

**Gabriel Myers Child on Child Sexual Abuse Work Group
January 29, 2010
Jacksonville, Florida**

Meeting Notes

Workgroup Members Present:

Dr. Jim Sewell, Chair
Bill Janes
Robin Rosenberg
Judge Frusciante
Dr. Mike Haney
Mez Pierre
Robert Edelman
Craig Latimer

CALL TO ORDER

Dr. Sewell called the meeting to order at 10:05 a.m. He welcomed those in attendance and introduced Nancy Dreicer, Northeast Regional Director. Ms. Dreicer shared that she is interested in hearing results from the Work Group. She has worked closely with the Casey Foundation to determine best practices across the country, and she shared with the group that unfortunately there is no real model in the nation as to child on child sexual abuse. Dr. Sewell thanked Ms. Dreicer, and then reviewed the purpose of the Work Group.

WORKGROUP INTRODUCTIONS

Dr. Sewell asked the Work Group members to introduce themselves.

Dr. Sewell called Laurie Blades, Chief of Children's Mental Health for the Department of Children and Families, to discuss Trauma Informed Care. Ms. Blades said that a good resource is the National Child Traumatic Stress Network on typical child development and behavior with sexual issues, issues with trauma, and complex trauma. When asked about what is being done to implement trauma informed care, Ms. Blades stated the Department received a grant to implement trauma informed care in the mental health system. The grant will bring together consumers and providers to attend a seminar in which the National Traumatic Stress Network will present and the participants will develop a local plan of implementation. Ms. Blades stated that Florida began working with the National Association of State Mental Health Program Directors about 7 or 8 years ago to reduce the need for seclusion and restraint in residential treatment facilities, which evolved into the current effort to implement trauma informed care.

PROCESS MAP OF CHILD-ON-CHILD SEXUAL ABUSE

Dr. Sewell introduced Alan Abramowitz, Program Director of Family Safety with Department of Children and Families. Mr. Abramowitz noted that the psychotropic rule is almost complete and that the Work Group has had a great impact on it. He thanked those who had helped him with the flow chart. Mr. Abramowitz brought certain statutes to the Work Group's attention: 39.307, 39.05, 39.303, and 39.201. He explained that the statutes state when the Department should respond and how to respond when a report involves an alleged victim under the age of 12, as stated in 39.307. Mr. Abramowitz applauded 39.305, because of the impact it has for child on child sexual abuse. 39.303, F.S. puts into place a lot of Child Protection Team interactions with the family. 39.201(f) has the mandatory reports that to be made by the Department. Mr. Abramowitz also commented on the Florida Administrative Codes regarding the child on child sexual abuse issue: 65C-28.001, 65C-28.004, and 65C-13.035. The codes state how to quickly handle the situation and how do to the assessment in Florida Safe Families Network (FSFN). Mr. Abramowitz went over three definitions from the 39.01, F.S. that correspond with child on child sexual abuse allegations. One of the three definitions must be alleged to apply for an allegation of child on child sexual abuse, quoting 39.01(7), 39.01(14), and 39.01(71).

Mr. Abramowitz explained that process maps are flow charts that show participants, activities and timeframes. The rectangles are the actions; diamonds are decisions. The process map begins when a call is first made to the Hotline. He introduced Mr. Robert Yeager, who works at the Hotline.

Mr. Yeager described the Hotline process: There are five options (not including the acceptance of an abuse/neglect intake) available to Hotline staff when assessing an allegation of child on child sexual abuse. Which option staff will utilize depends upon what is ascertained during the interview with the reporter, since there can be many varying factors. The options are outlined below:

1. Accept a **Child on Child Sexual Abuse Special Conditions Referral** when the alleged juvenile sexual offender is age 12 or under. This is essentially a report (intake) forwarded to the child protective investigations unit via the Florida Safe Families Network (FSFN). The report is also faxed to the appropriate Sheriff agency within a 48-hour timeframe.
2. If the alleged juvenile sexual offender is a foster child age 13 to 17 and resides within a DCF licensed placement (shelter home, group home, foster home), then a **Foster Care Referral** will be generated within the Florida Safe Families Network (FSFN). This is also faxed to the appropriate Sheriff agency within a 48-hour timeframe.
3. **Child on Child Referral**: specifically for children under the care of the Department, this includes foster children and those in placement (relative, medical, mental health). This is only entered into the phoeniX database and submitted to the circuit. The purpose of a Child on Child Referral is to notify a child welfare professional of a child age 17 and under that is either an alleged juvenile sexual offender or victim of child on child sexual abuse and the concern isn't already being handled in another format that would offer notification to child welfare staff (e.g. child on child special conditions referral or foster care referral). This is also faxed to the appropriate Sheriff agency within a 48-hour timeframe.
4. If the alleged juvenile sexual offender is age 13 to 17 and resides within the community, then a **Child on Child Sexual Abuse Template** will be generated in

