



Children's Advocacy Centers
of Washington

Presentation to **Sex Offender Policy Board**

May 20, 2021



Children's Advocacy Centers
of Washington

- Introduction
- Brief Overview of CACs
- CACWA Involvement with 5123
 - Reports of PSB in WA
 - Priority Issue
- Challenges, Opportunities & Questions

Introduction

Paula Reed, Executive Director

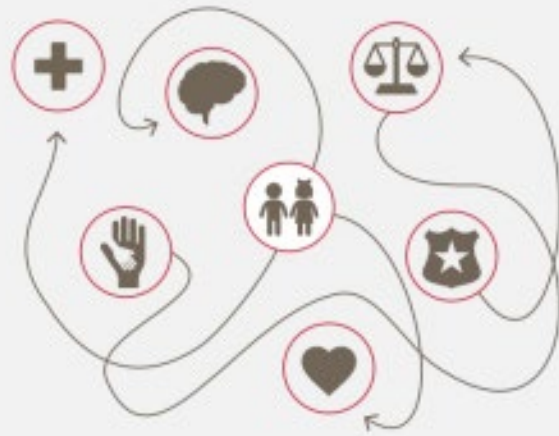
Children's Advocacy Centers of Washington (CACWA)

Children's Advocacy Centers of Washington is an accredited State Chapter of the National Children's Alliance (NCA)

National Children's Alliance (NCA) is the national association and accrediting body for a network of 924+ Children's Advocacy Centers—CACs – nationwide.

The CAC Movement

Without CACs



With CACs



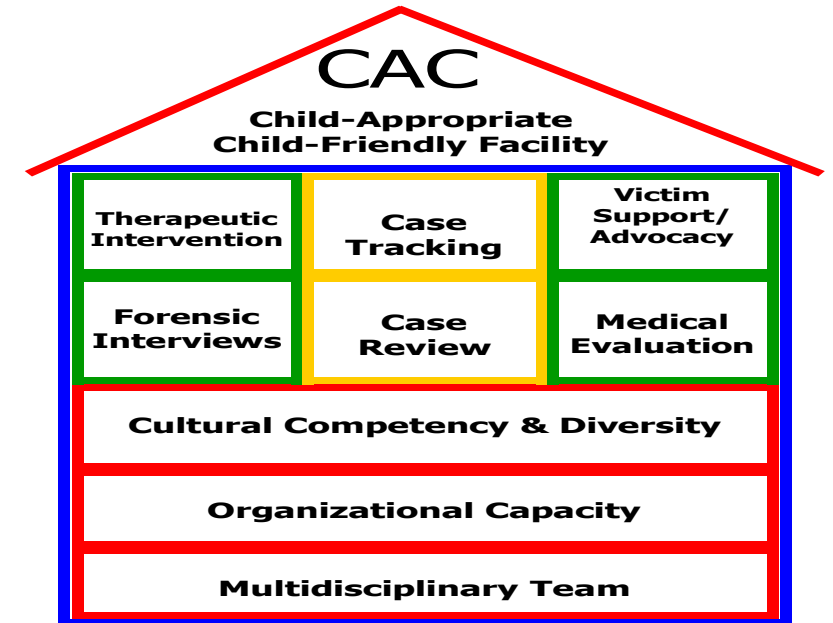
**What is
a CAC?**



National Accreditation Standards for CACs

- Child Focused
- Multidisciplinary Team
- Forensic Interview
- Mental Health
- Medical
- Victim Advocacy
- Cultural Competency & Diversity
- Case Review
- Case Tracking
- Organizational Capacity

Standards are updated every five years to reflect the latest evidence and practice.



