



A GUIDE TO  
*hope & healing*



The background is a soft watercolor wash in shades of purple, lavender, and light blue. Several stylized butterfly silhouettes are scattered across the page, some in a darker teal color and others in a lighter blue. The overall texture is painterly and dreamy.

*"We delight in the beauty of  
the butterfly, but rarely admit  
the changes it has gone through  
to achieve such beauty."*

*- Maya Angelou -*





## Letter From Lauren

Fifteen years ago, I disclosed the daily physical, sexual and emotional abuse I had been enduring since the age of 11 at the hands of my family's trusted, well-loved live-in nanny. At just 16 years old, I felt like I had been carrying the weight of the world with this deep, dark secret, and I could no longer bear the guilt, shame, desperation or isolation. Despite my fears, when I did find my voice, my dad said the three words I most needed to hear: "I believe you." Then: "I love you." In that moment, nothing else mattered and I knew I would be okay.

The days, months and years that followed were often rocky, challenging and complex. As I began my healing journey with the support of family, therapists and friends, I faced many roadblocks in the form of insensitive peers, PTSD, communication with my abuser... my road from victim to survivor was often one step forward and three steps back. But after doing the work and committing to healing, I now consider myself to be a thriving survivor of child sexual abuse. More than that, I am a woman, wife, daughter, sister, aunt, educator, advocate, founder and CEO... I am happy and whole, and your child will be, too.

Over the years at the helm of Lauren's Kids, I have often likened the journey we go through, from victim to survivor, to that of a butterfly. Maya Angelou said, "We delight in the beauty of the butterfly, but rarely admit the changes it has gone through to achieve such beauty."

As with every victim of sexual abuse, a piece of myself, my heart, my childhood is missing – stolen from me by my abuser. This is a painful truth. But, while I will never be able to recover that piece, I now see that it has undergone a transformation of healing to become something new. It has become something beautiful and full of life and love.

Whether you read *A Guide to Hope & Healing* from cover to cover, or jump to sections of your choosing, it is my hope that this guide will help your family on the path to survivorship and thrivership, and serve as a road map on your healing journey.

Sincerely,



**Lauren Book, M.S.Ed.**  
Founder/CEO, Lauren's Kids



## About This Guide

A child's disclosure of sexual abuse brings many, often overwhelming, thoughts, feelings and questions. "How could this happen?" "What should I do?" "What does my child need from me?" "How will we move forward as a family?" These questions are entirely normal.

*A Guide to Hope & Healing* was developed by the Lauren's Kids foundation in conjunction with Florida's children's advocacy centers, the Florida Council Against Sexual Violence, therapists and parents of survivors who have walked this path. It provides essential information and answers questions that often arise after a child's disclosure of abuse. This guide addresses common concerns and supports parents, caregivers and children on a path to healing.

By reading this guide, you will learn how to navigate the process of reporting abuse to the authorities, get information about what to expect during the follow-up investigation, learn how to manage the emotional stress that inevitably follows disclosure and understand the steps to process the abuse as a family.

We know that families can get through the difficult experience of their child's sexual abuse and become stronger in the process.

This guide will help you channel your strengths as a family and gain critical information, ideas and practical tools for healing.

### *Accessing the Guide*

This guide is available in both a print and digital format. The online version contains videos and audio clips in English and Spanish to enhance the learning experience and help families anticipate some of the daunting experiences a child faces upon disclosure of abuse, such as forensic interviews, court appearances and reactions from extended family and peers. The print version of the guide is available in English and Spanish. Access the online version by visiting [LaurensKids.org/HopeandHealing](https://LaurensKids.org/HopeandHealing).

*A Guide to Hope & Healing* is designed to be a resource for parents and caregivers at any stage of the abuse disclosure and healing process. Whether you suspect abuse, your child has recently disclosed abuse or you are further along the path of disclosure and recovery, knowledge is power. You may choose to read and participate in exercises from this guide from beginning to end, or jump to sections and topics of special interest to you. Whatever your approach, the content in this guide serves as a road map to recovery and healing through topics such as: safety planning, reporting sexual abuse and how to create a new normal.

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*Lauren's Kids was founded by child advocate, former classroom educator and child sexual abuse survivor Lauren Book. The organization educates adults and children about sexual abuse prevention and safety topics through an in-school curriculum and speaking engagements around the country and the world. The goal of Lauren's Kids is to create a world where the sexual abuse and exploitation of children is not tolerated. Lauren's Kids is a designated 501(c)(3) organization.*



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# About Child Sexual Abuse: You & Your Family Are Not Alone

While a disclosure of sexual abuse may feel isolating, remember that neither you nor your child are alone in this experience. In fact, 1 in 3 girls and 1 in 5 boys will be victims of sexual abuse before their 18th birthday,<sup>5</sup> and healing from sexual abuse is absolutely possible with guidance and support.

The good news is that despite a 2 percent rise in sexual abuse cases in 2012, there has been a steady decline since the early 1990s, which correlates with the growing trend in public awareness of child abuse. Early prevention efforts in schools and communities that educated adults about the risk of sexual abuse and children about “personal safety” had an enormous effect on public awareness. The following statistics shed light on the scope of the problem of childhood sexual abuse.

## Statistics

- ✦ In 2012, nationally 686,000 children were victims of abuse and neglect. Of these children, 9.3 percent, or 63,798 were victims of sexual abuse.<sup>1</sup>
- ✦ In 2012, Florida Department of Children and Families served 53,341 children. Of these, 5,601 (10.5 percent) were sexual abuse cases. The number of sexual abuse maltreatment cases more than doubled from the previous year when 4.6 percent of cases were for sexual abuse.<sup>2</sup> As disclosure and reporting become more common, the number of sexual abuse cases likely will increase.
- ✦ There are more than 42 million survivors of sexual abuse in America.<sup>3</sup>
- ✦ More than 90 percent of sexual abuse is committed by someone the victim knows, loves or trusts.<sup>4</sup>
- ✦ 42 percent of female rape victims were first raped before the age of 18.
- ✦ 30 percent of female rape victims were first raped between the ages of 11 and 17.
- ✦ 12 percent of female rape victims and 28 percent of male rape victims were first raped when they were age 10 or younger.<sup>6</sup>
- ✦ The FBI reported that 50 percent of cases known to law enforcement involve persons under the age of 18.<sup>7</sup>

Although these statistics are staggering, the solution is clear: 95 percent of sexual abuse is preventable through education and awareness...and healing is possible with guidance and support.<sup>8</sup>

Over the past decade, survivors, caregivers, professionals and concerned community members have shed the shame that often surrounds child sexual abuse, speaking out to share their stories, empower fellow survivors and demand community action to better support survivors and prevent abuse. As we shine light into dark places, perpetrators are losing their greatest advantages: sexual abuse thrives in silence, secrecy and denial. Your child's disclosure is the first step in their healing journey, and your family's path to safety and prevention.

## Signs & Symptoms of Sexual Abuse

Most people are unsure of what to look for when considering signs a child may be a victim of sexual abuse. To complicate matters, children often do not display signs of having been sexually abused for months or even years after the abuse has occurred. Many parents and caregivers look back and recognize signs of sexual abuse they did not notice before. That's understandable since most caregivers are not expecting someone to abuse their child, and are not educated about what to look for in the first place. Remember, sexual abusers are very good at manipulating and hiding their behavior. Ultimately, blame for sexual abuse is always the perpetrator's, never the caregiver's and never the child's.



With this in mind, there are behavioral signs that may indicate a child has been sexually abused. If your child is engaging in several of the following behaviors and has not disclosed abuse, please call and discuss your concerns with an advocate at the Statewide Sexual Violence Hotline at 1 (888) 956-RAPE (7273), your local Children's Advocacy Center or the Florida Abuse Hotline at 1 (800) 962-2873. The contact information for these organizations can be found in the back of this Guide in the Resources section.

### *Behavioral Signs & Symptoms of Sexual Abuse*<sup>9,10</sup>

- ✦ Nightmares, night terrors, bed-wetting
- ✦ Excessive masturbation
- ✦ Inappropriate sexual knowledge or behavior
- ✦ Frequent sexual play or acting out with siblings, friends, pets or toys
- ✦ Sudden onset of aggressive behavior
- ✦ Large weight changes
- ✦ Becomes overly protective of siblings
- ✦ Withdrawal and/or disinterest in normally enjoyed activities
- ✦ Poor concentration (may affect school performance)
- ✦ Regressive behaviors (acting younger than one's age)
- ✦ Anxiety, guilt, depression
- ✦ Sudden reluctance to be alone with a certain person
- ✦ Sudden fear of certain place or person
- ✦ Unexplained/frequent health complaints (stomachache, headache, "don't feel well")
- ✦ Uncomfortable or resisting physical contact
- ✦ Older children/teens
  - Self-harming (cutting, refusing to eat, suicide attempts)
  - Running away
  - Disruptive in school; skipping classes or playing hooky
  - Sexual promiscuity, especially with older teens or adults

- Drug and alcohol abuse
- Unexplained gifts, clothes and/or money
- Physical signs
- Difficulty walking or sitting
- Sexually transmitted disease (especially for under 14)
- Pregnancy (especially for children under 14) - refusal to name the father\*
- Frequent yeast or urinary infections
- Bruised or bleeding genital area
- Pain, itching or burning of genital area

Perhaps you've observed some of the signs of sexual abuse listed above. Maybe you're wondering how to speak with a child who may be trying to disclose sexual abuse. If so, review the "do's and don'ts" listed on page 11.

### *Promoting Healthy Sexuality*

When considering sexual abuse, it is helpful to understand what constitutes typical sexual behaviors displayed by children so you may better recognize what could be cause for concern. Children first learn about appropriate sexuality from their parents and caregivers, who share the family's values and beliefs regarding sexuality. These values influence how they react to their children's displays of sexuality. Some parents may have an open attitude toward nudity and adult affection and encourage their child's sexual self-expression, whereas other parents may encourage modesty, be reserved in adult displays of affection and discourage their child's sexual behaviors. What matters most to your child is that the family's sexual values are taught in a consistent, compassionate and age-appropriate manner.<sup>11,12</sup>

The majority of children engage in sexual behaviors. Thirty to forty-five percent of children under age 10 have touched their

*\*If your child is pregnant as the result of sexual abuse, you can support her resilience, recovery and independence from the abuser through a petition to terminate the abuser's parental rights.*

*Florida law permits the termination of an offender's parental rights to a child when there is clear and convincing evidence that the pregnancy resulted from sexual abuse or rape. For more information, contact the Statewide Sexual Violence Information Line at 888.956.7273.*



parents' breasts or genitals at least once. Observable sexual behaviors, such as masturbation, peak during the preschool years and start to decrease after age five. These behaviors generally do not happen often and pass quickly, and the child can be easily distracted or redirected to more acceptable behaviors.<sup>12</sup>

Older children typically show more interest in the opposite sex, "playing doctor," looking at photographs of nudity, drawing sexual pictures or using sexual words and asking about sex.

Children, especially preschool children, often imitate sexual behaviors they have heard or seen. It is important to model the behaviors that are acceptable to you and to protect your child from seeing sexually explicit materials, which can be found in magazines, in television shows, in movies, or on the Internet.

