

Caregiver Handbook: Understanding Abuse and the Healing Process



The Children's Advocacy Center of Delaware

www.cacofde.org

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The Children's Advocacy Center of Delaware

The mission of The Children's Advocacy Center of Delaware (CAC) is to reduce the devastating long-term effects that child abuse has on children, their families and society through immediate, coordinated, child-focused services, education, and advocacy.

Our goals are to:

- Work with the child protection and legal systems to help you and your child
- Do the best job possible in finding out what may have happened to your child
- Help you and your child understand the investigation, prosecution, and treatment processes
- Help you and your child begin to heal

This handbook was developed to increase caregivers' understanding of child abuse and the traumatic impact abuse has on children, caregivers, and their loved ones in order to improve outcomes for children. We hope you find the information included in this handbook helpful. We encourage you to contact The Children's Advocacy Center of Delaware if you have any questions or need assistance obtaining resources for you or your child.



Visit our website for additional
information and resources:
www.cacofde.org

**THE
MULTIDISCIPLINARY
TEAM
(MDT)**

The Multidisciplinary Team

MDT Members

In Delaware, we are fortunate to have a highly trained and experienced multidisciplinary team (MDT) of professionals that respond to child abuse and neglect allegations. These professionals are from the following agencies/fields:

- Law Enforcement (LE)
Role: Determine if a crime has been committed
- Division of Family Services (DFS)
Role: Determine safety of a child
- Children's Advocacy Center (CAC)
Role: Provide forensic interviews and other services for the child and family
- Department of Justice (DOJ)
Criminal Role: Determine if a case can be prosecuted
Civil Role: Determine if safety issues should be brought before the court; Determine if other penalties should be applied
- Victim Advocates
Role: Offer support and resources to the child and family
- Mental Health Professionals
Role: Provide assessment and counseling services
- Medical Providers
Role: Conduct medical evaluations and provide treatment

It is important to know the team members involved in your child's case and to understand each member's role so you can work with the team effectively to support your child's best interests.

The Multidisciplinary Team

Working with the MDT

The multidisciplinary team is working to gain the best outcome for you and your child. Working together with the team members involved in your child's case is critical. The team approach to these cases keeps the process as simple as possible and communication open between the agencies involved. To assist with this process, be mindful of the following:

- Cooperate with team members. It may feel overwhelming because they are expecting a lot from you during a very stressful time.
- Provide as many facts as you can. Team members need to gather information that is necessary and vital to the case and to your child's welfare.
- Be prepared to speak with each team member separately. Team members share information with each other but each has a different role.
- Remain calm when communicating with your child. Your child may misread your emotions and feel responsible for your reactions or responses.
- Understand that it can be difficult for children to share information with people they do not know. It is important to let your child know that team members are there to help.
- Avoid questioning your child or pressuring your child to talk. Allow your child to share his/her experience in his/her own words and in his/her own time.
- Remain calm when communicating with team members. It is a difficult and emotional time. Losing control can hurt the case and overshadow the needs of your child.

The Multidisciplinary Team

MDT Investigation Process

As a caregiver it is important to know the steps involved in an investigation of child abuse. The following steps outline the general flow of child abuse cases in Delaware.

- A suspicion of abuse is reported to authorities, either Law Enforcement and/or the Division of Family Services.
- An interview with the child is conducted, usually at the Children's Advocacy Center.
- A Medical Provider will conduct a medical exam, if necessary.
- Law Enforcement and/or the Division of Family Services will continue the investigation.
- The Family Resource Advocate at the Children's Advocacy Center (and/or other MDT Victim Advocates) will discuss counseling needs with caregivers and make referrals to Mental Health Professionals, as appropriate.
- Law Enforcement and the Division of Family Services will communicate with the Department of Justice to determine if criminal or civil actions are appropriate.
- The Department of Justice will take the lead in preparing for court if either criminal or civil actions are taken.*

* The Criminal System is concerned primarily with guilt or innocence of the accused and often uses a trial to decide on the person's guilt or innocence. The Civil System is concerned primarily with the safety of the child and focuses on issues like custody, visitation, and counseling. A number of different court hearings can be held to decide these issues. The decisions in the civil system do not depend on whether the criminal system finds guilt.

