

MINUTES OF THE SENATE COMMITTEE ON JUDICIARYThe meeting was called to order by Senator Elwaine F. Pomeroy at  
Chairperson10:00 a.m./~~pm~~ on February 3, 19 84 in room 514-S of the Capitol.~~All~~ members ~~were~~ present ~~except~~ were: Senators Pomeroy, Winter, Burke, Feleciano, Gaines, Steineger and Werts.Committee staff present: Mary Torrence, Revisor of Statutes  
Mike Heim, Legislative Research Department  
Jerry Donaldson, Legislative Research Department

## Conferees appearing before the committee:

Walter Buenning, Bert Nash Mental Health Center, Lawrence  
Jean Sagan, Lawrence  
James McBride, United Way of Greater Topeka  
Brent Cain, Child Protective Services, SRS  
Jan Waide, Youth Services, SRSCHILD ABUSE ISSUESWalter Buenning testified increasingly child sexual abuse is being reported by professionals and concerned citizens. A copy of his testimony is attached (See Attachment No. 1).Jean Sagan presented her testimony to the committee regarding possible improvements in legislation concerning child abuse. A copy of her testimony is attached (See Attachment No. 2). She stated she would be happy to work with the committee to provide information on the Douglas County Diversion program. She pointed out, convicting someone and sending them to jail does not solve the problem completely. She stressed education of children at an early level. The fact that children allow parents to abuse them is because they are ignorant. Children need to know what they can do, where they can go to improve their own situation. She referred to the children who are caught in the midst of custody battles, and suggested passing a law, anytime a divorce is filed involving child custody, the court must appoint a guardian ad litem; otherwise, the child becomes something to bargain with. The chairman commented it would be helpful in some way to let judges know throughout the state the studies Mr. Buenning presented to this committee. It would be helpful to the judge dealing with problem where sexual abuse is raised in a divorce action. She said they would be happy to pass that on to the judges. The chairman inquired, about the change in the incest law last year, is it counter-productive with regard to diversion? She replied, do not recall the change that was made. The category was raised; not sure it is counter-productive; thinks that is a very good thing. Striking down the confidentiality requirements is helpful.James McBride testified, during the allocations process in the spring of 1983, Greater Topeka United Way member agencies drew the attention of its citizen panelists to an alarming increase in the incidence of child abuse/neglect cases being encountered within Topeka and Shawnee County. A copy of his testimony is attached (See Attachment No. 3). A committee member inquired, how the percentage increase correlates with the population increase? The response, I think our increase in population is somewhat less than one percent a year. The chairman reported, haven't had much increase in population in Kansas. In Shawnee County it has been stable too. Enrollment in public schools is way down.

Brent Cain testified he would restrict his comments to Topeka and Shawnee County area. A copy of his handout is attached (See Attachment No. 4). The department

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON JUDICIARY,  
room 514-S, Statehouse, at 10:00 a.m./~~p.m.~~ on February 3, 1984

CHILD ABUSE ISSUES continued

is providing children with information how to protect themselves. He stated children can learn behavior other than victim behavior; need to begin to prevent these kinds of problems early. A committee member requested copies of the material that they are providing the children. The committee member inquired to what extent is the program federally funded? Jan Waide, acting director, reported children in need of care qualify for federal funding on a population basis in Kansas. There are a few states that don't qualify for federal funding because of not having a strong confidentiality law; depends upon appropriations made in the Congress. They use funding for many preventive kinds of services that have started. It is roughly one hundred thousand dollars a year. A committee member inquired, how much support do you receive for child abuse and neglect? She replied, it is not a great deal. The federal government has deferred to the states for most of the funding. A committee member pointed out the Family Support Worker Program funding is one million forty-seven thousand dollars. The emphasis has changed, it has been increased, and it is increasing substantially this year. The Senate Ways and Means Committee has asked SRS to present a two-page report of what services they have available.

Senator Gaines moved that the minutes of January 26, 1984, be approved. Senator Feleciano seconded the motion, and the motion carried.

The meeting adjourned.