The following chart lists common sexual behaviors in childhood, based on age. Remember, children develop at their own pace, so some overlap may occur in the behaviors listed; this is common and should not be cause for alarm. (Source: National Child Traumatic Stress Network: <http://nctsn.org>)

<i>Common Sexual Behaviors in Childhood</i> <sup>13</sup>	
<b>Preschool Children</b> (less than 4 years)	<ul style="list-style-type: none"> <li>✦ Exploring and touching private parts, in public and in private</li> <li>✦ Showing private parts to others</li> <li>✦ Rubbing private parts (with hand or against objects)</li> <li>✦ Trying to touch mother's or other women's breasts</li> <li>✦ Attempting to see other people when they are naked or undressing (such as in the bathroom)</li> <li>✦ Asking questions about their own – and others' – bodies and bodily functions</li> <li>✦ Removing clothes and wanting to be naked</li> <li>✦ Talking to children their own age about bodily functions such as "poop" and "pee"</li> </ul>
<b>Young Children</b> (approximately 4-6 years)	<ul style="list-style-type: none"> <li>✦ Attempting to see other people when they are naked or undressing</li> <li>✦ Purposefully touching private parts (masturbation), occasionally in the presence of others</li> <li>✦ Mimicking dating behavior (such as kissing or holding hands)</li> <li>✦ Talking about private parts and using "naughty" words, even when they don't understand the meaning</li> <li>✦ Exploring private parts with children their own age (such as "playing doctor," "I'll show you mine if you show me yours," etc.)</li> </ul>
<b>School-Aged Children</b> (approximately 7-12 years)	<ul style="list-style-type: none"> <li>✦ Purposefully touching private parts (masturbation), usually in private</li> <li>✦ Looking at pictures of naked or partially naked people</li> <li>✦ Playing games with children their own age that involve sexual behavior (such as "truth or dare," "playing family" or "boyfriend/girlfriend")</li> <li>✦ Attempting to see other people naked or undressing</li> <li>✦ Viewing/listening to sexual content in media (television, movies, games, the Internet, music, etc.)</li> <li>✦ Wanting more privacy (for example, not wanting to undress in front of other people) and being reluctant to talk to adults about sexual issues</li> <li>✦ Beginnings of sexual attraction to/interest in peers</li> </ul>



### *Suggestions for managing your young child's sexual behavior:*

- ✦ **Redirection** – Substitute an acceptable behavior for the unacceptable one (e.g., moving the child's hand from your breast to your waist or neck).
- ✦ **Distraction** – Encourage a change of scenery or introduce a new activity.
- ✦ **Ignore** – Sometimes it is best to just ignore the unacceptable behavior and then praise the child when she or he moves on to another, more acceptable behavior.
- ✦ **Reinforcement** – Let your child know when they are interacting respectfully with you and others, when their behaviors are pleasing and when you enjoy their hugs and affection.
- ✦ **Set your boundaries** – Be warm but firm when setting boundaries. Some examples of boundary setting could include: “you should always put on your underwear before you leave your room” or “you can touch yourself like that in your room, but not in front of other people.”
- ✦ **Talk about sexuality** – Sharing accurate information can protect your child. Using age-appropriate language, talk to your children about their sexual feelings and body parts; be sure to use the correct words for body parts such as “vagina” or “penis.” This decreases sexual abusers’ ability to manipulate your child. Be your child’s go-to person to talk about sexuality and sexual concerns by creating an open line of communication throughout childhood and adolescence.
- ✦ **Do not worry** – Most sexual behavior in children is normal and doesn’t mean your child has been sexually abused or re-abused.
- ✦ **Non-judgment** – When seeing your child engaged in unacceptable sexual behavior, remain non-judgmental and avoid punishment. You do not want to shame your child but to teach them acceptable sexual behaviors.
- ✦ **Nurturing touch** – Model acceptable physical touching by sharing affectionate, age-appropriate touch with your child and other members of the family.
- ✦ **Take a deep breath and a timeout** – If your child’s behavior is too upsetting, it’s a good idea to take a deep breath and give yourself a timeout. It is okay to delay addressing the behavior until you feel ready to be there for your child in a supportive, calm and non-judgmental way.
- ✦ **Be aware of your child’s developmental stages** – Child development resources, such as the chart on the previous page, can help you figure out when your child’s behavior is common for his or her age or when it may indicate a problem.
- ✦ **Listen** – Listening to your child does not mean you approve of their behavior. Rather, listening to your child may help you gain a better understanding of the behavior. As a rule, listen first and then talk.
- ✦ **Model or modeling** – Much of children’s learning is done by observing and imitating others, especially people they like and admire. Children are also naturally curious and great mimics. As parents, you are the most important role models in your child’s life. Your child will mimic your behavior and be curious about the things you’re interested in. The more aware you are of your feelings and behaviors – which your child observes and experiences, as when you respond calmly to something triggering – the better able you will be to make choices that support your child’s recovery. In fact, you are the most powerful antidote to the trauma your child has experienced.
- ✦ **Children who have been victims of abuse** – Children who have been victims of sexual abuse display a variety of sexual behaviors that are approximately two to three times greater than children who have not been victims of sexual abuse. If your child has been a victim of sexual abuse and is now acting out sexually on another child, understand that it is common under the circumstances, but needs to be immediately addressed with the help of your local Children’s Advocacy Center to protect both children.
- ✦ **Time lapse** – The acting-out behaviors commonly exhibited by children who have been victims of sexual abuse often do not occur for months, or even years, after the abuse occurred. If you observe sexual behaviors that are uncommon or inappropriate, it does not necessarily mean your child has been re-abused. Rather, it could just be a delayed reaction to the initial abuse. Seek guidance and individualized recommendations from your local Children’s Advocacy Center.



Be Fearless





✧ **Life stressors** – Sexual behaviors often increase when a child faces life stressors such as the birth of a sibling, placement in child care, family conflict or a move to a new home. Show understanding for the stress your child is facing, but also let them know what is and is not acceptable sexual behavior and set boundaries that reflect your family's values.

## Reasons for Concern

✧ Excessive or coercive sexual behaviors, especially in school-aged children who display other behavioral problems, may indicate sexual abuse or other life stressors that need to be addressed professionally.

✧ **Age gaps** – Likewise, sexual experimentation between children with age gaps greater than four years is a warning sign of some deeper problem that should be addressed professionally.

✧ **Developmentally inappropriate knowledge** – It is rare for young children, especially preschoolers, to display knowledge of oral sex or the mechanics of sexual intercourse. It is cause for concern if your child demonstrates age-inappropriate knowledge verbally or by their actions. It may indicate sexual abuse or exposure to pornographic materials.<sup>14</sup>

For suggested professional advocacy and therapy resources in your area, visit the Resources section in the back of this guide.

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<sup>1</sup> U.S. Department of Health & Human Services, Administration for Children & Families, Children's Bureau. (2013). *Child Maltreatment 2012*. Retrieved from [www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/child-maltreatment](http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/child-maltreatment).

<sup>2</sup> Retrieved from [cwoutcomes.acf.hhs.gov/data/downloads/pdfs/florida.pdf](http://cwoutcomes.acf.hhs.gov/data/downloads/pdfs/florida.pdf).

<sup>3</sup> National Association of Adult Survivors of Child Abuse, retrieved from <http://www.naasca.org/2012-Resources/010812-StatisticsOfChildAbuse.htm>.

<sup>4</sup> U.S. Department of Justice, retrieved from <http://mecptraining.org/wp-content/uploads/Child-Sexual-Abuse-MECP-presentation2.pdf>.

<sup>5</sup> The Advocacy Center, retrieved from [http://www.theadvocacycenter.org/adv\\_abuse.html](http://www.theadvocacycenter.org/adv_abuse.html).

<sup>6</sup> Black, M.C., et al. (2011). The National Intimate Partner and Sexual Violence Survey: 2010 Summary Report. Centers for Disease Control and Prevention.

<sup>7</sup> Finkelhor, D. & Jones, L. (2012). *Have Sexual Abuse and Physical Abuse Declined Since the 1990s?* Crimes Against Children Research Center, University of New Hampshire.

<sup>8</sup> Child Molestation Research and Prevention Institute, retrieved from [http://childmolestationprevention.org/pages/tell\\_others\\_the\\_facts.html](http://childmolestationprevention.org/pages/tell_others_the_facts.html).

<sup>9</sup> Friedrich, W.N., Fisher, J., Broughton, D., Houston, M. & Shafran, C.R. (1998). Normative Sexual Behavior in Children: A Contemporary sample.

<sup>10</sup> Friedrich, W.N., Fisher, L.L. & Dittner, C.A., et al. (2001). Child sexual behavior inventory: normative, psychiatric and sexual abuse comparisons. *Child Maltreatment*, 6(1), 37-39.

<sup>11</sup> Thigpen, J.W. & Fortenberry, J.D. (2009). Understanding variation in normative childhood sexual behavior: The significance of family context. *Social Service Review*, 83(4), 611-631.

<sup>12</sup> Kellogg, N.D. (2009). Retrieved from <http://pediatrics.aappublications.org/content/pediatrics/124/3/992.full.pdf>.

<sup>13</sup> The National Child Traumatic Stress Network *Sexual Development and Behavior in Children Table, 1* retrieved from [http://nctsn.org/nctsn\\_assets/pdfs/caring/sexualdevelopmentandbehavior.pdf](http://nctsn.org/nctsn_assets/pdfs/caring/sexualdevelopmentandbehavior.pdf).

<sup>14</sup> Horner, G. (2004). Sexual behavior in children: Normal or not? *Journal of Pediatric Health Care*, 18, 57-64.



# Reporting Child Sexual Abuse

This section details how to report child abuse and neglect, including child sexual abuse, to the Florida Abuse Hotline. It will also explain what happens after the Hotline receives a report and the protective investigation process begins. Because you are your child's chief advocate, it is very important to understand how evidence is collected from you, the child, the accused and others, as well as how it is used in prosecution.

A typical pedophile will commit 117 sexual crimes in a lifetime.<sup>15</sup> To help protect your child from being further victimized by their abuser, and to prevent other children from falling prey to this same individual, it is vital to report suspected child sexual abuse. It's not only our moral obligation to report, it's our legal obligation, too. According to Chapter 39, Florida Statutes, all Floridians are mandated to report suspected child abuse.

- ✦ As the caregiver, you are a mandated reporter and required to report your child's disclosure of sexual abuse to the Florida Abuse Hotline (see below).
- ✦ No matter the abuser's role in your child's life (and even if your child was abused by someone other than a family member or person responsible for providing care to the child), you must report the abuse. If the child was abused by a non-caretaker, the Hotline counselor who takes your information should immediately inform your local law enforcement agency of the allegations and provide them with your contact information.
- ✦ If your child first disclosed the abuse to someone else, that individual may have already completed his or her legal obligation of reporting the abuse. This is especially true if the first disclosure was made to a professional, such as a school employee.
- ✦ Professionals are required to report all abuse allegations to the Abuse Hotline immediately, and they are not required to

inform the parent/caregiver of the report or the allegations made by the child.

- ✦ If your child shares with you that they first told someone else about the abuse, you should still call the Abuse Hotline and make a report.
- ✦ You may also decide to contact law enforcement directly and make a report of your child's allegation of sexual abuse. Once the law enforcement officer or deputy responds to the report and an investigator has interviewed your child, the investigator will contact the Department of Children and Families Protective Investigation unit and provide them with the child's allegation and your contact information.

## *The Abuse Hotline*

The Florida Abuse Hotline definition for child abuse: "Abuse" means any willful act or threatened act that results in any physical, mental, or sexual injury or harm that causes or is likely to cause the child's physical, mental or emotional health to be significantly impaired. Abuse of a child includes acts or omissions (failure to protect). Corporal discipline of a child by a parent or legal custodian for disciplinary purposes does not in itself constitute abuse when it does not result in harm to the child.

The Florida Abuse Hotline serves as the central reporting center for allegations of abuse, neglect and/or exploitation for all children and vulnerable adults in Florida.<sup>16</sup>

The Hotline receives calls, faxes and Web-based reports from citizens and professionals with concerns of abuse, neglect or exploitation of children and vulnerable adults in Florida.

The Hotline assesses the information provided by the caller and determines if the information provided meets the statutory criteria for the Department of Children and Families to conduct an investigation. Even if your report does

not trigger an investigation, it will likely still be helpful in preventing further abuse.

Each report is logged in the system; multiple reports on the same person will trigger an investigation, even if each report on its own does not.

**To Report by Phone:** Call 800.962.2873 or for the TDD line call 800.453.5145. This toll-free number is available 24/7; counselors are waiting to assist you.

Be prepared to provide specific descriptions of the incident(s) or the circumstances contributing to the risk of harm, including who was involved, what occurred, when and where it occurred, why it may have happened, the extent of any injuries sustained, what the victim(s) said happened and any other pertinent information. This information may include:

- ✦ Victim name, possible responsible person or alleged perpetrator name(s).
- ✦ Addresses for the victim and alleged perpetrator, if known, including a numbered street address, apartment or lot number, city, state and ZIP code and/or directions to their location.
- ✦ Telephone numbers, including area code.
- ✦ Estimated or actual dates of birth.
- ✦ Social Security numbers, if available.
- ✦ A concise description of the abuse, neglect or exploitation, including physical, mental or sexual injuries, if any.
- ✦ Names of other household residents and their relationship to the victim(s), if available.
- ✦ A brief description of the victim's disability or infirmity (required for vulnerable adults).
- ✦ The relationship of the alleged perpetrator to the victim.
- ✦ Report any safety concerns to the Abuse Hotline Counselor, such as the perpetrator's ownership of weapons.
- ✦ Other relevant information that would assist an investigation, such as directions to the victim's home (especially in rural areas) and potential risks to the investigator, should be given to the Abuse Hotline Counselor.

If you are unable to obtain some of the information, still call the Hotline and a counselor will assess the information available to see if it meets the criteria for the Department of Children and Families to initiate a protective investigation.

To prepare to report by phone, please reference the Before Making a Report document within your supplemental materials.

**To Report by Fax:** Send a detailed written report with your name and contact telephone or fax number using the Florida Abuse Hotline's fax reporting form. Fax report to 800.914.0004.

**To Report by Web:** Web reporting should not be used for situations requiring immediate attention. Please contact the Hotline's toll-free reporting number, and call 911 if you believe a child is at imminent risk of harm.