phoeniX. The template is then faxed to the appropriate Sheriff agency within a 48-hour timeframe.

5. If the allegation of child on child sexual behavior does not meet any of the above guidelines, then it will be entered into the phoeniX database as a **Screened Child Template**. In these situations, the counselor will make every attempt to provide an appropriate referral. A transfer to law enforcement for further follow up is also common.

*All child on child sexual abuse allegations outlined in numbers one through four **require** a transfer to the Sheriff's department where the incident occurred.

The expectation is for staff to conduct a thorough assessment of each and every call. From an intake perspective, the Hotline must determine the incident occurred without consent, without equality, or as a result of coercion to generate a Child on Child Sexual Abuse Special Conditions Referral (ages 12 and under) or even a Child on Child Sexual Abuse Template (ages 13-17). Statute is very clear on this. Not following this guideline would result in inappropriately labeling a child as an alleged juvenile sexual offender.

The phoeniX database is an internal system used at the Hotline. The Hotline maintains a record of all calls received at the Hotline within phoeniX. This system tracks many different facets of a call, such as the start and end time of the call, along with the time spent processing the information received from a call. Other major areas that are tracked include language, program (e.g. child or adult), call type (e.g. report, screened, information referral, hang up), received method (phone, fax, web), county, unit of counselor, whether the call was consulted with a supervisor/manager, and the reporter information. If the call is screened (report isn't accepted), then the reason for a screened call is recorded. All incidents of an individual attempting to file a child or adult report that don't meet report acceptance criteria are screened and comprehensively recorded within the phoeniX database. These calls are then made available for further optional or mandatory supervisory/managerial/quality assurance review. Quality assurance staff utilize phoeniX to conduct child three hits reviews as required by Chapter 39 FL Statute. The phoeniX database is utilized to enter downtime templates in the event the Florida Safe Families Network (FSFN) isn't operational. Another component of the phoeniX database is the ability to send adult prevention referrals and child on child referrals to a circuit administrator and Department of Juvenile Justice (DJJ) referrals to DJJ. Just recently, we rolled out a newer version, R2B, of phoeniX which creates a call record in conjunction with FSFN and allows the screened child calls to be recorded (pushed) into FSFN.

An issue was discussed regarding the term "non-DCF child". The point was made that, although a child is not in the custody of the Department, he or she may be receiving benefits from the Department in different ways; for example, families receiving food assistance, mental health services, etc.

Discussion took place regarding the fact that, in Gabriel Myers's case, child on child sexual abuse allegations were not address appropriately, therefore, Gabriel Myers was never referred for needed services. The sexual abuse allegations were not investigated in depth enough to help him in recovery recovery. Committee members suggested that the statute be looked into and changed so that another child cannot be over looked like Gabriel Myers was.

Discussion: male on male sexual abuse should have a protocol and shouldn't be ignored. Just because an act may have been an agreed situation once does not mean that subsequent incidents won't be forced acts. Mr. Abramowitz agreed with the discussion and suggested that Hotline counselors have better training based on what experts say is an appropriate behavior. It was also stated that we have an obligation to make sure all the Hotline counselors are properly trained for all shifts working at the Hotline, to ensure that everyone has the same training and learning experiences. A suggestion was made to have the statutes or policies changed, with the change to allow Hotline counselors to make the referrals for the children, even if they fall into the "screened" category.

