

Understanding Child Sexual Abuse and Reporting Laws in Texas

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The Children's Assessment Center

Dynamics of Child Sexual Abuse

Reporting Abuse

Overview of The CAC Services



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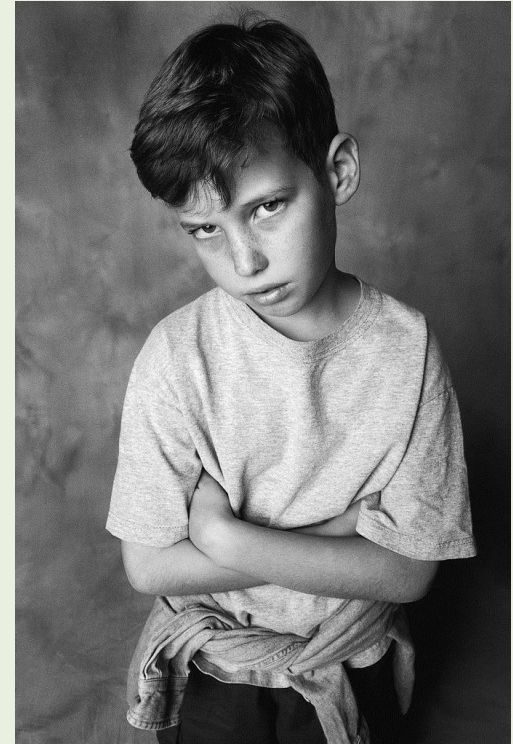
The Children's Assessment Center

The mission of The CAC is to provide a professional, compassionate and coordinated approach to the treatment of sexually abused children and their families, and to serve as an advocate for all children in our community



Child Sexual Abuse Statistics

- **3 million** child abuse cases per year (neglect, emotional, physical and sexual)
- **24%** of all reported sexual assault victims are under 18
- **85-90%** cases involve a perpetrator known to the child
- Less than **1/3** of alleged perpetrators were under the influence of drugs or alcohol at the time the abuse occurred
- Sexual abuse of children occurs in all socioeconomic groups
- According to the NCA **1 in 4** females and **1 in 6** males will be a victim of child sexual abuse by the age of 18



Child Sexual Abuse

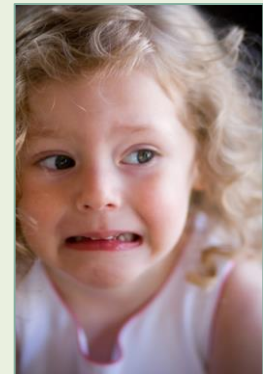
Commonly defined as
any sexual act engaged in
by a minor and an adult



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What is Sexual Abuse?

- Being touched, forced to touch or look at genitals or breasts of another
- Shown sexual movies or forced to listen to sexual talk
- Made to pose for seductive or sexual photos
- Witnessing another individual being sexually abused
- Forced to perform or watch sexual acts
- Raped or otherwise penetrated
- Fondled, kissed, or held in a way that made child feel uncomfortable
- Objectified and ridiculed about child's body
- Bathed in a way that felt intrusive to child
- Encouraged or goaded into sex child didn't want
- Involved in child sex trafficking or pornography



Signs, Symptoms, & Behaviors

(Indicating possible sexual abuse)

- Pain/genital infection
- Physical trauma to genital area
- Begin wetting the bed
- Loss of appetite
- Masturbate excessively
- Sexual play with friends, toys or pets
- Fear of some other place
- Wake up during the night sweating, screaming or shaking/nightmares
- Unexplained periods of panic
- Unusually aggressive behavior toward family members, friends, pets or toys
- Sudden reluctance to be alone with a familiar person
- Regress to behavior too young
- Initiate sophisticated sexual behavior
- Engage in self-mutilation
- Thoughts about death or suicide
- Unusual questions about human sexuality
- Show an unexplained change in personality traits.
- Abuse drugs or alcohol
- Pregnancy
- Sudden requests for locks /other safety precautions
- Unexplained health problems
- Fear of undressing in a PE class or medical exam
- Reluctant to attend school/not performing well
- Unusually dependent on parents



Children Who Are Vulnerable Targets

- Insecure
- Unhappy
- Neglected
- Craving adult attention or approval
- Lonely
- Unsupported by family
- Unsupervised
- Parents use drugs/alcohol
- Foster children
- Previous victims of sexual or physical abuse
- Learning disabled
- Exposed to multiple non-familial caretakers
- Sexual orientation concerns
- “Sexually ignorant”
- Extremely physically affectionate
- Delinquent



Grooming

Conditioning used to lower a child's sexual inhibitions in preparation to engage in sexual activities - How?