CAC Standards

CACs in Washington

CAC	Counties Served
Arthur D. Curtis Children's Justice Center	Clark
Children of the River Child Advocacy Center (CRCAC)	Pierce (Puyallup Tribe)
Children's Advocacy Center of Pierce County	Pierce
Children's Justice & Advocacy Center	Cowlitz & Wahkiakum
Children's Justice Center (CJC) of King County	King
Connections "A Center for Healthy Families"	Grays Harbor
Crisis Support Network	Pacific
Dawson Place Child Advocacy Center	Snohomish
Family Crisis Network	Pend Oreille
Healthy Families of Clallam County	Clallam
Kids Hope	Grant & Adams
Kitsap S.A.I.V.S. (Special Assault Investigation and Victim's Services)	Kitsap
Monarch Children's Justice & Advocacy Center	Thurston, Mason, & Lewis
NCW Child & Family Advocacy Center (SAGE)	Chelan & Douglas
Partners with Families and Children: Spokane	Spokane & Lincoln
Rural Resources Community Action - Kids First Children's Advocacy Center	Stevens & Ferry
Skagit County Children's Advocacy Center	Skagit, Island, San Juan
Skamania County Council on Domestic Violence and Sexual Assault	Skamania
Support, Advocacy and Resource Center (SARC)/Kids Haven	Benton & Franklin
Tulalip Tribes Children's Advocacy Center	Snohomish (Tulalip Tribe)
Walla Walla Valley CAC	Walla Walla & Columbia
Whatcom County Children's Advocacy Center	Whatcom
Yakima County Children's Advocacy Center	Yakima

WA Children Served by CACs in 2019

In 2019, **7,178** children received one or more core services at a CAC in Washington State

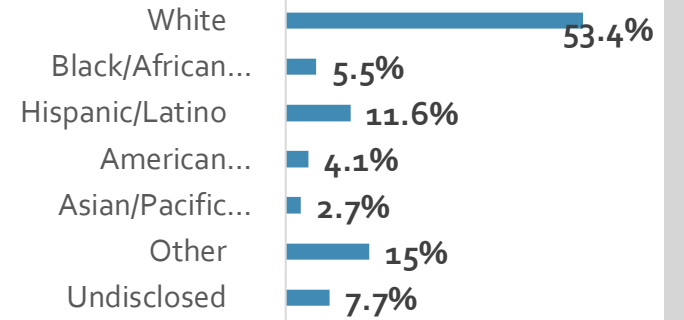
Core CAC services: forensic interview, medical evaluation, advocacy, trauma-informed therapy

70% of children were under the age of 13 and 33% were under the age of 6.

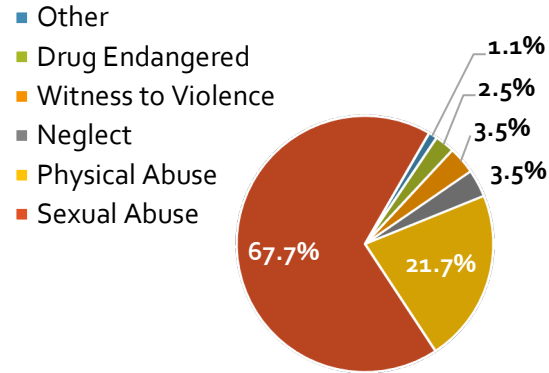
of children served by age

0-6 Years	2,400
7-12 Years	2,677
13+ Years	2,039
Undisclosed	62

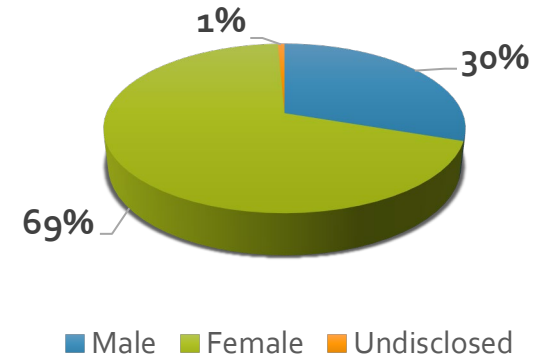
of children served by race/ethnicity



Types of Abuse Reported



of children served by gender



CAC Response to Youth with PSBs

Nationally, CACs are taking steps to adapt services to address increased incidences of problematic sexual behavior.