To make a report using the Florida Abuse Hotline's Web reporting option, please gather all of your information in advance and type the Web address below into your computer to access the Web reporting option: <https://reportabuse.dcf.state.fl.us>

### **Additional Information**

#### **Notification of report:**

- ✦ Telephone reporters will always be told prior to concluding the conversation whether the information provided has been accepted as a report.
- ✦ Fax reporters will only be notified if they request notification in the designated area on the fax reporting form.
- ✦ Reporters using the Web-based reporting form have an option to include their email address and request that they be notified whether the information has been accepted as a report.

For more detailed information about reporting abuse, you can read or download the following document, Reporting Abuse of Children and Vulnerable Adults, at <http://www.dcf.state.fl.us/programs/abuse/publications/mandatedreporters.pdf>.

It's normal to feel guilt and shame when reporting sexual abuse committed by a family member or close friend. Children often feel shame about the abuse itself, guilt for telling someone about it and a sense of responsibility for getting the abuser in trouble. When the abuser is someone the family cares about, it's especially difficult for the child. Similarly, caregivers may also feel responsible for not having prevented the abuse, and shame that a family member or friend has done a terrible thing. It's also normal to want to protect people you care about, even those who have abused others. However, the abuse and any consequences that result from reporting it, are entirely the abuser's responsibility. In spite of how difficult it can be to report child abuse, it's the right, legally responsible and courageous thing to do.



# How to Report Abuse: Overview

## Disclosure Tips



### *What do you say?*

- ✦ An adult's reaction to disclosure plays an important role in the beginning of the healing process for the child.
- ✦ "I'm really glad that you told me."
- ✦ "It took a lot of courage to tell me."
- ✦ "It's not your fault."
- ✦ "We will work together to get you help."
- ✦ "I will need to tell some other people who help to protect children."



### *What are the child's needs?*

- ✦ Be careful not to make promises that you cannot keep. Do not promise you will not tell anyone.
- ✦ Report immediately.
- ✦ Only speak to those who have to know – confidentially.
- ✦ Gentle honesty – keep information age appropriate and general.

## Information Needed



### *Have this information available:*



### *Who:* Who was involved?



### *What:* What occurred?



### *When:* When did it occur?



### *Where:* Where did it occur?



### *Why:* Why did it happen (what were the circumstances surrounding the event)?



## Make a Report

There are four ways to make a report. However, it is preferred that all reports be made through the Hotline. \*\*The exact words of the child need to be documented in your report.\*\*

**Telephone Hotline:** Call the toll-free Florida Abuse Hotline at: 1.800.96.ABUSE (1.800.962.2873). Counselors are available 24 hours, every day.

**TDD (Telecommunications Device for the Deaf):**  
Toll-free: 1.800.453.5145

**Internet:** <https://reportabuse.dcf.state.fl.us>

**Fax:** Fax a written report with your contact information to 1.800.914.0004. Alternatively, you may use the Florida Abuse Hotline's fax reporting form, which can be obtained here: [www.dcf.state.fl.us/programs/abuse/docs/faxreport.pdf](http://www.dcf.state.fl.us/programs/abuse/docs/faxreport.pdf).

## Frequently Asked Questions

### 1. Will the person(s) know I reported him or her?

All reports are confidential.

Florida Abuse Hotline Counselors will not acknowledge the existence of any report, will not acknowledge that they have previously spoken to a particular caller, nor will they release any information provided by a caller or any information contained in a report. No reports are released by the Abuse Hotline other than to those persons specifically authorized under Chapters 39 and 415, Florida Statutes. Any person with a statutory right to a copy of the report must contact the local investigative office and make a formal request for access to the file. If you would like more information on confidentiality, see Section 39.202, Florida Statutes – Confidentiality of reports and records in cases of child abuse or neglect.

### 2. What happens after the Hotline accepts a report from the information I provided?

The Hotline counselor sends a typed report of the allegations to the local investigation office where the victim is located. After the report is sent to the local office, the report is assigned to a child protective investigator (CPI).

The CPI is then responsible for conducting an investigation of the allegations to see if they meet the statutory criteria for the Department of Children and Families.

### 3. How soon does DCF respond to the home?

The Department of Children and Families makes every effort to act with a sense of urgency to all allegations of harm to children and/or vulnerable adults.

The Florida Abuse Hotline will submit all reports to the appropriate child protection investigative office within one hour after the call to the Hotline ends. Once the report arrives at the investigative office and is assigned to an investigator, the investigator has up to 24 hours to initiate contact with the subjects of the report. In situations in which it is believed the victim is at imminent risk of harm, the investigator will respond as soon as possible.

### 4. Why did the counselor tell me they could not accept my report?

Prior to concluding each call, the Hotline counselor is required to inform each caller if a report was accepted or not. When a report is not accepted, the Hotline Counselor may provide appropriate referral information to the caller so their concerns can be addressed by the appropriate agency.

*It's normal to feel guilt and shame when reporting sexual abuse committed by a family member or close friend. Children feel shame about the abuse itself, guilt for telling someone about it and responsible for getting the abuser in trouble. When the abuser is someone the family cares about, it's especially difficult for the child. Caregivers, too, feel responsible for not having prevented it, and shame that a family member or friend has done a terrible thing. It's also normal to want to protect people you care about, even those who have abused others. However, the abuse and any consequences that result from reporting it, are entirely the abuser's responsibility. In spite of how difficult it can be to report child abuse, it's the right and courageous thing to do.*



## 5. What happens with the information I give if a report is not taken?

The Hotline counselor is required to document all calls in the Hotline's database. This database is maintained for all contacts in compliance with Florida Statutes and for quality assurance and training purposes. Also, if a pattern of repeated calls for a particular child is identified in the database, then an investigation may be recommended.

If the report is not accepted, it may be considered for referral to the county office as a prevention referral. If the information is not sent as a prevention referral, then it is maintained in the Hotline's database.

NOTE: For a brief summary of the mandatory reporting requirements, reference the Reporting Tips & Forms section of your supplemental materials.

## Law Enforcement

The information provided in this section is a general overview of law enforcement practices as they relate to handling of child sexual abuse allegations. Practices vary widely by county, and your local Children's Advocacy Center is best suited to answer questions regarding practices in your specific region. In larger communities, there may be a Special Victims Unit with investigators trained specifically in child sexual abuse cases; whereas, smaller communities may have only two or three investigators who investigate all crimes, and they may not have specialized training in sexual assault and/or the sexual assault of children. The following information provides information on law enforcement best practices and can be used as a guideline of what to generally expect throughout the investigation process.

Law enforcement deputies and officers are trained to place the child's safety and emotional well-being above all other considerations. Their secondary goal is to gather information to see if a crime has been committed.

During the investigation, the investigator will collaborate with the state attorney's office, the Children's Advocacy Center, the Child Protective Services investigator and any other relevant agency personnel. If the facts and evidence indicate that a crime has been committed, the case will be forwarded to the local state attorney's office.

This can be a long process, which many parents find frustrating and confusing. Using the services of the law enforcement victim's advocate and/or the advocate from your local sexual assault center or Children's Advocacy Center can help you to navigate the system and find emotional support during a stressful time.

Law enforcement investigators and counselors strongly advise parents to avoid questioning their child once they have disclosed an incident of sexual assault. It is natural to want to know the details, but too much questioning can appear to an investigator or jury as possible manipulation of the child's testimony and create more trauma for the child.

Likewise, do not talk about the sexual abuse in front of your child. Adults often talk with one another about children, especially young children, when those children are present. Children are much more aware than adults give them credit for. They are eager to please parents and will take cues from your emotional reactions. If they fear you are very upset by the disclosure, they may change their story or recant in order to protect you.

### *Once the child has disclosed, and/or when they initiate conversations about the abuse, remember to do the following:*

- ✦ Remain calm (and neutral) when you are with your child
- ✦ Tell your child you're glad they told you about the abuse
- ✦ Tell your child that you believe them
- ✦ Tell your child that the abuse was not their fault
- ✦ Tell your child they were very brave to tell and you are proud of them
- ✦ Tell your child you will do everything possible to protect them from further abuse
- ✦ Tell your child that you will make a report to people who can help stop the abuse, such as the Department of Children and Families.

### *It's very important that you don't:*

- ✦ Make promises you can't keep, such as promising not to tell anyone
- ✦ Push your child into giving you details about the abuse
- ✦ Dwell on the sexual aspects of the abuse
- ✦ Discuss the child's abuse with people not directly involved with protecting or helping your child
- ✦ Communicate to your child your own anger about the abuse

*The Model Policy on Investigating Child Abuse*<sup>17</sup> was established by the International Association of Chiefs of Police (IACP)

National Law Enforcement Policy Center. It outlines the ideal practices for investigating child abuse cases.

This model policy emphasizes key aspects for law enforcement officers to consider when investigating child abuse cases. The policy points out several features unique to children:

- ✦ Children are usually unable to protect themselves because of their level of physical and mental development.
- ✦ Children frequently do not like to talk about the abuse and may delay disclosure or tell only part of the story.
- ✦ An emotional bond often exists between the child and the offender; children may want the abuse to stop, but may not want the offender to be punished.
- ✦ Crimes of abuse are usually not isolated incidents. Usually, they take place over a period of time, often with increasing severity.
- ✦ Abuse, especially sexual abuse, often occurs in a private place with no witnesses to the event.

The model policy stresses that until an investigation can be conducted, “all complaints of child abuse should be taken seriously, whether eyewitness or secondhand accounts, and whether filed personally or anonymously. Police officers must be in a position to make knowledgeable judgments about suspected child abuse cases based on an awareness of the signs and symptoms of such crimes.”

So you, as a parent of an abused child, have the right to expect an informed law enforcement response and a full and fair investigation of your report. No decision should be made to dismiss a case until a thorough investigation has been conducted.

Sometimes, an investigation will conclude without finding evidence of abuse. When this happens, it doesn't mean that authorities don't believe your child, or that your child wasn't abused. **It's important to remember that you are more important to your child's recovery than the outcome of any investigation. Your love, support and commitment to your child's well-being will do more to ensure that your child will thrive than any successful investigation.**

Sexual assault centers and Children's Advocacy Centers all provide services free of charge to victims' loved ones. If you're angry, sad and disappointed because of the abuse or the outcome of an investigation, reach out for the support you need and deserve.

## *Evidence Collection*

When dealing with suspected child abuse, the documentation and collection of evidence are crucial for the investigation and possible prosecution. Any time law enforcement encounters potential child abuse situations, the area should be treated as a crime scene, even if the abuse occurred in the past. Whenever abuse is suspected, the child should be taken to a medical professional for a complete physical examination to document recent and past injuries and uncover patterns of abuse. However, it must be noted that not all sexual abuse results in evidence that is detectable during the medical examination.

## *Pediatric Forensic Examination*

A forensic exam is a physical exam conducted by a trained health care professional for the purpose of gathering evidence of abuse. In Florida, these exams are always conducted by doctors or nurses specially trained to sensitively, gently gather evidence from children.

Parents often believe that a physical exam will be conducted immediately after a child discloses sexual abuse. However, unless the abuse just happened, or there's concern or an indication that the child has been physically injured, it's not necessary that the child be examined right away. Often, the exam can be postponed for a few hours, or even a day or two, until an experienced health care professional is available and the parents and child have had some time to prepare.

## *What to Expect*

As noted earlier, forensic exams are done by a doctor or a nurse with specialized training in conducting evidence collection exams for children. Exams rooms are child-friendly and generally designed to avoid the sterile atmosphere and hustle and bustle of an emergency room. You should be allowed to accompany the child throughout the exam procedure. Typically, children 12 years and older will go to their local emergency room, where qualified staff will conduct the forensic exam, while younger children will be seen at a local Child Advocacy Center. Because the primary purpose of a forensic exam is to collect evidence that may be used to prosecute the case and a child's body is where evidence may be found, each exam is different. The trained examiner will collect evidence from your child's body based upon the abuse your child has disclosed or that is suspected. If, for example, your child said someone



*Sometimes, an investigation will conclude without finding evidence of abuse. When this happens, it doesn't mean that authorities don't believe your child, or that your child wasn't abused. It's important to remember that you are more important to your child's recovery than the outcome of any investigation. Your love, support and commitment to your child's well-being will do more to ensure that your child will thrive than any successful investigation.*

touched his/her private parts, you should expect that your child's genitals will be carefully examined. You have a right to ask from what parts of your child's body the examiner will collect evidence. Having that information will help you remain calm, while you support your child during the exam. Remember to ask specific information about the exam before it starts, and not when your child is present.

Evidence is best collected as soon as possible after the latest incident of abuse. While DNA evidence can remain for up to 120 hours, it does degrade over time. Also, DNA evidence may be damaged or destroyed through activities such as bathing, brushing teeth, eating, using the bathroom or washing the clothes worn during the abusive incident. Avoid these activities if the abuse just happened and you may want your child to be examined within a few hours. However, if some of these activities have already occurred, you may still want your child to be examined in case not all DNA evidence was lost.

