

EFFICACY OF THE CHILD ADVOCACY CENTER MODEL

The investigation and intervention of child abuse, especially child sexual abuse, is very challenging for the children, families, and responding professionals. Children's Advocacy Centers (CACs) and Multidisciplinary Teams (MDTs) coordinate the multidisciplinary response to these allegations in a child-friendly setting where the needs of the child are the primary concern. Within this single setting, the combined resources and expertise of child protective services (CPS), law enforcement, prosecutors, victim advocates, forensic interviewers, mental health, and medical professionals collaborate to limit any additional trauma to the child and family, while also assuring a quality and competent investigation and intervention which leads to healing and hope.

WHY IS THIS WORK SO IMPORTANT?



ANNUAL MEDICAL COSTS FOR SURVIVORS¹



ECONOMIC IMPACT:

Child sexual abuse survivors were significantly less likely to own:



PER YEAR EARNINGS COMPARED TO A NON-ABUSED PERSON



Women abused in childhood appear to have 3:1 greater long-term economic impacts than men who were abused in childhood.²







PSYCHIATRIC CARE INPATIENT HOSPITAL **OUTPATIENT (PHYSICIAN AND CLINIC) PRESCRIPTION DRUGS TARGETED CASE MANAGEMENT**

WHY ARE CACs AND MDTs SO IMPORTANT?

COORDINATED SERVICES⁴

CAC communities demonstrated significantly higher rates of:

- Coordinated investigations between law enforcement and CPS
- · Team forensic interviews
- Case reviews
- Recording of forensic interviews
- Interviews in child-friendly settings



PROSECUTION RATES⁶

Use of the CAC approach leads to a dramatic increase in felony prosecutions of child sexual abuse:

- District with significant CAC usage 196% increase
- District with limited CAC usage 1% decrease

CASE PROCESSING TIME⁸

Faster criminal charging decisions in child sexual abuse cases:

Within 1-60 days CAC Community -▶ 80% Comparison Community A -**→ 49%** Comparison Community B -**► 58%**

ACCESS TO MEDICAL CARE⁵

Children served at CAC were much more likely to receive forensic medical exams:

- No penetration in abuse disclosure: 4.0 times more likely
- · Penetration in abuse disclosure: 1.5 times more likely



CLIENT SATISFACTION⁷

Caregivers whose children were seen at the CAC:

- Higher rates of satisfaction than caregivers whose children were seen at the comparison sites
- Significantly more satisfied with the experience than caregivers from the comparison samples

Children who were seen at the CAC:

• More significantly described themselves as "not at all" or "not very" scared versus kids from the comparison communities

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The NCAC models, promotes, and delivers excellence in child abuse response and prevention through service, education, and leadership.