GUESTS

SENATE JUDICIARY COMMITTEE

NAME	ADDRESS	ORGANIZATION
Leo E. Wall	204 W 5th	Topeka Police Dept
See Supis	"	" " "
John Clark	827 S. Dowla	KCOAA
Jean Sagan	729 Illinois, Lawr.	self
Mattie Buerling	2933 Howard, Lawrence	Best Nash Mental Health Center
Sister Ellen Richardson	K.C.	KS Catholic Conference
Andy Kenkel	Topeka	Ks Childrens Service League
Ruth Wilbur	"	Girl Scouts
Al Bumpus	Wichita	Self
Ester Bumpus	"	Self
Jan Owen	Topeka	KS Action for Children
Gammy Hanson	Topeka	Ks Childrens Service League
Brent D. Carr	Topeka	ERS
Lois Delio	Seppok	Kansas Action for Child
Darlene Kearns	Topeka	Consultation of Churches
Cynthia A. Robinson	Topeka	Ks Action for Children
Connie Garner	Topeka	United Way of Greater Topeka
Verna Roberts	Topeka	United Way of Greater Topeka
Sis M. Baird	Topeka	United Way of Greater Topeka
Johnny Soott	"	KCPCA
Shelly McLaughlin	"	KIA
Doris Ford	"	UPF
Jan Waide	2700 W 6th	Youth Services, S. R. S.
Hilda Ann Woody	Cottonwood Falls, KS 66845	National Organization for Women
Charles C. Harmon	Topeka - Forks Field	Kans Dept of Health & Environment

## Community Mental Health Center, Inc.

336 Missouri • Suite 202 Lawrence, Kansas 66044 913/843-9192

### Statement Regarding Child Sexual Abuse

1. Increasingly child sexual abuse (CSA) is being reported by professionals and concerned citizens. Educational efforts are more directed toward children informing them about CSA and encouraging them to tell someone.
2. Reported CSA incidents are being investigated promptly by SRS and the police in many communities.
3. However in only a small minority of cases (2-15%) are the accused ever charged, prosecuted or convicted of a crime.
4. Child sexual abuse remains a big problem. Now, however, the problem is not so much recognizing the problem but responding to the problem in a just and equitable manner.
5. The experience of the past ten years increasingly demonstrates that many sexual abusers can be treated effectively. We also know more about helping the victim and mother of the victim.
6. Only a small percent of perpetrators ever admit or acknowledge the accusation.
7. The growing body of knowledge accumulated nationally provides a consensus picture. Only one - three percent or less of girls ever make a false accusation. Over the past two years we have treated about fifty victims. In our opinion only one made a false accusation; we recognized it within the week and she acknowledged. In this case, however, the sister made a legitimate charge.
8. In most cases the mother believes the father and not the victim.
9. The majority (90%+) of perpetrators will not willingly enter treatment.
10. Even a large percentage of mothers and some victims will not willingly enter treatment.
11. A majority of accused men who initially deny the charges will admit at some point if they are charged, prosecuted, or enter treatment. In our experience 100% of the men who denied before entering treatment admitted to the child's allegations within several months.

#### Satellite Offices:

1415 Maple Eudora, Kansas 66025 913/542-2035

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Attch. 1

12. In the majority of situations the victim is emotionally and materially dependent upon the perpetrator.
13. In most cases CSA is a crime without any witnesses and little other evidence beyond the girl's statement.
14. In the final analysis the legal situation is reduced to the victim's <sup>word</sup> and against the abuser's word.
15. In nearly all situations once a girl makes an accusation it causes major changes in the family. The parents may separate, the father might be required to leave the home, the victim and/or other children may be removed from the home.
16. In most situations one or more of the family, but almost certainly the father (often the mother also) will blame the girl for breaking up the family or putting the father in jail.
17. As a result of this pressure and implied guilt, many victims retract their accusation. They become ambivalent and even adamant in their statement that nothing happened. In our experience if these victims remain in treatment, they will privately and confidentially confirm their original accusations.
18. As a result the process that occurs in most communities is that girls are increasingly encouraged and told to report. Once reported, however, only a small minority of the accused abusers are ever charged, prosecuted, incarcerated or treated. In many cases the impact upon the victim is worse than if she had never told at all.
19. The problem with CSA remains, only it is in a different stage and needs to be addressed.