Mr. Abramowitz thanked Mr. Yeager for his help, and continued to the next step on the process map: child-on-child special conditions. Hotline counselors enter the information into FSFN. Mr. Abramowitz asked Ms. Tammy Gajewski, supervisor with the sexual abuse unit, to join him in the next portion of his presentation. Ms. Gajewski's unit responds to child on child sexual abuse reports, and conducts pre-investigations by checking reports and gathering prior investigative paperwork. This unit finds out during the Child Protective Team interview if the aggressor child's action is based on learned behavior. Without this type of specialized unit, it is less likely that law enforcement will prosecute the child on child sexual abuse offenders. Currently, this type unit is only in the Jacksonville area, and the possibility of branching out to smaller areas is not likely, but it may be possible to branch out to larger areas.

Ms. Gajewski stated that a safety plan is developed and services are recommended on a case-by-case basis, depending on where the alleged act took place and how many children are living at the same residence. When a safety plan is developed with the family, every family member signs off on the plan, and a copy is provided to everyone in the family. If the alleged victim's parents decline the safety plan or services that are offered, then the case is staffed with Child Protection Team to get a possible in-home report, and the case is to stay open for 60 days as required by the law. If an offender's parents decline services, the unit looks at the reason for refusal and might call in a supplemental report to the Hotline. Mr. Abramowitz stated that there are three options when parents decline a safety plan or services: the case can be closed and nothing else happens; law enforcement can be included in the case, or referral for mediation, if available.

A concern was discussed that psychosexual evaluations are not being completed as soon as they could be. A suggestion was made to have a required training on a regular basis for the people who do complete the assessments. This could prevent a repeat of Gabriel Myers case where it took three months to make recommendations after the assessment was completed.

A key issue with Gabriel Myers' case was that a call was never placed with the Hotline. Mr. Abramowitz noted that Ohio (where the sexual abuse incident took place) did a lot of work that Florida does not know about because the workers on the cases were not communicating, as they should have been.

CREATING SEXUAL ABUSE SAFETY

Gordon Johnson, President and CEO of Neighbor to Family, thanked the Work Group for inviting him to present. He introduced Nina Johnson, Jeannette Buchman, Gail Biro, and

Heidi (a biological parent involved in their agency). Mr. Johnson started his presentation with background information on the agency, Neighbor to Family, Inc., telling why he created the group as well as the foundation of the group. Mr. Johnson worked for the Department of Children and Families in Illinois for about seven years, and then worked with the Jane Adams Hull House in Chicago for ten years. During his time at these agencies, Mr. Johnson tried to figure out why there were children still dying while in their custody. Mr. Johnson decided to build a program and hire foster parents.

Mr. Johnson shared that there are 588,000 children in foster care in the United States and that 55% to 69% of those children have siblings and that typically those sibling would be split up. The foster parents are independent contractors and have the ability to select the child or children they want regardless of separating siblings. Mr. Johnson shared the percentages of how many children placed in foster care are placed with all their siblings:

- 2 children- 54.5%
- 3 children- 38.7%
- 4 children-27.1%
- 5 children-17%
- 6+ children- 11.2%

Mr. Johnson shared that research suggests that children are more likely to remain in their first placement without disruption if they are placed with their siblings, while siblings who are not placed together initially have a greatly decreased chance of a reunion between the siblings in a permanent placement.

Neighbor to Family was created in 1994 at Jane Adams Hull House in Chicago, IL and was moved to Daytona Beach in 1998. Their mission is to revolutionize foster care by keeping sibling together while building healthier families and stronger communities.

Mr. Johnson gave some statistics comparing the national stats to the Neighbor to Families stats:

- The average length of stay in foster care in the United States is 33 months.
- The average length of stay in foster care in Neighbor to Families is 7.96 months.
- The average number of placements per child in Neighbor to Families is 1.3.
- The annual foster parent turnover with Neighbor to Families is 13%.

Neighbor to Families is currently serving 500 children in six states: Maryland, Virginia, North Carolina, Georgia, Texas, and Florida. They have served more than 5,000 children since the start in 1994. Neighbor to Families' unique feature is that the siblings are placed together with one foster family at a time. Neighbor to Families also sets high standards for the selected foster parents to accomplish before having children placed in their homes. Potential foster parents are highly trained with the 50 hours of training required each year. Potential foster parents are also required to take an Emotional Quotient Inventory, EQI, test to see if they are able to handle the different situations that might arise being a foster parent. They are also required to have random drug testing. Neighbor to Families also has team conferencing between the Neighbor to Families workers, foster parents, and the biological parents. They try to include the biological

families including the birth father, and will do whatever they can to try to locate and involve the father.