- Treats victim more special than others
- Makes excuses to be alone with victim
- Allow children to “accidentally” see them naked or walk in on naked children
- “Accidentally” Tickling and wrestling
- Examine the child's development
- Ask child not to tell about the touching
- Describes his sexual activities with others
- Teaches sex education with pornography



Luring

- Affection
- Emergency Situation
- Authority
- Name Recognition
- Fun and Games
- Job
- Magic and Rituals
- Threats and Fear



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Denial



- Existence or extent of abuse
- Significance or Responsibility
- Likelihood of re-occurrence of abuse
- As long as people deny that abuse is occurring, it can/will continue.



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Secrecy

- Allows the sexual abuse to continue and likely escalate in frequency and intensity
- Confuses the victim
- Convinces the victim that the abuse is his/her fault
- Creates guilt/shame, which may impede disclosure
- Isolates the victim from support



Children's Post-Disclosure Problems

- Separation from family
- Reduced Income of family
- Loss of parent(s)/other family relationships
- Feeling responsible for family changes
- Depression
- Child may shut down or recant



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Recantation

It can occur because:

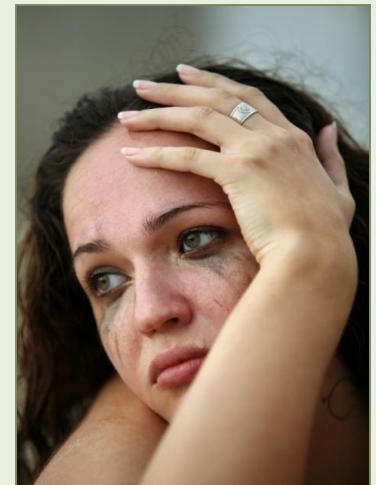
- The victim feels responsible for, and guilty about the abuse
- The response to the victim's accusation is anger, fear or not believed
- The victim is removed from the home/loves the offender
- The offender has the support of the family (and) community
- The offender is (not) incarcerated



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Characteristics of Non-Offending Parent

- Usually female
- May meet the criteria/exhibit features of Dependent Personality Disorder
- May be financially dependent on the perpetrator and may (not) work outside the home
- May be in or have been in battering relationships
- The perpetrator may be the first partner who was not physically abusive
- There may be present or past history of substance abuse
- Have been sexually abused as children



Characteristics of Sex Offender

- Usually male
- Need satisfaction derived through children
- Impaired capacity for intimacy
- Low self-esteem
- Inadequate social skills
- Immaturity
- Substance abuse
- Interpersonal insensitivity
- Lack of empathy



Effects of Sexual Abuse on the Victim



- Shame, guilt, embarrassment
- Sense of responsibility, for the abuse, for the offender and the impact on the family
- Confused feelings
- PTSD symptoms, depression, aggression, anxiety, substance abuse



Effects of Sexual Abuse on the Non-Offending Caregiver/Victim Relationship

- Alienates the victim from the non-offending caregiver
- Feeling that the non-offending caregiver failed to protect the victim
- The non-offending caregiver doesn't trust the victim, due to victim's problematic behavior symptoms



Effects of Sexual Abuse on Relationships with Other Family Members

- Endure the wrath of family members who blame the victim's outcry, rather than the offender's behavior
- Feel left out if siblings are allowed contact with the offender
- Family division as members choose whom to support



Effects of Sexual Abuse on the Offender

- Awareness on some level that the abuse is abhorrent
- After disclosure, the offender's life will most likely be turned upside down (legal, being ostracized, rejected)



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Effects of Sexual Abuse on the Community

- Confusing emotions, ranging from disbelief to hostility
- People often react with fear and loathing if they are able to believe the allegations
- They usually don't consider the impact of their reaction on the victim, who may feel condemned by such attitudes due to their involvement in the sexual abuse