M E M O R A N D U M

TO: Members of Senate Judiciary Committee  
FROM: Jean S. Sagan  
RE: Possible improvements in legislation re child abuse  
DATE: January 27, 1984

Dear Committee Members:

Over the past 3 years, until November 1983, I served as an assistant district attorney in Douglas County, Kansas, with full responsibility for all child-in-need-of-care (CNC) cases as well as all criminal cases involving child victims. In that capacity I have handled the prosecution of over 100 cases of physical, sexual and/or psychological abuse, working closely with law enforcement personnel, SRS, mental health professionals, doctors, and the local schools. In December 1983, I attended a 3 day conference on child abuse programs sponsored by the National Association of Counsel for Children and Florida Association of Counsel for Children and ABA. In addition, I have lectured on juvenile law at KU School of Law, conducted numerous in-service training sessions and public seminars, and have spoken regularly to high school and elementary school classes in Lawrence.

From this perspective, I have observed several problem areas which exist under our present laws relating to child abuse. Some of those problems may be susceptible to change, and some may not. I share them with you here because I am proud of Kansas's progressive stance on child abuse legislation, and am hopeful that our legislature will continue to actively address the protection of our most valuable natural resource - our children.

I. Problem Areas

1. The victim often recants her initial statement under pressure from her family or when she sees that everything she was warned would happen if she tells, does happen (i.e. "your father will go to jail," "we won't have any means of support," "they'll put you in a foster home," "you'll ruin us.") ONCE THE VICTIM'S STATEMENT IS RECANTED, CRIMINAL CONVICTION IS NEARLY IMPOSSIBLE.

2. The very factors which result from sexual abuse of children, i.e. promiscuity, sexual precociousness or obsession, acting-out, are invariably used by the defendant to impeach the Victim's credibility.
3. Pending or impending criminal action generally reinforces the perpetrator's denial, causes him to remain silent rather than incriminate himself, and undermines the effectiveness of juvenile court action aimed at maintaining the family unit.
4. Children are the ultimate defenseless victims, yet under our statutory scheme it is more reprehensible to steal \$100 than to abuse a child. Where a case of abuse is serious enough to warrant criminal proceedings as well as juvenile, the penalty is not adequate.
5. Not all abuse is of the same degree of seriousness. For example, the same statute can cover one who over zealously disciplines a child with a belt on the backside and one who intentionally ties a child to the bedframe and inflicts cigarette burns.
6. Confidentiality of CNC proceedings interferes with the public's need to know the possible outcomes, sanctions, etc. Conversely, there is no way to prosecute the most serious cases criminally and protect the child victim from the publicity and trauma of a public trial.
7. It is more reprehensible under our current criminal code to have sexual contact with someone else's child than with one's own child, yet the psychological damage from the latter is far more deep than from the former.
8. The public is totally unaware of what is done or what can be done. Victims as well as perpetrators, third party victims, teachers, neighbors, friends - all these people need to know what they can do and what to expect once they've done it.

## II. Possible Changes

1. Allow expert testimony regarding "sexually abused child syndrome" on rebuttal where (1) a defendant takes the stand and impeaches the Victim-witness's credibility or (2) the Victim subsequently recants her testimony. Psychological studies now indicate that 99% of the time, children don't lie about these things.



