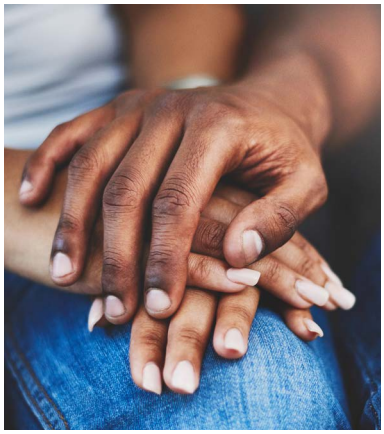




A Safer Place

Understanding Child Abuse
A Supportive Caregiver's Guide



UnityPoint Health

Welcome

Children come to the Child Protection Center due to concerns of possible abuse. Our goals are to:

- Help make the process comfortable for the family and the child
- Empower our patients throughout their appointment
- Give the child a space and an opportunity to be heard
- Work with a team of professionals involved in the case
- Help the child and family begin to heal and recover



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The Silent Problem

Most children do not disclose abuse. The reasons vary depending on the child and circumstances, but below is a list of possible barriers that children face:

- Developmentally, they may not understand that what happened is wrong, or they may lack the language to explain.
- They may feel embarrassed, ashamed, or responsible for what has happened.
- They may fear not being believed.
- There are often positive feelings associated with the abuser, and although they want the abuse to stop, they don't want the person to get into trouble.
- They are threatened or bribed by the abuser.

Is it my fault my child didn't tell me about the abuse when it occurred?

No. Disclosure of abuse, particularly sexual abuse, is very difficult for children. The reasons a child does not disclose abuse are unique to each child, but they often include a combination of the factors above. A child not disclosing abuse while it is happening, and the disclosure coming months or years later, is unfortunately the norm. That is true even when caregivers have been intentional about body safety education and encourage their children to come to them if someone ever hurts them or makes them uncomfortable. When a child does disclose abuse, it is also most common for that disclosure to be made to someone other than their caregiver. Peer-to-peer disclosure is very common, as is disclosing to therapists, school counselors, or a more removed relative. While it is normal to feel sadness and frustration that you didn't know the abuse was happening so that you could have been protective and supported your child sooner, what the child will be focused most on is how you protect and support them now that you know.

The circumstances of when and how your child discloses abuse are not a reflection of their relationship or trust in you.

Is it my fault the abuse occurred?

No. It is the abuser's fault. Caregivers often struggle with feeling like the abuse is their fault, and children who are abused often struggle with the same feeling. If a child expresses that the abuse is their fault, it is easy for a parent to not only reassure their child it is not, but also to fully believe that to be true. While it may be more difficult for caregivers to apply this belief to themselves, it is equally true. The abuse is not your fault; it is the abuser's. Sexual abuse, in particular, is prevalent because most abusers are family members, close friends, or someone whom parents and children are taught to trust, like coaches, teachers, or pastors. The abuser is aware of and intentionally using their status with the child and caregivers, as well as the inherent trust the family has for the abuser. This is done to not only abuse the child, but also to manipulate both the child and caregivers so the abuse is not reported or suspected. This very intentional way that abusers manipulate the child, the child's caregivers and the entire community around the child is referred to as grooming. This is why so often there are NOT any of the "red flags" that parents expect to see or think they missed when a child is being abused. While you should try not to put that guilt and blame on yourself as a caregiver, it is normal and fully appropriate to feel anger and betrayal toward the person who abused that trust. Just like your child, you are not at fault for the abuse that has occurred.

After you leave your appointment:

1

Believe and support your child.

Assure the child that you believe them, you support them and they are not to blame for the abuse.

2

Be ready to listen, but do not pry.

Tell the child you are available if they want to talk now or in the future, but do not pressure them to talk about the abuse, their appointment or anything else regarding the case.

3

Be a calm supporter.

The child is looking to you to know how to appropriately react and needs a calm supporter. Threatening to harm the alleged perpetrator, yelling, throwing items or other inappropriate behaviors may increase the child's worries. Refrain from adult conversations in the presence of your children.

