

2015 Report on Child Protection in Vermont



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Message from the DCF Commissioner

Last year, the Department for Children and Families (DCF) suffered a devastating loss when social worker Lara Sobel was killed as she left her office in Barre. This tragedy shone a bright light on the dangers that our child protection staff face every day as they work to strengthen families and keep children safe from abuse and neglect. We continue to feel this loss profoundly, each and every day.



Our highest priorities this past year have been to:

- 1. Enhance the safety of our workers
- 2. Build our department's capacity to protect children through strengthening their families

To that end, we advocated strongly for additional social worker positions and financial resources to help us improve security measures.

Thanks to the additional resources we received from Governor Shumlin's administration and the Vermont Legislature, DCF has been able to:

- Add 35 positions in our Family Services Division
- Provide enhanced security for staff in our offices and in the field

This will help our staff to continue providing quality services to Vermonters and feel safe while doing so.

One of the best ways to help families who are involved with the child protection system, and thereby help keep children safe, is by developing quality relationships with them based on mutual respect and trust. Quality relationships take time however — time to develop respect, build trust, understand the supports needed to stabilize families, and connect families to needed resources. Relationship-based practice also helps enhance the safety of child protection workers.

Positions were also added to the judicial system to help with their higher caseloads, because child protection is a system, not just one Department.

Vermont's child protection system has struggled in the past few years —with rising caseloads and increasingly complex cases. This is largely due to an opiate addiction crisis that continues to affect the state.

- The number of children entering DCF custody has risen sharply, from about 1,000 in 2013 to nearly 1,400 in June of this year (a 40% increase)
- The number of *Children in Need of Care or Supervision* (CHINS) cases filed in Vermont courts has also increased, from 881 in 2013 to 1,252 in 2015 (a 42% increase)

Our child protection staff has demonstrated amazing strength and resiliency over the last few years under the strong leadership of Family Services Deputy Commissioner Cindy Walcott. She led her staff through difficult times, while also looking to the future and how we could do things better —for Vermont children and families and the workers who dedicate their careers to helping them. We are sad to see her retire this year, but are grateful for the tireless energy she has put into this work. We could not have gotten where we are without her.

I am proud of and thankful for all of our dedicated Family Services Division employees who do a difficult job incredibly well, under very challenging circumstances.

Ken Schatz, DCF Commissioner

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Executive Summary

This report provides child protection data for calendar year 2015. Here are some highlights:

- → Reports were up by 4.8% over last year, with a record 20,233 calls made to the Child Protection Line to report concerns about children's safety and well-being.
- → At least 70% of the reports were made by mandated reporters, 16% were made by non-mandated reporters, 6% were made anonymously and 8% were unspecified.
- → Substance abuse was a factor in 28% of the reports received, financial stress in 17%, domestic violence in 13% and mental health in 11%.
- → Of the 20,233 reports received, we accepted 5,630 of them (28%) for intervention.
- → We opened 5,630 child safety interventions: 2,634 child abuse investigations, 1,618 child abuse assessments and 1,378 family assessments.
- → We conducted 2,675 child abuse investigations: 2,634 that began as investigations plus another 41 that began as child abuse assessments but were later changed to the investigation track.
- → At the conclusion of the 5,630 child safety interventions, we opened 1,050 cases for ongoing services based on an assessed risk of future maltreatment that was high or very high.
- → At the conclusion of the 2,675 child abuse investigations, we substantiated 773 reports.
- → Based on these substantiated reports, there were:
 - o 945 unique child victims
 - 860 substantiated incidents of abuse:
 - 157 of physical abuse
 - 306 of sexual abuse
 - 85 of risk of sexual abuse
 - 283 of risk of harm
 - 29 of emotional abuse/neglect

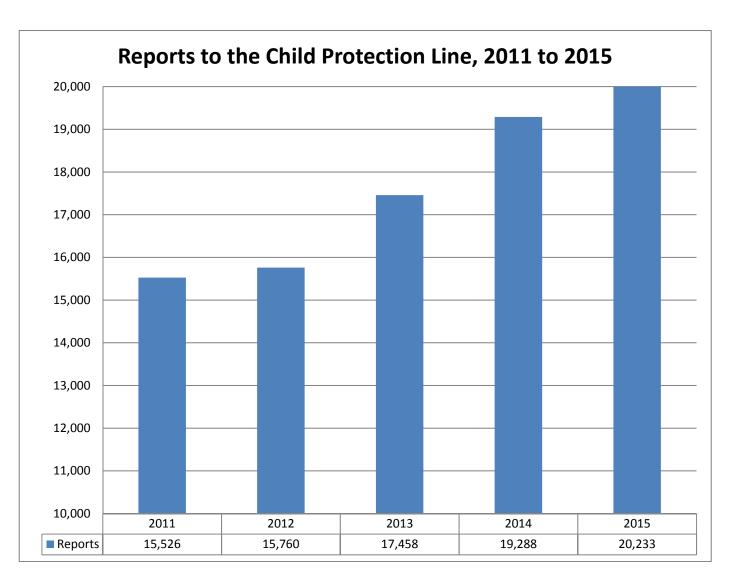
Reports to Vermont's Child Protection Line