The Multidisciplinary Team

Preparing for Court

If your case continues through the legal system, professionals with the Department of Justice will help you by providing information about the court process, answering questions, and explaining the types of victim assistance programs and services for which you may be eligible. If there is to be a trial, professionals from the Department of Justice will prepare you and your child for court. Some information they will provide includes:

- Directions to the courthouse
- Information about transportation and parking
- A tour of the courtroom and the waiting room
- Appropriate dress code for court
- Items you can and cannot bring into the courthouse
- Items your child can bring into the courtroom or waiting room

Going to court can feel overwhelming. Some fears you and your child may experience are:

- Seeing the accused again or his/her family members
- Concerns about who will be in the courtroom, including the media
- Worrying about not being believed
- Wondering if someone supportive will be in the courtroom
- Thinking the court experience will be like what is shown on television

If you are going to testify in the case, you may not be allowed in the courtroom when your child is testifying. In some cases, it might be easier on your child if you are not in the courtroom because your child may be worried about how you would feel hearing all the details of his/her experiences. However, your child should never be in the courtroom without a support person.

Although it can be emotionally draining for you and your family, preparing for court is very important to your child's case. It is understandable that some people do not want their child's case

The Multidisciplinary Team

Preparing for Court (cont.)

to go to court or just wish the court process was over. However, the chance to speak up in court about what happened can be an important step in the healing process for both you and your child - whether or not the accused is convicted.

As you are involved in the legal process, it is important to know that the Delaware Department of Justice has a Victims Bill of Rights and an online resource guide outlining services which may be helpful for you or your child.

For information on the

Delaware Victims Bill of Rights

and

The Victims Guide

go to:

www.attorneygeneral.delaware.gov

Find "Public Resources"

Click on "Victims Rights"

Click on "Victims Guide"

TYPES OF ABUSE

Types of Abuse

Physical Abuse

Physical abuse is any physical force or action that results in, or may result in, a non-accidental injury of a child. Physical abuse is usually connected to physical punishment or is confused with child discipline. Although an injury resulting from physical abuse is not accidental, the abuser may not have intended to hurt the child. Physical abuse may happen one time or repeatedly. Some abusive behaviors include:

- Punching
- Kicking
- Shaking
- Stabbing
- Hitting/Beating
- Poisoning
- Pinching/Plucking
- Burning/Scalding
- Biting
- Throwing
- Choking
- Suffocating
- Holding under water
- Pulling hair or ears

These behaviors, and other abusive acts, can result in internal or external injuries, or in the most extreme cases, child death. Some signs of physical abuse may include bruises, cuts, welts, scratches, burns, broken bones, or internal injuries. Other signs of physical abuse may include unexplained and/or repeated injuries. Additional indicators might include changes in the child's behavior, such as the child becomes hyperactive, disruptive, aggressive, complacent, non-compliant, or withdrawn.

Physical abuse often involves visible external injuries making it easier to detect than other forms of abuse. However, injuries may be intentionally or unintentionally concealed by the child's clothing. Additionally, children may be made to miss school, lie about injuries, or to conceal them with make-up, glasses, hats, etc. While many signs of physical abuse can be apparent, internal injuries may only be revealed through symptoms or medical examinations. Some symptoms of internal injuries may include stomach pain, nausea, vomiting, extreme fatigue, loss of appetite, headaches, blurred vision, sore throat, and loss of consciousness.

Types of Abuse

Witness to Abuse or Violence

Witnessing abuse or violence occurs any time a child sees, hears, or is used as part of an abusive or violent act. This can include witnessing physical abuse, sexual abuse, intimate partner violence, or school or community violence. Children may witness abuse or violence one time or repeatedly. They may witness the same type of abuse over and over or they may witness various types of abuse and violence throughout their childhood. These are some of the ways children may experience witnessing abusive or violent acts:

Children may see:

- Hitting, punching, stabbing, shooting, sexual assault
- Weapons, injuries, blood, broken or destroyed objects
- Pets being mistreated, injured, or killed
- Someone being taken to the hospital or to jail

Children may hear:

- Arguing, screaming, crying, threats of physical harm
- The sound of hitting, kicking, punching
- Things being thrown or broken
- Doors slamming, cars crashing, gunshots, alarms, or sirens

Children may be:

- Forced to watch or participate
- Held hostage or used as a shield
- Used as a spy; interrogated for information about the victim
- Manipulated by the abuser or forced to lie

These acts can, but do not necessarily, include direct physical harm to the child. Generally these acts include harm or injury to another person, such as, a sibling, friend, parent, teacher, neighbor, or stranger. Oftentimes, the impact that witnessing abuse or violence has on the child is minimized or overlooked. However, witnessing such acts in childhood can lead to poor adult health and varying degrees of emotional and social harm. For example, children who experience violence may have unexplained aches and pains, sleep difficulties, regressive behaviors, and increased separation anxiety. They may also become hypervigilant, having worries, fears, and startle reactions to sudden movements or loud noises.

Types of Abuse

Sexual Abuse

Sexual abuse is any sexual act between an adult and a child or between two children when one exerts power over the other.¹ Sexual abuse generally involves forcing, coercing, or persuading a child to engage in any type of sexual act.² Sexual abuse may involve one sexual act or many acts over a period of time.

Sexual acts may involve touching or non-touching behaviors. Touching behaviors may include kissing, touching or rubbing private parts (clothed or unclothed), oral and anal contact, penetration of private body parts, and sexual intercourse. Non-touching behaviors may include exhibitionism (exposing private body parts), exposure to pornography (making the child view, read, or participate in making pornography), voyeurism (secretly viewing others to see private body parts or sexual acts), and communicating in a sexual manner in person, by phone, or on the Internet.

Sexual abuse is often a traumatic experience for children and teens.³ These acts may cause physical injury; however, the acts can be emotionally distressing with or without physical injury. Sexual abuse can be a traumatic event that upsets and overwhelms a child's ability to cope, may interfere with his/her daily life, and may require help from mental health professionals.

Sexual abuse may affect a child's behavioral, emotional, and/or physical well-being. Some signs of sexual abuse may include:

- Nausea or headaches
- Crying or sadness
- Drug or alcohol use
- Withdrawal/avoidance of others
- Clinging to caregivers
- Changes in school performance
- Sexually inappropriate behavior
- Wetting or soiling accidents
- Changes in appetite
- Nightmares or sleep problems
- Changes in mood
- Avoidance of school or friends
- Aggressiveness or anger
- Self-harming behaviors
- New fears and phobias
- Attention-seeking behaviors

Sexual abuse often does not involve visible signs or injuries making it harder to identify. Furthermore, the characteristics of child sexual abuse and the grooming process, which will be discussed on page 14, make it extremely difficult for children to tell. For example, children are taught to listen to and trust adults. They tend to believe what adults tell them rather than trusting their own judgment and feelings. As a result, if an abuser tells the child that what is happening is okay, the child may doubt his/her own feelings about the abuse. Additionally, a caregiver's response may cause further confusion for a child. If a caregiver's initial response to being told about the abuse is, "This can't be true!", the child may again question his/her own judgment and feelings.

Other feelings children may have in regards to sexual abuse that may keep them from telling include feelings of embarrassment, shame, or guilt. Children who have experienced sexual abuse often have many fears, to include:

- Not being believed
- Their own safety, the safety of others, abuser, pets
- How others will respond or react
- Being removed from the home or breaking up the family
- Being blamed for the abuse
- Being looked at differently by everyone
- Someone else will be abused
- The abuser will go to jail
- Caregiver cannot handle what happened
- Caregiver will not love them anymore
- Losing relationships
- Further or worse abuse

Most of the time, children are sexually abused by a family member or household member. Being sexually abused by someone they know or love can make telling even more difficult.

The relationship with the abuser along with these fears not only keeps children from telling about what happened to them, but may also cause children to recant (take back what they reported).