4

Do not make promises.

Do not make promises to the child that you cannot keep. For example, promising that someone will go to jail, that they will never have to see someone again, or that no one will ever hurt them again. While these are all well-intended promises, they are things that are not solely in your control.

5

Allow a return to normalcy.

Return to your normal daily routine. Provide the child with a physically, mentally and emotionally safe environment in which to recover. Allow them to talk about the situation when they are comfortable but do not catastrophize the abuse.

6

Starting the healing process.

Follow through with any treatment recommendations. Evidenced-based mental health therapy is frequently recommended to assist the child in processing trauma and helps them develop ways to safely cope. Therapy may also be recommended for caregivers and families.

Possible Long-Term Effects

Child abuse is no longer a secret. It happens to people from all backgrounds. Perpetrators come in all shapes and sizes. Child abuse is a serious problem that can lead to long- term effects:

- Low self-esteem
- Guilt, shame
- Depression
- Difficulty forming trusting, meaningful relationships
- Destructive coping mechanisms (alcohol, drugs and self-harming tendencies)
- Sexual confusion or dysfunction and intimacy issues
- Loneliness, isolation and alienation
- Disturbed and confused family relationships

To help the child deal with such feelings, counseling is recommended.

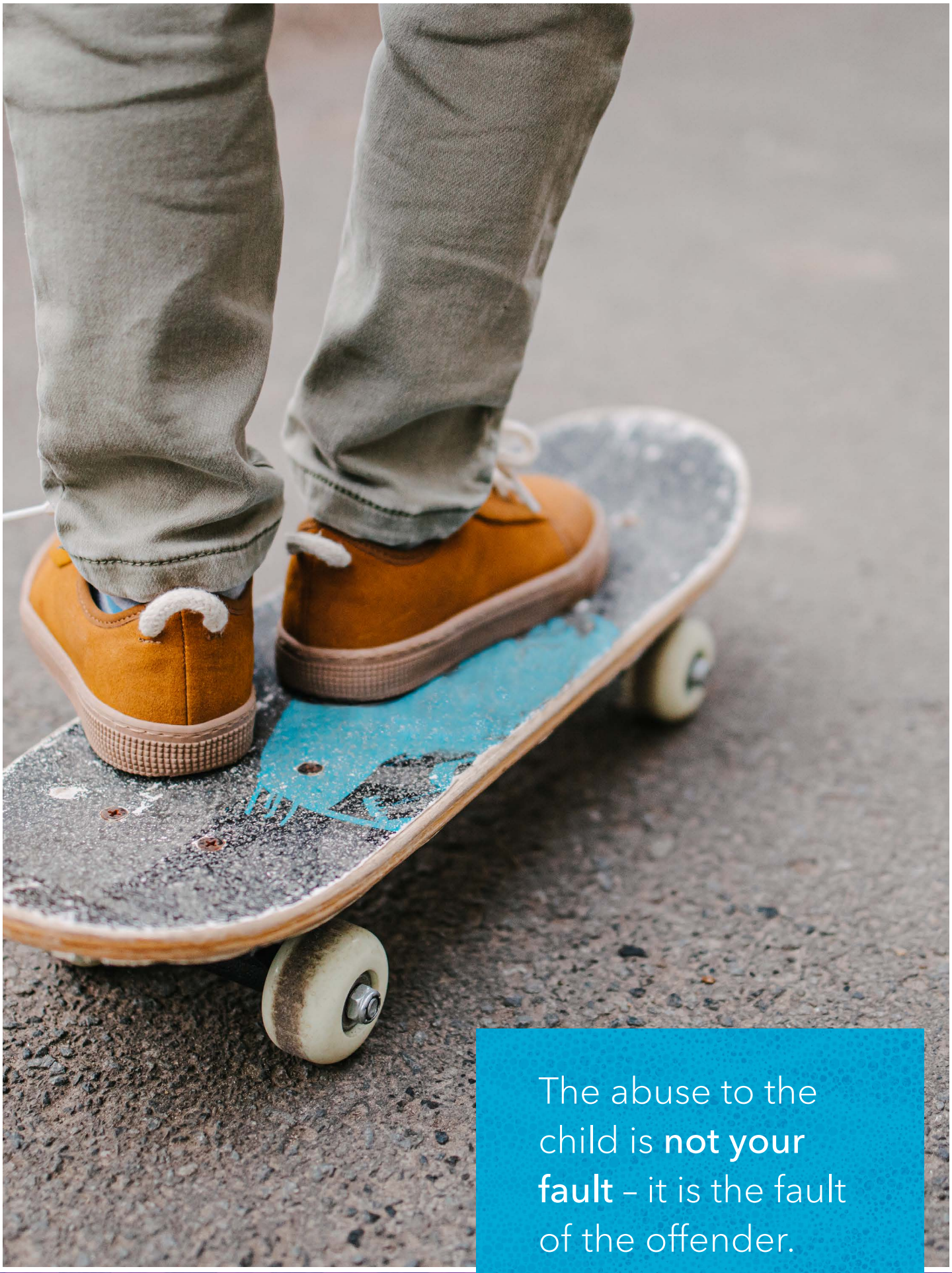
Recovery

Child abuse is a term that covers a wide variety of acts and it affects each child differently. Though the child is in no way responsible, things the offender did or said can make the child feel responsible. Not all children may need recovery services, but this feeling of responsibility is a possible treatment issue. It is important that a child who has been abused gets a clear understanding that the abuse was not their fault. The child may have positive feelings toward the offender and needs to separate what was OK about the relationship from what was abusive. Even a one-time incident can cause confusion and guilt if not handled properly.

Supportive caregivers are sometimes tempted to ignore the problem. This attitude will not help children deal with their feelings about the abuse. Children need to know you will take the problem seriously and help them deal with it.

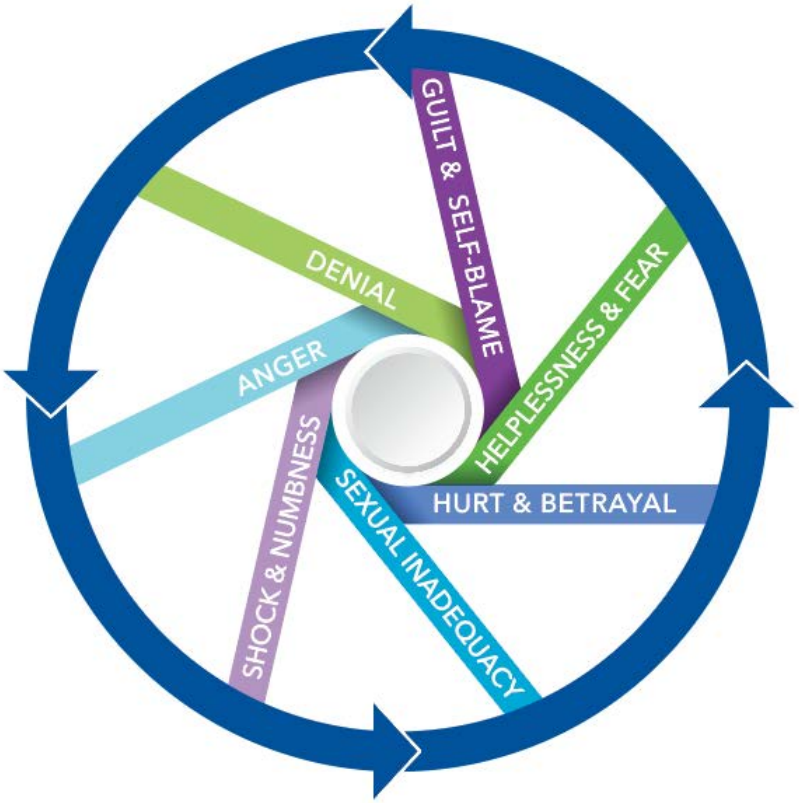
Children are usually relieved to talk about what happened with someone who is not directly involved. Many children, out of concern for their supportive caregivers, don't want to tell them things that will make them sad. The counseling session provides a safe place for children to deal with their feelings.