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2. Mandate a diversion program for interfamily abuse where (1) the perpetrator's actions were non-violent, (2) the perpetrator has no prior convictions and is not currently on diversion, (3) there is a CNC action pending, (4) the perpetrator admits and is willing to undergo intensive counselling, and (5) the victim and spouse are willing to participate in the counselling program.
- 3. Amend the Code for Care of Children to give the court authority to remove the alleged perpetrator from the home where the appropriate, rather than the child.
4. Create degrees of child abuse, perhaps Child Abuse & Aggravated Child Abuse. Amend the present law to include intentionally inflicting injury on a child or battery of a child by an adult.
- \* 5. Amend Endangering a Child to specifically include a parent who knows or should reasonably know that physical or sexual abuse is occurring and who either fails to remove the perpetrator from the home or report to authorities.
6. Lengthen the statute of limitations for sexual abuse to 10 years. The child usually doesn't report the incidents until much later, and there is seldom any physical evidence to be preserved.
7. Mandate education at the ELEMENTARY SCHOOL level regarding children's rights and recourses. Too often children don't know that what's being done to them isn't done to everyone, and if they do, they don't know where to go or what to do. They need to know that they will be believed, too. Provide funds to implement the program, or require the school system to coordinate it through existing means.
8. Mandate the posting of the Mandatory reporting law (38-1522) in a prominent place in all schools, hospitals, health care facilities, child care facilities, social service and law enforcement agencies, ambulance and fire stations, and other appropriate places.



GREATER TOPEKA UNITED WAY PLANNING COMMITTEE  
TASK FORCE ON CHILD ABUSE AND NEGLECT

I. BACKGROUND

During the allocations process in the spring of 1983, Greater Topeka United Way member agencies drew the attention of Citizen Panelists to an alarming increase in the incidence of child abuse/neglect cases being encountered within Topeka and Shawnee County. Information provided by the Community Resources Council's Information and Referral network documented a thirty percent increase in 1982 in the number of calls dealing with child abuse and neglect. Key child care providers such as the Salvation Army expressed concern to United Way in writing about "the numbers of children who evidence symptoms of abuse and/or neglect." (Mowers to McHenry, 1 June 1983)

In the face of this evidence, the Greater Topeka United Way Board asked its Planning Committee to form a special task force to fulfill three charges:

1. Develop an understanding of the present scope of the problem.
2. Determine what additional programs or resources might help to alleviate the problem.
3. Make some specific recommendations regarding the allocation of public and private funds in relationship to the problem.

In addressing this mandate, the task force conducted four meetings during the fall of 1983. On September 14, representatives of Greater Topeka United Way agencies met with the task force to share information relevant to the inquiry. On October 12, representatives from a variety of non-member agencies provided additional information to the task force. On November 10, a selected group of United Way member agencies and community organizations met to discuss the issue of a Level V facility in Shawnee County.

Based upon information gathered from these meetings and sources, the attached report represents a summation of the evidence and conclusions drawn. Persons having additional information pertinent to this inquiry are encouraged to contact Ms. Connie Larsen at the United Way office, 235-9251.

II. CHILD ABUSE AND NEGLECT - THE ~~NATIONAL~~ PICTURE

Reported cases of sexual and physical abuse and emotional neglect of children under the age of 18 increased 91 percent nationwide between 1976 and 1980, according to statistics from the American Humane Center. In 1980, 800,000 cases of child and adolescent abuse were reported; 22 percent of them involved adolescents between 15 and 18 years old.

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II. CHILD ABUSE AND NEGLECT - THE NATIONAL PICTURE (CONTINUED)

In a recent national survey, thirty-nine out of fifty states reported an increase in the number of confirmed cases of child abuse and neglect. Authorities in the field argue that changes in the composition of American families are major contributing factors behind this alarming development. Some of these changes are illustrated by the following statistics:

CHANGES IMPACTING UPON AMERICAN FAMILIES

A. <u>Out-of-Wedlock Births</u>	1960	1970	1980
Number in thousands	224	399	666
Percent of all births	<del>5.3</del>	10.7	<del>18.4</del> (1)

B. Family Living Arrangements

As of 1982, 14 million young people or 22 percent of all children under 18 were living in a single parent family with either their mother or father. Some 23 million young people or 37 percent of all U.S. children under 18 were living in something other than a family where both biological parents were present. (2)

C. Children in Female-Headed Households (Under 18 - in millions)

Child lives with mother who is	1970	1982	% Change 1970-82
Divorced	2.3	5.1	+122%
Separated	2.3	3.1	+ 33%
Never Married	0.5	2.8	+431%
Widowed	1.4	1.1	- 17%
Other	.9	.4	- 56%
<u>Total Children living mother only</u>	<del>7.4</del>	<del>12.5</del>	<del>+68%</del> (3)

D. Child Support

Barely one third of women with children under 21 whose fathers are absent receive child support payments from the absent father.

