Case Tracking Sheet was developed by the Children's Justice Act Program to assist teams staffing cases. Different localities may want to track different information. For example, some communities may want to include a column noting whether the child has been referred for mental health or other services. This document can be changed to meet your needs. Simply save the document to your computer; alter it as needed; and tab through the document inserting your case information.

According to the legislators from the State of New York, the multidisciplinary team approach is the best approach to investigating child abuse and neglect cases, whether the team members are co-located or not. There is a growing trend to locate team members within a single building or Children's Advocacy Center, providing an array of services to children and families. Children Advocacy Centers of Virginia is the Official Virginia State Chapter of the National Children's Alliance, a national non-profit agency that certifies children's advocacy and support organizations. Children Advocacy Centers of Virginia, CACVA provides monetary and logistical support to Virginia communities seeking to improve children services. For more

information on Children's Advocacy Centers, contact CACVA or the National Children's Alliance.

A booklet on Information Sharing and the Multidisciplinary Child Abuse Team was developed to provide guidance on Virginia law to professionals serving on multidisciplinary teams investigating allegations of child abuse and neglect. This information is provided as guidance to teams regarding what information may be shared and is not intended to provide legal advice or substitute for consultation with counsel. The State of Virginia, unlike the State of New York, does not have laws that specifically address the need to terminate parental rights, which in itself could possibly reduce and/or eliminate the reoccurrence of abuse.

Over the past decade, thousands of programs have been initiated across the country to respond to child victims. These programs include multidisciplinary initiatives that provide a coordinated response of various agencies involved in responding to child victims; enhanced support and representation for child victims in the criminal justice and juvenile court system; and prevention programs. We must continue to fund this effort if we are to truly make an impact on child abuse in this country.

Because many child abuse and neglect cases involve simultaneous responses by child protection agencies and law enforcement agencies, professionals have come to recognize the benefits to be gained not only by the investigating agencies but also by the child victims when their investigations are better coordinated. Multidisciplinary teams have been developed in

hundreds of communities (based in hospitals, police departments and prosecutors' offices, and child protection and nonprofit agencies) to improve coordination and communication among the personnel involved in these cases. One of the most important reforms brought about by multidisciplinary teams is the ability to conduct joint interviews of child victims, reducing the number of interviews and interviewers to which child victims are exposed in the course of an investigation. It is imperative that we continue to utilize these partnerships and minimize the repeated interviewing of the victim.

Another portion of this Bill calls for the strengthening and expanding child advocacy centers (CACs), calling them "modern day miracles in the fight against child abuse and neglect," Assembly Speaker Sheldon Silver and Families Committee Chair William Scarborough said the Assembly would continue advocating strongly for the expansion of child advocacy centers (CACs) and multi-disciplinary investigative teams across New York State. Assembly Bill 11188 would create a statutory definition of child advocacy centers and require CACs to meet certain minimum standards.

Following a series of statewide hearings in 2006, the Assembly concluded the lack of coordination amongst law enforcement agencies, child protective services and other entities involved in the protection of children was a major impediment in effectively protecting abused and neglected children.

CACs and multi-disciplinary investigative teams provide children and their families coordinated intervention services from teams that include

professionals from child protective services, law enforcement, medical, prosecution, mental health and other disciplines responsible for the investigation and management of reports of child abuse. These facilities focus on the needs of child-abuse victims, thereby increasing rates of prosecution of child abusers and more effectively and humanely assisting child victims.

According to Scarborough, there are 28 CACs and seven multidisciplinary teams statewide (New York). While co-location of these centers and teams is a recommended best practice, this arrangement exists at a limited number of sites.

### **Improvement of Criminal Justice and Law Enforcement Agencies Interview Procedures**

In order to improve the criminal justice response to children exposed to violence, criminal justice professionals need to ensure the earliest possible recognition and reporting of crimes against children. This means all criminal justice professionals who come in contact with children should be trained to identify children who are exposed to violence as victims or witnesses and should be informed of the impact of victimization. Specifically, criminal justice professionals assigned to handle cases involving child victims should have more in depth training in forensic interviewing, child development, identification of abuse-related injuries, the emotional and psychological impact of abuse, and legal issues related to child victims and witnesses. Children who witness violence should be provided the same level of victim assistance and special protections within the criminal and juvenile justice systems as child victims. Criminal justice

agencies handling cases involving children as victims and witnesses should work in collaboration with other agencies having responsibility for at-risk children, such as family and juvenile courts, social services agencies, medical and mental health providers, and victim services agencies.

It is also suggested that when multiple agencies are involved in a child's life, communication among professionals is critical to ensure complete and accurate information is available to decision makers to ensure the child is adequately protected. And lastly, criminal justice professionals should adapt their practice to recognize the developmental stages and needs of child victims and witnesses to ensure they are sensitively treated throughout the investigative and trial process. Agencies should avoid revictimization as much as possible by minimizing the number of times the victim has to recall and/or explain the specifics of the abuse. In addition to these core recommendations, it is strongly suggested that criminal justice and child advocacy centers adhere to several Department of Justice recommendations, which are listed below in appendix A.

