2013 Report On
Child Protection in Vermont

VERMONT

DEPARTMENT FOR CHILDREN AND FAMILIES
FAMILY SERVICES DIVISION

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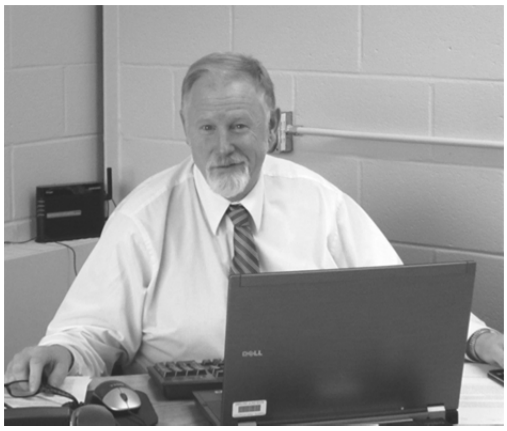


Why do some people do unspeakable things to children? How can we make sure children in Vermont are not just safe, but thriving? I have asked myself these questions over and over these past few months as our state, communities, and child protection system have been rocked by the tragic deaths of two young Vermonters.

These tragedies add gravity to the data in this report. Issues that were not at the forefront of the public's mind have taken center stage as people are asking more questions: about child abuse and neglect in Vermont, how the system works, and ways we can all do better to make sure children are safe. It is through this public discourse that we can educate each other about the significant challenges faced by far too many children and families in Vermont. As public awareness grows, so does our collective will to change.

We must take a hard look at the practices, policies and laws that govern and guide our child protection work. But we must also examine issues such as chronic poverty, substance abuse, and domestic violence, which create an unrelenting undertow of toxic stress for many families and increase the risk of child maltreatment. Without an equal focus on how we can strengthen families so fewer children need protection in the first place, we will have failed miserably.

There is no easy solution. Government intervention alone is surely not the answer. We must all work together – government, community organizations, parents, law enforcement, educators, and concerned citizens – to prevent child abuse, strengthen families, and prepare children for success.

Our challenge is to do more than study the numbers on these pages. Our obligation is to know the stories behind the numbers and commit to addressing the factors that can lead to abuse and neglect in the first place.

I look forward to joining our partners in future months to discuss how we can do just that.

Dave Yacovone, DCF Commissioner

Message from the Family Services Deputy Commissioner

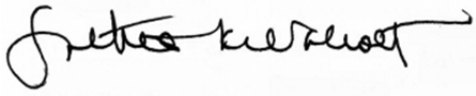
The Family Services Division is Vermont's child welfare and youth justice agency. First and foremost, our goal is safety. Sadly, by the time most families come to our door, their children have already experienced significant trauma. For too many families, drug abuse, mental health issues, and domestic violence are interfering with the healthy upbringing of their children. This reality suggests that, as a state, we need to do all we can to support families with young children.

Research shows that children are safer, healthier, and more secure when parents and extended family members are actively involved in planning for their safety and parents are provided the support they need to follow through. For this reason, the Family Services Division employs a number of strategies to ensure supportive family members are identified and engaged in planning to keep young family members safe. If we can do so safely, we keep children and youth at home and provide services and supports to help their families get back on track.

When that is not possible, we look to relatives or family friends to care for them. Living with people they know is less traumatic for children and keeps them connected— to their parents and communities. When appropriate relatives are not available, non-relative foster parents step up to provide temporary, out-of-home care.

Our ultimate goal is to make sure children and youth live in safe, supportive, and healthy environments where they can grow and thrive. I am proud of the work we do and our dedicated employees who commit themselves every day to helping children and families improve their lives.

I hope that all Vermonters will find out what they can do to help children and families in their communities. These families need our support, compassion, and help to get their lives back on track. It will take our combined efforts to help realize the promise of every Vermont child.



Cindy Walcott, Family Services Deputy Commissioner

Executive Summary

This report provides child protection data for calendar year 2013.

Here are some highlights:

- Reports were up by 10.8% over last year, with a record number of calls to the Child Protection Line: 17,458.

- At least 72% of the calls were made by mandated reporters; 19% were by non-mandated reporters; and 9% were anonymous.

- Substance abuse was a factor in 29% of the reports received; financial stress showed up in 15% of reports; domestic violence in 14%; and mental health in 11%.

- Of the 17,458 calls received, 5,135 of them (30%) were accepted for intervention. *If we get five calls about the same child/incident, it counts as five calls but only one intervention.*

- We opened 2,657 child abuse investigations, 1,409 child abuse assessments, and 1,069 family assessments.

- We conducted 2,683 child abuse investigations: 2,657 that began as investigations and another 26 that began as child abuse assessments but were later changed to the investigation track.

- At the conclusion of the 5,135 child safety interventions conducted, we opened 790 cases for ongoing services based on an assessed risk of future maltreatment that was high or very high.

- Of the 2,683 child abuse investigations conducted, 642 were substantiated.

- There were 868 unique child victims based on substantiated reports.

- There were 114 substantiated incidents of physical abuse, 338 of sexual abuse, 125 of risk of sexual abuse, 205 of risk of harm, and 30 of emotional abuse/neglect. *What is called neglect in other states is captured largely in our risk of harm categories.*

- At least 14% of the persons substantiated for child sexual abuse were unknown to the children. This is substantially higher than it's been over the past three years: it was 3% in 2012, 3% in 2011, and 1% in 2010. We believe this is due, in part, to an increase in the number of persons substantiated for possessing online child pornography.