#### *Is a forensic exam right for my child?*

Many parents wonder about the need for a forensic exam if they are uncertain about pursuing the case criminally. It may be worthwhile to collect forensic evidence even in these cases, though the decision is ultimately up to you and your child. It may be important to consider that collected evidence can be stored for several months to a year or more, depending on your local law enforcement agency's storage policy. This gives you time to decide how you would like the case to proceed with the knowledge that the forensic evidence is available for testing if needed.

Remember, forensic exams are optional. You can ask that certain procedures not be done and you can stop the exam at any point.

#### *Protective Investigations<sup>18</sup>*

Child protective services investigators are employed either by local law enforcement agencies or the Department of Children and Families.

Once a report is made, the Florida Abuse Hotline staff strives to submit all reports to the appropriate investigative office within one hour after the call has ended.

Once the report arrives at the investigative office and is assigned to an investigator, the investigator has up to 24 hours to initiate contact with the family of the abused child. In situations in which it is believed the victim is at imminent risk of harm, the investigator will respond as soon as possible.

#### *Investigation of Child Sexual Abuse*

The following information describes the role of Child Protective Services (CPS) in the investigation of cases of sexual abuse, the structure of the investigation and risk assessment in child sexual abuse.

#### *The Role of Child Protective Services*

CPS is the local authority, housed in the Department of Children and Families or in local law enforcement agencies, responsible for investigation of and intervention in cases of suspected sexual abuse. CPS is only responsible for intervening in those situations in which the offender is in a caretaking role for the child. Law enforcement agencies are usually responsible for the investigation of cases involving offenders in non-caretaking roles.

Upon receiving a report from the Florida Abuse Hotline, CPS conducts an investigation within a specified time frame (typically within 24 or 48 hours). The goal of CPS is to determine whether or not maltreatment has occurred and is likely to occur in the future and whether the child's safety can be ensured in the home. In forming conclusions about maltreatment and risk, the worker receives input from other professionals and from non-professionals (e.g., parents, children, neighbors, relatives), but the final decisions lie with CPS.

Sexual abuse cases are handled somewhat differently from other referrals to CPS. State laws mandate collaboration between CPS and law enforcement when the report is of sexual abuse. This often results in joint investigation and always in sharing of information. The mandate of the law enforcement agency is not to help families with their problems but to gather evidence toward the prosecution of offenders. As a consequence, the CPS goal is to focus on the child's safety and ideally to keep families together or to quickly reunify families once the child's safety can be ensured.

### *The Structure of the Investigation*

Communities vary considerably in how they structure investigations of sexual abuse. However, generally there are five types of professionals involved – Department of Children and Families caseworkers, law enforcement officers, Children's Advocacy Center staff, medical personnel and mental health professionals. Other professionals may be involved as well.

Communities also vary in the extent to which their investigation is well organized and coordinated. Some communities are fortunate enough to have multidisciplinary teams composed of members actively involved in the investigation or professionals who serve as consultants. In other communities, the roles of CPS, law enforcement and health care providers are coordinated, but the involvement of other professionals and the communication with the court are not well coordinated.

In others, unfortunately, the investigation is haphazard and poorly organized so that professionals are not aware of what others are doing or are working at cross-purposes. Although there are considerable differences by community as to who does what and, to a lesser extent, when it is done, there nevertheless are specific features of a good investigation. Good investigations include discussions (and data gathering) from

the referral source, a child interview, a medical examination, an interview with the non-offending parent(s) or caregivers, and an interview with the alleged offender.

### **Gathering Information from the Referral Source**

The investigative process usually begins by gathering information from the reporting party. The interview with the reporter should include information about what the child has said or done that the reporter thinks indicates possible sexual abuse, his/her reactions to this information and the reporter's knowledge of any other people with helpful information.

### **The Child Interview**

Children may be nervous, frightened or embarrassed at the thought of recounting abuse during their interview with investigators, or may fear not being believed. You can help your child prepare for the interview in several ways. First, ask the investigators where the interview will take place and ask them to describe to you the building and the interview room. Tell your child as much as you can about where you'll be going for the interview. Even a few details can help your child feel less afraid. Next, reassure your child that you or a trusted adult will remain in the building while the interview is being conducted. Tell your child that there is no right or wrong way to answer the questions they will be asked. Let them know they only have to tell the truth and answer honestly, and you will not be disappointed or mad about anything they say to the interviewer(s).

Before the interview occurs, investigators will consider several factors including where the interview should occur, who should be present, how information from the interview will be recorded and how many interviews are needed.

- ✦ The interview should occur in a location the child sees as a "safe place." In most instances, this will not be the child's home, but it may be the child's school, a therapist's office, a child interview room at the CPS office or police station, or a Children's Advocacy Center (CAC). Children's Advocacy Centers are available in communities throughout Florida.
- ✦ CACs provide a child-oriented office developed just for interviewing and providing services to abused children.
- ✦ When used for interviewing children, specialized facilities such as CACs are equipped with one-way mirrors or



# Child Sexual Abuse Investigation Process

## Report

A child discloses abuse and a call is made to the Florida Abuse Hotline with information about suspected child sexual abuse. *The following actions apply if the Hotline accepts the report.*

## Investigation Conducted

### Perpetrator Is a Caregiver:

Hotline refers to Child Protective Services Investigations and CPS makes home visits, and interviews the child, siblings, caregivers, perpetrator and relevant others. They determine:

- ✦ Has maltreatment occurred, and is it likely to occur in the future?
- ✦ Can the child's safety be ensured in the home?

### Perpetrator Is Not a Caregiver:

Hotline refers to local law enforcement and they gather evidence toward the prosecution of the alleged offender. Evidence may be collected from the alleged offender, non-offending parent(s), caregivers, relatives, neighbors, etc. Based on findings, the case may be closed or referred to the state attorney's office.

CPS and law enforcement support each other throughout the investigation. Other professionals such as caseworkers, Children's Advocacy Centers, and medical and mental health professionals also provide input in the investigation.

## Decisions & Healing

CPS Investigations determines if the child is able to remain in the home. If the child is removed from the home, Child Protective Services works to quickly reunify families once the child's safety can be ensured.

The state attorney's office in the judicial circuit where the abuse occurred decides if the evidence provided by law enforcement is sufficient to prosecute and win a case at trial.

*At any point in the process, a non-offending caregiver may choose to file an injunction for protection through the local county clerk's office. They may also call their local sexual assault center to receive support and advocacy throughout this process (reference the Resources section of this guide for contact information).*

*When the abuser is another child in the family, the emotional risk to the victim is especially great. Parents often feel the need to protect both children, the victim and the abuser. But protecting one child – the victim – can feel like abandoning another child – the abuser. This is an incredibly difficult situation for families, and the abused child feels tremendous responsibility for the distress parents feel.*

separate offices where the interview can be observed via video monitors. In Florida, CACs have a specialized unit called Child Protection Teams (CPT) for handling child abuse cases. CPTs conduct forensic interviews and medical exams for children under the age of 12.

- ✦ As mentioned above, investigations may be conducted by both CPS and law enforcement. In some communities, CPS is responsible for the child interview, and law enforcement interviews the alleged offender. In other communities, both are present at the child interview, although only one usually conducts the interview. Alternatively, one of the investigators (and others, such as a mental health expert or an assistant prosecutor) may be behind the one-way mirror or in the separate office watching the interview on a video monitor. Having more than one person present during the child interview may eliminate the need for multiple interviews.
- ✦ Some record is made of information gathered during the child interview. This may be a videotape, digital recording, an audiotape or notes.
- ✦ The number of interview sessions usually depends on who is conducting the investigation. In the majority of cases, CPS conducts one interview. If no supporting evidence emerges and there is no other evidence, the CPS worker will usually close the case after a single interview.
- ✦ Similarly, CPT conducts a medical exam and a single interview. In contrast, mental health providers assessing children at the request of mandated agencies or the courts often conduct several interviews.

- ✦ Non-offending parents or caregivers are usually interviewed before the child. The reason for this order is that, in most cases, the child's statements and behavior are the best means for determining whether sexual abuse occurred. Consequently, having some information before the interview with the child is helpful. In addition, knowing some details may be useful in later interviews with the alleged offender.

### **The Interview with the Non-offending Parent**

As your child's caregiver, you will likely be interviewed during the investigation. The investigative or assessment interview with you, the non-offending parent or caregiver, has several purposes:

- ✦ to gather additional information about the likelihood of the sexual abuse;
- ✦ to determine whether the caregiver is protective and supportive of the victim;
- ✦ in some instances, to ascertain if the caregiver has had a role in prompting the child to make or recant an allegation; and
- ✦ to understand the causes or dynamics leading to the sexual abuse.

Remember that the child interview is the primary means for gathering information to determine the likelihood of the sexual abuse. Simply answering the investigator's questions truthfully and to the best of your ability will be helpful to the process.

### **The Interview with the Alleged Offender**

Communities vary as to whether law enforcement or CPS conduct the initial interview with the alleged offender. The law enforcement officer can and may obtain a warrant to search



the premises and seize relevant physical evidence and has the capacity to “preserve the chain of evidence,” so that the physical evidence will be admissible in court. Police officers are also the only professionals who can make arrests.

### *Risk Assessment*

If it is determined by CPS or law enforcement that a child has been sexually abused, the case is one of family abuse and the child is living at home, then it is necessary to make a determination of risk to the child if she/he stays in the home. The following are three types of potential risk:

- ✦ Risk of additional sexual abuse
- ✦ Risk of physical abuse
- ✦ Risk of emotional maltreatment

### *Types of Emotional Risk*

In most cases, the child is at greater risk for emotional abuse than additional sexual abuse immediately after disclosure. There are various types of emotional abuse the victim may suffer, for instance:

- ✦ The child may be disbelieved by her/his parent, siblings and/or extended family.
- ✦ The child may be blamed for the sexual abuse. She/he may be told she/he was seductive. The child may believe she/he allowed it because she/he got special favors from the offender.
- ✦ The child may be rejected by her/his family. The non-offending parent may be angry at her/him. The child's siblings might be angry because she/he has caused them embarrassment and loss of their other parent.
- ✦ The child may be blamed for the consequences of disclosure. Because she/he told, the father is going to have to leave the home, going to lose his job, going to jail. Now the mother will have to divorce the father. Now the family has to go on public assistance.
- ✦ The child may be pressured to recant (i.e., deny that she/he was abused).

If professionals determine that the child is at risk for future sexual, physical or emotional abuse, then some plan should be made to protect the child. CPS's choices are generally to either remove the offender from the home (preferable by therapists and clinicians), or remove the victim from the home. Removing the offender has the advantage of providing a clear message to the victim, the offender and the family that the offender is the person who has done something wrong, not the victim, and that

the offense is serious. It will also protect any other children in the home from being victims of abuse at the hands of the offender.

When the abuser is another child in the family, the emotional risk to the victim is especially great. Parents often feel the need to protect both children, the victim and the abuser. But protecting one child – the victim – can feel like abandoning another child – the abuser. This is an incredibly difficult situation for families, and the abused child feels tremendous responsibility for the distress parents feel. If this is the situation in which you find yourself, your children and your family, it is especially important to seek professional guidance and support from trained trauma therapists at your local children's advocacy or sexual assault center. They understand the complex dynamics at play and have helped other families navigate this difficult path.

### *Child Protection Teams*

The Child Protection Team program brings together experts in many different fields.

It is a medically directed, multidisciplinary program that works with local sheriff's offices and the Department of Children and Family Services in cases of child abuse and neglect to supplement investigation activities.<sup>19</sup>

Child Protection Teams provide expertise in evaluating alleged child abuse and neglect, assessing risk and protective factors, and providing recommendations for interventions to protect children and enhance a caregiver's capacity to provide a safer environment when possible.

If child abuse or neglect is reported to the Florida Abuse Hotline and accepted for investigation, the case is automatically eligible for Child Protection Team assessment. There are no financial costs to families for CPT services.

Once a referral from the Department of Children and Families or law enforcement has been accepted, the Child Protection Teams may provide one or more of the following services:

- ✦ Medical diagnosis and evaluation
- ✦ Nursing assessments
- ✦ Child and family assessments
- ✦ Multidisciplinary staffings
- ✦ Psychological and psychiatric evaluations
- ✦ Specialized and forensic interviews
- ✦ Expert court testimony

## *Trial*

The decision to pursue criminal charges, if the evidence supports such, is sometimes a difficult one for parents to make. Ultimately, you will have to determine what's best for your child. Will participating in the prosecution, regardless of the outcome, help him or her recover from the trauma of sexual abuse? Does she or he believe that recovery is dependent upon the abuser's conviction? Do you? In order to make the best decision for your child, be as aware as possible of your own beliefs about and expectations of the criminal justice system.

Talking with the prosecuting attorney about possible outcomes can help you prepare yourself and your child for the trial process and the verdict. And, remember, you and your family will not be alone.