### **Improved Training for Law Enforcement Agencies**

All officers should have at least basic training in recognizing and responding to children who are abused, neglected, or exposed to violence. Agency heads should specially assign officers to handle cases involving child victims and witnesses, ensuring these officers receive in-depth training in interviewing children, identifying injury, child development, and understanding the impact of victimization and witnessing violence on

children. Police agencies should have written child abuse policies that provide sufficient guidance for making important decisions, such as whether to arrest a suspected perpetrator, whether to place a child in protective custody, and how to deal with unusual or difficult situations.

Law enforcement investigators should work in collaboration with medical and mental health providers, child protective services agencies, and victim assistance providers. Law enforcement and criminal justice agencies ask a great deal of children who have been victims or witnesses to crime when we ask them to participate in the criminal justice system. It is a system designed for adults, not for children. Young children are expected to take part in a process that many adults find complex, confusing, and intimidating and to answer detailed questions about terrifying events in the presence of strangers and the defendant.

If an investigation and a trial are a search for the truth, then we must do everything we can to enable children to tell what happened to them as clearly and completely as possible. Just as the criminal justice system makes accommodations for victims and witnesses who do not speak English or who have physical handicaps, it must also make accommodations for children. It is important that criminal justice professionals adapt their practice to the special needs of child victims and witnesses. If children cannot participate effectively in the criminal justice system, it may be impossible to protect them from future victimization and to hold the offenders accountable for their actions (Department of Justice, 2000).

The rational choice theory proceeds on the assumption that individuals make reasoned decisions based on maximization of pleasure or profits. There is a reward and/or punishment for our behavior. One must decide whether the goal is worth the cost. This is a general principle of all choices in life and in crime.

Several theories have been identified and deemed as contributing factors to family violence; however, the rational choice theory seems to be the most closely related to family violence. The theory allows the violator to do whatever he/she wants including violence to obtain goals as long as what they achieve is outweighed by the cost of aggression. The issue of privacy in the home also allows the violence to continue to occur and there is little or no risk of intervention in the home unless a family member of concern person brings the violence to the attention of the authorities and other community service agencies (Wallace, 2005). The area of family violence has been heavily researched and to date there appears to be no one single factor that leads to family violence.

Rational-choice theory builds on opportunity theories and argues that crime is a calculated and deliberate event based on the offender's assessment of risks compared to rewards in a specific situation. When applied to persons at risk for the sexual abuse of children, this means that they commit their crimes when they have either chosen or encountered a situation in which they find a suitable potential victim (a child of preferred gender) in the

context of an opportunity for committing the crime without a high risk of being stopped or caught.

Whereas, some theorists recommend using a risk-management model for addressing child sexual , abuse, i.e., attempting to ensure that high-risk child molesters are prevented from being in tempting environments. A good-life model of offender rehabilitation is preferred, which involves guiding offenders into fulfilling alternatives to the sexual abuse of children, which leads to their personal choice to avoid risky situations.

### **Summary and Conclusions**

The long-term effects of child abuse are explained in part by a variety of theories in a general sense. The rational choice theory is built on the principles of cost and rewards for one's behavior. Since child abuse and parental substance abuse are so interconnected, the criminal justice system polices must have a significant effect on perpetrators of child abuse. Substance abuse focused studies with kids also reveal that victims of child maltreatment are often more likely to turn to drugs and alcohol than non-maltreated children (OJJDP).

It is equally important for criminal justice agencies to properly handle the investigative stage and minimize the potential for revictimization.

The investigative stage following the child abuse disclosure/report must keep further victimizing the child at the forefront of the process (Holder & Turman, 1999). This important task can be accomplished through forensic interviewing, a multidisciplinary teaming approach, and child advocacy

centers (Delany-Shabazz, 1995). Initially, the multidisciplinary team consisting of the law enforcement personnel, child protection worker, victim witness advocate, district attorney, and/or any medical staff should meet to discuss the case objectives and interviewing steps while keeping in mind the child's developmental stage and possible labeling that may occur (Holder & Turman, 1999). "Jointly conducted or monitored interviews can reduce inconsistencies and improve the quality of information and interagency relationships. Forensic interviews should use consistent methods and should follow a tested protocol" (Holder & Turman, 1999, p.75).

Laws have been formed with victims needs in mind (Chapter 17, 1996). However, criminal justice related agencies that come into contact with children during the investigative stage need to develop policies focusing on minimizing further victimization to child who have been the victim of physical and/or sexual abuse (Holder & Turman, 1999).

As mentioned previously, implementing strategies designed to minimize further victimization during the investigative process should minimize child revictimization. Additionally, it should be helpful to take a closer look at a child's developmental stages and how labeling can affect victimization in child abuse cases. Finally, it should be found that legislators and organizations are implementing more laws and policies with victims in mind.