Your willingness to seek counseling for the child if difficulties arise will greatly assist the child's healing. No matter what kind of counseling the child receives, your relationship with the child will be the most crucial element in their recovery.

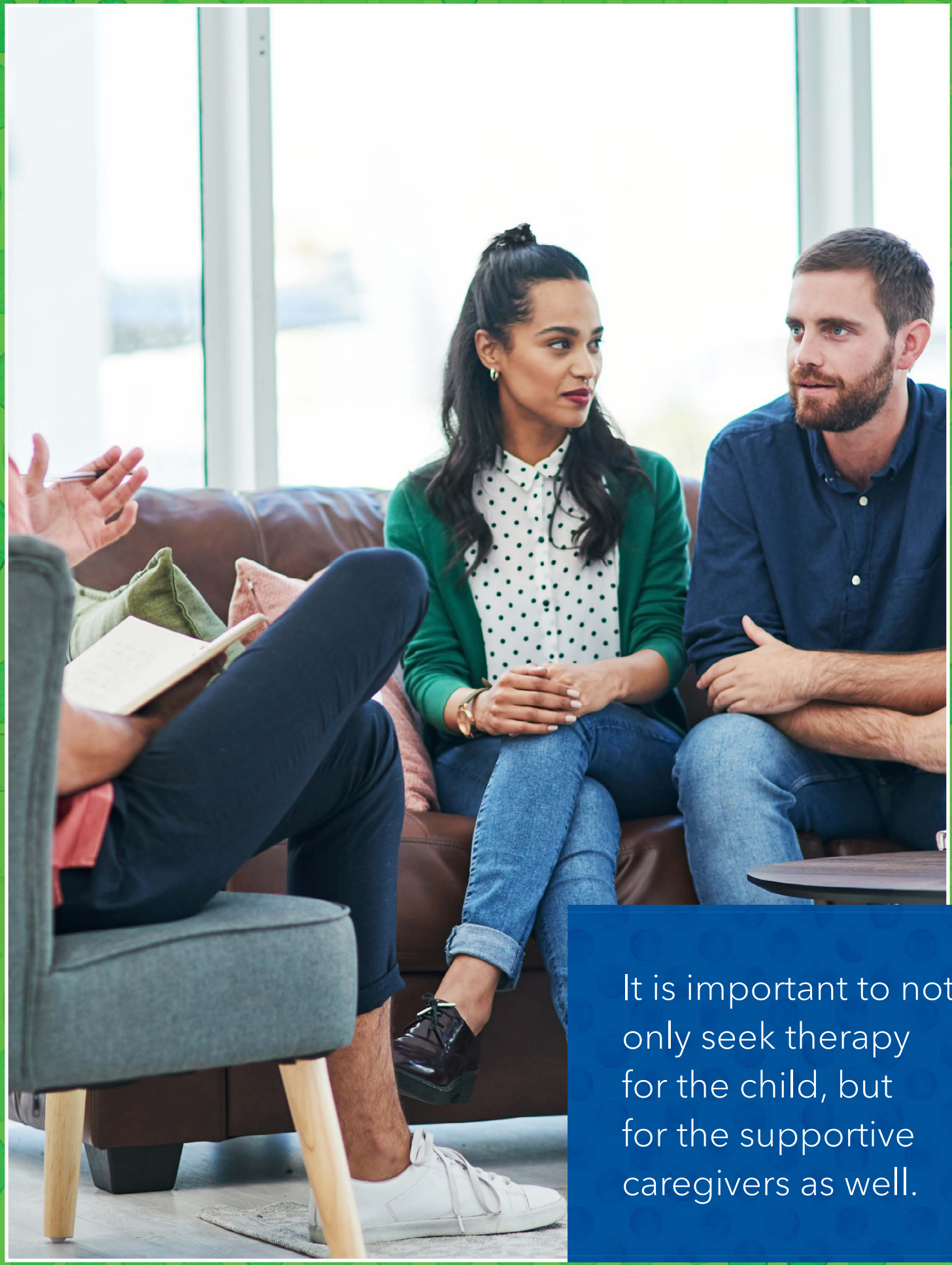


The abuse to the child is **not your fault** – it is the fault of the offender.