E. Women With Minor Children From an Absent Father, 1978

All women with minor children from an absent father:

1. Number in U.S. Population - ~~7.1 million~~
2. % Awarded Child Support Payments - ~~59%~~
3. % Who Received Any Child Support - ~~35%\*~~
4. Mean Annual Support Received - \$1,799 (4)

\* Only ~~14%~~ of black mothers receive any support (5)

### III. THE STATEWIDE PERSPECTIVE

In FY 1983 the state reports 19,498 cases of reported child abuse and neglect of which 6,439 were confirmed. Particularly disturbing is the increase of 30.8% in the families identified as being "at risk", which rose from 4,263 in 1982 to 5,576 in 1983. (6)

### IV. THE SHAWNEE COUNTY PERSPECTIVE

Social and Rehabilitation Child Protective Service Referrals indicate 282 confirmed abuse cases in 1981; 288 in 1982; and 232 from January to September in 1983. (7) If the last quarter of 1983 is projected on the basis of the first three quarters, there will be a 7.3% increase in this category.

Petitions Alleging Child Abuse or Neglect in the District Court of Kansas-- Shawnee County number 136 through October 31, 1983, which already represents an increase of 30.8% over similar petitions filed in 1982. (8) Cases of confirmed abuse reported by the Topeka Police Department involving major physical injuries number 81 through September 30th, including one homicide. (9) If the last quarter of 1983 is projected on the basis of the first three quarters, there will be about a 7% increase in these cases over 1982.

The number of cases of child abuse or neglect encountered by the Topeka/ Shawnee County Health Department between January and June of 1983 totaled 105. Of these cases, 57 were confirmed as involving abuse or neglect. (10)

In considering the numbers of cases reported by these agencies and institutions, it should be pointed out that some cases will be reflected in the records of more than one agency. Even when that fact is taken into account, the overall pattern points to a significant increase in both the number and the severity of cases. Illustrative of this trend are hospital statistics, with St. Francis reporting 3 cases of abuse and neglect in 1981, 9 cases in 1982, and 13 cases already in 1983. (11) Stormont Vail reported 21 suspected child abuse/neglect cases in the Emergency Room from January 1 to October 31, 1983. (12)

Information gathered from Greater Topeka United Way member agencies corroborates these trends. Numerous agencies serving children report seeing an increase in both the number and severity of cases. John Holzhuter, Executive Director of Catholic Social Services, noted that the instance of child abuse/neglect cases has risen in his agency by 21% between 1982 and 1983. This increase does not include referrals to the agency from SRS. Mary K. Rodwell, Topeka Area Director of the Kansas Children's Service League, noted that over the past eight to nine months one-fourth of the clients coming to her agency through community corrections services have involved clients from abusive situations. Particular concern is expressed about the increase in the incidence of cases involving sexual abuse. Judge Bill G. Honeyman noted the same trend when he wrote recently: "There has been an increase in the incidence of reported sexual abuse of minor children which is very disturbing." (Honeyman to Larsen, 1 November 1983)

### V. THE PRESENT SERVICE NETWORK

The present components of the service system dealing with child abuse/neglect cases are outlined below:

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V. THE PRESENT SERVICE NETWORK (CONTINUED)

I. Prevention/Education

- A. Parents Anonymous
- B. Stress Hotlines
- C. Educational Programs

II. Supportive Community Services

- A. Day Care
- B. Respite Care
- C. Homemaker Visitation Programs
- D. Project Assist Type Programs

III. Treatment Services

- A. Family Counseling
- B. Alcohol/Drug Abuse Treatment and Counseling
- C. Emergency Foster Care
- D. Level IV Treatment Facilities and Services (Residential Care for Children)
- E. Medical Care/Adolescent Psychiatric Service

IV. Investigative and Criminal Prosecution Services

- A. Court-Related Services
- B. SRS Investigative Services
- C. Law Enforcement Investigative Services