The state attorney's office in the judicial circuit where the abuse occurred decides if the evidence provided by law enforcement is sufficient to prosecute and win a case at trial. As a parent, you can decide whether or not you want your child to testify. However, the child's testimony is often essential for a successful prosecution, so if the prosecutor determines the case is unwinnable without your child's testimony, the case will not generally go to trial.

Videotaped child testimony – Rather than appearing at the trial, the court may allow videotaped testimony for children under age 16 (see Section 92.53, Florida Statutes).

Subpoenas – When deciding whether to go to trial, remember that your child can be subpoenaed by the state attorney's office or the offender's attorney to testify. However, you should be allowed to be present during the deposition, unless the prosecutor and/or attorney believe your presence would have a negative impact on the child (see FL Rules of Civil Procedure 1.310(b)(2)(8)).

### *Tips for Advocating for Your Child in the Legal System*

1. Seek assistance from your local Children's Advocacy Center or sexual assault center – don't try to go it alone. Advocates are available to help you through the process. They provide confidential services and can help you find free or low-cost services for sexual assault survivors.
2. Keep prosecutors, law enforcement and advocates up to date with your contact information. They may need to reach you to update you about the court process.
3. Don't be afraid to ask questions! Advocates, prosecutors, counselors and law enforcement officers are there to keep you updated about what is going on throughout the phases of the criminal process.
4. Know your rights and your child's rights – talk to your advocate to be informed. Don't be shy about asking prosecutors about your rights. Also ask your advocate if there are attorneys in your community who help child victims on a pro bono (free) or low-cost basis.
5. Listen to your child and believe them! Report any new information provided by your child. Watch your child for signs of stress and anxiety throughout the court process and respond with the appropriate support. Ongoing counseling is advised for children involved in court proceedings.
6. Talk to your advocate or counselor about developing healthy coping mechanisms. The criminal trial process can take months or even years to proceed. Be sure you and your child have developed healthy strategies for coping with what can be at times a very challenging experience.
7. Talk to your advocate and prosecutors about realistic expectations for the resolution of the case and possible outcomes.
8. Try not to compare cases (e.g., what happened during your neighbor's niece's trial). Each case is different. Talk to your prosecutor and advocate about what to expect – keep talking to them as things change throughout the court process.
9. Reach out for help before becoming overwhelmed. Getting swamped by the court process leads many people to just give up. Before you get to that point, find the support you need in order to speak up and stay involved.
10. Courtroom Pet Therapy – is your child comforted by animals? If yes, then consider requesting a service animal to accompany your child in court. Section 92.55(5), Florida Statutes states that the court may allow victims of a sexual offense to have animal support from a therapy or service animal certified by national standards. However, if the defendant objects, then the court will do a balancing test to make sure the defendant won't be prejudiced by this provision.





*Courtroom Pet Therapy*

*Is your child comforted by animals? If yes, then consider requesting a service animal to accompany your child in court.*

11. When preparing your child for interviews during the investigation phase, the more they know about what a court looks and sounds like, the better prepared and less anxious they will be. Advocates from local sexual assault centers and Children's Advocacy Centers are experienced at helping survivors prepare for trial. Some Children's Advocacy Centers have mock courtrooms that your child can visit. If your local Children's Advocacy Center doesn't have one, ask an advocate to arrange for you and your child to spend some time in an empty courtroom so that you can both become familiar with it.

### *After the Trial*

Much of the support you and your child receive before and during a trial also will be available to you afterward, regardless of the outcome. If your child's abuser is found not guilty, or

receives a light sentence, you may feel angry and disheartened, along with those who supported you and your child throughout the process. Though the trial may be over, your child's and your family's recovery can and should continue. Advocacy, support and counseling services from your local sexual assault center is independent of the criminal justice system, and you can and should seek ongoing services from your local center.

If your child's abuser received a short sentence, there are steps you can take to protect your child and your family before and after the abuser is released. The local Children's Advocacy Center and sexual assault center can help you identify and take those steps. Please visit the Resources section at the back of this guide for a list of Florida Children's Advocacy Centers and sexual assault centers.

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<sup>15</sup> Identify Registered Sex Offenders living near you. (n.d.). National Sex Offenders Registry. Retrieved from <http://www.registeredoffenderslist.org/default.htm>.

<sup>16</sup> This material was taken from the Department of Children and Families website at <http://www.myflfamilies.com/service-programs/abuse-hotline>.

<sup>17</sup> This material was taken from the IACP *Model Policy on Investigating Child Abuse* found at <http://www.theiacp.org/Model-Policy-List>.

<sup>18</sup> This material was taken from the Child Welfare Information Gateway website at <https://www.childwelfare.gov/pubPDFs/cpswork.pdf>.

<sup>19</sup> The information on CPTs was taken from the Children's Medical Services website at [http://www.floridahealth.gov/AlternateSites/CMS-Kids/families/child\\_protection\\_safety/child\\_protection\\_teams.html](http://www.floridahealth.gov/AlternateSites/CMS-Kids/families/child_protection_safety/child_protection_teams.html).

CPTs are available to communities throughout the state. For more information see Section 39.3035, Florida Statutes, "Child advocacy centers; standards; state funding."



# Safety Planning

If your child has been sexually abused, the most important safety plan is one that prevents the abuser(s) from having any contact with your child. It should also prevent further abuse from all others. This section will explain how the court can help protect your child. It will also outline family safety plan ideas and prevention tips.

You play a key role in protecting your child, but the court can also help by granting you an injunction for protection. Injunctions can be filed with your local clerk of court for no charge. Once you have completed the injunction paperwork, it will be reviewed by a judge. With the judge's approval, you will immediately be issued a temporary injunction. The injunction will include a date to return to court for a full injunction hearing before the judge. Injunctions are heard in civil (not criminal) court. The defendant (abuser) will be served with the injunction paperwork and has the right to be at the injunction hearing.

During the hearing, the judge will hear evidence from both parties. You are permitted to bring witnesses and may also have an attorney to represent you, although an attorney is not required. After hearing the evidence, the judge can order a permanent injunction. The injunction will permanently prevent the abuser from having any contact with your child, including letters, texts, phone calls or third-party contact. If the abuser violates the injunction, he will have committed a crime and his case will be referred to criminal court.

For more information about injunctions, please read Section 784.046, Florida Statutes.

## *Family Safety Plan*

1. Parents or caregivers should lead a discussion with all of their children that addresses the difference between safe and unsafe touch. Encourage your children to ask questions and to give their own examples of behaviors that are safe or unsafe. Some examples of safe touching may be "hugs from family members" or "a good-night kiss from Mom" whereas unsafe touching may be "getting pushed into the swimming pool" or "getting kicked on the playground." Reinforce the idea that an unsafe touch is one that makes you feel (emotionally) icky, confused, guilty, sad or not quite right. A safe touch is one that makes you feel happy, loved and cared for. Sometimes, an unsafe touch that is sexual in nature may feel good physically, but emotionally disturbing, confusing and not quite right.
2. Let children know that some touches may be safe but unwanted. Empower your children to make decisions about whom, when and how others will touch them. An awkward situation for many families is when a child refuses a hug from a grandparent or close relative. It is tempting to insist the child let themselves be hugged, but that sends the message that the child should comply with adult requests for affection even if it is unwanted. Rather, teach the child to politely but firmly set their boundaries for physical contact. In the situation above, the child may say "I don't want a hug now, Grandma, but maybe later we can hug."
3. Make sure your child knows their address and the phone number of caregivers and possibly other trusted adults.

## *Family Safety Plan*

*Make sure your child knows their address and the phone number of caregivers and possibly other trusted adults.*





If the child is old enough, having a cell phone can be part of a safety plan. Have the numbers of trusted adults programmed into the phone for quick and easy access.

4. Have your child(ren) fingerprinted. Local law enforcement will often do this for free. Keep recent photos of each child on hand. Have photos updated every few months.
5. Encourage your child to stay in groups when outside without an adult. If a child must be out alone, such as walking to or from school, then teach them general safety rules, such as not going within 15 feet of a car, ignoring all strangers (even if they seem to know the child's caregivers and say they have a special message), call a trusted adult immediately if they feel uncomfortable or concerned, and know how to call 911 if they feel at risk of harm, including what to say to the dispatch officer. Likewise, if your child must stay home alone after school, have clear rules of behavior, such as not answering the door or phone. Internet safety rules should apply when the child is alone and online activity is unsupervised. The family rules can be written on note cards and/or posted in an obvious place such as the refrigerator or bulletin board.
6. Create a family password that can be used by family members to indicate when help is needed immediately. The password can also be shared with trusted adults for those possible but unexpected times when they may need to pick up your child.
7. Teach your child the meaning of boundaries. Boundaries refer to the imaginary lines we draw around ourselves to maintain balance and protect our bodies, minds and emotions from the behavior or demands of others. Examples of healthy boundaries include:

✧ **Physical boundaries** – We all, including children, have a safe space around us (usually around 3 feet for adults and less than that for children). If someone comes into that space uninvited, we begin to feel uncomfortable. Teach your child to respect their personal space and to speak up when someone breaks that boundary. For example, the child could decide to move farther away from the other person. If that is not possible, then the child should know they have the right to say, “I don’t feel comfortable with you so close; please move away.” If the person will not respect your child’s request, then

the child should move farther away, get up and leave, or go find a trusted adult to help them regain their sense of personal safety.

- ✧ **Emotional boundaries** – Children have the right to be respected and not hurt emotionally. If they feel uncomfortable with what someone is saying or doing to them because it hurts their feelings, they should be prepared to say, “STOP, I don’t like that.” Some examples of crossing emotional boundaries are name-calling, teasing and isolation (such as making the child eat alone or refusing to let them be part of an activity). Bullying is a common form of violating emotional boundaries. Children should know that if someone is hurting them emotionally, then getting support from a trusted adult is not “tattling” but simply asking for help with a problem the child is unable to manage on their own.
- ✧ **Behavioral boundaries** – Children have an internal guide that lets them know which behaviors are good and acceptable. Often, children will be asked (or bullied) to break that internal “code” and do something the child believes is wrong. Encourage your children to listen to their inner voice. When someone wants them to act against what they believe is right, they should take a stand and say, “No, I don’t want to do that.” Sometimes it is best for the child to walk away from trouble. If that is not possible, then speaking up and letting others know their behavioral boundaries (what they will or will not do) is a good option.
- ✧ **Respecting boundaries** – Just as we teach our children to assert their right to have their boundaries respected, they must also learn to respect the boundaries of others. Caregivers provide children with the best example of how one should respect their own boundaries and the boundaries of others. Children who have their boundaries respected by family members are less likely to allow non-family members to violate their boundaries or to disrespect the boundaries of others.

## *Prevention*

While one in three girls and one in five boys will become a victim of child sexual abuse before the age of 18, we can prevent 95 percent of this abuse with education and awareness. Prevention refers to actions that reduce the risk of

sexual abuse from ever occurring or recurring. Lauren's Kids offers evidence-based abuse prevention curriculum for children in grades pre-kindergarten through high school. The *Safer, Smarter Kids* and *Safer, Smarter Teens* curriculum materials empower children to identify unsafe situations (grooming) and to seek help from trusted adults. The materials were developed by the Lauren's Kids foundation in collaboration with career educators and developmental psychologists to teach personal safety from a place of fun, not fear.

While the curriculum was designed for use in the classroom – as studies show children who receive school-based prevention education are more than three times more likely to disclose if they are or were being abused<sup>20</sup> – Lauren's Kids also offers free Web-based resources for parents. Visit [SaferSmarterKids.org](http://SaferSmarterKids.org) (pre-k through grade 5 and special education resources) and [SaferSmarterTeens.org](http://SaferSmarterTeens.org) (resources for parents of middle and high school-aged children) to learn more.

### Prevention Tips

You can empower your family to stay safe from harm and to access help immediately if an abuse situation occurs. The following tips are ways to prevent further abuse or abuse of other children in your family, based on *Safer, Smarter Kids* and *Safer, Smarter Teens* prevention resources:

1. Be suspicious if your child is singled out as “special.” It’s always flattering when a teacher, coach or counselor recognizes all the wonderful qualities your child possesses and seems to favor him or her over other kids. But this can be a major warning sign. Perpetrators often “groom” children by making them feel special, misunderstood or in need of a grown-up who truly appreciates them. The perpetrator may set up an “us against them” dynamic in order to isolate the child from his caregivers and social support system.
2. Be wary of one-on-one time. Once a pedophile has singled out a particular child, the next step is getting that child alone. The perpetrator may suggest private tutoring time, one-on-one sports lessons, or even sleepovers or camping trips. As excited as your child may be, don’t allow this private time unless you are absolutely sure of the adult’s good intentions.
3. Many child sexual abusers prey on the children of single mothers, who may be more anxious for a male figure in their lives (and more than 90 percent of all perpetrators are male). These men also take advantage of the fact that a single mother likely has less time and less help, and may welcome someone who offers to babysit or help out. Sadly, perpetrators often befriend single mothers with the goal of molesting their children. This is considered part of the grooming process of the adults in the child’s life.
4. Meet everyone who will be involved in your child’s life. For example, if you send your child to a sports camp you’ll often meet the head coach, but not the other instructors/volunteers who will be with your child on a

*Don’t automatically assume that a person is trustworthy because of their position, title or working in a place where children gather. Ask about the background check policy of the school, church, activity center or place where you will be allowing your child to attend. Be certain that anyone who works with your child has completed a thorough background check and that, even if they passed the screening, that the center has a policy that adults are never allowed to be alone one-on-one with your child.*



daily basis. Make it a point to ask the coach to introduce you to all of the staff. Besides getting to know them, you send predators the message that you are a parent who pays attention. Studies show that high parental involvement acts as a discouragement to predators.