How Supportive Caregivers Feel When Abuse Has Been Reported



- **Anger.** Supportive caregivers sometimes feel angry at themselves for not being able to protect their child. You may feel anger and disgust toward the perpetrator for what they did. Be honest with yourself about your feelings and talk to someone you trust.
- **Denial.** It's normal to have questions about the abuse. You may believe that the abuse happened but no damage was done or the child does not even remember. Supportive caregivers often feel this way because it is so overwhelming to accept the abuse and long-term effects. With many supportive caregivers, it just takes time to accept the abuse and overcome the denial.
- **Guilt and Self-Blame.** You may feel that it is your fault, but the abuser is to blame. The best thing to do is to learn how to make things better and support the child.
- **Helplessness and fear.** You may feel that things are out of control and do not know what to expect. You may feel invisible and that things are not going your way or the child's way. You may also experience fear regarding things like what will happen next, how the alleged offender will respond, etc. We will help guide you towards the appropriate actions to take to ensure the best outcome for your child and family.
- **Hurt and Betrayal.** It is normal to feel hurt and betrayed by what happened to the child. You may lose people who are close to you because of the abuse. It is important to grieve for your losses and talk to someone you trust.
- **Sexual Inadequacy.** Some believe the offender turned to the child because sexual relations were not adequate. However, it is important to learn the dynamics of abuse in order to realize that sexual relations with an adult partner do not affect a person's likelihood to abuse or not abuse children.
- **Shock and Numbness.** This situation may bring back feelings of your own abuse and how you did not want this to happen to the child. This may lead to shock and numbness of the new situation that you are in. If this is the case, you may need to seek therapy to help recover from the abuse.



It is important to not only seek therapy for the child, but for the supportive caregivers as well.

What to Say to Others

It is important to maintain the child's sense of privacy. It is also important for abused children to feel some sense of control over what has happened to them. It may be helpful to ask the child who they want to tell and when. We encourage you to also be careful not to make it a secret, as this could cause more shame for the child.

A challenge your family may face will be what to say to others about the abuse. The child may feel embarrassed and/or responsible. Let the child know with which relatives or friends you will be discussing it with and let the child have some choice about who is told. Open communication about how, when, and who information will be shared with can be empowering for your child.

If you are especially close to your family, you will probably want to talk with them about the abuse and how it has affected the family. It is important to keep in mind how these relatives usually react to stressful situations. Their reactions may include hysteria, horror, anger, obvious distress, sincere concern, embarrassment, disgust, disinterest or unnecessary questioning for intimate details. You may also find them to be of great comfort. If you know they will react in a negative way, you may not want to share the information with them unless it becomes necessary.

It is important that when/if you share your child's experience with others that it is done outside the presence of the child and/or other children, unless the child identified they want to be part of the conversation. Additional exposure to discussion of the abuse in front of children is discouraged.



Terms to Know

Alleged – Used by the legal system to indicate something has not yet been proven. It does not mean that the police or prosecutor or HHS do not believe a crime was committed.

Civil Cases – Usually filed for monetary damages or to right wrongs. Must be able to prove you suffered specific losses in order to win damages.

County Attorney – The prosecutor who works for the county and prosecutes state laws. The prosecutor has final decision as to whether charges will be filed and how a case is resolved.

Defendant – The person who is charged with the crime or against whom the complaint is filed.

Deposition -- The recorded sworn oral testimony of a party or witness before trial.