In 2015, Vermonters called the state's toll-free Child Protection Line a record 20,233 times to report their concerns about children's safety and well-being. While there has been a steady increase in reports over the past 10 years, we experienced a sharp increase starting in 2013.

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.

We count all the reports we get, whether or not they meet the legal definition of child abuse and neglect. This includes:

- → Reports 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
- → Multiple reports about the same children/incidents made by different reporters



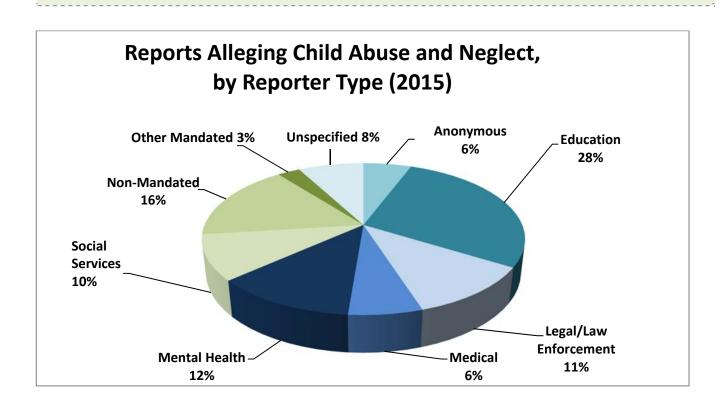
Mandated Reporters of Child Abuse and Neglect

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

A mandated reporter is any:

- Health care provider, including any chiropractor, dentist, emergency medical personnel, hospital administrator, intern, licensed practical nurse, medical examiner, osteopath, pharmacist, physician, physician assistant, psychologist, registered nurse, resident physician, and surgeon
- Individual who is employed by a school district or an approved or recognized independent school, or contracted and paid by a school district or an approved or recognized independent school to provide student services, including any school superintendent, school principal, headmaster of an approved or recognized independent school, school teacher, student teacher, school librarian, and school guidance counselor
- Agency of Human Services employee, contractor, or grantee who has contact with clients
- Camp administrator, counselor and owner, including any residential and nonresidential camp and recreational program
- Child care worker, clergy member, mental health professional and social worker
- Police officer and probation officer

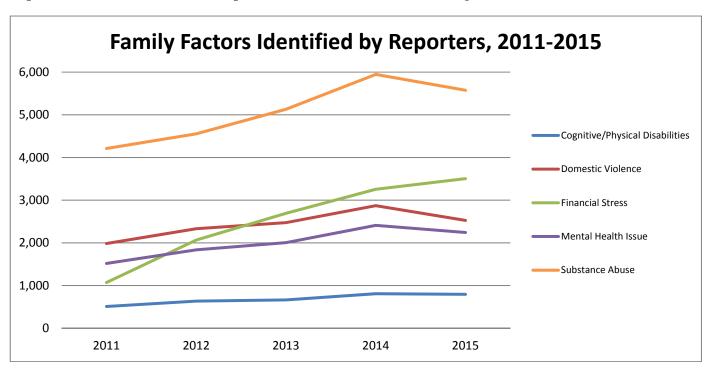


Family Factors Identified by Reporters

While children from any family can experience child abuse and neglect, we know 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
- → The presence of multiple risk factors has an exponential impact on a child's likelihood of experiencing abuse and neglect

The following table lists 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.