Possible Long-Term Effects in those who do not receive treatment

Emotional Functioning

- Depression
- Anxiety Disorders: OCD, PTSD, Panic Disorder
- Eating Disorders

Cognitive Distortions

- Self-blame for the abuse
- Poor self-esteem

Behavioral Manifestations

- Substance abuse
- Self-injurious behaviors
- Suicidal Ideation

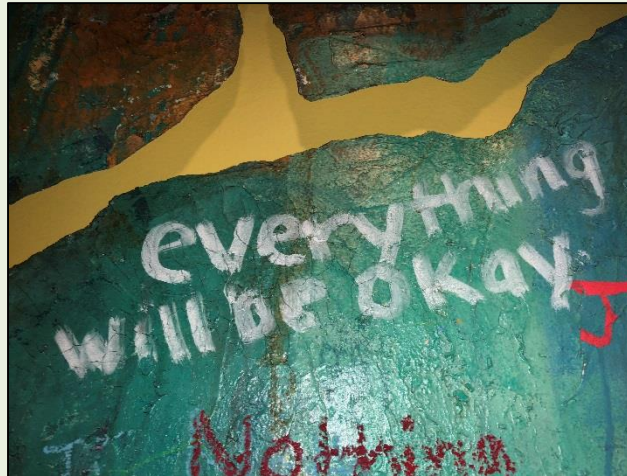
Interpersonal Difficulties

- Do not like to be touched
- Difficulty trusting others



Protective Factors

- › Having ONE protective, believer, and supportive caregiver
- › Appropriate reaction by the first adult
- › Early intervention and access to therapy services



Reporting Child Abuse

Texas Family Code Reporting Laws

SUBCHAPTER B. REPORT OF ABUSE OR NEGLECT

§ 261.101. *Persons Required to Report; Time to Report*

A person having *cause to believe* that a child's physical or mental health or welfare has been adversely affected by abuse or neglect by any person shall *immediately* make a report as provided by this subchapter



Reporting Laws

If a professional has *cause to believe* that a child has been abused or neglected or *may be abused or neglected*, or that a child is a victim of an offense under Section 21.11, Penal Code, and the professional has cause to believe that the child has been abused as defined by Section 261.001, the professional *shall make a report not later than the 48th hour after the hour the professional first suspects* that the child has been or may be abused or neglected or is a victim of an offense under Section 21.11, Penal Code.

A professional *may not delegate* to or rely on another person to make the report. In this subsection, *"professional"* means an individual who is licensed or certified by the state or who is an *employee of a facility licensed, certified, or operated by the state* and who, in the normal course of official duties or duties for which a license or certification is required, has direct contact with children.

The term *includes* teachers, nurses, doctors, day-care employees, employees of a clinic or health care facility that provides reproductive services, juvenile probation officers, and juvenile detention or correctional officers.



Reporting Laws

The requirement to report under this section applies without exception to an individual whose personal communications may otherwise be privileged, including an attorney, a member of the clergy, a medical practitioner, a social worker, a mental health professional, and an employee of a clinic or health care facility that provides reproductive services.

Unless waived in writing by the person making the report, the *identity of an individual making a report under this chapter is confidential and may be disclosed only:*

(1) as provided by Section 261.201; *(this is essentially by court order)* or

(2) to a law enforcement officer for the purposes of conducting a criminal investigation of the report.



To Whom to Report?

§ 261.103. Report Made to Appropriate Agency

1. any *local or state law enforcement* agency;
2. the department ("*Department*" means the *Department of Protective and Regulatory Services -CPS*) if the alleged or suspected abuse involves a person *responsible for the care, custody, or welfare of the child*;
3. the state agency that operates, licenses, certifies, or registers the facility in which the alleged abuse or neglect occurred; (*Texas Department of State Health Services must be notified for camps*)
4. the agency designated by the court to be responsible for the protection of children.



Contents of Report

§ 261.104. Contents of Report

The person making a report shall identify, if known:

1. the *name* and *address* of the child;
2. The name and address of the *person responsible* for the care, custody, or welfare of the child; and
3. Any *other pertinent information* concerning the alleged or suspected abuse or neglect.