^{1,2,3} Darkness to Light at www.d2l.org

Types of Abuse

Sexual Abuse – The Grooming Process

Some caregivers wonder how it is possible for their children to be sexually abused. Abusers use many tactics to gain access to children to abuse them. This is an intentional, planned process of manipulation known as the grooming process. The tactics abusers use include:

Seeking out an approachable child: Abusers pick children who are easy to access (i.e., relatives, friends, and neighbors). They may also seek children who have emotional needs for friendship and attention.

Establishing relationships with the child, caregiver, and others: Abusers find ways to build trust and relationships with children, their families, and others in the children's lives and the community. Abusers then manipulate these relationships to meet their own needs.

Breaking down the child's resistance to touch: Abusers find ways to touch children through normal activities in an effort to make children comfortable receiving touches from them. Abusers may engage children with a lot of physical contact, like wrestling or tickling. Then, when the touches become sexual, children can be confused about the intent of the touches.

Assessing the process: Abusers continually evaluate how the children, caregivers, and others are responding to the manipulative steps abusers have taken. This allows abusers to determine what else they may need to do to accomplish their goal of having sexual contact with children.

Finding ways to isolate a child: Abusers find excuses to be alone with children so they can sexually abuse them. For example, they may offer to babysit, invite them to sleep over, or take them camping.

Blaming the child and keeping the secret: Abusers manipulate children's responses and emotions about the abuse in an effort to make children feel responsible and/or keep the secret. Abusers may say things like, "No one will believe you." or "If you tell, people will think you're bad... I will go to jail... or you will be taken from your family."

THE CAREGIVER

The Caregiver

Caregiver Feelings

When abuse is reported, it is normal for caregivers to experience many different emotions. Allegations of abuse can affect life in many ways. Although experiences are individual, there are common thoughts and feelings caregivers sometimes share:

Guilt and self-blame: You may feel it is your fault. You may feel as though you did not protect your child, but you are not responsible for someone else's actions. The best thing you can do is support your child.

Grief and loss: You may feel an overwhelming sense of grief in relation to the losses you, your child, and loved ones have experienced as a result of the abuse. For example, relationships with some friends and family members may have become strained or ended altogether. Identifying what you have lost is important because caregivers need to grieve each loss.

Denial: Your first reaction may be to not believe or accept the possibility that abuse really happened. Or you may believe it happened but that no real harm was done. Caregivers often experience denial because it is too overwhelming to accept that the abuse occurred. For some people, it takes time to overcome denial and face the realities of abuse.

Anger: You may feel angry for a variety of reasons. You may feel angry at the abuser for what he/she did. You may feel angry at yourself and others. You may even feel angry with your child. It is important to recognize that what happened is not your fault or your child's fault and it can be easy to misplace angry feelings during such an emotional time.

Sadness, depression, and withdrawal: You may experience feelings of sadness and depression. These feelings can be accompanied by sleep trouble, changes in appetite, moodiness, or withdrawal. Withdrawal occurs when caregivers find themselves lacking interest in daily activities, lacking motivation to accomplish tasks, and isolating themselves from others. To assist you in understanding and processing these thoughts and feelings it may be helpful to speak with a counselor.

Helplessness: You may find yourself feeling helpless, like there is nothing you can do to make the situation better. You may feel like you have no control over what is happening because you do not know what to expect or what to do. It is important to recognize that you have the ability to help your child heal. Processing these feelings with a trusted friend or a professional may help you advocate for yourself and your child.

Shock and numbness: You may feel shocked when you learn that your child has been abused. Some people also experience numbness because they are overwhelmed with all the feelings and emotions associated with the abuse. These feelings can make you feel paralyzed, unable to make decisions, or unable to respond to the needs of your child. Understanding more about the process and the services available will help.

Hurt and betrayal: Feelings of hurt and betrayal are very common. You may feel hurt from the loss of your child's innocence, that your child did not tell you about the abuse, or any number of reasons. In addition, you also may feel betrayed by people, organizations, or the community as a whole. Feelings of hurt and betrayal can lead to feelings of mistrust and may make you want to isolate yourself and your child. It will be important to build a support system by surrounding yourself and your child with people on whom you can depend.

Concern about money: You may be worried about finances because of lost income or additional expenses due to the abuse, such as counseling, medical exams, or time away from work. You may be eligible for financial assistance and there are professionals who will work with you to access these services.