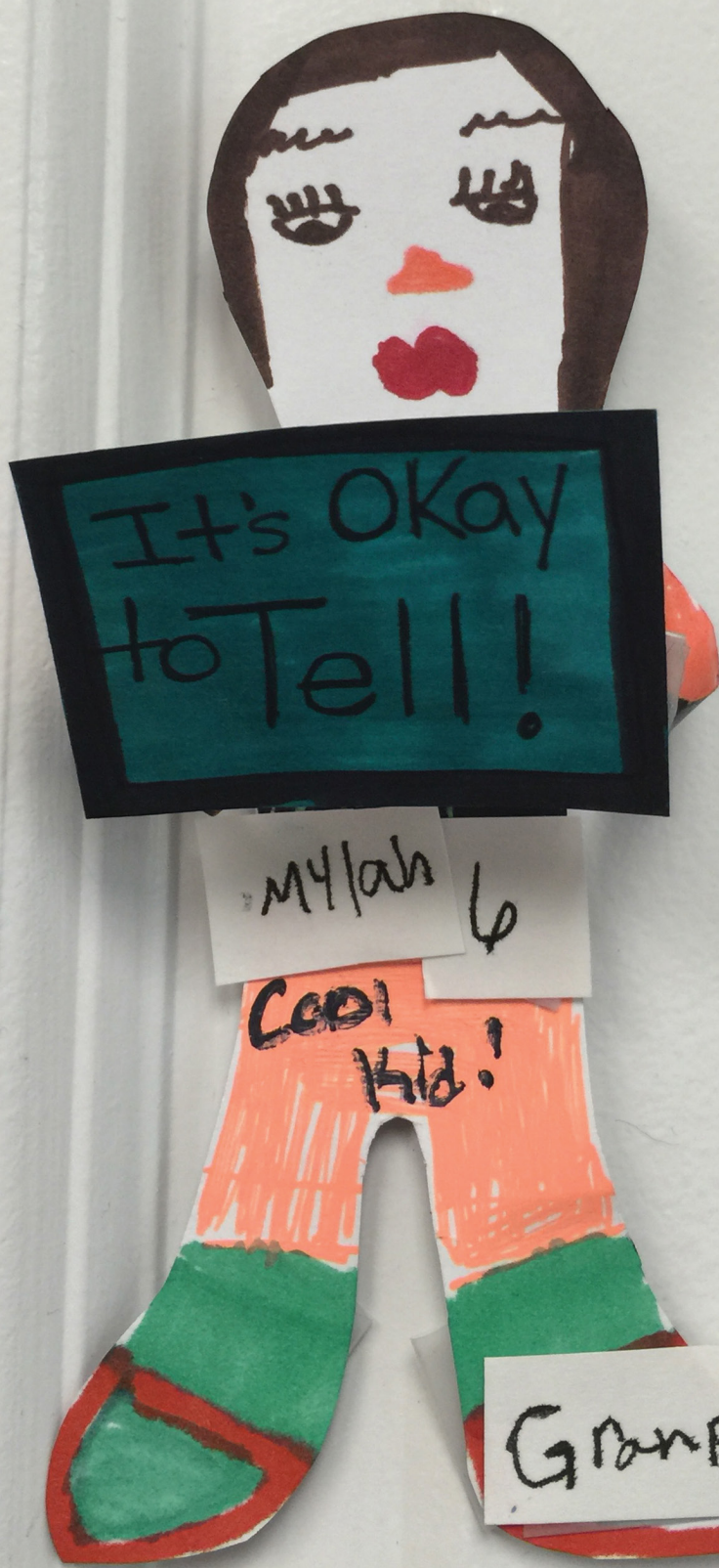
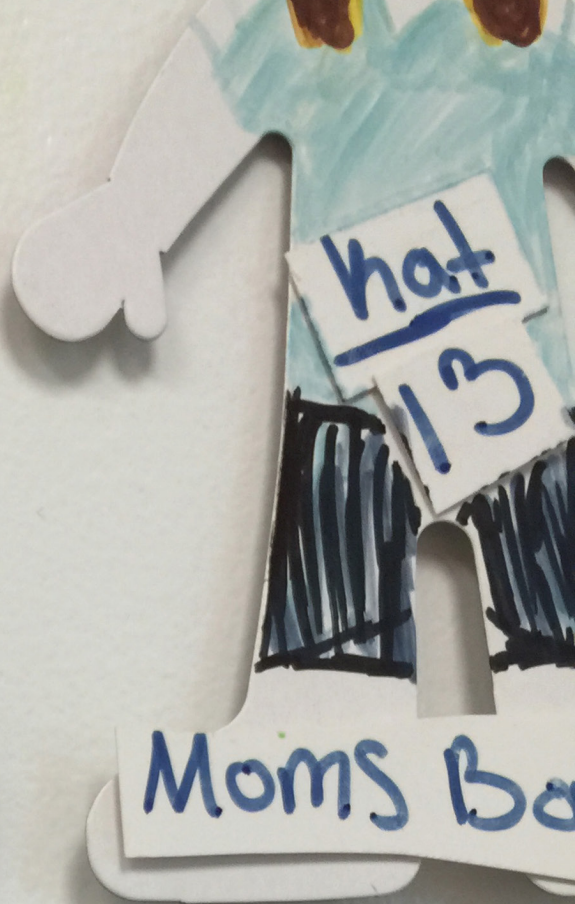
5. Make unannounced visits to a child's nursery, babysitter, day care center or school. Make sure there are no places off limits to parents. Check whether a child's school includes sexual abuse prevention training.
6. Don't automatically assume that a person is trustworthy because of their position, title or working in a place where children gather. Ask about the background check policy of the school, church, activity center or place where you will be allowing your child to attend. Be certain that anyone who works with your child has completed a thorough background check and that, even if they passed the screening, that the center has a policy that adults are never allowed to be alone one-on-one with your child.
7. Be open when children ask questions about sex. Make the answers age appropriate, but always be willing to communicate. Children are naturally curious about sex, and your comfort with the topic will make you the go-to person rather than peers or others who may not share your values on the subject.
8. Let your children know that their private parts are their own and a personal boundary that should be respected. No one has the right to touch or look at their private parts (other than a trusted caregiver or a doctor in certain circumstances).
9. Teach children not to let someone violate their personal space, to say "no" when something feels uncomfortable, confusing or icky, and immediately report that situation to a trusted adult.
10. Let children know the difference between safe secrets and unsafe secrets. For example, a safe secret is when you are told something that will make someone happy such as a surprise birthday party, whereas an unsafe secret is when someone asks you to not tell anyone about something strange the person did. Adults should never ask children to keep secrets indefinitely. Let a child know that they should always tell a trusted adult if someone asks them to keep a secret that makes them feel uncomfortable, scared or confused.
11. Discuss the difference between safe and unsafe touch, as outlined in the Safety Planning document within your supplemental materials. Reinforce the idea that an unsafe touch is one that makes you feel (emotionally) icky, confused, guilty, sad or not quite right. A safe touch is one that makes you feel happy, loved and cared for. Sometimes, an unsafe touch that is sexual in nature may feel physically good, but emotionally confusing, unsettling and not quite right.

Remember that even with family safety plans and prevention awareness, a child still faces some risk of being sexually abused. Please do not blame yourself if sexual abuse occurs; blame the perpetrator. He or she is the only one responsible for the abuse.

For more safety planning and prevention resources, visit [Parenttoolkit.LaurensKids.org](http://Parenttoolkit.LaurensKids.org), [SaferSmarterKids.org](http://SaferSmarterKids.org), [SaferSmarterTeens.org](http://SaferSmarterTeens.org) and [LaurensKids.org](http://LaurensKids.org).

<sup>20</sup> Walsh, Zwi, Woolfenden & Shlonsky. (2015). School-based education programmes for the prevention of child sexual abuse (Review). *The Cochrane Library*.

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# After Disclosure

Children can and do heal from sexual abuse, and you can play a key role in recovery. In this section, it will describe the impact trauma has on children and explain how to minimize it. You will also see practical advice on how to build children's resilience, a characteristic that helps them overcome hardship or adversity. You'll also find lists of things you can do, right now, to help both your child and family heal.

## *Trauma Triggers (Reminders)*

As you know all too well, sexual abuse is a traumatic event in a child's life. The experience is generally frightening, confusing and very stressful for the child. They may feel obligated to comply with the perpetrator out of fear, love, threats, coercion and concern for others, or through deceit practiced by the abuser, such as "we're only playing a game" or "you're so special; that's why I love you in this way." The child often experiences total powerlessness in the situation, but may feel extreme guilt for what is happening. If the abuser is also a trusted adult or caregiver, then the betrayal, helplessness, confusion and anxiety are only worse. It can be very difficult to see your child experiencing such distress even after the abuse has ended. This section will provide you with information to help you better understand what your child is going through and how to help them cope as they heal from abuse.

### *How Trauma Affects the Brain*<sup>21-26</sup>

Trauma is a neurobiological experience, primarily involving three aspects of the brain. The hippocampus, which releases stress hormones (cortisol) in the presence of danger and causes the fight, flight or freeze response; the amygdala, which sends messages to the hippocampus to prepare for danger (it is called the "primitive" brain); and the prefrontal cortex, which is the social and emotion control center (the "thinking" brain).

The cortex controls the primitive brain in all situations other than trauma. During a traumatic event the prefrontal cortex is turned off and the amygdala takes over. It exerts an involuntary focus on the immediate threat – the goal

becomes survival. The automatic responses (e.g., fight, flight or freeze) hijack the thinking brain preventing the option for reflection or problem solving.

If the sexual abuse occurs more than once and over time, then the child can suffer from "complex" trauma. Complex trauma refers to the strong biological responses (fight, flight or freeze) that are triggered whenever the child senses danger. Exposure to repeated trauma can overstimulate the brain's "danger" response, leaving the child always on the lookout for signs of potential threat and ready to engage in danger responses at a moment's notice. Consequently, the child's primitive brain is often in control and the prefrontal cortex is limited in its ability to function as the thinking social and emotional control center.

Trauma reminders (or triggers) stimulate the primitive brain. Triggers can be almost anything: sounds, smells, articles of clothing, places or people who remind the child, consciously or unconsciously, of an abuse event. Depending on the intensity of the trauma memory, the child's primitive brain may automatically take control and leave the child vulnerable to feeling "as if" they were reliving the experience. When triggered, the child generally will display acting-out behaviors. Depending on their age, the child may regress to an earlier developmental stage, throw tantrums, become clingy, sexually act out through masturbation or sex acts with toys or other children, begin bed-wetting, withdraw, damage property, become sexually promiscuous, run away, or engage in self-injurious acts or delinquent behavior. While it may feel anything but normal, try to remember that this is a common response to trauma, and that with guidance, support and trauma therapy, your child can continue to heal.

School counselors can play an important role in your child's healing and recovery process. In order to respond sensitively to the unique trauma your child has experienced, some school personnel may need to know what has happened. You and the school counselor should discuss whether any other school personnel should be told about the abuse. If you decide that some teachers and administrators need to know, discuss together

what information will be shared. These conversations will allow the school counselor to help others respond to your child with the compassion and understanding necessary for recovery.

Depending on the severity and duration of the abuse, such distressing emotional reactions to triggering events can last weeks to years after the traumatic events have stopped. Remember, children can and do recover from trauma. The following are a few tips on ways to help your child respond to traumatic memories and to heal from trauma.