	2011	2012	2013	2014	2015
Cognitive/Physical Disabilities	509 (3%)	636 (4%)	664 (4%)	808 (4%)	795 (4%)
Domestic Violence	1,985 (13%)	2,331 (15%)	2,473 (14%)	2,871 (15%)	2,527 (13%)
Financial Stress	1,071 (7%)	2,066 (13%)	2,692 (15%)	3,256 (17%)	3,504 (17%)
Mental Health Issue	1,517 (10%)	1,836 (12%)	2,005 (11%)	2,410 (12%)	2,243 (11%)
Substance Abuse	4,212 (27%)	4,555 (29%)	5,130 (29%)	5,946 (31%)	5,575 (28%)

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
- 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 an adult (18+).
- 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.
- 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
- 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 recommendations to Family Court about the need for children to come into DCF custody and be 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 2015, 41 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:

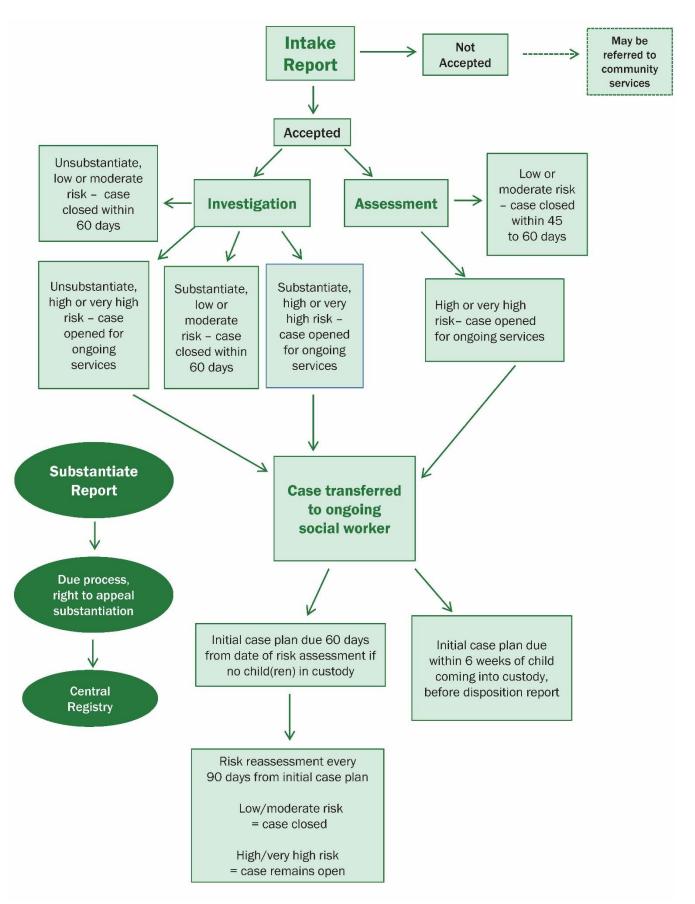
Both investigations and assessments result in a determination of the family's need for ongoing services based on the assessed risk of future maltreatment.

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.

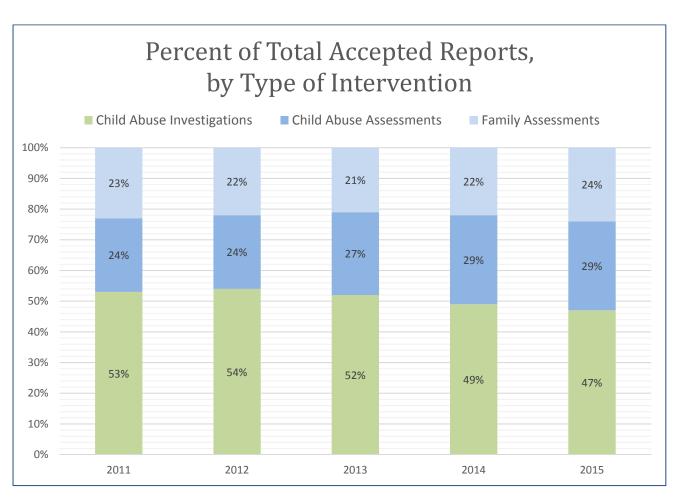
If a report is *unsubstantiated*, a case could still be opened for services based on the assessed risk of future maltreatment.

