



University of Pittsburgh

SCHOOL OF
Social Work

*Empower People
Lead Organizations
Grow Communities*

PA Child Welfare Resource Center

209: Family Reunification and Case Closure in Child Sexual Abuse Cases



Competencies

110-2: Assessment: The child welfare professional gathers relevant information and engages in critical thinking, utilizing a strength-based perspective and the competency model leading to an ongoing, accurate, and comprehensive assessment process.

110-4: Planning: The child welfare professional facilitates the planning, development, and coordinate of relevant information to a well reasoned sequence of strategies and goals to achieve sustainable and beneficial results.

110-7: Professionalism: The child welfare professional comprehends and applies social work and child welfare ethics and principles to interactions and communications with children, youth, families, colleagues, and team members.



Learning Objectives

Participants will be able to:

- Identify factors that place a child at risk for sexual abuse;
- Identify and implement the key ingredients of safety planning in a sexual abuse case;
- Determine critical treatment milestones in preparation for reunification or case closure; and
- Carry out the process and ingredients of a reunification plan and case closure.



Agenda

- Introduction
- Dealing With Personal and Professional Issues Regarding Sexual Abuse
- Assessing Safety and Risk
- Assessment and Treatment
- Determining Readiness and Reunification
- Techniques in Reunification and Case Closure
- Closing and Evaluation



Protective Capacities: Three Areas of Functioning

- Behavioral
 - Demonstration of protection of the child
- Emotional
 - Motivation to protect the child, feelings and attitude of identification with the child
- Cognitive
 - Knowledge, intellect, understanding and perceptions to protect the child



Quote Regarding Safety of Child

“Effective and responsible sex offender management requires that while addressing the changing needs of offenders, the safety and protection of victims must remain an overriding consideration.”

(Center for Sex Offender Management, 2005)



Stages of Treatment

- Crisis Intervention
- Individuation
- Dyadic
- Family Resolution



Family Treatment Milestones

- Attainment of individual therapeutic goals for the victim, NOP, siblings and perpetrator
- Restoration of relationships between victims and NOP and between victim and perpetrator if reunification is planned
- Understanding that the victim was not to blame for the abuse and that the perpetrator is wholly responsible



Family Treatment Milestones (Continued)

- Development of a family safety plan
- Establishment of appropriate physical and psychological boundaries for all family members
- Establishment of an appropriate marital relationship and communication pattern for the couple if reunification is planned



Statistics Related to Victims Recanting Abuse

“In an examination of 116 children with substantiated histories of child sexual abuse, Sorenson and Snow (1991) found that at various points during the process of disclosure:

- 72% of the victims denied that the abuse occurred;
- 78% tentatively offered an acknowledgement of the abuse
- 22% recanted
- the vast majority (93%) ultimately reaffirmed their allegations of abuse”

(CSOM, 2005)



Treatment Milestones for Reunification

- Family members must have established appropriate physical and psychological boundaries.
- The couple must have established an appropriate relationship and communication pattern, if reunification is the goal.
- Development of and agreement to a safety plan by all members of the family.
- Acceptance of the occurrence of abuse by all family members, placing responsibility for the abuse solely on the perpetrator.



Treatment Milestones for Reunification (Continued)

- Victim has made significant progress in therapy and expresses a genuine desire for reunification.
- NOP has demonstrated the ability to protect the victim and places the needs of the victim as their first priority.
- All team members are able to agree that reunification or case closure is appropriate.



Desired Results of Clarification Sessions

- Responsibility for abuse consistently placed on perpetrator
- Recognition of misperceptions and thought distortions
- Change in family structure and organization

(CSOM, 2005)



Desired Results of Clarification Sessions (Continued)

- Understanding and recognition of risk factors, warning signs and behavior patterns
- All family members to “have a voice”
- Establishment and agreement of a relapse prevention plan and safety plan

(CSOM, 2005)



Instructions for Visitation Activity

1. Therapeutic Setting
2. Supervised by Professional in the Community Setting
3. Supervised by Family in the Community Setting
4. Supervised by Family in the Home Setting
5. Overnight Visitation



Instructions for Visitation Activity (Continued)

- Who can be present?
- What are the “ground rules” (i.e. touching, whispering, what can be brought along, etc.)?
- Under what circumstances would you end the visit?
- Any other rules you think would be important?



Factors to Consider for Case Closure: Reunification Cases

- Rules and boundaries established and followed
- Family members continue to participate in treatment
- A safety plan has been established and adhered to by the family
- Ability of family to acknowledge the risk of abuse continues vigilance in following the safety plan



Factors to Consider for Case Closure: Reunification Cases (Continued)

- The family has adequate support systems
- Other issues have been adequately addressed
- A plan is in place for reporting any re-abuse of the victim or any other child in the family



Factors to Consider for Case Closure: Non-reunification Cases

- Rules and boundaries established and are followed
- Family members continue to participate in treatment
- A safety plan has been established and adhered to by the family



Factors to Consider for Case Closure: Non-reunification Cases (Continued)

- Rules for continued contact between the victim and the perpetrator have been established (if appropriate) and the NOP is willing and able to follow the rules
- The NOP or caregiver demonstrates the ability to protect the child
- A plan is in place for reporting any re-abuse of the victim or any other child in the family



Female Offender Statistics

- Females account for less than 10% of all adults and juveniles reported for sex crimes
- Arrests of adult women for sex-related offenses have recently decreased; however, have increased for adolescent girls in the juvenile court



Female Offender Statistics (Continued)

- Evidence exists that sexual victimization perpetrated by females is likely to be under-identified and under-reported
- Societal and professional denial of sexual abuse perpetrated by women, particularly when the offender is the child's mother, is prevalent
- Female perpetration of sexual abuse has increased potential for the presence of a male co-offender