Mr. Johnson introduced Nina Johnson, Training Specialist. At the initial training, staff and foster parents receive a minimum of 90 hours of comprehensive training. Along with the 50 hours required annually, foster parents receive an annual performance evaluation. Some of the basic training requirements are the importance of sibling bonds, foster caregiver training, engaging birth families, security awareness, non-violent crisis intervention, universal precautions, CPR and first aid, sexual safety planning, psychotropic medications, and childhood trauma. All of these trainings are a part of the 50 hours of annual training required. The psychotropic medication training is contracted out to a local expert. Ms. Johnson explained that the training is in person where the trainer uses video, workbooks, discussions, and case scenarios.

Ms. Johnson stated that 50% of males are sexually abused and 20% of males have attempts of being sexually abused. In general, one out of every four females has had a sexual encounter and one out of six males has had a sexual encounter, while 84% of children in foster care have sexual encounters. Part of the sexual safety training is to teach the foster parents how to intervene. The sexual safety training also covers development in a children's behavior after sexual abuse. Of the 50 hours of required annual training, only three or four of those hours are directed to the sexual training.

Neighbor to Families creates the training curriculum but had assistance/consultation from a national expert. The Work Group requested some background information to allow them to look into the possibility of creating a similar training program for the Department of Children and Families.

Mr. Johnson thanked Ms. Johnson and welcomed Ms. Gail Biro, Vice President of Policy and Program Development with the Neighbor to Families program. Ms. Biro explained how Neighbor to Families creates sexual safety with the foster families and the children. She explained how traumatic events include an unexpected event that changes their view of the world and are an uncontrollable event that renders feelings of helplessness. The Sexual Safety program connects the feeling relating to loss to the issue.

Ms. Biro explained that for recovery, a support system must be created for the child. The support system needs to believe that the abuse occurred, validate feelings, and ensure safety of the child. Also for recovery, there needs to be an education system created to allow the questions to be answered for the child. Without the support system or the education system, the recovery rate is 28%. Recovery is defined as when the past trauma no longer effects how you see the world. Ms. Biro referenced D. Wayne Dean's statistic of a recovery rate being 94%.

Ms. Biro explained that to ensure the safety of the children in the homes, Neighbors to Families creates rules in the households. The rules are developed to encourage healthy relationships between the children and the foster family. The rules also give the children the permission to disclose the sexual abuse they have experienced. Creating the rules decreases disruption of placement for the children in the foster family. A big reason for setting rules is to prevent any false allegations against the foster parents. Another way to create sexual safety in the foster families is to role play. The role play involves meeting the children, discussing the rules, developing the family safety plan, and negotiating individual touch contracts.

Mr. Johnson thanked Ms. Biro for her presentation and welcomed Heidi. Heidi is a biological mother who shared her family's story with the Work Group. Heidi stated that child-on-child sexual abuse can be traced back to an adult that stole the child's innocence, which caused the child to act out the way he, or she was shown by that adult. Heidi talked about how she worked for three years to keep her foster family together when the children had experienced sexual abuse. Heidi told the committee how the birth mother and father are involved with the process and how she had an open relationship with the foster mother of her children. The children involved with the Neighbors to Families program have a 40% percent rate of reunification with the birth parents and the rest are placed in permanent guardianship.

THE ADAM WALSH ACT

Ms. Mary Coffee of the Florida Department of Law Enforcement explained the sexual offender registration requirements by law in Florida. Ms. Coffee provided background information on Florida's sexual registration. In 1993, predators were registered in "the book", a hard copy of registrant information with law enforcement. In 1995, Florida started having the sexual predator information posted on the internet. In 1997, there were 8,000 offenders and 300 predators posted on the internet. Also in 1997, Florida passed a safety act and reclassified the predator requirements. In 1998, adjustments and glitches were addressed, requiring more people to register. In 1998, the Jimmy Ryce Civil Commitment act was started.