- In at least 25% of cases handled by CACs, youth or children under age 18 have acted out against another child.

A priority for the National Children's Alliance and its members is developing and implementing effective responses that ensures the physical and psychological safety for all children and their families within the CAC model.

- The Collaborative Work Group created a library of resources and training for CACs to educate themselves, their partners, caregivers, and communities on addressing youth and children with PSBs. <https://learn.nationalchildrensalliance.org/psb>

CACWA involvement with SSB5123

CACWA Public Policy Committee review of proposed legislation

- Initially opposed to some proposed changes

Research and Education

- Met with Katherine Hurley & George Yeannakis

Meeting with Senator Darneille

- Expressed concern with removal of registration requirement without other action
- Letter from Senator Darneille

Increased Reports of PSB

Washington State 2019-2020 CAC-Military Partnership Project

- 2020 Webinar Series for CACs and Military Partners
 - *Presented by Deborah Darnel MA, MFT, LMC, CMHS, CSOTP*
- Training on Normal & Problematic Sexual Behaviors for CACs March 2021
 - *Presented by Miriam Wolf*
- Guide and Resources for Parents and Other Community Members

Feedback from CACs and Mental Health Clinicians

- ...seeing more cases, mainly males with younger ages, 9-11 years old
- ...need training on how to effectively serve youth with PSBs
- ...expect we will see even more acting out and other red flag behaviors when school resumes more normally in the fall. I'm particularly concerned about the vast numbers of youth who have been home during the pandemic, isolated and bored, plugged in to the internet.

Gaps Identified

- Lack of education, support or resources for families
- Lack of qualified providers to address sexual behavioral problems, especially for those under 12
- Concern with minors being prosecuted in same category of offenses as adults
- Few providers facilitate family reconnection and reunification

“There needs to be widespread education and more availability to support for families. Non-offending parent’s groups and groups for PSB children need to be widely available and de-stigmatized. New and developing therapists need to be better educated on the risks and warning signs, and schools need to be educated and brought into the discussion. There are nowhere near enough therapists in the community trained to work with this issue.”

CACs as part of the solution

- CACs occupy a unique place in the child abuse community response
- CACs are experienced at facilitating a collaborative response using a multidisciplinary approach
- CACs have access to national expertise, resources and training
- Proven success of CAC involvement

“Previous evaluations and experience have demonstrated an advantage for successful community implementation and sustainability of the PSB-CBT model when partnering with CACs who have leadership invested in improving practice and policy to address problematic sexual behavior of youth.”

*PSB-CBT Training and Technical Assistance Program
University of Oklahoma Health Sciences Center*

How the MDT response helps

Multidisciplinary Team (MDT)



Qualities of Effective Community Based Programs

Effective community-based treatments for youth with problematic sexual behavior, the child victims, and their families have the following characteristics:

- **Community collaboration.** Juvenile justice, child welfare, treatment services systems, schools, child advocacy centers and others collaborate to identify children with problematic sexual behaviors, assess risk, and engage families in evidence-based treatment;
- **Clinical services teams trained in evidence-based treatment.**
- **Active parent and caregiver involvement.** Helping these children and youth requires active engagement of the family; and
- **Agency and public policies that are consistent with research outcomes**

When accomplished effectively, communities can better sustain the safety, health, and well-being for the children and families in the community.

National Center on Youth
Sexual Behavior

Standards of Practice

Guiding Principles for working with youth who have PSB.

