Unto the Third Generation: a call to end child abuse within 120 years

Victor Vieth
National Child Protection Training Center
Gundersen Health System
Winona State University
vivieth@gundersenhealth.org
www.ncptc.org

The Agenda

• The history of the fight against abuse
• The five obstacles to ending child abuse
• The battle plan
• The timeline for accomplishing this goal
• The last full measure

Child abuse and history

• 1865: Animal protection
• 1874: Child protection
• 1930s: Social Security Act
• 1962: Dr C. Henry Kempe
• 1967: Mandated Reporting Laws
• 1970s: MR laws expand
• 1980s: prosecution and failures
• Reforms: CAC’s, NCPCA, prevention
• 1999: The National Call to Action
The National Call to Action

- Premised on the idea ending child abuse is possible
- According to Dr. David Chadwick, victory will “require keepers of a plan who will devote many decades of their lives to the effort. The keepers will keep the message alive. It will take sweat and tears. These keepers must recruit successors w/ similar dedication. Who, among you, are the keepers?”

Anne Cohn Donnelly

- Ending child abuse will require “adopting a far longer view than we have historically held, such as planning our efforts over decades, not years, and likewise measuring their success over decades, not years. This new approach would require flexibility and a great deal of patience. But in my own view, it is possible.”

The Five Obstacles to Ending Child Abuse
1. Many children suspected of being abused are never reported
   • A 1990 study found that only 40% of maltreatment cases and 35% of the most serious cases known to mandated reporters were in fact reported
   • A 2000 study found that 65% of social workers, 53% of physicians and 58% of physicians assistants were not reporting all cases of suspected abuse
   • 2001 study of 197 teachers: only 26% would report familial abuse & only 11% abuse at hands of a fellow teacher

2. Even when reports come in, most cases will never be investigated
   • In 1999, there were 3,244 million children reported as abused or neglected
   • According to NIS-3, only 28-33 percent of these kids will have their cases investigated (NIS-4 similar results 2010)
   • The report found “especially remarkable that CPS investigation extended to only one-fourth of the children who were seriously harmed or injured by abuse or neglect.”

3. Even when cases are investigated, investigators are often inadequately trained and inexperienced
   • Reporter Anna Quindlen: “Their training is inadequate, and the number of workers is too small for the number of families in trouble. Some cases would require a battalion of cops, doctors and social workers to handle; instead there are 2 kids fresh out of college w/ good intentions and a handful of forms.”
Marc Parent (Turning Stones)

• Commenting on his training, Parent says he received “two weeks of solemn discussion on child protective issues, but little on getting a drug dealer to let you into an abandoned building or talking a restless police officer into sticking around until you get through with a case and back into your car.”

The problem extends to graduate schools

• A 2003 study of APA accredited graduate programs found many of the programs “fall far short” of guidelines proposed by the APA for minimal levels of competence in handling child maltreatment cases.

Dr. Anna Salter

• “In the two years I spent at Tufts getting a masters degree in Child Study & the five years I spent at Harvard getting a PhD in Psychology & Public Practice, there was virtually nothing on child sexual & physical abuse in any course I took...Ironically, many of the lectures were on maladies so rare I’ve yet to see them in 20 years of practice.”
Medical schools

• Dr. Ann Botash: “more than 40 years after the diagnosis of BCS entered the literature, our pediatric residency programs do not have a significant education requirement for preventing, recognizing or managing child abuse.”
• 31% of AHT cases not recognized by physicians who first evaluated them
• Misdiagnosis “common” (CAN 2012)

4. Even when abuse is substantiated, child is typically older and it is more difficult to address impact of abuse

• Average age of CSA victims is 3
• Average age of victims in court is 10, median age is 13
• Victims often come into court as delinquents, runaways and prostitutes
• We spend 94 billion dollars per year dealing w/ the aftermath of abuse

5. Lacking a unified voice to communicate their needs, maltreated children receive an inadequate share of our country’s financial resources

• Child abuse has been called an “epidemic”
• Rate of child abuse is 10 times the rate of cancer
• We invest 1 nickel for every $100 of societal cost associated with child abuse but $2 for every $100 of societal cost associated with cancer
Dr. Richard Krugman

• “Effective policy making requires an ‘iron triangle’: an effective lobbying organization, several congressional ‘champions,’ and inside help from a supportive bureaucracy. In contrast to many instances of effective political efforts in health & defense...the child protection system is ineffective (with) few congressional advocates, a weak lobby, and an even weaker bureaucracy.”