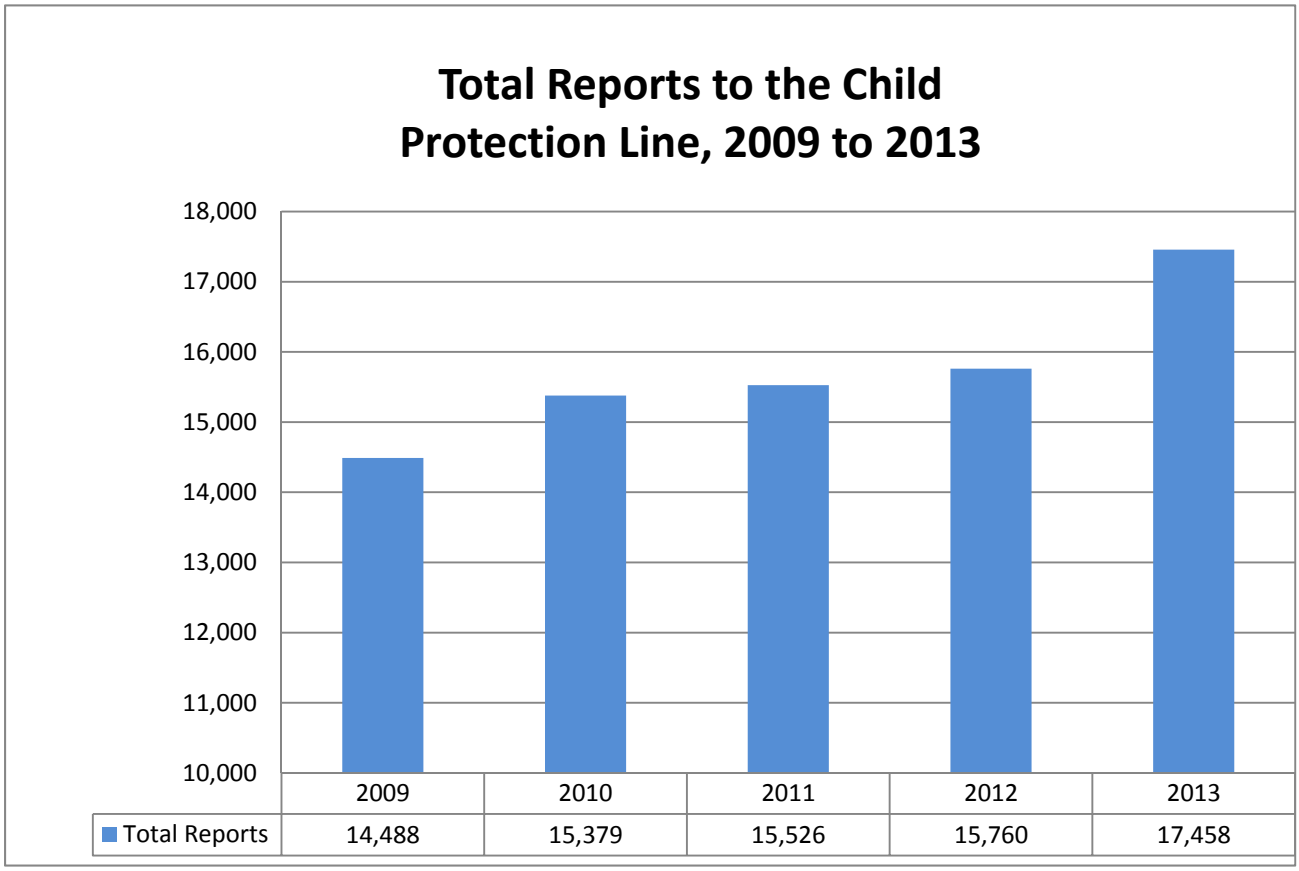
Calls to Vermont's Child Protection Line

In 2013, Vermonters called the state's toll-free Child Protection Line to report their concerns about children's safety and well-being a record 17,458 times. Both mandated and non-mandated reporters can call our hotline anytime, day or night.

According to the *2012 Child Maltreatment Report,* published by the U.S. Department of Health & Human Services, Vermont has the highest rate of child abuse and neglect reporting in the nation. In 2012, we had 117.9 reports per 1,000 children, while the national average was 46.1.

This higher-than average rate of reporting can, at least in part, be explained by the following:

- We encourage all Vermonters – whether mandated by law to report or not – to call the Child Protection Line with any concerns about a child's safety; and
- We count all the calls we get, whether or not they meet the legal definition of child abuse and neglect. This includes:
  - Calls about youth who may be engaging in risky behaviors;
  - Allegations that don't meet the legal definition of child abuse or neglect but still raise concerns about whether children are receiving proper parental care; and
  - Multiple calls about the same children/incidents made by different reporters.

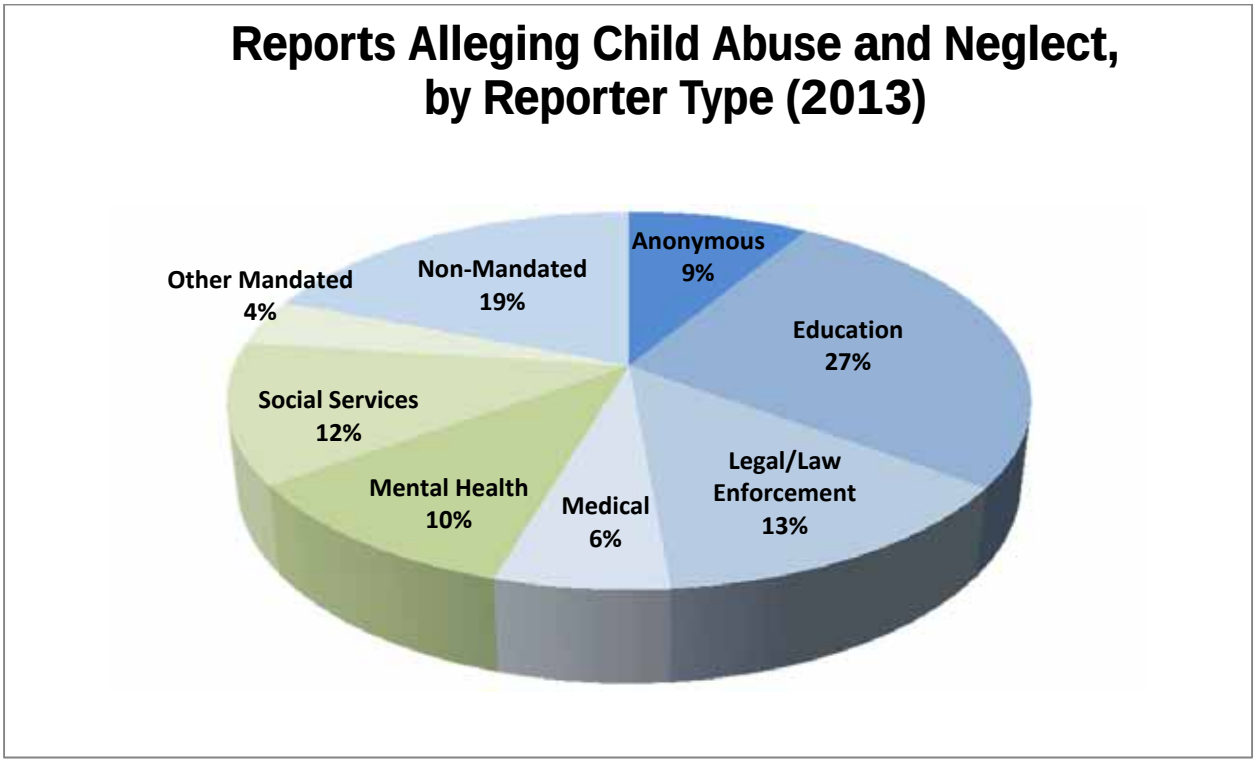


Mandated Reporters of Child Abuse and Neglect

While all Vermonters are encouraged to report their concerns about children's safety, certain people – called mandated reporters – are required by Vermont law to do so (Title 33, Chapter 49). What's more, they must report their suspicions to Family Services *within 24 hours*.