Over the past decade, thousands of programs have been initiated across the country to respond to child victims. These programs include

multidisciplinary initiatives that provide a coordinated response of various agencies involved in responding to child victims; enhanced support and representation for child victims in the criminal justice and juvenile court system; and prevention programs. We must continue to fund this effort if we are to truly make an impact on child abuse in this country.

Recommendations include continued support of multidisciplinary teams, child advocacy centers, law enforcement agencies and other community support programs to work collaboratively to combat this issue by using a three-pronged approach, which includes treatment, prevention, and education for both the offender and the victim.

Subsequently, we need to continue to push for community-based agencies and other programs that will get victims connected with the appropriate services. Immediate intervention is the key. Criminal justice agencies, child advocacy centers and the community must strike early against child maltreatment and maintain that support as long as the victim needs it. They must stop the child from being victimized repeatedly; this must be done at all costs. Swift intervention and speedy apprehension are what should be strived for. Protecting our children from abuse should be our first priority along with making those who commit these acts fear the embarrassment and social stigma associated with being an abuser. Expose the abusers. Make the fact that they are an abuser public knowledge as they do for sexual offenders. This should serve as a huge deterrent because it could affect you ability to

choose where you live, work and negatively affect your quality of life. We must stop the abuse!

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## **Appendix A-Department of Justice Recommendations**

There is an imminent need for increased victim services and rights for victims of child abuse. The first step towards improving our current victim services programs is to follow the recommendations as set forth by the Department of Justice (DOJ). The Department of Justice recommendations are geared toward the community and child advocacy centers. The main goal of DOJ's recommendations is to ensure that victims receive sufficient services, assistance and special protections along with early reporting and intervention. And lastly, minimize the potential for revictimization during the investigation stage.

### **Department of Justice Recommendations:**

- 1) Communities should establish children's advocacy centers to provide child-friendly locations where abused children can receive the services they need to heal and information for the evaluation and investigation of their cases. To ensure the highest quality of intervention, training should be provided to professionals on conducting forensic interviews, to medical professionals on conducting child abuse examinations, and to mental health professionals on employing abuse-specific treatment approaches.
- 2) Children who witness violence should be provided the same level of victim assistance and special protections within the criminal and juvenile justice systems as child victims.
- 3) To ensure child abuse cases are recognized and reported as early as possible, training on the identification and signs of abuse, as well as the impact of child victimization, should be provided to all professionals who come into contact with child victims.
- 4) There should be an improved governmental response to the problem of missing, abducted, and sexually exploited children.
- 5) All jurisdictions should establish or support court school programs to help educate child victims and witnesses about the court process and their role within it.

- 6) States should enact legislation to open access to criminal history records, and they should adopt regulations and policies necessary to meet the requirements of the National Child Protection Act.
- 7) The Federal Government should examine data collection regarding child victimization to ensure that all crimes against children, from their birth through the age of majority, are uniformly reported, categorized (by age of the child, type of crime, and offender relationship to the child), and analyzed at the State and Federal levels.
- 8) All States should authorize judges to exclude from the courtroom persons who are not necessary to child-related court proceedings if requested by the victim or the victim's representative or if the court determines that there would be substantial psychological harm if the child were to testify in open court.
- 9) All States should consider alternatives to live in-court testimony for children under the age of 18.
- 10) Specially trained lawyers and court-appointed special advocates should be provided to children in all civil child protection and other abuse-related proceedings.
- 11) Early intervention programs such as Head Start and Healthy Start programs should be implemented nationwide. The staff of these programs must be trained to recognize the signs of child abuse, how to report abuse to appropriate authorities, and how to provide referrals for victims and their families.
- 12) Child-serving institutions such as schools, social service, and law enforcement agencies should make diligent efforts to identify troubled youth and refer them to social service or victim assistance programs before they run away from home. Efforts also should be undertaken to identify and assist runaway, thrown-away, and homeless child victims.
- 13) Child abuse prevention programs that address computer exploitation should be developed and publicized.
- 14) Federal and State governments should support the significant additional research that is needed to document effective treatments for child victims, especially victims of child sexual and physical abuse and children who witness violence.
- 15) Convictions and substantiated allegations of spousal or child abuse should create a rebuttable presumption against awarding temporary or permanent custody to an offending parent. Parents convicted of

child or spousal abuse should not be granted the right to visitation without independent supervision.

- 16) States should include driving while under the influence of alcohol or other drugs with children in the vehicle as a form of child endangerment. Such drivers should receive enhanced sanctions when criminally convicted, and evidence of driving under the influence should be considered by family and juvenile courts when determining custody and visitation rights in cases affecting the parent-child relationship.
- 17) Health insurance providers, particularly managed care providers, should ensure that their practices facilitate immediate, specialized assistance for child victims and witnesses of crime. Managed care providers should join multidisciplinary children's advocacy centers or teams and should authorize payments for out-of-plan examinations by specialists in the treatment of child abuse without prior approval.