Fear of violence: You may fear the abuser will try to harm you, your child, your loved ones, or him/herself. If you have safety concerns, professionals will help you access appropriate services. If there is a threat of immediate danger, call 911.

Fear of drug or alcohol abuse: You may be afraid that you will abuse drugs or alcohol because of the stress of the abuse. Professionals who have experience working with addictions can help you through this difficult time.

The Caregiver

Communicating with Others

One challenge caregivers sometimes face is what to say to others about the abuse. Prior to talking to others, first consider the feelings and needs of your child. Be aware that your child may feel embarrassed or responsible for the abuse and may be concerned about others knowing. To respect your child's need for privacy and dignity and to allow your child some sense of control, consider letting your child know who you will be discussing the abuse with, and when appropriate, let your child have some choice about who is told. Additionally, if there is an active investigation or pending court action, you will need to avoid discussing details with people associated with the case, including the abuser, other possible victims or witnesses, and their families.

As this will be a stressful time, you will probably want to talk with others about your child's abuse and the impact it has had. It is important to keep in mind how the people you may tell might respond or react. Being prepared by thinking about people's responses in advance can help you decide who will be able to handle the information and who will be able to provide support to you and your loved ones. Keep in mind that most people have very little knowledge about child abuse. Remember that while they may be supportive and helpful, child abuse is a very personal and distressing topic. Think about how these people have responded to other stressful situations in the past.

Even those who care about you most may not know what to say or how to respond. Responses and reactions vary widely and may include sincere care, concern, and interest; horror; disbelief; disgust; or disinterest. Additionally, some people may respond by asking about intimate details or making inappropriate comments about the abuse. Some examples of such questions or comments are listed here with ideas for possible responses:

"What exactly happened to your child?"

- "I would prefer to respect my child's/family's privacy."

"Are you sure your child didn't make it up?"

- "Although I wish it did not happen, I fully support my child."

“Why didn’t you know it was happening?”

- “I have asked myself that many times, but I know that secrecy is a big part of the abuser’s manipulation.”

“If it were my child, I’d just move away.”

- “I appreciate your concern, but we are taking other steps to deal with what has happened.”

Some other thoughtful responses include:

- “Thank you for caring about us; if we need you, I will definitely let you know.”
- “My child could use your support, but please do not question him/her about what has happened.”
- “Thank you for your concern, but this is under investigation right now and we are not supposed to talk about it.”

It will also be important to help your child be prepared for questions or comments from others. Specifically, if you feel it is appropriate, you could let your child know who knows about the abuse so your child is not surprised by questions or comments from those people. Let your child know that he/she does not always have to respond to comments or questions. You can give your child permission to say, “My mom and/or dad told me not to talk about it.” or “Thank you for your concern, but I’d rather not talk about it.” If someone says, “I’m sorry about what happened to you,” your child can respond with a simple, “Thank you.”

Remember that children may want to share their experiences with others. Talk with your child about who he/she can talk with. It is important to set boundaries so that your child understands this is not a topic to discuss with everyone; however, be careful not to make your child feel like this is a “dirty secret,” as this could cause your child to feel shameful.

Planning for possible responses, reactions, questions, or comments from others can help you and your child feel more prepared for these interactions. Although there will be professionals who you and your child will need to talk with, remember that you and your child have a right to decide what information you will share with others.

The Caregiver *Self-Care*

As a caregiver, this is likely to be a very difficult and stressful time for you. Stress can affect your overall health and ability to cope. As your well-being is very important, you need to find time to take care of yourself and relieve stress. Taking care of yourself means taking the time to do something just for you on a regular basis. This may be difficult to do, but it is in the best interest of you and your child.

Some suggested activities include the following:

- Take a walk
- Have lunch with a friend
- Practice deep breathing
- Watch a movie
- Exercise
- Take a drive
- Read
- Meditate
- Listen to music
- Work in a garden
- Take a bike ride
- Spend time with a pet

Another way to reduce stress is to have a healthy support system. It is important to surround yourself with people who are helpful and positive. Have contact information for these people easily accessible for times of need. Remember that you do not have to handle this alone.