Ms. Coffee discussed some federal laws regarding sexual registration. The Wetterling Act, created in 1994, is the law that requires the registration of sexual offenders and requires that the information be accessible from the community to allow citizens to identify local sex offenders. Megan's Law, created in 1996, provides the community with notification of local offenders and verifies that addresses on record for offenders are correct. The Lychner Act, created in 1996, requires registrant information be kept at a national level. The Campus Sex Crimes Prevention Act, created in 2000, requires registration of offenders who are students, employees, or volunteers at an institute of higher learning. Ms. Coffee touched on key issues and concerns associated with registration: address verification, relocated out of state offenders, and homeless offenders.

In 2005, the Florida Jessica Lunsford Act was created. The Lunsford Act reclassified all sentencing guidelines for violations of sexual offender and predator registration laws. The Lunsford Act informs the courts with whom they are dealing prior to the start of the court hearings to prevent making an unsafe decision for the community. The Lunsford Act requires registrants to go to their local law enforcement office to verify address and other information twice a year.

The Adam Walsh Child Protection and Safety Act of 2006 was signed on July 27, 2006, which was the 25th anniversary of 6-year-old Adam Walsh's abduction and murder in Hollywood, Florida. Amie Zyla is an advocate for child victims and the protection of children from juvenile sex offenders. She was a victim of sexual abuse at age eight 1969 by a juvenile offender. The Adam Walsh Act increased the mandatory minimum sentences for sex offenders. The Act also upgraded sexual offender registration and tracking provisions and increased penalties for internet crimes for child pornography

laws. Florida's response to the Walsh Act was requiring juveniles fourteen and older to register if they were treated as adults in court. Prior to the Act, juveniles were not required to register. Offenders were also required to register their email and instant message addresses. The registrants must register their school information as well as their place of employment and vehicle information.

Florida's Walsh Juvenile Act criteria started with anyone adjudicated as a delinquent on or after July 1, 2007 and were fourteen years of age or older at the time of the offense. The Walsh Juvenile Act also includes juveniles with charges of sexual battery. Sexual battery is defined in the 794.001, F.S. as oral, anal, or vaginal penetration by, or union with, the sexual organ of another or the anal or vaginal penetration of another by another object. It also includes lewd and lascivious battery where the victim is under twelve years of age or where they court finds sexual activity by the use of force or coercion. Also included in the act is lewd and lascivious molestation.

Ms. Coffee discussed the Sex Offender Registration and Notification Act. The purpose of the Act is to share information regarding sex offenders and updates immediately to the Attorney General, local law enforcement, schools, housing agencies, and other specified agencies, entities, and organizations. Florida requires that all qualifying offenders who are not incarcerated must register. If an offender is under the supervision of the Department Juvenile Justice or Department of Corrections, the offender must register within three business days after the finding is made. If the offender is not under supervision, they must register with the Sherriff's office in the county where the finding was made within 48 hours. If an offender is being released from a Florida jail, the offender must register within three business days after release date.

Ms. Coffee provided current Florida numbers:

- Sexual Predators: 7,168
- Sexual Offenders: 32,055
- Juvenile Sexual Offenders: 93
- Approximately 565 predators and offenders are homeless

Juvenile registrant statistics:

- Juvenile Sexual Offenders: 385
- Active Walsh Juvenile Sex Offenders: 98
- Total cases reviewed for Walsh Juvenile Requirement: 236
- Total qualifying for Walsh Juvenile Registration: 104
- Out of State convictions: 12
- Average age of victims: 9 years old
- Cases with multiple victims: 19
- 44 of 98 Walsh Juvenile Offenders are currently under the Department of Juvenile Justice Detention

JIMMY RYCE ACT

Dr. Suzonne Kline is the Director of the Sexually Violent Predator Program. Dr. Kline provided the following opening thoughts: 13% of sexual offenders do not recidivate, sexual violence is decreasing, and childhood sexual abuse does not cause a person to sexually offend as an adult.

Dr. Kline gave the committee some fast facts (all numbers are as of January 21, 2010):

- 36,577 referrals from the Department of Corrections, Department of Juvenile Justice, or mental health facility have been sent to Department of Children and Families since January 1998
- 3,474 referrals sent are for face to face evaluations
- 1,421 referrals recommended for civil commitment
- 1,305 petitions filed by State Attorneys
- 464 persons are currently committed to Department of Children and Families

Referral Process: referrals are received from the Department of Corrections, Department of Juvenile Justice, and Department of Children and Families. The referrals are then returned or information is gathered from Masters level staff. A decision is made as to whether the evaluation is needed or not, and then the evaluation is conducted. A recommendation is sent to the State Attorney after the evaluation is completed, at which time a petition may be filed.