The Battle Plan for Ending Child Abuse

Abused children must be reported into the system & the reports must be high quality

• Every university must teach students entering mandated reporting professions the skills necessary to perform this task
• The WSU project: competence & ethics
• Research and marketing of this program
• Mandated reporters must receive annual training
The system must conduct a competent investigation

- All children must receive a competent interview
- From CornerHouse to Finding Words (1998)
- Half a Nation by 2010
- South Carolina (2000)
- New Jersey, Indiana, Mississippi (2002)
- Georgia, Missouri (2003)
- West Virginia, Maryland, Illinois (2004)
- Kansas, Ohio (2005)
- Delaware, Virginia, Arkansas (2006)
- Connecticut, Oklahoma (2007)
- Wisconsin (2008)
- Pennsylvania, North Carolina, Japan, Colombia (2010)
- Alaska (2011)

ChildFirst totals

- 20 State Programs (17 certified), 2 international
- 817 Counties represented
- 10,062 professionals have been trained at a state course (hundreds more at a national course)
- If each professional trained works with only 40 children in their life, the training would impact 402,480 children
- If each professional trained works with only 120 children in their life, the training will impact 1,207,440 children

The end of on the job training

- Mastering investigative skills begins in college: the second semester at WSU
- The process of repairing families begins in college: the third semester at WSU
- CAST has expanded to a minor & certified by MNSCU
- Research and market the program
- 100 universities in 5 years, and 500 in 10 years
  - CAST in 34 universities/colleges/graduate programs with 50 more in the process
- Model curriculums for law schools, medical schools and other graduate programs
- Once in the field, front line social workers/police officers must have ongoing training and technical assistance (NCPCA & NCPTC)
NCPTC Regional Center

NorthWest Arkansas Community College

Mock house NWACC

Use of actors
Police, CPS and prosecutors must become community leaders in prevention

• Training must begin in college and continue once in the field: move entrenched systems, think outside the box, identify and respond to the unique needs of each community
• Simply put, prevention from the ground up (CED and JWRC)

The prevalence of injuries with corporal punishment

• ACE research found 28% of children hit so hard there are injuries and a majority of substantiated physical abuse cases involve corporal punishment

— Felitti & Anda (2012)
Corporal punishment and mental health

“Recent studies have suggested that a host of potentially harmful behavioral and psychological consequences may result from so-called ‘ordinary’ physical punishment. These negative outcomes include alcohol abuse, depression, suicidal thoughts, behavioral problems, low achievement, and future economic insecurity.” (Flynn 1996).

Corporal punishment and physical health

Harsh physical discipline (pushing, grabbing, shoving, slapping, and hitting) even in the absence of more severe maltreatment (broken bones, sexual abuse, etc) is associated with higher risks of cardiovascular disease, arthritis, obesity, history of family dysfunction, and mental disorders (Afifi, et al, 2013).

The impact on developing brains
The best that can be said about CP

• “At its worst corporal punishment may have negative effects on children and at its best has no effects, positive or negative.” (Gershoff 2002)

• Think of CP as a “risk factor”

Asking doctors to take the lead

American Academy of Pediatrics
Committee on Psychosocial Aspects of Child and Family Health

Guidance for Effective Discipline

Adults should explain discipline strategies, pediatricians should use a comprehensive approach to discipline, including strategies that promote early positive parent-child relationship, and reinforce positive behavior. They should be aware that corporal punishment is a risk factor for serious child abuse and neglect. Most pediatricians report that discipline is needed in the development of self-esteem. Pediatricians can work with parents to develop strategies that fit with a child’s age and maturity. Parents should use discipline that is consistent and appropriate to the child’s age and maturity. Parents should be aware that discipline can be a challenge and may require the use of a variety of strategies.

Parents of children with special needs should be aware that discipline can be a challenge and may require the use of a variety of strategies.
The first 40 years (2001-2040)

• Get kids into the system: WSU project
• Quality interviews: ChildFirst state courses
• Competent civil/criminal investigations: the end of on-the-job training and continued training for those in the field
• Prevention from the ground up
• Cultural sensitivity: race, religion, socioeconomic status, etc
• Survivors/child advocates organize (Male Survivor, etc)
• The tipping point (the New York experience)

Three things necessary

• First, need connectors who spread the message
• Second, the message must possess “stickiness” in that you can’t get it out of your head
• Third, social epidemics are driven by the “power of context” in that the solution must not be far removed from the problem solver. Unto the 3rd generation turns the world upside down.
• The next 80 years (2040-2120)
The final obstacles

• Believing we can end abuse
• The legacy of Henry Wallace
• The last full measure

To obtain an electronic copy of Unto the Third Generation (Revised & Expanded)

• Visit the website of Hamline University School of Law & click on Hamline Journals (2006)
• Or visit www.ncptc.org
• Or just e-mail me at vivieth@gundersenhealth.org