Mandated Reporters in Vermont

- Chiropractors, dentists, emergency medical personnel, licensed practical nurses, medical examiners, mental health professionals, osteopaths, pharmacists, physicians, physicians' assistants, psychologists, registered nurses, surgeons, and any other health care providers;
- Hospital administrators, interns, and resident physicians in any hospital in the state;
- School superintendents, principals, headmasters (independent schools), teachers, librarians, guidance counselors, and other individuals regularly employed by, or contracted and paid by, school districts or independent schools to provide student services;
- Childcare workers, police officers, probation officers, social workers, and clergy members;
- Residential and non-residential camp administrators, counselors, and owners; and
- Employees, contractors, and grantees of the Agency of Human Services who have contact with clients.



Family Factors Identified by Reporters

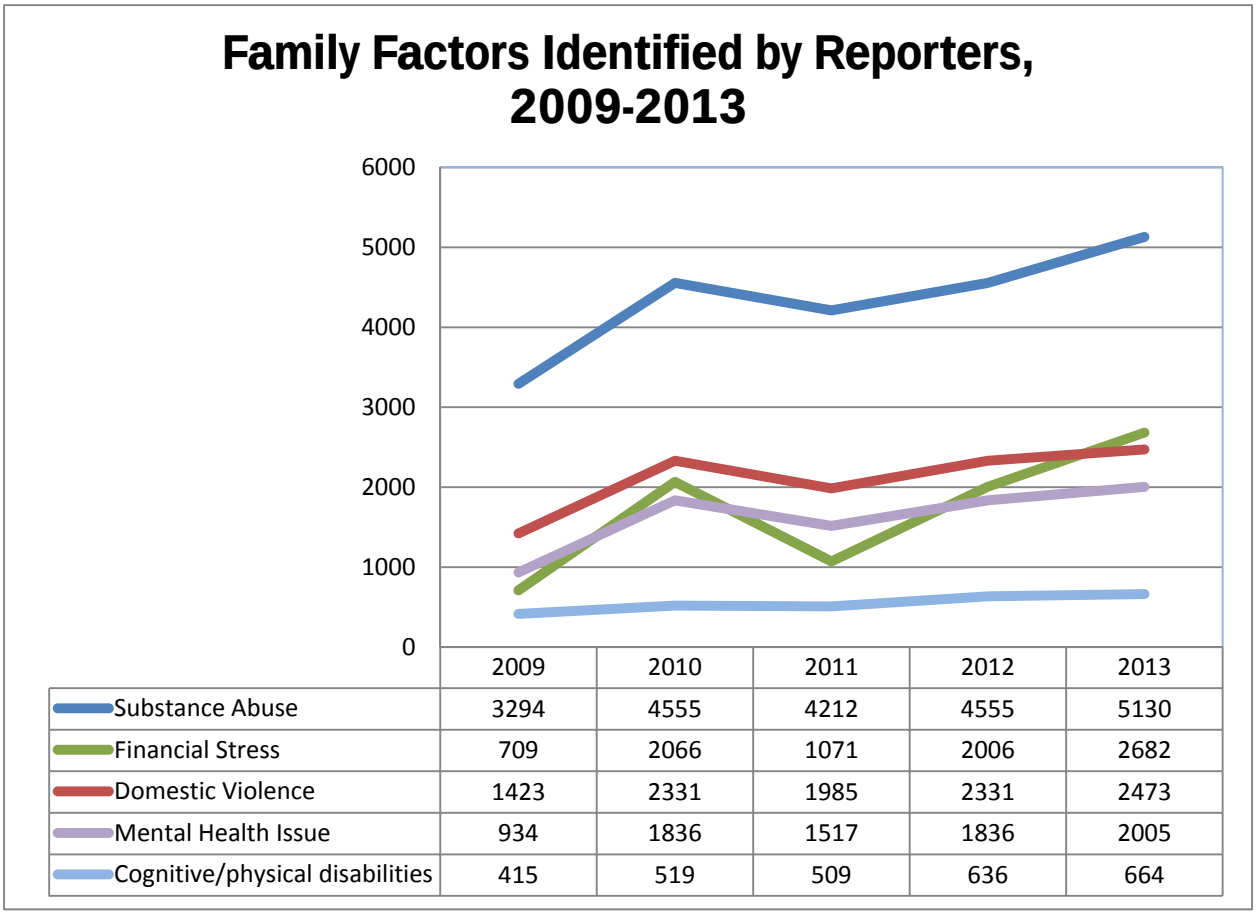
While children from any family can experience child abuse and neglect, we know that there is a strong correlation between child maltreatment and factors such as substance abuse, domestic violence, mental health, and financial insecurity. The presence of these factors can create a toxic level of stress that impairs a family's ability to function and inhibits the development and well-being of children.

Research has found that:

- ➔ The presence of any one of these factors increases the risk of child abuse and neglect; and
- ➔ The presence of multiple risk factors has an exponential impact on a child's likelihood of experiencing abuse and neglect.

The following table identifies family factors that were identified by reporters when they called the Child Protection Line. While some factors may not have been validated during ensuing interventions, this list helps us better understand the difficult challenges families face and helps supervisors and social workers plan effective intervention strategies.

Of note is that fact that substance abuse was reported as a family factor in almost a third of all the reports made, reinforcing the need for supportive services and specialized interventions for this pervasive problem.



	2009	2010	2011	2012	2013
Substance Abuse	3294	4555	4212	4555	5130
Financial Stress	709	2066	1071	2006	2682
Domestic Violence	1423	2331	1985	2331	2473
Mental Health Issue	934	1836	1517	1836	2005
Cognitive/physical disabilities	415	519	509	636	664

What Happens To Reports Received

1. **A supervisor screens each report.**
   The supervisor decides whether the report can be accepted for a child safety intervention according to Vermont law and departmental policy. Several factors are considered, including:

   - The age of the alleged victim;
   - The alleged abuser's relationship to the child; and
   - The nature of the allegation.

   Each non-accepted report gets a second review by another supervisor who may decide to accept it. If it is still *not accepted*, the family may be referred to services in the community but no further action is taken by the Family Services Division

2. **If a report *is accepted*, the supervisor determines the appropriate intervention.**
   Traditionally, the only available response to an accepted report of child abuse or neglect was a child abuse investigation. That changed in 2008, when the Vermont legislature amended Title 33, Chapter 49 of statute to allow child abuse assessment as an alternative. *Differential response* allows us to respond differently to reports based on factors such as the type and severity of the alleged maltreatment, the number of previous reports, and the family's willingness to engage in services to reduce risk.