Immunities

§ 261.106. Immunities

A person *acting in good faith* who reports or *assists in the investigation of a report of alleged child abuse or neglect* or who testifies or otherwise participates in a judicial proceeding arising from a report, petition, or investigation of alleged child abuse or neglect is *immune from civil or criminal liability* that might otherwise be incurred or imposed



False Reports

261.107. False Report; Penalty

A person commits an offense if the **person knowingly or intentionally makes a report** as provided in this chapter that the person knows is false or lacks factual foundation. An offense under this section is a **Class A misdemeanor** unless it is shown on the trial of the offense that the person has previously been convicted under this section, in which case the offense is a state jail felony



Failure to Report

261.109. Failure to Report; Penalty

A person commits an offense if the **person has cause to believe** that a child's physical or mental health or welfare **has been or may be adversely affected by abuse or neglect** and knowingly **fails to report** as provided in this chapter.

An offense under this section is a **Class B misdemeanor**.

(punishments: fine not to exceed \$2000 and jail time not to exceed 180 days).



Defense Against Frivolous Claims

261.108. Frivolous Claims Against Person Reporting

A court shall award a defendant reasonable attorney's fees and other expenses related to the defense of a claim filed against the defendant for damages or other relief arising from reporting or assisting in the investigation of a report under this chapter or participating in a judicial proceeding resulting from the report if:

The court finds that the claim is frivolous, unreasonable, or without foundation because the defendant is immune from liability under Section 261.106;

and

The claim is dismissed or judgment is rendered for the defendant.

To recover under this section, the defendant must, at any time after the filing of a claim, file a written motion stating that:

1. the claim is frivolous, unreasonable, or without foundation because the defendant is immune from liability under Section 261.106; and
2. the defendant requests the court to award reasonable attorney's fees and other expenses related to the defense of the claim.



In Summary...

- If a report is made in good faith, without malice, reporters are immune from civil or criminal liability, (Section 261.106 of the TFC)
- The person who suspects the abuse **MUST** be the one who reports the abuse
- Although your company may have its own protocol regarding reporting, the person suspecting the abuse must be the reporter
- Reporting **MAY NOT BE DELEGATED** to another person.
- Remember, the law requires you to report **suspected** abuse, not prove that abuse occurred.
- In fact, professionals ask that you do not attempt to validate the abuse.



Remember...

- The Texas Family Code (TFC) requires **anyone suspecting the abuse or neglect of a child to** report the suspected abuse to the Child Protective Services Hotline @ 1-800-252-5400 or 911
- It is located in Austin, TX and is staffed 24/7
- Section 261.101 of the TFC specifically requires that a teacher make a report immediately, no later than 48 hours of first suspecting a child has been abused or neglected, to CPS or to a local law enforcement agency
- All reports of suspected child abuse or neglect are *CONFIDENTIAL*



What to do when a child tells you they are a victim of sexual abuse ?

The *first adult* to whom the child makes an *outcry* of abuse is known as the “*Outcry Witness*”



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When a child makes an outcry of abuse...

DO

- Find a private place to talk with child (2 adults)
- Explain to the child that you are going to tell someone who can help
- Be open and understanding
- Maintain eye contact
- Believe the child
- Write down exactly what the child reports to you

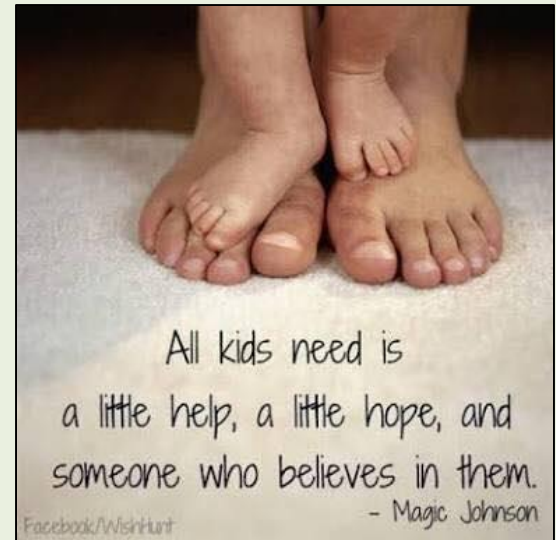
DON'T

- Show shocked
- Ask leading questions or investigate the facts
- Promise anything
- Tell the family of the report
- Be judgmental
- Tell anyone who does not need to know about the abuse.



Information needed in a child abuse or neglect report

- Child's name, age and address
- Primary caretaker's name and address
- All indicators observed (physical and behavioral)
- Your name, position and contact info



If a Child Tells you

YOU must report the outcry to:

1 – 800 – 252 – 5400

You are the outcry witness

It is illegal to delegate this responsibility!