### *Tips for Responding to Your Child's Traumatic Memories*

- ✧ **Create a safe place** – Ask your child where they feel safest. For example, they may say “under the bed,” “in my room,” “when you hold me.” When your child’s behavior indicates they have been triggered by trauma memories, you can simply ask if they would like to go to their safe place for a little while. Let them know that you will be nearby in case they would like your company.
- ✧ **Use emotion cards** – Purchase or create cards that express common emotions such as fear, anger, hatred, guilt and sadness. Include cards with positive emotions as well, such as happy, safe, comfortable and silly. Developing your child’s “feeling” vocabulary will allow them to express their feelings verbally rather than using acting-out behaviors. Young children can be asked to point to the card that expresses how they are feeling.
- ✧ **Use active listening** – When a child acts out, it is easy to focus on controlling the behavior rather than understanding what underlies the behavior. With a traumatized child, use the behavior as a window into the emotions that precipitated the acting out. Use your active listening skills to engage the child in talking about their feelings and focus on the emotions expressed rather than the behavior used to express it. Active listening requires listeners to feed back what they hear to the speaker, by way of restating or paraphrasing what they have heard using their own words. For example, if your child says, “I hate myself; I ruin everything,” you could say, “You sound very angry with yourself and feel like you have caused a lot of trouble.” Reflecting your child’s thoughts and feelings is often enough to successfully interrupt the negative behavior.
- ✧ **Practice CARE** – Consistency, Active listening, Respect and Empathy. Modeling care to your child through these simple actions provides your child with the knowledge that no matter what they do you will remain a steady and reliable person who will guide them back to safety and their better self.
- ✧ **Provide reassurance** – Clearly acknowledge your child’s feelings and let them know that you are going to protect them from harm to the very best of your ability. Let them know that you will not willingly let the abuser have any contact with them. Let them know that you will not stop loving them because of what happened or because they are struggling, acting out and getting upset over memories of what was done to them or what they may have done.
- ✧ **Develop a safety plan** – With your child, develop a plan that they can easily use when something happens that triggers abuse memories. It could be a card with contact numbers for the people that make them feel safe, a poem or saying that gives them strength, a place for them to go where they feel safe, tactile safety articles such as a “safety stone,” stuffed animal, or a comforting photo or picture card. Create reminder cards that contradict the triggered memories, such as “he can’t hurt me anymore,” “I am safe now,” “I’m not alone anymore,” “these are ‘terror’ feelings that will pass” or “people believe me now.”
- ✧ **Develop coping skills** – When your child experiences trauma triggers or flashbacks, encourage them to engage in physical activities that are easy for them to do. This will help to decrease the physiological aspect of the triggered brain. Examples include practicing deep breathing, engaging the thinking brain by writing down the experience in a notebook, starting to color in a coloring book, playing ball or jumping rope, or simply focusing on what’s around them at that very moment and describing the scene out loud.
- ✧ **Encourage play** – Once the child is calm enough, engaging in play is a good way to reorient the child to the present and to engage their thinking brain. For young children it could mean putting together a puzzle or building with blocks. For older children it could mean playing a game outside, playing cards or a board game, or going out for a favorite activity.
- ✧ **Show affection** – Children have different ways of looking for attention, but the key is to show affection in ways that are meaningful to your child. For a young child it may mean sitting on your lap and rocking and/or singing songs together. For an older child it might mean a simple hug, holding hands or a pat on the back. For some children



it may be best to speak soothing words of kindness and affection. The goal is to show your love and reduce your child's feelings of shame, guilt or powerlessness that the traumatic memories may have awakened.

- ✦ **Delay discipline** – All attempts to address the acting-out behavior and to impose consequences should be avoided until the child has regained their sense of self-control and emerged from the physiological and psychological trauma state induced by the traumatic memories. Once you are confident that the child has regained their self-control and is firmly in the here and now, you can then address the problematic behaviors triggered by the trauma.

### *Long-Term Impact of Unresolved Trauma*<sup>27-32</sup>

If you are reading this guide, you are likely the parent or caregiver of a child whose abuse has come to light. You are actively working to help protect your child, and support them on their healing journey from victim to thriving survivor. However, unaddressed childhood sexual abuse can lead to long-term effects in the victim's physical and emotional health. The following information underscores the value of early intervention for the long-term well-being of child sexual abuse victims. Although the information is unsettling, your child need not experience any of the long-term effects described. Your child's disclosure has given you the opportunity to act now to prevent the consequences of untreated trauma. You are the most important healing factor in your child's life. Studies show that family love and support are essential to a child's recovery. Parents and caregivers who believe their child and reassure the child that they are not to blame for the abuse are providing the best support possible. Ongoing counseling also can offer lasting benefits.

- ✦ Child sexual abuse (CSA) survivors are four times more likely to be revictimized in adolescence or adulthood than are non-CSA individuals.
- ✦ The severity of the child sexual abuse (i.e., how often the abuse occurred, how long it went on and whether or not the offender was a close family member) is associated with more negative long-term outcomes such as PTSD and revictimization.
- ✦ Severe child sexual abuse is linked to greater self-blame and poor coping strategies such as blocking out the events, social withdrawal, risky sex, substance abuse, alcoholism and domestic violence.

- ✦ More than half of the adult survivors of child sexual abuse reported blaming themselves as a child for the abuse and close to half of adult survivors continued to blame themselves as adults.
- ✦ Those who blame themselves are more likely to have trouble in their relationships, struggle with depression and anxiety and suffer health-related problems.
- ✦ Long-term consequences are greater for children who experienced abuse at younger ages (0-12) and were coerced into secrecy.
- ✦ Adult survivors had higher rates of lifetime psychiatric disorders such as anxiety, depression and bipolar disorder compared to non-CSA individuals.
- ✦ Both male and female adult survivors are at greater risk for suicide attempts than are non-CSA individuals.
- ✦ Risk increased for both men and women if the CSA involved penetration.
- ✦ The degree of risk was similar for both men and women survivors of CSA.
- ✦ Children and adults who avoid dealing with what happened to them; for example, minimizing the impact of the abuse, acting as if it never happened or using wishful thinking, are at greater risk for negative long-term consequences and psychological distress. Whereas, children and adults who use an "approach" strategy that anticipates an event (including thoughts and feelings) and confront what happened to them and how they feel about it have better long-term outcomes.

Several key factors help to protect a child against negative long-term consequences. The following list contains a few of the most important protective factors:

- ✦ Trauma-focused cognitive-based therapy is one of the more effective treatments for sexually abused children. Because the majority of children display symptoms resulting from the sexual abuse, it is recommended that the child (and non-offending parent and siblings) have a mental health assessment to determine the need for ongoing therapy.<sup>26, 31</sup>

- ✧ Protective factors that help children recover and move on include having educational plans, plans for the future, positive friendships and stable families. Mullers and Dowling point out that “the receipt of support from someone special in their lives was an important protective factor evident in women with more resilience.”<sup>27</sup>
- ✧ Without pressure, encourage your child to address the abuse in age-appropriate ways. In the short term, refusing to deal with what happened can reduce stress, but over time it may lead to unhealthy behaviors such as cigarette smoking, substance abuse, aggressive conduct and risky sexual practices.<sup>28,29</sup>
- ✧ Children who perceive their families as supportive demonstrate a higher sense of self-worth and lower rate of behavioral problems. Studies show that a loving relationship with a parent or caregiver has a positive effect on a child’s potential for healthy adjustment to the sexual abuse trauma.<sup>26,28</sup>
- ✧ Children who do not blame themselves for the abuse have the best chance for recovery in both the short term and the long term.<sup>26,28,30</sup>

## *School Bullying, Cyberbullying and Cyber Predators*

Unfortunately, a child who has experienced sexual abuse may become the target of bullying at school. This is especially true if the abuser was a teacher or fellow student, and more so if the abuser was popular or a school athlete. The following information covers a definition of bullying, signs of bullying and effective ways to help your child.

### *What constitutes bullying?*

As defined by Olweus (2001)<sup>33</sup>, Bullying is defined as a situation where “a student is being bullied or victimized when he or she is exposed, repeatedly and over time, to negative actions on the part of one or more students.” It spans a range of physical, verbal and social behaviors.

### *Florida’s Anti-Bullying Protections and Remedies*

Florida has some of the strictest anti-bullying laws in the nation. In Florida, if your child or your child’s siblings attend the same school as the accused (offender) you can request that the accused be required to attend another school. This

law does not apply to extended family members of either the victim or the accused.

### **Section 960.011(1)(s), Florida Statutes:**

(s) Attendance of victim at same school as defendant. – If the victim of an offense committed by a juvenile is a minor, the Department of Juvenile Justice shall request information to determine if the victim, or any sibling of the victim, attends or is eligible to attend the same school as the offender. However, if the offender is subject to a presentence investigation by the Department of Corrections, the Department of Corrections shall make such request. If the victim or any sibling of the victim attends or is eligible to attend the same school as that of the offender, the appropriate agency shall notify the victim’s parent or legal guardian of the right to attend the sentencing or disposition of the offender and request that the offender be required to attend a different school.

In addition, the Florida Legislature has shown its commitment to making schools a safe place for students by passing the Jeffrey Johnston Stand Up for All Students Act, which includes the following provisions:

Section 1006.147, Florida Statutes prohibits bullying and harassment (known as the Jeffrey Johnston Stand Up for All Students Act)<sup>34</sup>

Bullying and harassment of any student or employee of a public K-12 educational institution is prohibited.

- ✧ Bullying includes cyberbullying and means an activity that occurs over time and results in the infliction of physical hurt or psychological distress.
- ✧ Bullying through the use of data or computer software, technology or any electronic communication that is accessed or conducted on or off school property is prohibited.

### **Each school district must:**

- ✧ develop a way to report an act of bullying and permit anonymous reports
- ✧ adopt a policy prohibiting bullying, and the policy must be implemented throughout the school year and be part of the school curriculum





## *Family Support*

*Children who perceive their families as supportive demonstrate a higher sense of self-worth and lower rate of behavioral problems.*

- ✦ develop a procedure for promptly investigating reports of bullying; if the reported act is not within the school's authority then it must refer the report to the appropriate jurisdiction
- ✦ develop a procedure for providing parents with immediate notification of acts of bullying/harassment and regularly report to the victim's parents the actions taken to protect the victim
- ✦ develop a procedure for referring both victims and perpetrators of bullying to counseling

### *How do I know if someone is bullying my child?*<sup>35</sup>

Often, children are reluctant to tell their parents they are being bullied because they are embarrassed, have low self-esteem or do not want to burden their parents with this information. There are numerous signs to be aware of that may indicate your child is a victim of bullying, such as:

- ✦ Physical injuries such as unexplained bruises and scratches
- ✦ General unhappiness
- ✦ Reluctance to go to school (often accompanied by vague excuses to stay home)
- ✦ A decline in academic performance
- ✦ Getting into trouble more often at school
- ✦ Moodiness, withdrawal, tension and tears after school or after being with friends
- ✦ Talk of hating school and having no friends
- ✦ Torn clothing
- ✦ Refusal to discuss what's happening at school
- ✦ Major changes in relationships and friendships with others
- ✦ A friend your child spends time with who seems mean or abusive

### **How Parents and Caregivers Can Help:**

- ✦ Let your child know you do not blame them for the bullying. Only the bully is to blame.
- ✦ Take time with your child to find out when and where the bullying is happening (make notes of dates and times). Take screen shots of cell phone messages and copies of anything else.
- ✦ Bullying is often about power or revenge. Give your child the power to make some decisions about how they believe the problem should be handled and then help them achieve those goals.
- ✦ If your child is being physically harmed, you must intervene. Gather evidence and report this to the police.
- ✦ Start an anti-bullying campaign at your child's school. By cooperating with the local school administration, you can possibly arrange to bring an approved anti-bullying

curriculum or resources for a school-based preventive program. Prevention can help stop bullying before it ever starts.

- ✦ Help your child identify safe, supportive friends and support your child as they cultivate relationships with these friends. Positive emotional support from peers is invaluable.

### *Cyberbullying*

Cyberbullying is somewhat similar to traditional bullying, only it occurs through the tools of technology such as email, instant messaging, game sites, chat rooms, social networking sites such as Facebook or Twitter, through "apps" or through digital messages or images sent to a cell phone. Unlike traditional bullying, only one act of cyberbullying is needed to affect a child's life since "a single act by one perpetrator may be repeated many times by others, and experienced many times by the victim."<sup>36</sup> Author Patricia Agatston<sup>37</sup> estimates that only 1 in 10 children who are victims of cyberbullying tell their parents.

It is important for parents and caregivers to talk to their children about cyberbullying, especially if they notice any of the following warning signs:

- ✦ Your child may appear depressed or withdrawn, or may not want to go to school.
- ✦ Your child may avoid social activities and may seem upset or angry after being on the phone or computer.
- ✦ Your child may become obsessed with checking their messages or social networking sites because they are worried about what other individuals might be posting about them.

### **How Parents and Caregivers Can Help:**

- ✦ As with traditional bullying, children often feel shame when they are the target of cyberbullying. Try to reduce these feelings by letting your child know they are not to blame.
- ✦ Do not address the bullying by prohibiting your child's access to technology. Technology offers children an important gateway to education and socialization with supportive peers.
- ✦ Encourage your child not to give out their cell phone number to anyone other than trusted friends and family. If necessary, change the phone number.
- ✦ Block online messages and identities, track IP addresses, change passwords and/or usernames, or contact the website administrator and report the abuse to block the abuser permanently from the website.



- ✦ Close down the current Facebook (or Twitter) account and open another one with a different name. Use the security settings to allow only invited friends to visit the Web page.