VI. RECOMMENDATIONS FOR STRENGTHENING THE COMMUNITY'S RESPONSE TO THE PROBLEMS OF CHILD ABUSE AND NEGLECT

- A. Support for increased funding from state resources to SRS for the purpose of enabling that agency to address the increasing case load being encountered. This would include funds to support investigation, evaluation, family support and residential services.
- B. Increase funding for prevention/education and other supportive community services.
- C. Adequately support funding for programs and services targeted at sexual abuse of children.
- D. A special task force consisting of the child abuse service network providers and representatives of funding agencies should be created to study the options and to develop a plan for the implementation of a case management system to assist the service network in Topeka. (See attachment #1)

VI. RECOMMENDATIONS FOR STRENGTHENING THE COMMUNITY'S RESPONSE TO THE  
PROBLEM OF CHILD ABUSE AND NEGLECT (CONTINUED)

- E. It is desirable that a Level V treatment facility be an option locally available to agencies dealing with child abuse and neglect cases. The closure of St. Vincent's Children's Home means that Topeka and Shawnee County currently lack such an option. It is recommended that the possibility of re-establishing a Level V treatment facility using St. Vincent's physical plant be reviewed by a special task force of funders and providers.

Draft compiled by Greater Topeka United Way  
Planning Committee Task Force on Child Abuse and Neglect  
November 30, 1983

VII. ACKNOWLEDGEMENTS

The United Way gratefully acknowledges the assistance of the following individuals and organizations:

Task Force Members:

Mr. Pete Henry, Hallmark Cards  
Mr. Vance Mellen, Colmery, O'Neil VA Medical Center  
Mr. Leland Koon, Menninger Foundation  
Ms. Mary K. Rodwell, Topeka Area Director, Ks. Children's Service League  
Mr. Dave Wiebe, Executive Director, Shawnee County Mental Health Center

Other Contributors:

Jan Kenyon, Salvation Army  
Karen Juola, Topeka Day Care  
Bob Harms, Family Service & Guidance Center  
John Holzhuter, Catholic Social Services  
Barbara Ballentine, Battered Women's Task Force  
Donna Osment, Battered Womens's Task Force  
Elgin Woody, Boys' Club  
Pat Dwyer, Big Brothers/Big Sisters  
Roxanne Emmert-Davis, Mental Health Association in Shawnee County  
Jan Stratton, Mental Health Association in Shawnee County  
Sabra Diehl, Topeka Association for Retarded Citizens  
Jan Bowen, Social Rehabilitation Services  
January Scott, Kansas Committee for Prevention of Child Abuse  
Judge Bill Honeyman, District Court of Kansas, Third Judicial District  
Adrian Apel, Parental Stress Hotline (Mental Health Association)  
Larry Woodward, Social Work Department, Stormont-Vail Regional Medical Center  
Ann Smith, Assistant District Attorney  
Nancy Sargent, Parents in Stress  
Brent Cain, SRS Protective Services  
Sarah Mays, Court Services  
Careen Dale, School of the Future  
Nola Ahlquist-Turner, Shawnee County Health Department  
Richard Donner, Juvenile Detention Center  
Louis Finocchario, Catholic Social Service, K.C., KS.  
Penny Frye, Social Rehabilitation Services  
Jim Gill, Social Rehabilitation Services  
Emma Machac, Social Rehabilitation Services  
Captain William McKinnon, Topeka Police Department  
Jim Olson, Community Resources Council

FOOTNOTES

1. CWLA/CRITTENTON REPORTER, Washington D.C., Special Insert #39, June, 1983.
2. Ibid.
3. Ibid.
4. Ibid.
5. Child Welfare Planning Notes, June 1983, p.61.
6. Kansas Committee for Prevention of Child Abuse, January H. Scott, Executive Director, October 28, 1983, one page statistical review.
7. Social and Rehabilitation Services, Jim Gill, Section Supervisor, November 1, 1983, two page statistical report.
8. District Court of Kansas Third Judicial District, Bill G. Honeyman, Associate District Judge, to Connie Larsen, November 1, 1983.
9. Topeka Police Department, telephone call from Captain Bill McKinnon to Verna Roberts, October 28, 1983.
10. Topeka-Shawnee County Health Department; Mother's, Children and Youth Program Statistics, January to June 1983.
11. St. Francis Hospital, Pam Crary, LMSW, November 11, 1983, one page statistical report.
12. Stormont Vail Hospital, telephone call from Jeri Stonestreet, Pediatric Social Worker, to Connie Larsen, November 11, 1983.