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Preventing Allegations of Sexual Abuse

Recommended Rules and Procedures

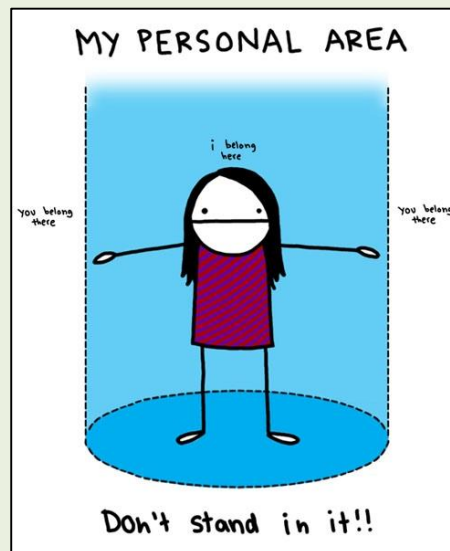
- Conferences with a child must be done in the presence of 2 staff members
- Children should be adult supervised at all times
- Avoid being alone:
 - Counselor/Teacher & Child
 - Child & Child
 - Messages
 - Cell phones

- Address signs and symptoms
- Reduce 1-on-1 isolated encounters
- Prevent any opportunity for abuse to be alleged/occur
- Report any suspected abuse immediately



The Role of Boundaries

- Boundaries are violated/distorted by a perpetrator of abuse
- Professionals must maintain appropriate boundaries (role model)
- Appropriate boundaries help prevent victimization
- Show respect for a child and model appropriate boundaries
- Identify inappropriate behaviors
- Always replace inappropriate behaviors with examples of appropriate behaviors