FSD Case Flowchart



Response to Reports, from 2011 to 2015

	2011	2012	2013	2014	2015
Total reports to Vermont's Child Protection Line	15,526	15,760	17,458	19,288	20,233
Reports accepted for:					
1.Child abuse investigation	2,591	2,536	2,657	2,877	2,634
2.Child abuse assessment	1,192	1,119	1,409	1,688	1,618
3.Family assessment	1,128	1,044	1,069	1,281	1,378
Total reports accepted for intervention	4,911 (32%)	4,699 (30%)	5,135 (30%)	5,846 (30%)	5,630 (28%)



Reports Accepted in 2014 & 2015 — by Intervention & District 1

District	Child Abuse Investigations		Child Abuse Assessments		Family Assessments		Total Reports Accepted for Intervention	
	2014	2015	2014	2015	2014	2015	2014	2015
Barre	315	269	192	207	119	158	626	634
Bennington	216	203	119	129	98	107	433	439
Brattleboro	172	154	116	98	107	116	395	368
Burlington	425	419	300	298	184	240	909	957
Hartford	171	153	96	87	91	91	358	331
Middlebury	123	124	90	59	69	74	282	257
Morrisville	136	117	78	86	46	39	260	242
Newport	146	135	106	90	61	50	313	275
Rutland	328	288	165	202	128	135	621	625
Springfield	211	195	133	107	135	111	479	413
St. Albans	348	308	178	156	183	192	709	656
St. Johnsbury	160	163	94	76	57	59	311	298
Out of State	126	106	21	23	3	6	150	135
Statewide	2,877	2,634	1,688	1,618	1,281	1,378	5,846	5,630

 $^{^{1}}$ District refers to the Agency of Human Services district where the child's caregiver lives.

Outcomes of Investigations & Assessments — by District¹

In 2015, we conducted 2,675 investigations: 2,634 that began as investigations and another 41 that began as assessments but were later changed to the investigation track.

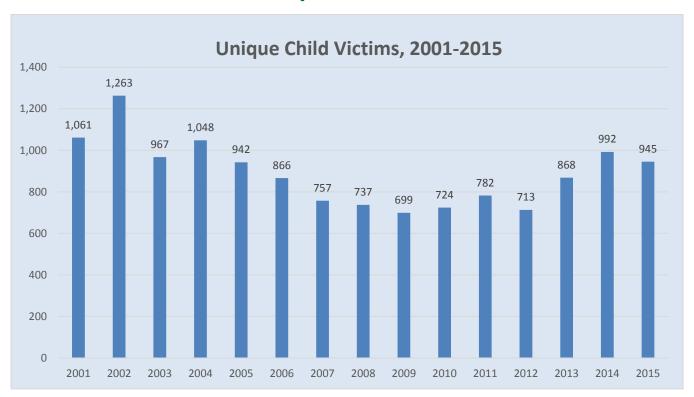
- → Of the 2,675 investigations conducted, 773 were substantiated².
- → At the conclusion of the 5,630 investigations and assessments, we opened 1,050 cases for ongoing services based on an assessed risk of future maltreatment that was high or very high.

		gations ntiated	Cases Opened for Services		
District	2014	2015	2014	2015	
Barre	70	79	69	125	
Bennington	59	62	92	108	
Brattleboro	27	41	53	83	
Burlington	91	88	179	189	
Hartford	32	41	48	50	
Middlebury	30	45	54	70	
Morrisville	45	35	40	30	
Newport	16	33	11	19	
Rutland	56	67	86	81	
Springfield ³	67	71	98	82	
St. Albans	99	110	127	166	
St. Johnsbury	48	61	54	42	
Out of State	12	40	5	5	
Statewide	652	773	916	1,050	

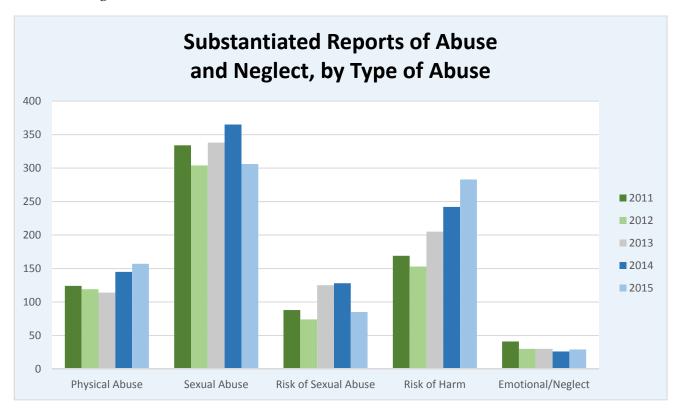
¹ District refers to the Agency of Human Services district where the child's caregiver lives.

² Substantiated means the evidence would lead a reasonable person to believe the child was abused or neglected.

Data from Substantiated Reports in 2015



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 2015 — 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 773 — the number of reports substantiated in 2015.