Iowa Department of Health & Human Services (HHS) – HHS is involved in the identification, reporting, assessment, and treatment of cases of child abuse. HHS responds based on where the child lives.

Law Enforcement – Investigators assigned come from an agency that may include a city police department, county sheriff's office or other designated agency. They may interview people involved in the case and gather evidence. Law enforcement responds based on where incident/s occurred.

Plaintiff – Person, city, county or state that sues or files the complaint.

Plea Agreement – An agreement without a trial. It is reached when the county attorney and defense attorney agree on a charge and sentence that will resolve the case without trial and ask the court to follow the agreement. A plea agreement is often reached with the input of the victim and the victim's family.

Probable Cause – Standard used to determine if there is enough evidence to charge a person with a crime.

Subpoena – An official order of the court that tells people they must come to court or provide something to court.

How the System Responds

Depending on the age of the offender, a case may be prosecuted in juvenile court or adult court. Depending on the level of offense, a case may be prosecuted as a felony or a misdemeanor. Whether a charge is being prosecuted in juvenile court or adult court and whether it is charged as a felony or misdemeanor will determine who the assigned prosecutor is and what jurisdiction will hear the case: District Court or District Associate Court. Prosecutors with the local County Attorney's Office are always available to answer these questions and help navigate children and families through the legal system. Don't lose yourself in the legal system, because it is only one step in the process. It is not essential to your child's recovery. Not all investigations of child abuse result in charges or founded assessments by HHS. A lack of charges or lack of a founded assessment does not mean your child was not believed. This may be due to a number of factors. Investigators will be able to provide more information on the specifics of the case and the criteria necessary for charges and/or founded assessments.

Life of a Criminal Case

1

The Investigation A law enforcement officer conducts the investigation. The officer will interview the person who reported the abuse. Then, an appointment is arranged for the victim at the Child Protection Center. The officer may also conduct a crime scene investigation and process evidence, interview other witnesses, and conduct investigative research. This research includes looking for prior convictions and reviewing prior police reports involving the suspect, victim and witnesses. Then, the officer usually interviews the suspect.

2

The Arrest The arrest is made by law enforcement when there is probable cause and typically with the input of the prosecutor. It may be without an arrest warrant. Law enforcement prefers to wait to arrest a suspect until the investigation is complete. The defendant may post bond any time after the arrest and be released from custody except in cases of Sexual Abuse 1st, 2nd or 3rd Degree. These cases require the defendant to appear in front of the court in order for a no-contact order to be issued before they can post bond.

3

The Initial Appearance In some types of cases, the defendant appears before a judge within 24 hours of an arrest. The court will advise the defendant of the criminal charges against them and enter a "No Contact Order." The judge then sets the bond conditions. A defendant is able to be released from custody after they have seen the judge and they post the bond amount. There are other types of cases in which the defendant could post bond before seeing a judge. This can delay the implementation of a "No Contact Order."

4

The Arraignment The County Attorney's Office will file a document called the Trial information. This contains a summary of what each witness will testify to. The defendant then files a written arraignment or appears in court. This is when the defendant enters a plea. Typically, the defendant pleads not guilty at this stage. The defendant will also either demand a speedy trial or waive their right to a speedy trial. If they demand a speedy trial, the trial must happen within 90 days.

5

The Discovery The defense attorney will receive copies of police reports, medical reports and the victim's interview. They may then conduct depositions of witnesses and/or the victim. Minor victims do not have to be in the same room as the defendant during the deposition. Plea negotiations may be held during this phase.

6

The Trial The defendant can choose whether to have a bench (judge) or jury trial. This may be held at any time between 90 days to a year or more. Generally, victims and any other witnesses testify at trial.

Iowa Department of Health and Human Services (HHS)

Child Protective Services aims to ensure the children in Iowa are safe and families have the supports in place to keep their children safely at home when possible. Concerns of suspected abuse and neglect are assessed by a Child Protection Worker (CPW). In every assessment, the CPW works with the family and others familiar with the family or child to:

- Ensure the safety of the child.
- Better understand the concerns reported.
- Identify the strengths and supports that the family has in place.
- Assist with referrals for services to meet the needs of the family.

