About Prevent Child Abuse North Carolina

For over thirty years, Prevent Child Abuse North Carolina has worked to ensure that our youngest citizens reach their full potential as the next generation of North Carolina leaders, parents, and workers.

We believe with the support of engaged communities and nurturing families, all of North Carolina’s children can thrive and have the opportunity to grow into caring, contributing, and healthy adults.

PCANC Goals

1. Support successful replication of evidence-based and promising family strengthening programs.

2. Influence public social norms that support the prevention of child maltreatment.

3. Support public policies to prevent child maltreatment from occurring in the first place.

PCANC Activities

- Support community-based agencies through consultation, training and technical assistance to launch and sustain effective family strengthening programs including:
  - The Nurse-Family Partnership
  - Incredible Years Parent Training Program
  - Strengthening Families Program
  - Circle of Parents Mutual Support Group Program
- Public awareness and media campaigns to support prevention
- Ongoing professional education and training
- Prevention Network Membership Services to 250 agencies across the state
- Education of policymakers and opinion leaders about effective prevention investments

Recognizing and Responding

Today’s Presentation Goals

- Quick overview: reporting law and rates
- Continuum of factors effecting reporting
- PCANC Activities
  - Training
  - Public Awareness
  - Considerations
Overview of Reporting in NC

- NCGS 7B-301 defines who should REPORT suspected abuse or neglect as: Any person or institution that has cause to suspect that a child is being abused or neglected is required by law to report it.
- NC reporting rate is approximately 54 per 1,000 children.
- Similar to other Southeastern states. Data does not indicate that North Carolina has lower reporting rates than other states.
- However, child maltreatment underreported opportunities exist to improve our response to maltreatment.

Barriers to Reporting

Continuum (please see handout)

- Unaware of legal obligation to report.
- Doesn’t recognize signs of maltreatment.
- Doesn’t know how to make a report or whom to make a report to.
- Reluctance to make a report because:
  - Doesn’t want to get involved (e.g. time, family privacy beliefs)
  - Doesn’t want to alienate a family.
  - Doesn’t want child to be taken away or offender jailed.
  - Confusion regarding an agency’s policies about reporting.
  - Has filed reports before – bad experience or doesn’t believe it made a difference.

PCANC Activities Addressing Reporting

- Supported by NC Division of Social Services
- Professional education/training of professionals working with children/families and citizens, and (2) public awareness.
- Efforts to "reframe" how we talk about the issue of reporting child maltreatment based on national communications research.
- Our goal: to help professionals/citizens see DSS as a community resource that supports healthy child development through parent support and family engagement (versus "punishing bad parents")
  - Recognizing and Responding
  - "Referring" families to DSS versus "Reporting"

PCANC Professional Education/Training

- Content:
  - NC laws about abuse and neglect.
  - How to recognize indicators for all four types of maltreatment and dependency.
  - How and where to make a referral:
    - Step-by-step from how to make the phone call to structured intake form to what DSS does as a result of a report.
    - Emphasis on Multiple Response System and how it works.
  - How to handle disclosures and work with families.
  - Barriers to reporting & overcoming them:
    - Examining personal beliefs and concerns
    - Administrative policies that agencies can put into place.

PCANC Professional Education/Training Format:

- Interactive, involves embedded quizzes to test knowledge.
- Discussion to examine barriers and brainstorm solutions.

Methods of Delivery:

- All day, on-site trainings open to any citizen and professional (2x/year).
- By request: on-site trainings for agencies/communities or at conferences (5-7x/year).
- 2 hour trainings/webinars (4x/year) open to any citizen/professional.
  - April 2011 for CCPTs specifically.
- Served approximately 300 professionals last year.

PCANC NEW Self-Guided Online Curricula

- Recognizing and responding curricula.
  - Information/tools targeted at different populations.
  - Embedded pre-post test.
  - Features taped interviews with parents who have been involved in CPS system, social workers, community agencies partnering with DSS.
  - Available anytime on-line.
- Populations:
  - General youth serving organizations.
  - Educators.
  - Child care professionals.
  - Faith community.
  - Medical providers.
- Target date: June 2011.
PCANC Public Awareness Activities

Materials:
- Recognizing and Responding Brochures
- R&R Workbooks
- R&R Posters
- R&R materials/information on website
- April Campaign materials

PCANC Public Awareness Activities

Distribution/Campaign Methods:
• April Campaign
  – R&R materials included in April packets mailed to stakeholders in all 100 counties including CCPT, DSS, DPH etc (total 1800)
  – Communities hold events throughout April and order materials to be distributed through their events
  – 100 R&R posters mailed to each CCPT last April to be posted throughout the county to increase awareness
  – April poster goes to 15,000 across NC which also directs to our website
• Successful Students Campaign
  – All materials on-line and every public and private school in NC gets packets of information which directs them to our website
• Materials upon request

Considerations to Improve Response to CAN

• What barriers are most significant and if addressed, most likely to improve community’s reporting rates
  – Our experience through training is that the biggest barriers to reporting are tied to many issues, however, citizen/professional perceptions of effectiveness the cpss system (will reporting make a difference) is very significant.
• How can we ensure that the child protection system’s capacity and the community’s capacity to support families is sufficient to meet need.
  – The desired outcome of increased reporting (child safety and well-being) is directly tied to the community’s capacity to provide effective services to those families (trauma treatment, evidence-based parenting programs, substance abuse, etc.).
  – Referring families is the first step of a much longer sequence of events to help children, and does not in and of itself, assure child safety and well-being.

Thank you!!