

THE COALITION TO PROTECT MARYLAND'S CHILDREN

Our Mission: To combine and amplify the power of organizations and citizens working together to keep children safe from abuse and neglect. We strive to secure the budgetary and public policy resources to make meaningful and measurable improvements in safety, permanence, and well-being.

Testimony before the Senate Judicial Proceedings Committee Bill #SB 134: Civil Actions – Child Sexual Abuse – Definition and Statute of Limitations (Hidden Predator Act of 2021) SUPPORT

February 2, 2021

The Coalition to Protect Maryland's Children (CPMC) is a consortium of Maryland organizations and individuals formed in 1996 to promote meaningful child welfare reform. CPMC strongly **supports** passage of SB 134: Civil Actions – Child Sexual Abuse – Definition and Statute of Limitations.¹

Senate Bill 134 would eliminate the statute of limitations in civil actions related to child sexual abuse. This statute of limitations had previously been extended in 2017 by House Bill 642, to 20 years from the age of majority from 7 years from the age of majority – i.e. from age 25 to age 38 years. Unfortunately, it also raised the standard of proof to sue employers from ordinary negligence to gross negligence, making it much more difficult to sue institutions for failure to protect children in their care from sexual abuse.² SB 134 bill would eliminate the statute of limitations. In addition, it would create a lookback window for those victims who have previously been barred by the statute of limitations, allowing them to file suit for a period of two years. Finally, it would remove the purported “statute of repose” language inserted into the 2017 bill, which inappropriately attempts to vest property rights in sexual predators and the institutions that protect these sexual predators from discovery and prosecution.

We know from extensive research that sexual abuse can have profound and long-lasting, even lifetime-long negative effects on children. During childhood, victims may exhibit anxiety, social withdrawal, school failure, and inappropriate sexual behavior.³ In adolescence, sexually abused teens are at increased risk for depression, self-injury, suicide attempts, eating disorders, risky sexual behavior, and teen pregnancy.⁴ Adults who experience child sexual abuse and exploitation

¹ Members in support of position include: Advocates for Children and Youth, Baltimore Child Abuse Center, Child Justice, Inc., Citizens Review Board for Children, Court Appointed Special Advocates, The Family Tree, Maryland Chapter of the American Academy of Pediatrics, Maryland Chapter of the National Association of Social Workers, Maryland Coalition Against Sexual Assault, State Council on Child Abuse and Neglect, and Board of Childcare.

² <https://www.baltimoresun.com/news/opinion/oped/bs-ed-op-1012-abuse-victims-redress-20171011-story.html>

³ Trickett PK, Noll JG, Putnam FW. The impact of sexual abuse on female development: Lessons from a multigenerational, longitudinal research study. *Development & Psychopathology*. 2011;23:453-476.

⁴ Homma Y, Wang N Saewyc E, Kishor N. The relationship between sexual abuse & risky sexual behavior among adolescent boys: A meta-analysis. *Journal of Adolescent Health*. 2012;51:18-24.

Sanci L, Coffey C, Olsson C, Reid S, Carlin JB, Patton G. Child sexual abuse & eating disorders in females. *Arch Pediatr Adolesc Med*. 2008;162:261-267.

Pallitto CC, Murillo V. Abuse as a risk factor for adolescent pregnancy in El Salvador. *J Adolescent Health*. 2008;42:580-586.

Mills R, Alati R, O'Callaghan M. Child maltreatment and adolescent mental health problems in a large birth cohort. *Child Abuse & Neglect*. 2013;37:292-302.

are more likely to have alcohol and/or drug dependence, chronic abdominal and pelvic pain, and poor overall health.⁵ Women who have been sexually abused spend more on health care costs, and are more likely to rely on welfare for income.³

Delayed disclosure in child sexual abuse is extremely common.⁶ Children commonly wait months and even years before disclosing. There are numerous reasons for this delayed disclosure. Victims will frequently cite shame, fear of social stigmatization or ridicule, and fear of not being believed. Perpetrators of sexual abuse may threaten the child or family with physical harm, or may threaten the child that she will be taken away from her family. Perpetrators often blame the child for the abuse, and the child internalizes this self-blame. Abused infants, toddlers, and other very young children may not understand that what is going on is abuse. And finally, a child may attempt disclosure to an adult who is distracted, disbelieving, or in denial, and no further action is taken. For all of these reasons, children may tell no one for decades.

As noted above, adults who were sexually abused as children are often left with long-term physical and mental health problems that can be extremely costly. Under current law, adults who were abused as children are often left with no legal remedy, and no way to make them whole. Elimination of the statute of limitations would allow adults who were sexually abused as children to seek justice for the harm that they have suffered.

In addition to helping adults who were abused as children, SB 134 very importantly also protects our current children. Abusers frequently abuse multiple children. Identification of a predator can stop his ongoing contact with children and prevent additional victimization. For example, lookback windows enabled the identification of 125 predators in Minnesota and 300 in California.

For all these reasons we urge a favorable committee report on SB 134: Civil Actions – Child Sexual Abuse – Definition and Statute of Limitations with no amendments.

⁵ Fergusson DM, McLeod GFH, Horwood LJ. Childhood sexual abuse and adult developmental outcomes: Findings from a 30-year longitudinal study in New Zealand. *Child Abuse & Neglect*. 2013;37:664-764.

⁶ Munzer A, Fegert JM, Ganser HG, Loos S, Witt A, Goldbeck L. Please Tell! Barriers to disclosing sexual victimization and subsequent social support perceived by children and adolescents. *J Interpersonal Violence* 2016;3:355-377.