Once a report is accepted for assessment, the CPW will gather necessary information from observations, interviews, and documentation. The CPW will then assess the credibility of subjects of the report, collateral contacts and information, and determine whether or not abuse occurred.

The CPW must make one of the following conclusions regarding a report of child abuse:

- **Not Confirmed** means that it was not possible to determine, by more than half of the available evidence, that abuse occurred. The child abuse assessment summary is retained for five years.
- **Confirmed** means that more than half of the available evidence shows that abuse occurred, but the abuse does not meet the criteria for placement on the Central Abuse Registry. The child abuse assessment summary is retained for five years.
- **Founded** (Confirmed and Placed) means that more than half of the available evidence shows that abuse occurred, and the abuse does meet the criteria for placement on the Central Abuse Registry. This assessment summary will be kept on the Registry for ten years.

The CPW is required to complete the child abuse assessment within 20 business days of receipt of the child abuse report. The family will receive a written notice that the assessment has been completed as well as a copy of the assessment report which includes any service recommendations.

Body Ownership Tips

- Teach children proper names for body parts (breasts, vagina, penis, testicles, and butt). We don't have "cute" or "silly" names for our other body parts (such as our arms or legs), and we shouldn't for our private parts either. The child using other names for their private parts may be confusing to other adults if they go to them for help and investigations can be difficult if these terms are used.
- Teach children their body belongs to them and nobody has the right to give them a touch they don't want, including family members (such as a hug or kiss goodbye). Ensure family members and other adults understand and respect this boundary.
- Talk with children and help them identify at least five (5) safe adults that they can go to for help, including at least one (1) person outside of their family. Discuss with them how they can contact them and practice this.

Sexual Abuse Prevention Tips

While there are no guaranteed sexual abuse prevention strategies, listed here are many effective options to incorporate into family culture:

- Know where the children are, whom they're with and what they are doing. Make it a habit of yours to get to know teachers, coaches, friends, supportive caregivers, and any other adults they spend time with. After the child spends time with others, have casual conversations about what they did, if they have anything that they want to share with you about their day, etc.
- Teach children not to keep secrets and create a home environment where it is "surprises, not secrets." Surprises are short term, positive, and everyone will know shortly (like a surprise birthday party), whereas a secret is something they aren't supposed to tell anyone and is therefore unsafe.
- Teach children to ask permission before accepting gifts from others.
- Teach children the "Safetouch Rules":
  - Say "NO"
  - Leave the situation
  - Go and tell a safe grown-up
  - Keep telling until a grown-up helps them
  - Remember that it is not their fault

Family Conversations

- Teach children if anyone threatens them or their family to tell a grown-up immediately.
- Ask children open-ended questions about their day and time spent with others. Create a family culture that includes daily conversation which allows kids to feel safe bringing any concerns to your attention. Here are some conversation starter ideas:
  - What is something you would like to share with me about your day?
  - What is one new fact that you learned today?
  - What was your favorite part of the day? What was your least favorite part of the day?
  - If you could change something about your day, what would it be?
  - What do you like best about school (camp, grandma's house, etc.)? What do you like the least?

Social Media and Internet Safety Tips

- Monitor children's use of social media and the internet, including their screen time, who they have the ability to communicate with, what apps they're using, their passwords, etc.
- Be careful not to post information that identifies your children's school, home address, etc.
- See a Family Advocate for up-to-date resources and materials.



Create a family culture that includes daily conversation which allows kids to **feel safe** bringing any concerns to your attention.

Together We Care

When you need some help, we would like to make it easier for you to find free and reduced cost services that address your needs. If you're looking for food assistance, help with paying bills, a ride somewhere important or other types of support begin your search here. **Allen Child**

Protection Center (319-226-2345)
St. Luke's Child Protection Center (319-369-7908)
STAR Center (515-224-3300)

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