   An investigation is mandatory, however, in certain situations. This includes when a report alleges that:

   - A child was sexually abused by someone over 10 years old;
   - A child is at risk of harm for sexual abuse by an adult;
   - The actions or inactions of a "person responsible for a child's welfare"(*see definition on inside back cover*) resulted in a child's death or serious injury to a child; or
   - A person responsible for a child's welfare abandoned a child; maliciously punished a child; physically abused a child under three or a child of any age who is non-verbal or non-ambulatory; or allowed a child to be exposed to methamphetamine production.

Another Child Safety Intervention: Family Assessments

In addition to child abuse investigations and assessments authorized by Chapter 49 of Vermont law, Chapter 51 authorizes the use of family assessments. They may be used for allegations that don't meet the legal definition of child abuse or neglect but still raise concerns about whether children are receiving proper parental care necessary for their well-being. This could include, for example, allegations that a parent is neglecting a child's education; a woman who has a substantial history with DCF is pregnant; a newborn has a positive toxicology screen for illegal substances; and a child faces a serious threat to his or her health because of the mother's substance use during pregnancy.

3. FSD opens an investigation or an assessment.

A social worker is assigned to the case and the selected intervention begins, usually within 72 hours but sooner if a child is in imminent danger.

Safety is the first priority in both types of intervention, which include similar steps:

a) Assessing a child's immediate safety;

b) Assessing the risk of future maltreatment;

c) Determining the outcome of the intervention; and

d) Opening a case for ongoing services if needed.

The same assessment tools are used in both types of intervention: the *SDM® Assessment of Danger and Safety Tool* and the *SDM® Risk Assessment Tool*. The results inform our decisions about the need for children to come into DCF custody and placed out of their homes to ensure safety.

The main difference between the two types of intervention is that an investigation requires a formal determination of whether the reported abuse or neglect happened and should be substantiated, while an assessment does not.

Assessment to Investigation Track

A supervisor may approve changing a child abuse assessment to a child abuse investigation at any time if it appears necessary to ensure a child's safety. In 2013, 26 interventions that began as child abuse assessments were later changed to the investigation track.

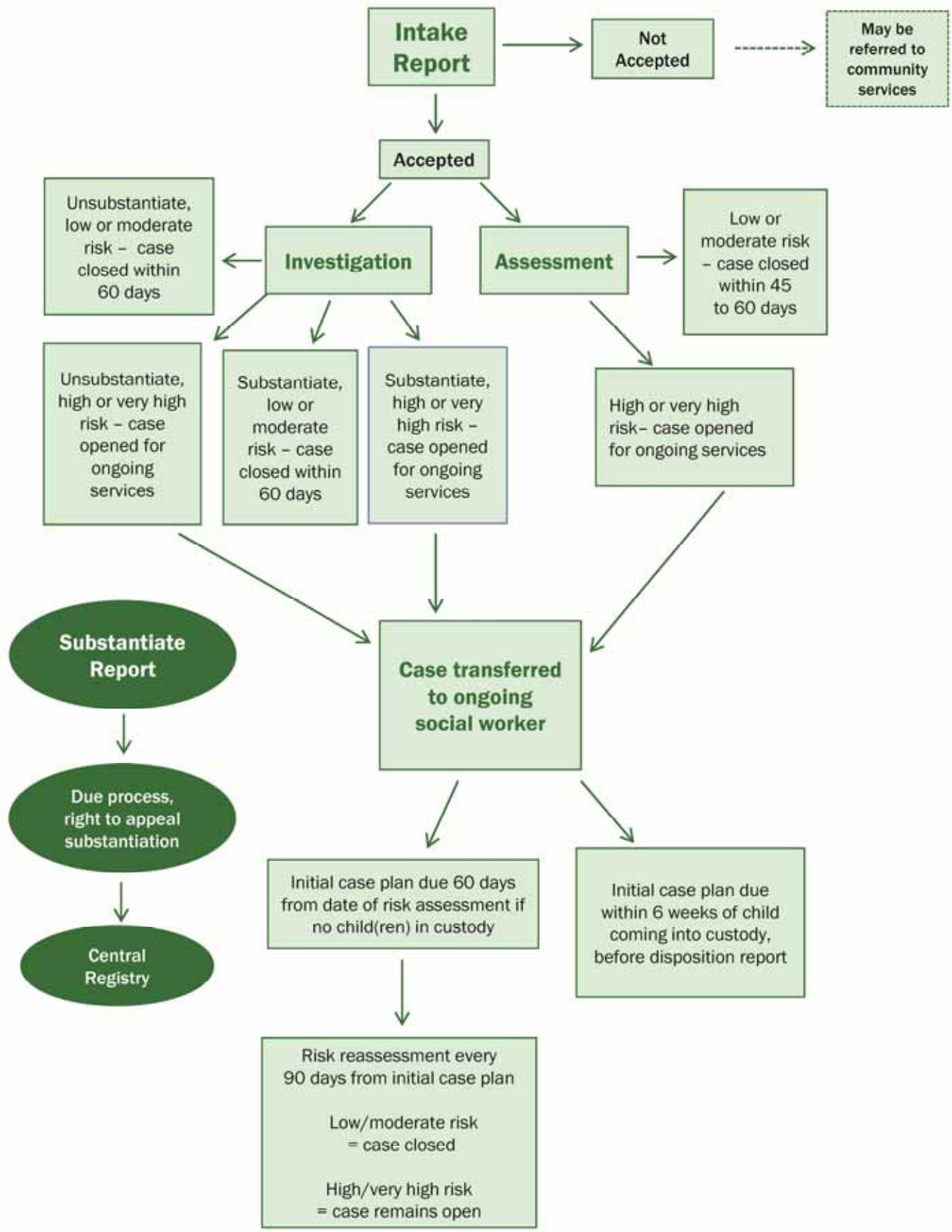
4. At the conclusion of the intervention, the supervisor determines the outcome based on the information gathered.

a. Need for services:
Both investigations and assessments result in a determination of the family's need for ongoing services based on the assessed risk of future maltreatment.

b. Formal Determination:
Investigations also result in a formal determination of whether the reported abuse or neglect occurred. If the evidence would lead a reasonable person to believe the child was abused or neglected, the report is *substantiated* and information about the person substantiated is entered into Vermont's Child Protection Registry – a database of all substantiated reports of child abuse and neglect dating back to January 1, 1992.

If a report is *unsubstantiated*, a case could still be opened for services based on the assessed risk of future maltreatment.

FSD Case Flowchart



Response to Reports, from 2009 to 2013

	2009	2010	2011	2012	2013
Total Calls To Vermont's Child Protection Line	**14,488**	**15,379**	**15,526**	**15,760**	**17,458**
Reports Accepted For:					
1. Child Abuse Investigation	2,831	2,465	2,591	2,536	2,657
2. Child Abuse Assessment[1]	638	1,058	1,192	1,119	1,409
3. Family Assessment	1,021	1,078	1,128	1,044	1,069
Total Reports Accepted For An Intervention	**4,490 (31%)**	**4,601 (30%)**	**4,911 (31.6%)**	**4,699 (30%)**	**5,135 (30%)**

Report Response Rates: Can Vermont data be compared to national data?