District ¹	Physical Abuse	Sexual ² Abuse	Risk of Sexual Abuse	Risk of ³ Harm	Emotional/ Neglect
Barre	18	17	7	42	8
Bennington	11	23	9	26	0
Brattleboro	12	15	3	10	0
Burlington	21	34	2	38	3
Hartford	8	17	8	17	0
Middlebury	9	22	9	12	0
Morrisville	7	16	4	10	1
Newport	7	11	3	15	3
Rutland	19	24	6	22	0
Springfield ⁴	17	29	9	29	4
St. Albans	21	43	17	33	9
St. Johnsbury	7	29	6	25	0
Out of State	0	26	2	4	1
Total Statewide	157 (18.3%)	306 (35.6%)	85 (9.9%)	283 (32.9%)	29 (3.4%)

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. Most other state child welfare agencies do not investigate allegations of child sexual abuse by non-caregivers.

³ What is called neglect in other states is captured largely in our risk-of-harm categories.

Reports Substantiated in 2015 — by Age & Gender of Victim

The data below represents the age and gender of the victims of substantiated abuse or neglect. *Note: 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	8.6	15	0	7	68	7
1	4.8	7	0	8	35	4
2	5.0	7	2	6	34	7
3	5.7	8	10	9	31	6
4	7.8	19	16	14	35	4
5	7.0	17	14	8	34	6
6	5.0	13	11	10	21	2
7	6.3	14	17	11	27	2
8	5.7	11	16	12	25	0
9	4.5	5	16	6	23	1
10	5.3	12	20	7	18	3
11	4.5	4	26	8	11	2
12	4.4	6	21	12	11	0
13	6.4	7	40	11	12	2
14	7.8	10	47	9	16	6
15	5.1	6	39	6	7	0
16	4.1	7	25	5	9	0
17	2.0	2	17	1	2	1
TOTAL	100%	170	337	150	419	53
Gender						
Male	41.2	105	63	61	212	24
Female	58.8	66	275	89	207	27
TOTAL	100%	170	337	150	419	53

Reports Substantiated in 2015, 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	1	97	2	4	0
20 - 29	52	77	26	120	17
30 - 39	60	38	32	112	10
40 - 49	34	49	27	53	5
50 - 59	6	16	9	15	2
60+	2	13	3	2	1
Unknown	2	23	0	0	0
Gender					
Female	67	14	33	152	18
Male	89	293	65	153	17
Unspecified	1	6	1	1	0

Reports Substantiated in 2015, by Relationship of Abuser to Child

Relationship	Physical	Sexual	Risk of Sexual Abuse	Risk of Harm	Neglect/ Emotional
Parent	122	26	87	264	49
Stepparent/ Parent's Partner	39	30	37	63	4
Foster Parent	2	5	1	6	1
Sibling	0	15	1	3	0
Other Relative	5	45	18	21	6
Neighbor/Friend	1	120	16	2	0
Other Known	1	44	22	12	2
Stranger	1	39	0	0	0
Unspecified	10	221	3	10	0

¹ Includes people found to have possession of online child pornography

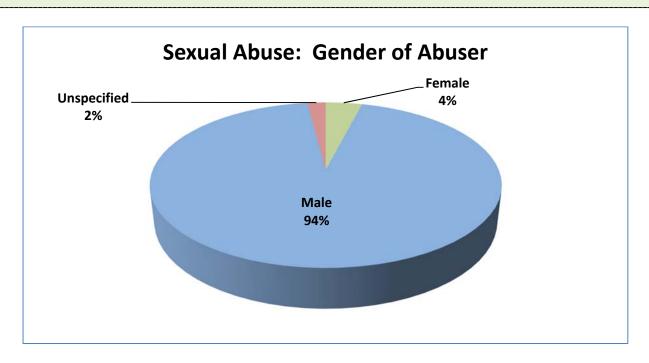
Reports Substantiated for Child Sexual Abuse in 2015

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.

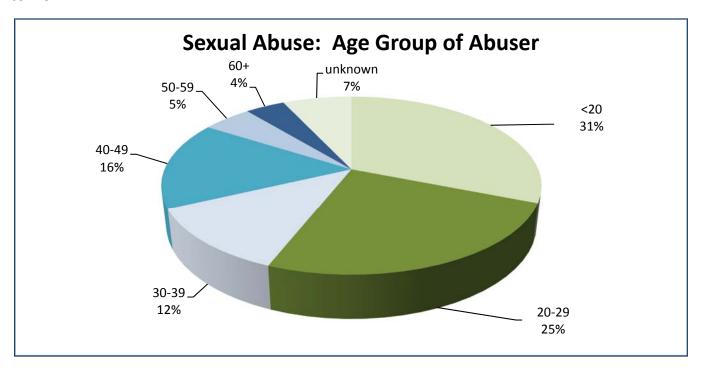
At least 83% of child sexual abuse was committed by people the children know.