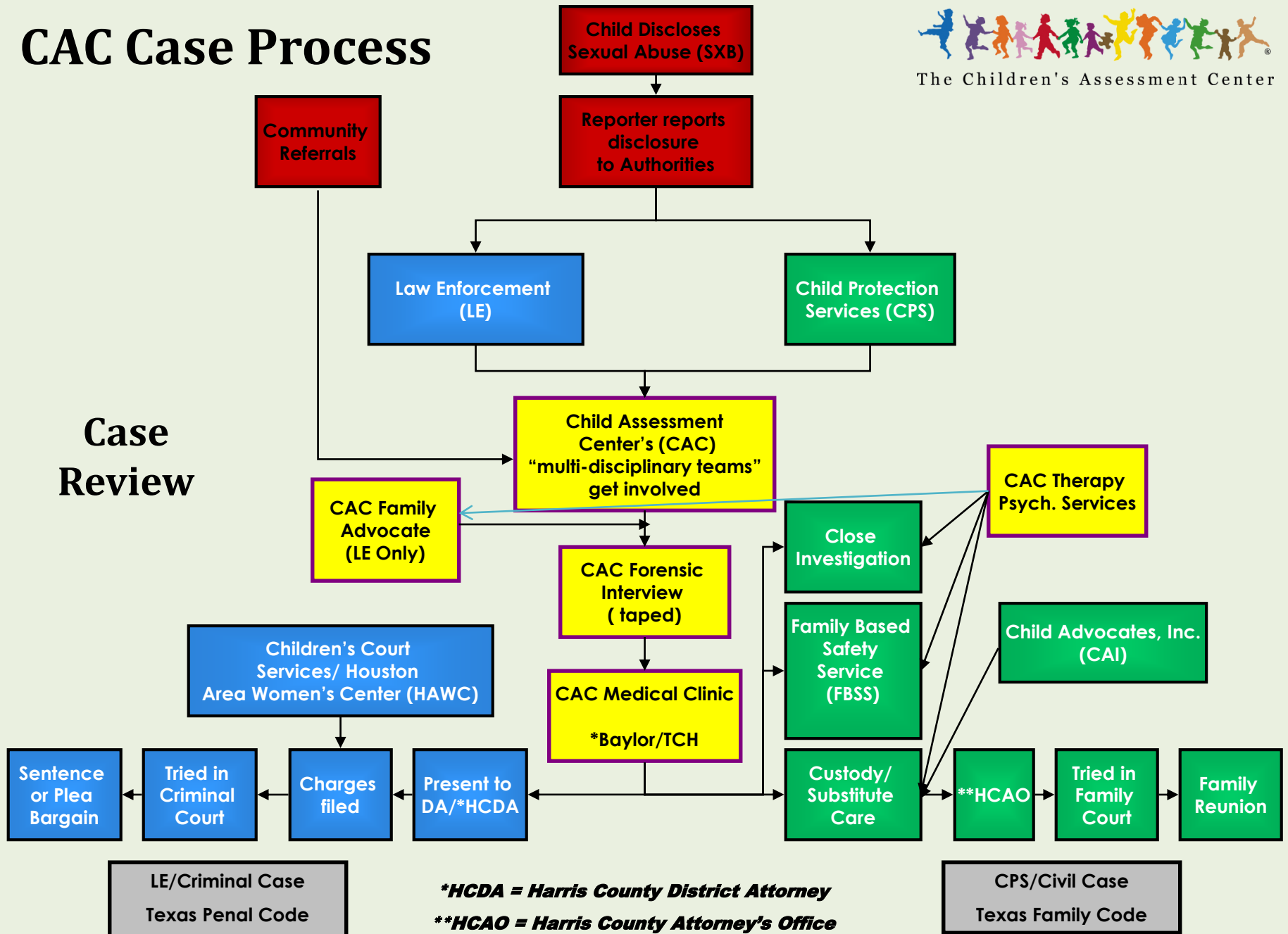


What Happens When a Child Discloses Sexual Abuse?



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CAC Case Process



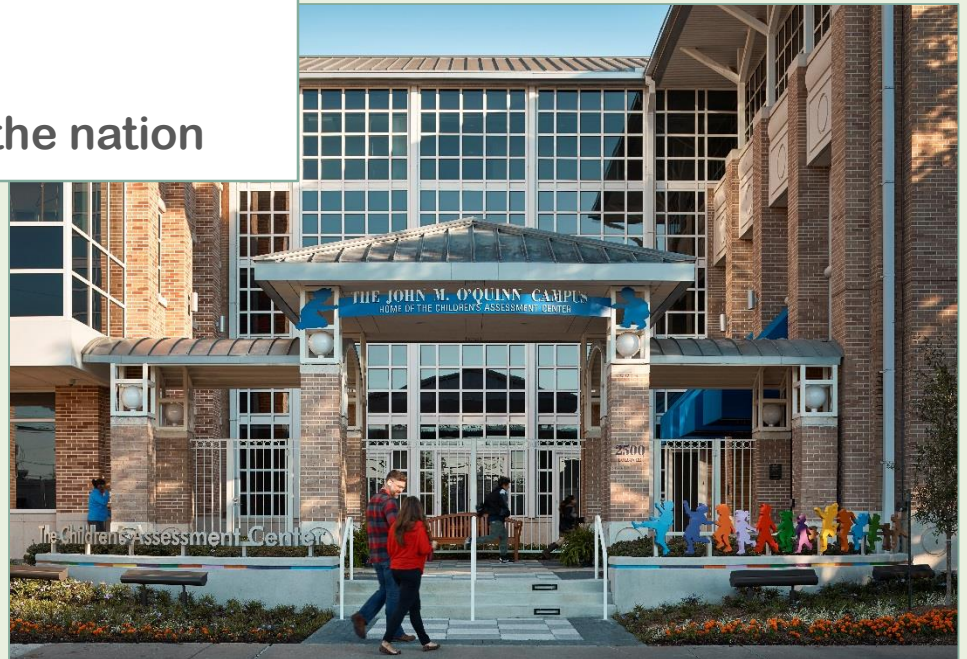


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Partnership between the public and private sectors for the most effective service delivery to children and families

Part of a national movement to create child-friendly intervention systems for sexually abused children

One of the largest of its kind in the nation



The CAC Offers

- Child friendly location
- Co-housing of 53 partner agencies
- Joint training for all professionals and volunteers
- Quality, coordinated assessment and planning by professionals



The CAC 53 Partner Agencies

Police Departments

Baytown
Bellaire
Deer Park
Friendswood
Hedwig Village
Houston PD
Humble
Jacinto City
Jersey Village
Katy
Lakeview
La Porte
Memorial Village
Pasadena
Seabrook
Southside Place
Spring Valley Village
Stafford
Tomball
Webster
West University Place

Investigations

Children's Protective Services (CPS) -
TDFPS
Harris County Precinct 1, 4, 5, & 6
Harris County Sheriff's Office
Houston Metro Internet Crimes Against
Children (ICAC) Task
Federal Bureau of Investigation (FBI)
Texas Rangers-Company "A"
Homeland Security Investigations (HIS)
U.S. Postal Inspector

School District-Police Departments

Aldine ISD Police Dept.
Alief ISD Police Dept.
Cypress Fairbanks ISD Police Dept.
Houston ISD Police Dept.
Pasadena ISD Police Dept.
Spring ISD Police Dept.
Spring Branch ISD Police Dept.