According to the 2012 Child Maltreatment Report published by the U.S. Department of Health & Human Services (HHS), Vermont has one of the lowest rates of responding to (or *screening in)* reports in the country: 24%.

Looking at these numbers, it might seem that Vermont is not being responsive to child protection concerns, especially when compared to other states. But the numbers don't tell the whole story.

Each state counts "total reports" differently. This makes comparing data from state to state tricky. It can be like comparing apples to Brussels sprouts. For example:

- ➔ Some states only included calls that met their definition of child abuse and neglect in their count of "total reports". This gave these states an artificially high response rate; it does not mean they intervene on every call they get.
- ➔ Vermont included all the calls we received in our count of "total reports". While we only screened in 24% of the total reports for child abuse investigations and child abuse assessments, this accounts for 28.3 reports per 1,000 children. Illinois and Alabama, states with extremely high screen-in rates, accepted only 21.8 and 18.1 reports per 1,000 children, respectively[2].
- ➔ Vermont did not include family assessments in data reported to HHS. When you factor in these assessments, Vermont responded to 30% of our "total reports".

[1] This intervention was not available prior to July 1, 2009.

[2] Calculations based on the under 18 population from Kids Count Data Center, 2012.

Reports Accepted in 2012 & 2013 – by Intervention & District[1]

District	Child Abuse Investigations		Child Abuse Assessments		Family Assessments		Total Reports Accepted for Intervention	
	2012	2013	2012	2013	2012	2013	2012	2013
Barre	319	323	118	142	123	113	560	578
Bennington	162	203	92	107	78	85	332	395
Brattleboro[2]	140	148	63	86	63	102	266	336
Burlington	416	366	201	270	162	163	779	799
Hartford	163	201	78	104	76	78	317	383
Middlebury	112	150	55	72	35	40	202	262
Morrisville	130	131	45	60	37	46	212	237
Newport	147	133	73	63	61	53	281	249
Rutland	239	246	101	142	100	89	440	477
Springfield[2]	199	171	92	113	144	109	435	393
St. Albans	299	317	129	155	117	140	545	612
St. Johnsbury	133	164	63	82	45	48	241	294
Out of State	77	104	9	13	3	3	89	120
Statewide	**2,536**	**2,657**	**1,119**	**1,409**	**1,044**	**1,069**	**4,699**	**5,135**

[1] District refers to the Agency of Human Services district where the child's caregiver lives.
[2] In September of 2013, certain towns in the Springfield district were temporarily reassigned to the Brattleboro district; this reassignment is reflected in the numbers.

Outcomes of Investigations & Assessments – by District[1]

In 2013, we conducted 2,683 investigations: 2,657 that began as investigations and another 26 that began as assessments but were later changed to the investigation track.

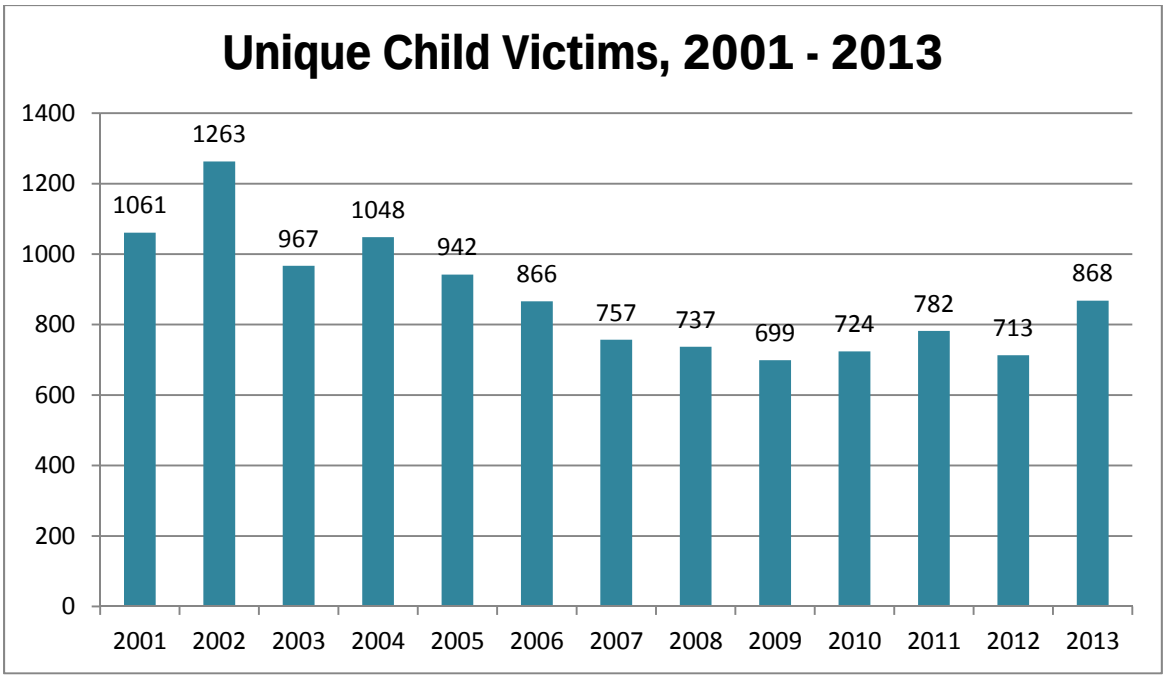
- ➔ Of the 2,683 investigations conducted, 642 were substantiated[2].
- ➔ At the conclusion of the 5,135 investigations and assessments conducted, we opened 790 cases for ongoing services based on an assessed risk of future maltreatment that was high or very high.