In addition to your friends and family, your support system can also include professionals. For example, a counselor can help you work through feelings and emotions related to the abuse and teach you additional self-care techniques.

**SUPPORTING
YOUR
CHILD**

Supporting Your Child

Things You Can Say & Do

The single most important factor affecting the child's recovery is the support of the caregiver. Saying and doing things to show love, support, and protection for your child will help with the healing process. This can include saying and doing things for your child that demonstrate care and concern and help establish and maintain a sense of emotional and physical safety.

Here are some things you can say that may be helpful for your child:

- I'm sorry this happened to you.
- I will take care of you.
- You are not alone in this.
- I believe you.
- It is not your fault.
- I'm glad I know about it so I can help.
- I'm not sure what will happen next, but I am here for you.
- I'm upset but not with you; I'm upset with the person who did this. He/she is responsible for what happened.
- You may see me cry because what happened makes me sad, but I will be okay and so will you.
- It is confusing to know how to feel; whatever you feel is okay.
- I don't know why the person did it; he/she has a problem. I will find someone we can talk with to help us understand what has happened.
- You can still love the person who did this and at the same time be angry or even hate him/her for what happened.

Here are some things you can do that may be helpful for your child:

- Learn about child abuse.
- Understand the impact of abuse.
- Know that all children will not respond the same to abuse or violence.
- Stay close and assure your child that you will do all you can to keep him/her safe.
- Be available if your child wants to share his/her thoughts or feelings.
- Do not question your child about the abuse.

- Do not allow your child to have contact with people who are not supportive of your child.
- Teach your child about personal safety.
- Build a new normal routine that is safe and secure.
- Observe your child's language, behaviors, and emotions for signs of trauma or poor coping.
- Know that children see and hear everything - your child will be observing your language, behaviors, and emotions.
- Consider counseling for your child and yourself.
- Teach your child basic relaxation techniques, such as deep breathing.

It is also important that you keep your child from having contact with the abuser. This might be challenging if the abuser is a significant person to you. Remember that your child relies on you to make healthy, protective decisions.

Supporting Your Child

Understanding Trauma

A traumatic event is an experience that is extremely emotionally distressing. This may be an event that happens directly to the person or is witnessed by the person. Many times during a traumatic event the person fears for his/her safety and/or the safety of others. There are many different kinds of traumatic events, such as physical abuse, witness to abuse or violence, sexual abuse, loss of a loved one, natural disasters, car accidents, house fires, and divorce.

People react in different ways to traumatic events based on many things, such as age when the trauma occurred, the severity of the trauma, a history of other traumas, and support received from others after the trauma occurs. Trauma may affect a person's behavioral, emotional, and/or physical well-being.

Some symptoms or effects of trauma include:

- Difficulty sleeping or nightmares
- Not wanting to be alone; separation anxiety
- Constantly thinking about the abuse or event
- Efforts to avoid talking about the abuse or event
- Increased fear in both safe and risky situations
- Feelings of shame, guilt, or low self-esteem
- Regressed behaviors
- Difficulty concentrating; easily distracted
- Showing no feelings at all; seemingly numb
- Difficulty staying still
- Thoughts about death or dying
- Medically unexplainable headaches, stomach aches, etc.
- Decline in grades or performance at school
- Mood swings, irritability, or problems with anger
- Avoiding people, places, or things that remind the child of the abuse or event

People who experience traumas in childhood are more likely to have poor physical or mental health; smoke, drink, or use drugs; have multiple sexual partners; and/or are at a higher risk for intimate partner violence (Adverse Childhood Experiences Study). It is important for people who have experienced any type of trauma to consult with a mental health professional to determine if counseling is recommended.

Supporting Your Child *Counseling*

The Children's Advocacy Center can help connect you and your child with appropriate counseling resources to help overcome the effects of trauma. Here are some common questions caregivers ask about counseling:

What is counseling? Counseling is an opportunity for your child to meet with a trained professional who is able to establish goals for his/her treatment and a pathway toward achieving those goals. For children who have experienced abuse, counseling will likely include research-based treatments that are proven to be effective in helping children deal with trauma.