The CAC 53 Partner Agencies (cont.)

Legal

Harris County District Attorney's Office
Harris County Attorney's Office
U.S. Attorney's Office- Southern District

Services

BCM & TCH
Memorial Herman Healthcare System
Crime Stoppers-Houston
Child Advocates, Inc.
Children's Court Service/HAWC
Harris County CPS
Harris County Institute of Forensic Sciences
Texas Center for the Missing
Communities In Schools (CIS)-Houston



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Services at The CAC

- Central Intake
- Multidisciplinary Team Enhancement Program(MEP)
- Forensic Interviewing
- Extended Assessments
- Family Advocate
- Clinical Social Work
- Medical Clinic
- Therapy, Psychological and Psychiatric Services
- Case review – Child Sexual Abuse Review Team (CSART)
- Volunteer and Children's Services
- Community Outreach/Training



Forensic Interviewing

Conducted by a specialist in child interviewing in a safe, child-friendly setting & digitally recorded

A **neutral, non-leading** fact-finding interview that is legally defensible in court



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Family Advocates

Masters Level Social Workers

Meet with families on non-familial cases

Provide crisis intervention, resources and advocacy for families



Medical Clinic

Baylor College of Medicine

Texas Children's Hospital

Full Medical Services

Rape kits/Non-acute sexual
assault exams

Colposcope Examination



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When to Perform Sexual Abuse Examinations

- Immediately if <96 hours since event with evidence collection
- Urgently if acute injury present (rapid healing areas & quickly losing evidence)
- Concern for STDs
- Disclosure
- Sexual acting-out behavior
- At risk for sexual abuse



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Therapy & Psychological Services

Staff & Contract Psychologists/Therapists/Psychiatrist

Interns from Social Work, Family Therapy, Psychology & Psychiatry

Contract dance/movement therapist

Contract Licensed Sex Offender Treatment Provider (LSOTP)

Services provided in English and Spanish

Individual, group and family therapy

Psychological & Psychiatric Evaluations

Crisis Intervention

Children 3-18 (victims & siblings) & non-offending caregivers



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Overall Treatment Goals

- Individualized treatment plans
- Recovery from the sexual abuse and from the changes that occur after disclosure
- Psycho-education about the dynamics of sexual abuse
- Prevention of future abuse



Volunteer and Children's Services

Activity Center

4 staff members/volunteers 5 days/week

Activities for all ages

Breakfast, lunch & snacks

Rainbow Room – Emergency Clothing

Diapers & Wipes

Special Programs

Summer Fun Activities

Back-To School Party

Holiday Party



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Children's Advocacy Centers of Texas - CACTX
www.cactx.org



National Children's Alliance
www.nationalchildrensalliance.org



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Call the abuse/neglect hotline

1-800-252-5400

Report Online at

www.txabusehotline.org

Remember... you are obligated by law to report suspected child abuse



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Thank you for making a difference by participating in this presentation. Research suggests that the average trained adult will better protect *at least ten children* from sexual abuse in the years after training

Contact us if you have any questions or concerns in the future!

The Children's Assessment Center

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The Children's Assessment Center

Training Provided by The CAC Professionals

Presentations & Training Topics

Overview of The CAC
Dynamics of Child Sexual Abuse
Texas Child Abuse Reporting Laws
Foster Parenting Sexually Abused
Children
What Teachers Need to Know about Child
Sexual Abuse

Child Safety & Prevention Programs

Domestic Minor Sex Trafficking (DMST)
Stewards of Children
“P.S. It’s my body” - Happy Bear
“NetSmartz”
Youth Camp Training

*The Children's Assessment Center recommends that child abuse trainings
be presented by a child abuse professional.*



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