	Investigations Substantiated		Cases Opened for Services	
District	**2012**	**2013**	**2012**	**2013**
Barre	82	81	57	75
Bennington	35	46	47	81
Brattleboro[3]	31	34	31	50
Burlington	79	83	163	214
Hartford	39	46	46	28
Middlebury	32	23	36	41
Morrisville	36	30	25	26
Newport	39	32	23	12
Rutland	25	33	44	57
Springfield[3]	65	62	63	65
St. Albans	95	108	87	93
St. Johnsbury	38	38	53	48
Out of State	30	26	0	0
Statewide	**626**	**642**	**675**	**790**

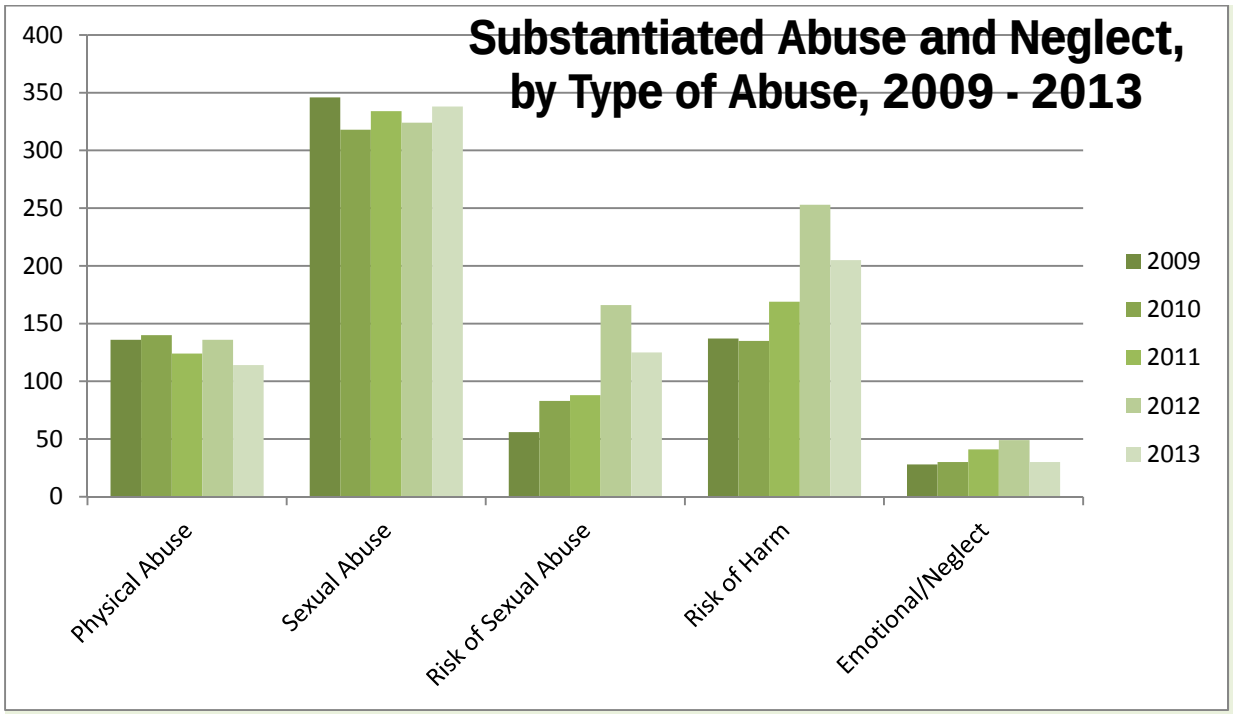
[1] District refers to the Agency of Human Services district where the child's caregiver lives.
[2] Substantiated means the evidence would lead a reasonable person to believe the child was abused or neglected.
[3] In September of 2013, certain towns in the Springfield district were temporarily reassigned to the Brattleboro district; this reassignment is reflected in the numbers.

Data from Substantiated Reports in 2013

At the writing of this report, 66 investigations are still pending. This will affect the data related to the outcomes of investigations on pages 17 to 22.



Note: the numbers in the graph above are an unduplicated count of victims of substantiated child abuse and neglect.



Note: since a report can be substantiated for more than one type of abuse, the numbers above reflect a total greater than the number of substantiated reports.

Reports Substantiated in 2013 — by Type of Abuse

Since a report can be substantiated for more than one type of abuse, the numbers below reflect a total greater than 642 — the number of reports substantiated in 2013.

District[1]	Physical Abuse	Sexual[2] Abuse	Risk of Sexual Abuse	Risk of Harm	Emotional/ Neglect
Barre	16	37	22	26	2
Bennington	7	24	7	16	1
Brattleboro[3]	8	23	4	10	3
Burlington	17	34	13	26	4
Hartford	6	32	6	12	4
Middlebury	5	13	2	9	0
Morrisville	6	17	11	4	1
Newport	5	19	7	11	0
Rutland	8	26	5	12	3
Springfield[3]	10	24	14	29	9
St. Albans	20	47	31	32	3
St. Johnsbury	6	20	1	17	0
Out of State	0	22	2	1	0
Total Statewide	**114** (14%)	**338** (41.6%)	**125** (15.4%)	**205** (25.2%)	**30** (3.7%)

[1] District refers to the Agency of Human Services district where the child's caregiver lives.
[2] The department investigates all valid allegations of sexual abuse and risk of sexual abuse regardless of the relationship between the alleged abuser and child.
[3] In September of 2013, certain towns in the Springfield district were temporarily reassigned to the Brattleboro district; this reassignment is reflected in their numbers.

Reports Substantiated in 2013 — by Age & Gender of Victim

The data below represents the age and gender of the victims of substantiated abuse or neglect. Please note that a child is represented more than once if he or she suffered more than one type of abuse or was involved in more than one substantiated report during the year.

Age	Percent	Physical	Sexual	Risk of Sexual Abuse	Risk of Harm	Neglect/ Emotional
< 1	5.0%	9	1	7	34	1
1	4.2%	7	1	9	25	2
2	4.5%	5	3	9	28	2
3	6.2%	9	12	11	30	2
4	5.8%	11	17	18	12	2
5	7.5%	8	26	19	23	2
6	7.6%	6	31	15	25	2
7	6.7%	9	15	22	20	4
8	6.0%	8	20	13	19	2
9	5.3%	9	13	15	16	2
10	5.1%	4	22	8	16	3
11	5.8%	7	22	13	14	4
12	4.7%	7	22	11	6	3
13	6.6%	4	39	12	11	2
14	6.8%	8	47	4	9	3
15	6.6%	5	45	8	8	3
16	3.3%	2	20	6	3	3
17	2.3%	2	16	4	1	1
TOTAL	**100%**	**120**	**372**	**204**	**300**	**43**
Gender						
Male	40.6%	69	90	73	171	19
Female	59.4%	51	282	131	129	24
TOTAL	**100%**	**120**	**372**	**204**	**300**	**43**

Reports Substantiated in 2013 — by Age & Gender of Abuser

The data below represents the age and gender of substantiated abusers. An abuser may be represented more than once if more than one type of abuse was substantiated.