How will counseling help my child? Counseling can provide a safe place for your child to learn about what he/she is feeling, such as anger, fear, or sadness. The counselor can then work with your child to help him/her express these feelings in a healthy way. The counselor may also provide positive messages regarding self esteem. This could include that the child did not do anything wrong and that the abuse was not his/her fault.

How long should my child attend counseling? The length of time in counseling varies. Your child's counselor will help your child set goals to be reached in counseling. An individual treatment plan will be made and reviewed periodically. Your child may need to seek counseling at different times throughout his/her life when going through periods of change such as puberty, leaving home, or marriage.

How do I request counseling for my child? You can request a referral to be made for your child through any of the professionals dealing with your child's case. The Family Resource Advocate at the Children's Advocacy Center will help you with referrals that are appropriate for your child and family.

How do I pay for counseling for my child? If your child does not have insurance or your insurance does not cover mental health services, resources are available. Please call the Victims' Compensation Assistance Program (VCAP) at 302-255-1770. The Family Resource Advocate at the CAC will assist you in filing for financial assistance through VCAP.

Supporting Your Child

Choosing a Counselor

There are many types of mental health providers including psychiatrists, psychologists, licensed counselors, and clinically trained social workers. Mental health providers are often referred to as counselors or therapists. What is important is that you select a counselor with appropriate training and qualifications to work with a child who has experienced abuse. To find a counselor, talk to members of the multidisciplinary team for their recommendations. Specifically, the Family Resource Advocate (FRA) at the Children's Advocacy Center will assist you in finding a counselor.

When helping you choose a counselor for your child, the FRA will consider many factors, such as your location, your access to transportation, and insurance. Additionally, the FRA will consider the age of your child, any special needs your child may have, and the type of counseling most appropriate given your child's experiences. Many children experience abuse as a traumatic event. If this is the case, your child may be referred to Trauma-Focused Cognitive Behavioral Therapy (TF-CBT).

If you choose to find a counselor without the assistance of the FRA, consider asking the following questions to decide who will be best suited to work with you and your child.

- Are you licensed? How long have you been practicing?
- Do you have experience treating children who have been abused and their families?
- Do you have experience treating trauma in children?
- What kind of treatment do you usually use with children? Do you feel this treatment would be effective with my child?
- How long would you expect my child's treatment to last?
- What are your fees? Do you accept my insurance?

While working to identify someone who is qualified to meet the needs of your child, also consider how you feel about this person, since your child's treatment will involve working together as a team. A good relationship is critical, so choose a counselor with whom you feel comfortable.

RESOURCES

Resources

HOTLINES

Division of Family Services

Child Abuse Hotline.....1-800-292-9582

Visit www.kids.delaware.gov for further information or to make an online report of child abuse or neglect.

Division of Prevention and Behavioral Health Services

Mobile Response and Stabilization Services.....1-800-969-4357

www.kids.delaware.gov/pbhs

Child, Inc.

Domestic Violence Hotline.....302-762-6110 (NC)

302-422-8058 (K&S)

www.childinc.com

Contact Lifeline

Rape Crisis Hotline.....302-761-9100 (NC)

1-800-262-9800 (K&S)

www.contactlifeline.org

Delaware Helpline.....211

1-800-464-HELP

www.delaware211.org

VICTIM SERVICES

Department of Justice

Victim/Witness Program.....302-577-8500 (NC)

1-800-870-1790 (K&S)

www.attorneygeneral.delaware.gov/criminal

VICTIM SERVICES (cont.)

Victim Information and Notification

Everyday (VINE)1-877-338-8463

www.vinelink.com

Family Court of Delaware

Protection From Abuse Orders302-255-0300 (NC)

302-672-1000 (K)

302-855-7400 (S)

www.courts.delaware.gov/help/pfa/

FINANCIAL ASSISTANCE

Victims' Compensation Assistance

Program (VCAP).....302-255-1770

www.attorneygeneral.delaware.gov/vcap

NC=New Castle County / K=Kent County / S=Sussex County

MDT Information

Law Enforcement: _____

Division of Family Services: _____

Department of Justice: _____

Children's Advocacy Center of Delaware: _____

Medical Provider: _____

Mental Health Provider: _____