## POSITION PAPER

CASE MANAGEMENT SYSTEM TO ASSIST SERVICE  
NETWORK FOR CHILD ABUSE AND NEGLECTHISTORY

There appears to be a very complex and potentially comprehensive service network to deal with high risk and confirmed child abuse/neglect cases in the community. Since the elimination of court intake services, and to some degree even before that time, some families have tended to get lost in the service network. In many cases, particularly for high risk families with unconfirmed cases of abuse or neglect, a variety of service providers are engaged in helping without knowing that other resources are involved. In other cases, families engage in a variety of services that consciously or unconsciously are designed to work at cross purposes because of lack of coordination. Some families are not willing to receive services and can escape working on needed changes because of this same lack of coordination.

The existence of these service problems suggests that a case management system to assist the service network is a potential method of strengthening the community response to child abuse and neglect.

CASE MANAGEMENT - A DEFINITION

Case management is a concept of service integration which begins with a service request from a client or referral source and ends with feedback data regarding client satisfaction and goal attainment. It is a consumer-centered, goal-oriented approach to service integration. The case manager functions are primarily assessment/diagnosis, planning, community resource assessment, negotiation with agencies and client needs, advocacy brokerage, monitoring and evaluation. The process starts with a definition of the client's problem in terms of needs and includes a statement of objectives designed to resolve those needs. Meeting the needs of the clients is generally not the responsibility of the case manager directly, but of other agencies or services. The major responsibility of the case manager is to perform with the client, or on behalf of the client, the negotiation, advocacy, brokerage, monitoring and evaluation functions in relationship to specific goals set out for the client.

The case manager essentially integrates the arena or array of services to achieve the objectives. Success or failure is not determined by the mere provision of the services, but by whether or not the services attain the essential objectives.

Case management does not, itself, constitute a specific form of "treatment" but rather aims to assess the needs of each client on a case-by-case basis, and help that client (family) effectively utilize existing community resources to resolve problems which may be contributing to the abuse/neglect situation.

Case management assumes a multi-causal theory of problem formation. Thus, the "cause" of child abuse may rest within the child, as in learning difficulties, emotional problems, untreated physical ailments; or within another

### CASE MANAGEMENT - A DEFINITION (CONTINUED)

family member, as in an alcoholic, mentally disturbed or ill parent; or between other family members, as in the presence of marital difficulties, or divorce. Family stresses, a recent move, a fight with a boyfriend, unemployment may precipitate the dysfunctional behavior that results in abuse or neglect.

Most times with families "at risk" it is impossible to expect them to assess for themselves what services and what agencies might be most effective in meeting their needs. The case management approach provides professional assessment of client needs and problems and arranges for the indicated services, following the client and services until case closure. Some models also allow for the purchasing of those services when necessary.

Case management is equipped to address problems of a multi-causal character. Case managers are not committed to any one form of intervention. Hence they are in a position to provide an objective assessment which may be difficult for those who can only offer a particular form of service. In the role of monitor, the case manager serves as the conductor in an orchestra, integrating the array of services. Clients are not likely to get lost.

The strength of case management lies in its emphasis on specifiable objectives, stated in behavioral terms; clarity of objectives with client, case manager and other parties in the service delivery network; and the flexibility of case management in that it allows the case manager to utilize an array of possible services in order to achieve objectives rather than be limited to blanket contract services. It provides a mechanism for integration of the arena of services around the primary reason for the existence of the service, the client problems.