Age	Physical	Sexual	Risk of Sexual Abuse	Risk of Harm	Neglect/ Emotional
<20	2	127	7	3	0
20 - 29	43	69	38	89	10
30 - 39	42	41	42	85	14
40 - 49	17	41	31	37	8
50 - 59	5	22	16	11	5
60+	2	16	4	4	0
Unknown	3	20	0	0	0
Gender					
Male	68	312	105	111	15
Female	42	21	33	119	22
Unspecified	2	4	0	0	0

Reports Substantiated in 2013 — by Relationship of Abuser to Child

Relationship	Physical	Sexual	Risk of Sexual Abuse	Risk of Harm	Neglect/ Emotional
Parent	85	26	80	279	47
Stepparent/ Parent's Partner	30	23	55	49	8
Foster Parent	0	1	0	3	0
Sibling	0	43	0	3	0
Other Relative	4	50	38	7	1
Neighbor/Friend	0	154	38	9	0
Other Known	1	31	11	4	0
Stranger	0	37[1]	2	0	0
Unspecified	5	14	6	5	0

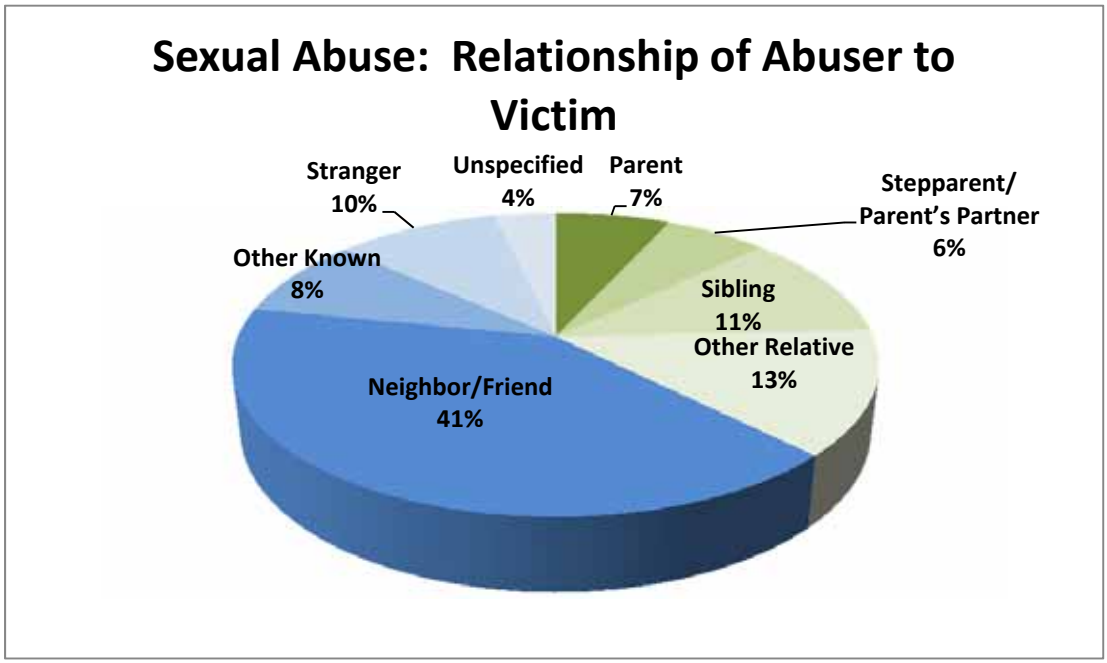
[1] Includes people found to have possession of online child pornography

Reports Substantiated for Child Sexual Abuse in 2013

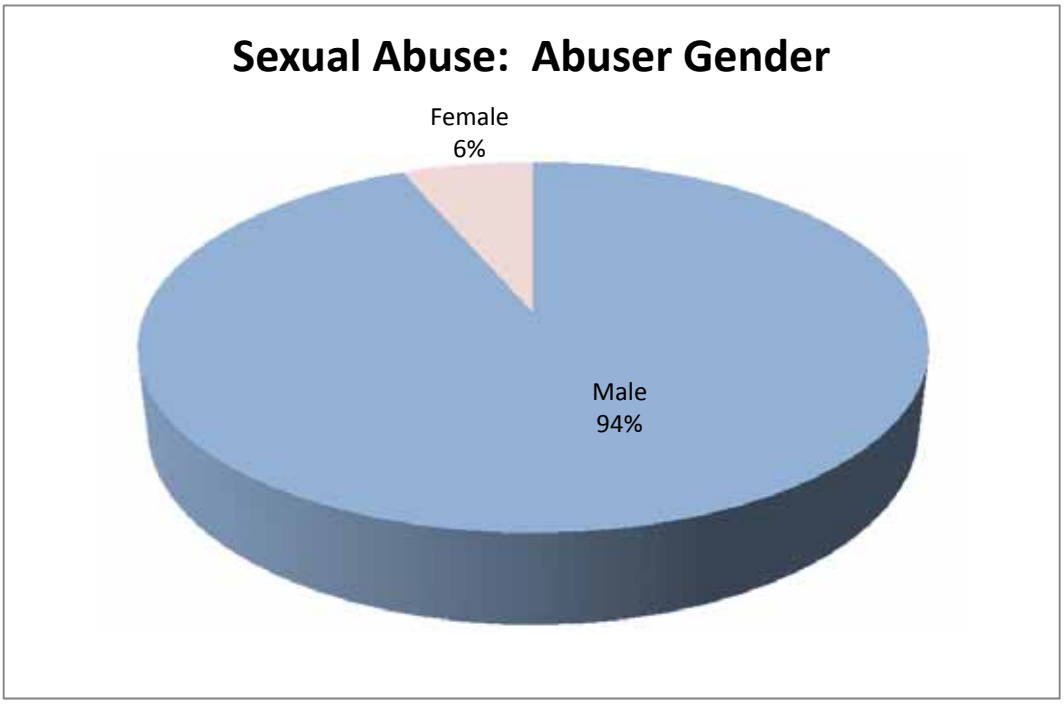
Unlike other types of child abuse, the department investigates all valid allegations of sexual abuse and risk of sexual abuse — regardless of the relationship between the alleged abuser and child. Other state agencies only get involved when the alleged abuser is a caregiver. For this reason, our rate of intervention in sexual abuse cases is not comparable to other states.