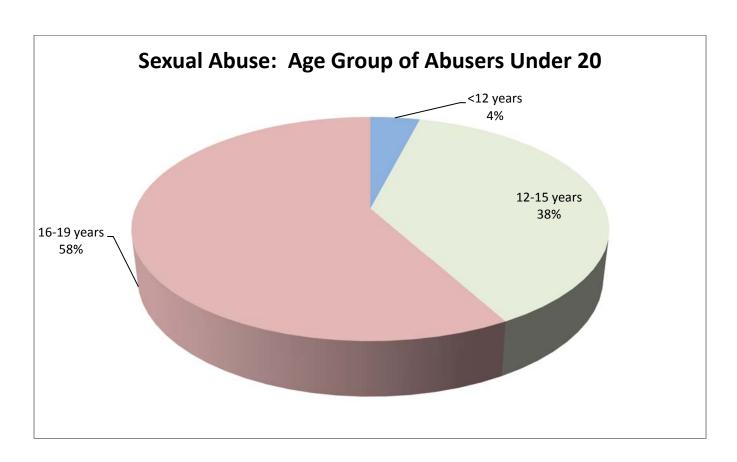


94% of the identified abusers were male.



At least 31% of the abusers were under the age of 20. Of these, 58% were aged 16 to 19.





Appendix One: Child Abuse and Neglect Definitions

For more detailed definitions go to http://dcf.vermont.gov/fsd/policies and read Policy 50: Child Abuse and Neglect Definitions.

Vermont law (33.V.S.A. 49, § 4912) defines an "abused or neglected child" as: a child 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. Also, a child who is sexually abused or at substantial risk of sexual abuse by any person and a child who has died as a result of abuse or neglect.

Harm can occur by:

- Abandonment
- Emotional maltreatment
- Neglect
- Physical injury
- Sexual abuse

Risk of harm means a significant danger a child will suffer serious harm other than by accidental means, which would be likely to cause physical injury or sexual abuse including as the result of:

- A single, egregious act that caused the child to be at significant risk of serious physical injury
- The production or preproduction of methamphetamines when a child is present
- Failing to provide supervision or care appropriate for the child's age or development and, as
 a result, the child is at significant risk of serious physical injury
- Failing to provide supervision or care appropriate for the child's age or development due to use of illegal substances, or misuse of prescription drugs or alcohol
- Failing to supervise appropriately a child in a situation in which drugs, alcohol, or drug paraphernalia are accessible to the child
- A registered sex offender or person substantiated for sexually abusing a child residing with or spending unsupervised time with a child

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: The failure to supply a child with adequate food, clothing, shelter or health care, including medical or non-medical remedial health care permitted or authorized under state law (33 VSA § 4912(6)(B)).

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

Serious Physical Injury: By other than accidental means:

- Physical injury that creates any of the following:
 - o A substantial risk of death
 - o A substantial loss or impairment of the function of any bodily member or organ
 - o A substantial impairment of health
 - o Substantial disfigurement
- Strangulation by intentionally impeding normal breathing or circulation of the blood by applying pressure on the throat or neck or blocking the nose or mouth of another person.

Sexual Abuse:

Consists of any act or acts by any person involving sexual molestation or exploitation of a child, including:

- Incest
- Prostitution
- Rape
- Sodomy
- Lewd and lascivious conduct involving a child
- 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 sexual conduct, sexual excitement, or sadomasochistic abuse
 involving a child
- Viewing, possessing, or transmitting child pornography, with the exclusion of the exchange of images between mutually consenting minors, including the minor whose image is exchanged
- Human trafficking
- Sexual assault
- Voyeurism
- Luring a child
- Obscenity

HELP PREVENT CHILD ABUSE

If you suspect that 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

http://dcf.vermont.gov/protection/reporting

Mandated Reporter Website

Visit our website to:

- Get the latest information on reporting
- Sign-up to get email updates on child protection issues
- Find links to relevant information

mandatedreporters.vt.gov

Online Mandated Reporter Training

This training will help you understand the dynamics of child abuse and neglect and your responsibility as a mandated reporter.

It should you take about two hours to finish. Once you've successfully completed the final exam, we will email you a certificate of completion.

https://goto.webcasts.com/starthere.jsp?ei=1087433