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SCCAN is an advisory body required by Maryland Family Law Article (Section 5-7A) "to make recommendations annually to the Governor and General Assembly on matters relating to the prevention, detection, prosecution, and treatment of child abuse and neglect, including policy and training needs."

TESTIMONY IN SUPPORT OF HB1005

Education – Health and Safety of Students – Notification of Problematic Sexual Behavior
SUPPORT

TO: Hon. Anne R. Kaiser, Chair, and members of the Ways and Means Committee

FROM: Wendy Lane, MD, MPH, Chair, State Council on Child Abuse & Neglect (SCCAN)

Claudia Remington, Executive Director, State Council on Child Abuse & Neglect (SCCAN)

DATE: February 26, 2020

Over one third of all sexual offenses against children involve youth with problematic sexual behavior (PSB). Twenty to Twenty-five percent of the cases handled by multi-disciplinary Child Advocacy Centers (CACs) involve youth with PSB. Unfortunately, Maryland and most other states have fragmented and inconsistent systems and policies to identify and effectively respond to this growing problem. Research suggests that school administrators, child protective services (CPS), and law enforcement are often the first responders and yet there are no clear statewide policies or understanding of how best to manage instances of PSB in children and youth. While the child welfare and law enforcement systems are mandated to respond to child sexual abuse, that mandate is limited. CPS is not required to respond to cases of PSB, unless either the children involved are living in the same household or sexual abuse or neglect by a caregiver is suspected. Creating a comprehensive and coordinated system of quality training, clear protocol, multidisciplinary team responses, and evidence-based treatments is critical to developmentally appropriate responses to youth with PSB.

Maryland's CACs are leaders in supporting families impacted by child abuse through coordinated multidisciplinary response and care. This uniquely qualifies CACs to coordinate effective interventions for this population. Several Maryland CACs have worked with the National Center on the Sexual Behavior of Youth (NCSBY) to improve their teams' training in evidence based treatment for children with PSB. Unfortunately, not all Maryland CACs have had this technical support and the ones that have struggle with a lack of referrals. They know there are children in their community in need of services, but the community change process has not been successful to improve the strategies to identify, safety plan, and respond with services for all children involved. According to NCSBY the one exception to the

referral issue is Tree House in Rockville which reports having more referrals than they can keep up with. This is attributed to the fact that the Tree House has developed collaborative relationships with needed partners in CPS, Law enforcement, etc.

HB 1005 is an important first step in developing a statewide approach to responding to these cases and more needs to be done to study and develop effective response systems. Parents whose children have acted out sexually in a problematic way and parents whose children have been victimized are in urgent need of information in order to respond effectively to their child and to guide them in appropriate boundaries, behaviors, consent, pornography, and relationships. Requiring that parents of involved students be notified within 24 hours, allows parents to educate themselves to effectively support their child. Early intervention is key and highly effective. It helps children with PSB learn to control their behaviors and end them, it prevents future acting out. And, it helps victims learn that the actions were not their fault, learn about boundaries and other skills that can be effective in preventing the otherwise long term impacts of child sexual abuse. Parents cannot act early to help their children unless they are notified of instances of PSB in a timely fashion.

For these reasons, the Council respectfully urges a favorable report on HB1005.

ⁱ Finkelhor, Ormrod, & Chaffin, 2009; Hackett, 2014

ii National Children's Alliance 2015 statistical data submitted by Children's Advocacy Center members.