Here's what the 2013 data tells us about reported child sexual abuse in Vermont:

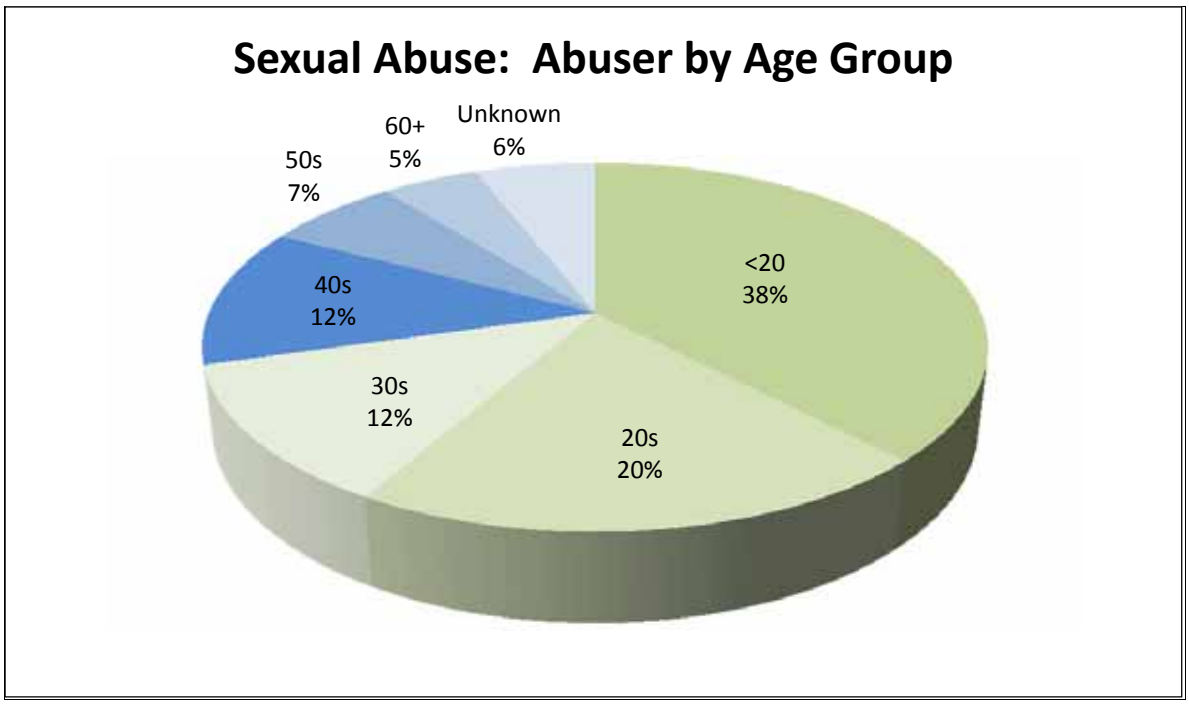
- At least 86% of child sexual abuse was committed by people the children know.

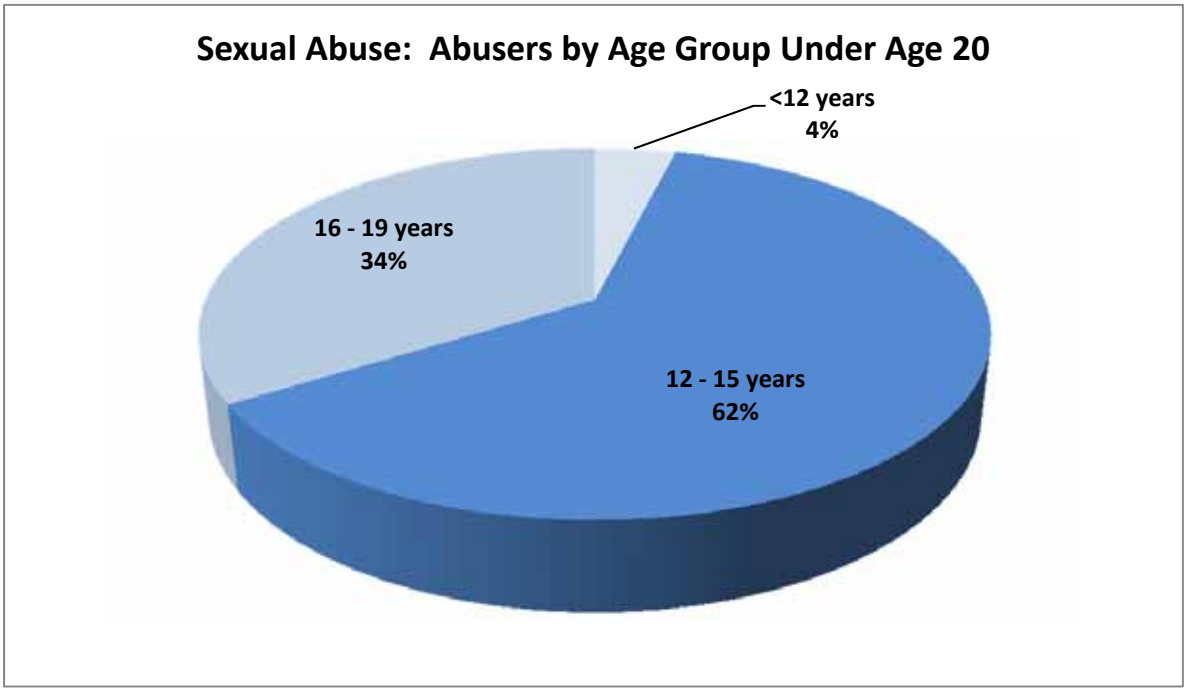


- 94% of the known abusers were male.



- At least 38% of the abusers were under the age of 20. Of these, 96% were between the ages of 12 and 19.





Child Abuse and Neglect Definitions

Vermont law (33.V.S.A. 49, § 4912) defines an “abused or neglected child” as:
One whose physical health, psychological growth and development or welfare is harmed, or is at substantial risk of harm, by the acts or omissions of his or her parent or other person responsible for the child's welfare. It also means a child who is sexually abused or at substantial risk of sexual abuse by any person.

Harm: can occur by abandonment, emotional maltreatment, neglect, physical injury, or sexual abuse.

Risk of harm: means a significant danger that a child will suffer serious harm other than by accidental means, which would be likely to cause physical injury, neglect, emotional maltreatment, or sexual abuse.

Child: an individual under the age of 18.

Person Responsible for a Child's Welfare: includes the child's parent, guardian, foster parent, and any other adult residing in the child’s home who serves in a parental role; an employee of a public or private residential home, institution or agency; or other person responsible for the child's welfare while in a residential, educational or child care setting, including any staff person.

Emotional Maltreatment: a pattern of malicious behavior, which results in impaired psychological growth and development.

Neglect: failure to supply a child with adequate food, clothing, shelter or health care.

Physical Injury: death, permanent or temporary disfigurement, or impairment of any bodily organ or function other than by accidental means.

Sexual Abuse: Any act or acts by any person involving sexual molestation or exploitation of a child including but not limited to incest, prostitution, rape, sodomy, or any lewd and lascivious conduct involving a child. Sexual abuse also includes the aiding, abetting, counseling, hiring, or procuring of a child to perform or participate in any photograph, motion picture, exhibition, show, representation, or other presentation which, in whole or in part, depicts a sexual conduct, sexual excitement or sadomasochistic abuse involving a child.

HELP PREVENT CHILD ABUSE

If you suspect a child is being abused or neglected,

call Vermont's Child Protection Line to

report it — 24 hours a day, 7 days a week.

1-800-649-5285

Preventing child abuse helps

ensure the safety, health, and

optimal development of our children.

http://dcf.vermont.gov/fsd

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