To be referred to the Sexually Violent Predator Program, a person must be 18 years or older, with at least one conviction for a sexually motivated offense, and in lawful custody. There must be evidence of a mental abnormality or personality disorder, and the person must be likely to commit another sexually violent offense. If a 17 year old is charged as an adult, the 17 year old would not go through the program.

The program houses an estimated 668 ex-offenders who are civilly committed and a small portion are detained for probable cause. There are four phases used during the program. Level one is moral recognition therapy, thinking for change, and treatment readiness. During level one, the group discusses criminal thinking and patterns and prepares the person for the group process and encourages them to open up and talk about what they did. Level two is where the person discloses and discovers. The person will begin with their most recent offense and will work backward, requiring them to disclose their sexual history. While opening up on their history and telling their stories, they are required to take a lie detector test. Level three is the development and consolidation and level four is maintenance and comprehensive discharge planning. The program's treatment takes an average 6 years to complete.

LAW ENFORCEMENT INVESTIGATIONS OF A CHILD ON CHILD ABUSE

Dr. Sewell introduced Terry Thomas, Statewide Coordinator for Crimes Against Children Program with the Florida Department of Law Enforcement (FDLE). Mr. Thomas informed the Work Group that child-on-child interviews were the hardest to conduct because about 90% of the cases do not have physical evidence and any child under the age of seven is considered incompetent. In some cases, an officer is able to get evidence when there is no physical evidence.

The typical process for law enforcement's response for child abuse is that the law enforcement will received a call from the Abuse Hotline. The uniform officer will assess the situation, briefly interview the victim(s) and witness(es), and then would notify the on-call detective. The on-call detective's typical process is to conduct an in-depth interview with the victim(s) and witness(es), arranged the Child Protective Team exams, and consider arrest and/or search warrants.

When interviewing the child victim, a child has many fears to overcome. A child fears that they will not be believed, that they will be blamed, their family and friends will reject them. The children are also scared that they will be removed from the home and that the perpetrator's threats will be carried out. A child often feels guilty or has anxiety regarding their involvement in the situation. Children will often recant, as they will rather go home than be taken away from what they know and from their support system. 18 to 24% of the cases that have been called in actually make it to court.

Within each circuit in Florida, the chief judge has the authority to set a limited amount of interviews with the victim(s) and witness(es). Florida Statutes state that the Child Protective Team and/or law enforcement are able to do the interview at any location needed. When the child is under the age of four, the Child Protective Team won't conduct a forensic interview with a child. Some interviewing tools used by the law enforcement and the Child Protective Team when conducting interviews with children are using anatomically designed dolls and free-hand or structured drawing. The dolls are usually used with non-verbal children, normally under the age of five. Mr. Thomas presented the typically used structured drawing used in the interviews as well as an example of a free-hand drawing.

CHILD ON CHILD SEXUAL ABUSE: FROM THE PERSPECTIVE OF LAW ENFORCEMENT IN JACKSONVILLE

Lt. Rob Schoonover is the unit commander for the Sex Crimes, Family Violence, and Child Abuse Unit and Sex Crimes and Family Violence Unit with the Jacksonville Sheriff's office. Lt. Schoonover worked on the force for 28 years and started with the Sex Crimes Unit in September of 2009. Lt. Schoonover also brought a colleague with him, Detective Richard Futch, who has worked with the Sex Crime Unit for seven years. The Sex Crimes unit has a daily morning meeting to discuss new cases, allowing officers to give suggestions of how they worked similar cases in the past as a resource on a new case.

Lt. Schoonover and Detective Futch provided some of Jacksonville's statistics:

- In 2010, already there are already 4 juvenile cases with sexual battery
- 48 cases were black and white males while 2 were females
- 41 have been repeat victims

When a juvenile has been adjudicated delinquent, their DNA is encoded into the system. It is typical for female victims to withhold information in and not disclose it for years.

ADJOURNMENT

The next meeting of the work group is scheduled for February 17, 2010 in Tampa. Adjourned at 4:42 p.m.