- Utilize developmentally appropriate approaches
- Approach each case as individual and unique
- Avoid unnecessary labels
- Integrate socioecological factors
- Use a collaborative approach
- Conduct high-quality, holistic assessments
- Provide focused and effective interventions and treatment
- Use a flexible continuum of service delivery options
- Ensure appropriate training, qualifications and practice
- Implement effective practices and public policies

Benefits of Effective Community Based Programs

Community collaboration and implementation of evidence-based services for youth with problematic sexual behaviors, children impacted, and families can lead to:

- Decreased child symptoms (problematic sexual behavior and trauma)
- Increased pro-social behaviors in children and youth
- Decreased parent / family stress
- Improved safety and well-being for child and family
- Sustainable and safe reunification of family members
- Improved placement stability for youth involved in Child Welfare system
- Decreased recidivism for youth involved in juvenile justice
- Decreased costs for placement, services and interventions

MENTAL HEALTH

Evidence-based, trauma-focused mental health services, designed to meet the unique needs of the children and caregivers, are consistently available as part of the Multidisciplinary Team response.

Best Practices for PSB Treatment for Youth

- Developmentally Appropriate
- Evidence Supported
- Trauma Informed
- Family Focused
- Least Restrictive
- Minimize False Assumptions

Evidence-Based Treatment for Youth with PSBs:

MST-PSB (Multisystemic Therapy)

Youth between 10 and 17.5 years of age (and their families) when the youth has engaged in sexually abusive behavior toward others and is involved in the juvenile justice system.

PSB-CBT School-Age Program

Children (ages 7-12; with OJJDP expansion, ages 9-14) with PSB and their caregivers

TF-CBT-PSB (Trauma-Focused CBT)

Children (ages 3-12) with a known trauma history who are experiencing PSBs and significant PTSD symptoms.

Identified Challenges, Opportunities & Questions

1. **Consider broadening or reclassifying how we refer to youth with these behaviors.**
 - Modify RCW language referring to “Sexually Aggressive Youth”
 2. **Make it easier and more affordable for clinicians to access training in EBTs to serve youth with problematic sexual behaviors**
 - Increase specialized training opportunities for PSB-specific EBTs
Consider offering annual statewide training in WA for CBT-PSB at reduced cost to clinicians
-
- **Question:** Would community-based clinicians trained in CBT-PSB require SOTP certification, or is certification only for those contracting with DCYF and other state agencies?

Challenges, Opportunities, & Questions

3. **Work to expand provider network to increase access to Trauma Informed, Evidence-Based Services for Youth with PSBs** (particularly for those 12 and under)
 - Implement creative strategies for increasing clinician-base
Partner with higher ed institutions to develop a "provider pipeline" focused on treatment and youth with PSBs
 - Assess SOTP certification requirements
Is expense/cost a barrier?
Are there enough supervisors for affiliates (limit 2 per)?
What is ratio of those specializing in treatment, evaluation or both?
 - Allocate additional resources to address low reimbursement rates for clinicians
4. **Increase education, information and resources for parents, educators, child serving professionals**
Education can facilitate preventing problematic or illegal sexual behavior before it starts.

Challenges, Opportunities, & Questions

6. **Are adequate supports available to families during the treatment process?**

➤ *Question: Are families involved in training and preparation for reunification when siblings are involved?*

7. **If registration requirement is removed, can successful completion of therapy be required?**

• *Would work only if there is an adequate base of highly trained providers to provide services.*

8. **Opportunity to leverage use of telemental health to increase access to group therapy.**

• *Pilot Project*



CACs and
CACWA are
ready to be
part of the
solution...

Thank you for this opportunity.

We are interested in engaging in efforts to facilitate alternatives to registration that both ensure accountability and impact youth in a more positive way.

It will take all of us working together, as well as additional resources, to implement the treatment and support needed to – as Senator Darneille so effectively stated -

- *Be successful in our goal of preventing these offenses from occurring;*
- *Recognize the harm experienced by victims of these offenses;*
- *Provide a robust and effective response that focuses on reducing risk factors, increasing protective factors, promoting family stability, and increasing ties to the community.*

Questions?

Contact:

Paula Reed (360-753-3703) or director@cacwa.org

Web Resources

National Children's Alliance - <https://learn.nationalchildrensalliance.org/psb>

National Center on Sexual Behavior of Youth- <http://ncsby.org/>

University of Oklahoma Health Sciences Center: <https://psbcbt.ouhsc.edu>