### PROBLEMS

Possible problems in case management relate to the skills of the case manager, the ability to state objectives in specific behavioral terms, and the availability and willingness of service providers in the community to engage in specific contracting and on-going communication. The strength of case management lies in its analogy to the market model-the willingness of agencies to provide fairly directed services in return for direct compensation-also means that there needs to be some degree of competition or at least a multiplicity of services (this clearly exists in Topeka). One of the recommendations by most authorities on case management is that the case manager be given "hard clout" (such as a legal basis for delivering services) or moneys that can be used directly in the negotiation process with service vendors. The confidentiality issues in multiple services and the need for coordination and communication of confidential material can be simply handled through signed releases of information completed by the client.

### OPTIONS

The location of a case management service for high risk and abusing or neglecting families in Topeka has several options, each with its own set of problems:

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OPTIONS (CONTINUED)

1. Because SRS has the legal responsibility to serve all suspected or confirmed cases of child abuse or neglect, logic might suggest that they could be expected to provide this service. Locally provided funds could not be accepted for hiring staff for this purpose, but SRS management feels that case managers could be housed in their facilities if hired and paid through another source. Potential clients might resist the service if provided out of the same location that investigation occurs.
2. Court Services might be able to reinstitute a modified version of the old juvenile Court Services intake. Local interpretation of Juvenile Code might prevent the modification of the Court Services role in this way. Some clients might also resist seeking service in this location because of the assumption they might have about the corrections functions of Court Services.
3. Because the local law enforcement agencies are now empowered to declare children in need of care, the juvenile division of the Topeka Police Department might be considered for an expanded service. Questions addressed in Items #1 and #2 would have to be answered as well as testing whether the department could assimilate what is essentially a social work service.
4. A neutral "clearing house" agency such as the Mental Health Association or the Community Resources Council might be considered for expanded services. Assuring that all high risk and confirmed abuse/neglect cases would be referred would have to be the cornerstone of any program development.
5. Any currently operating agency with expertise in child abuse and/or case management services (including local hospitals) could be considered for expanded services. Issues related to Item #4 must also be addressed here.

RECOMMENDATION

A special task force consisting of the child abuse service network providers and representatives of funding agencies should be created to study the options and to develop a plan for the implementation of a case management system to assist the service network in Topeka.

Submitted by Mary K. Rodwell  
November 30, 1983

Brent D. Cain  
Social Worker III  
Supervisor  
Child Protective Services  
Topeka Area Office

Format for Testimony

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

2-3-84  
Attach. #4

Testimony Concerning (H.B. or S.B.) \_\_\_\_\_

Relating to Child Abuse/Neglect

- I. Recodification of juvenile code has provided clarity and better defined roles of those involved in child abuse.
  - A. Grounds for termination of parental rights much clearer.
  - B. Roles of SRS and law enforcement made more distinct through S.B. 105.
  - C. 38-1524 sets forth the "imminent danger" criterion for removal of a child by law enforcement.
    1. Imminent danger seems too vague.
    2. Imminent danger is often interpreted as the threat of death or serious injury rather than the threat of further abuse/neglect.
- II. The more successful SRS is in its publicity and education program regarding child abuse/neglect, the more referrals increase.
  - A. Statewide referrals have doubled between F.Y. 1977 and F.Y. 1983.
    1. Locally in Shawnee County physical and sexual abuse have risen 9.5% from January 1981 through December 1983.
    2. In previous years abuse cases accounted for about 34% of the overall referrals; this has steadily risen to projected 39% in F.Y. 1984.
      - a. These are often more difficult cases to work.
      - b. Involve more potential danger to the child.
      - c. More rapid response time is required.
      - d. Sexual abuse cases are confirmed over 50% of the time meaning these cases often require intense follow-up and family reconstruction.
      - e. These type cases very emotionally draining on workers.
- III. Continued fiscal support is needed.
  - A. Family support program:
    1. Purchase of service funds for day care and family counseling.
    2. Direct services of family support workers.
  - B. Legislative support needed for any preventative initiatives including:
    1. Parent education.
    2. Sexual abuse prevention.
      - a. Children are particularly vulnerable to sexual abuse because of their age, society's asexualization of them, and their relationship to the perpetrator.
      - b. Books, literature and other materials are available to help child learn to protect themselves, but it is not widely available.

Attch. 4