### Cyber Predators

The Internet is a wonderful tool for children to learn and play, but it can also be a dangerous place, as outlined in the previous section on cyberbullying. As reported in *Don't Miss the Signs in the Digital World*,<sup>38</sup> one in five minors are sexually solicited online, and in 82 percent of online sex crimes against minors, the offender used a social networking site to gain information about them. In general, a child is engaged in social networking for an average of 44.5 hours each week. While your child may understand Facebook, Twitter and Instagram better than many adults, you as a parent know for certain that nothing online is truly private and any detail your child posts can be used against them. Sadly, one in five teens have electronically sent or posted online nude or seminude pictures of themselves and think that it will never come back to haunt them.

Now that you understand the risks, you can focus on keeping your child safe in the digital world. Talking to your child about the dangers of social networking as a means of sexual exploitation is the best defense:

- ✦ Let your child know they can always talk to you if something happens online that makes them uncomfortable.
- ✦ Explain that predators often pretend to be of the same age and gender as your child. They may even post false photos of themselves to trick your child into believing they are peers.
- ✦ Warn your child never to meet with an unknown cyber “friend.”
- ✦ Use parental control options on your child’s computer so you can browse their online history and trace potentially abusive contacts.
- ✦ If possible, have your child use a computer that is in a public space such as a living room, family room or kitchen and have your child “turn in” the laptop, tablet or smartphone at night.
- ✦ Have your child sign the safety online pledge.
- ✦ Notify law enforcement if you suspect your child is being sexually exploited through social networking or the Internet.

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- <sup>28</sup> Mullers, E. & Dowling, M. (2008). Mental health consequences of child sexual abuse. *British Journal of Nursing*, 17, 1428-1433.
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- <sup>35</sup> Retrieved from NoBullying.com at <http://nobullying.com/stop-bullying-australia/>.
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### *Love & Support*

Children can recover from sexual abuse. Your love, support and understanding, as well as counseling, will contribute to your child's full recovery.



# Creating Your New Normal

## *Recovery for the Survivor*

Children can recover from sexual abuse. Your love, support and understanding, as well as counseling, will contribute to your child's full recovery. Although sexual abuse will cause lifetime changes, it can also result in personal growth. Many survivors say that with time, they felt the assault had actually made them stronger and better able to assert their right to safety and personal well-being. This is often true for the survivor's family and loved ones, too.

This section will provide practical advice on how to build children's resilience, a characteristic that helps them overcome hardship or adversity. You'll also find lists of things you can do, right now, to help both your child and family heal.

### *How you can help your child's recovery process:*

- ✦ **Regain trust** – Your child has had their trust violated; this is especially true if the abuser was a trusted friend or family member. You can help your child regain trust by listening without judgment, letting them know how much their safety matters to you, developing a safety plan together, reassuring them that they will never knowingly be left alone with the abuser again, and allowing them to set the pace of their own recovery.
- ✦ **Learn about the impact sexual assault can have on your child** – Finding out your child has been sexually abused is stressful for the whole family. You may feel guilt, anger and numbness or have difficulty accepting or believing the news is true. Your child is also dealing with the aftermath of their disclosure. They may cope by displaying behaviors that are difficult for you to manage, especially when you too are experiencing stress. Knowing what behaviors to expect, learning effective parenting strategies and understanding that their behavior is a normal reaction to trauma can provide perspective and the skills to cope.
- ✦ **Talk about the abuse** – Be a good listener and do not judge, blame or argue with your child as they express their thoughts and feelings about the abuse. When you feel overwhelmed by what your child is disclosing, it is all right to set limits. You could say, "let's talk until ... television show comes on." Or when you feel at your limit you could say, "five more minutes and then we'll read a book together" or "go for a walk."
- ✦ **Appropriate touch** – Teach your child the difference between a safe and unsafe touch. Let them know that it is never okay for an adult to have sexual contact with a child. Even if your child was abused by a teenager or older child, let them know that it is not okay for anyone other than a trusted caregiver or medical professional to touch their private parts, and it is never okay for an adult to ask your child to touch their or the adult's private parts. If someone threatens them or tries to force them to have sexual contact, they should tell a trusted caregiver or adult who would believe and protect them.
- ✦ **Skills to say "no"** – Children need to learn skills to say "no" to inappropriate sexual advances. Children are taught to respect and obey authority figures and are vulnerable to threats and coercion. After a sexual assault, caregivers have the challenge to encourage their child to trust authority figures again, while also teaching them that people in authority are sometimes untrustworthy. Your child's understanding of appropriate touch can help with this challenge.

- ✧ **Trauma therapy** – Encourage and ensure your child is receiving the proper counseling to heal from their abuse. Please visit the Resources section in the back of this guide for counseling services and information.

## *Resilience*

Resilience describes a person's ability to cope with life's challenges and traumatic events. Research has shown that up to half of the children who experience sexual trauma will not show any long-term problems or symptoms. Although a child's resilience is due in part to biological and genetic factors, it is also a quality that you can encourage. Resilient children often possess high self-esteem, the ability to ask for help and the belief that their actions can make a difference for the better.<sup>39</sup> The following list provides ways in which you can foster resilience in your child after a sexual assault:

- ✧ Encourage your child to develop a personal narrative (i.e., story) of the events that includes a positive interpretation. For example, you can emphasize your child's strength in surviving the betrayal of their trust, of coming forward and disclosing and of working hard to heal. When your child speaks of the abusive event, look for the underlying strengths and bring them into the conversation. Over time, your child will develop an abuse narrative that includes their courage and smart handling of a traumatic experience.
- ✧ Demonstrate your support and love for your child at every possible moment. Studies have shown that a mother's sensitivity to her abused child's needs and support of her or his healing are key to increasing the child's resilience.
- ✧ Create opportunities for positive social support. The support can be from family members, the child's friends, supportive teachers or other trustworthy adults.
- ✧ Encourage activities, especially school extracurricular activities such as sports or clubs. Allow opportunities for artistic expression, involvement with cultural events and participation in spiritual outlets. Studies have also shown that involvement in social activities builds resilience.
- ✧ Maintain a home environment free from any form of violence and substance abuse because these activities have been shown to reduce a child's resilience.
- ✧ Encourage your child to talk about the abuse. Children who face the traumatic event and process its effect on them have the best chance of healing. Avoidance as a coping method is the least favorable means of handling the abusive experience.

Studies have found that increasing a sexually abused child's self-esteem, strengthening the mother/caregiver-child bond, having positive school experiences, participating in school activities and sports, and providing strong social supports will build resilience to the negative effects of sexual assault, such as depression and anger.<sup>40</sup>

## *Sibling Reactions*

As you have come to realize, sexual assault of one child affects the whole family, including siblings. Siblings may experience feelings of anger (at the victim and/or the perpetrator), confusion and anxiety. Everything you do to help your children is important. Even the smallest actions on your part can create big opportunities for healing on your children's part. Here are some common reactions you can expect from non-abused siblings:

- ✧ **Resentment of the abused child** – Siblings may resent the attention the abused child is getting from the caregivers and extended family and friends. Often the abused child has many appointments that take the caregivers away from the home. Counseling sessions may involve play therapy and other "fun" activities that the non-abused siblings are excluded from. You can help to reduce possible resentment by making sure every child has special time, including them in as many activities as are age appropriate and, if possible, taking the siblings out for a treat during the abused child's treatment sessions. If appropriate, have all of the children attend family therapy sessions so a professional addresses their concerns and feelings.
- ✧ **Emotional distress** – All the children experience distress in a family crisis. The siblings' reactions are often similar to the abused child's reactions. For example:
  - **Regression** – This is displaying behaviors of a younger child such as thumb sucking, bed-wetting, temper tantrums or problems at school.
  - **Stress reactions** – Each child has unique behaviors they use to manage stress. These may be regressive behaviors for some and angry outbursts, increased teasing and fighting with siblings, withdrawal, eating disturbances or



defying common household rules for others. Be prepared for stress reactions and spend time helping your child to understand the root of their behavior.

- ✦ **Overprotection** – Older siblings may feel responsible for their sibling’s abuse and respond by trying to protect them from all potential risks. The sibling may begin to parent the abused child in an effort to reduce their personal guilt and/or protect the child in an effort to prevent any further family distress or external threats. Help your child to understand that they can be supportive of their sibling but is not responsible for making sure they are safe from all future harm. It is your job, as the parent, to protect the children in the family.
- ✦ **Promote sibling support** – Studies have shown that sibling support plays an important role in a child’s healing from sexual abuse. Often the abused child can acquire a stigmatized role among her siblings. She may be blamed for causing all the distress the family is experiencing. Help all of the children to understand that only the abuser is responsible for the changes the family is going through. Constantly redirect sibling reactions to the abuse to the responsible party and remind them that their sibling did not want to be abused and needs to be treated with acceptance in order to help him or her on the path to healing.
- ✦ **Blame** – When the abuser is a family member, relative or close family friend, the siblings are faced with the loss

of a loved one. If the abuser contributed to the family finances, then the children also face the fears caused by financial hardship such as needing to move, changing schools, new careers and losing neighborhood friends. They may also experience the stress caused by conflicted family relations among extended family members, possible divorce, supervised visitation and many other changes and/or losses. They may feel the abused sibling should have kept quiet, is lying or is otherwise responsible for the painful circumstances the family is experiencing. As stated earlier, it always helps to redirect blame to the only person responsible – the abuser. Also, you can try to minimize the amount of change the children have to face at one time and constantly reassure the children by providing them with understanding and support.

### *From Victim to Thriving Survivor*

The healing journey from victim of child sexual abuse to thriving survivor takes time, support from family and loved ones and commitment to working through the trauma with the help of a trained counselor. Candidly, the process is not easy and often feels like three steps forward, one step back. But healing from abuse is absolutely possible. While there is no true, linear road map for the healing journey, the chart below illustrates benchmarks that can help you understand your child’s progress.<sup>41</sup>

<i>Victim Outlook</i>	<i>Survivor Outlook</i>	<i>Thriving Outlook</i>
Doesn’t deserve to be happy	Looking for reasons and opportunities to heal	Gratitude for good things in life, acceptance of and willingness to face challenges
Low self-esteem/shame/unworthy	Sees self as both wounded and healing	Sees self as a competent, capable, independent individual with positive self-esteem
Alone	Begins to seek help	Able to build and maintain relationship of mutual trust and caring

<i>Victim Outlook</i>	<i>Survivor Outlook</i>	<i>Thriver Outlook</i>
Hyper-vigilant, expecting bad things to happen, doesn't trust	Understands vigilance/anxiety as an "old" and no longer helpful tool for dealing with the abuse; wants to learn new ways to cope	Identifies and uses tools to remain present, in the moment and calm (meditation, prayer, relaxation, friendships)
Feels selfish	Begins to understand that taking care of oneself isn't selfish, just necessary; everyone needs help sometimes	Practices healthy self care; understands that compassion for others requires compassion for self
Damaged	Acknowledges self as wounded by abuse, but isn't forever "damaged goods"	Was wounded and now healing
Confusion and numbness; angry when not numb	Begins to feel more than anger, learning to grieve, feel sadness about the impact of abuse on self and others; grieving past ungrieved trauma	Able to grieve and feel sad about current losses; less "lag time" between events and feelings
Overwhelmed by past	Naming and grieving what happened; sometimes overwhelmed but more able to experience pleasure in the moment	Living in the present
Hopeless	Hopeful	Faith in self, life and other people
Uses activity, business, external focus to hide from feelings	Stays with emotional pain	Understands that emotional pain will pass and brings new insights
Hides their story	Not afraid to tell their story to safe people	Beyond telling their story, but always aware they have created their own healing
Often wounded by unsafe others	Learning how to protect self by share, check, share	Protects self from unsafe others, sets boundaries



<i>Victim Outlook</i>	<i>Survivor Outlook</i>	<i>Thriver Outlook</i>
Believes everyone else is better, stronger, less damaged	Comes out of hiding to hear others and have compassion for them and eventually self	Lives with an open heart for self and others
Places own needs last	Learning healthy needs	Places self first, appropriately, realizing that is the only way to function and eventually help others
Creates one drama after another	Sees patterns	Creates peace
Serious and anxious	Beginning to laugh	Seeing the humor in life
Uses inappropriate humor, including teasing	Feels associated painful feelings instead	Uses healthy humor
Uncomfortable, numb or angry around toxic people	Increasing awareness of pain and dynamics	Healthy boundaries around toxic people, including relatives
Lives in the past	Aware of patterns	Lives in the now
Suspicious of therapists and those who try to help	Sees therapist as guide	Owens their own healing, continuing therapy as necessary

<sup>39</sup> Williams & Nelson-Gardell. (2012). Predicting resilience in sexually abused adolescents. *Child Abuse & Neglect*, 36, 53-63.

<sup>40</sup> Asgeirsdottir, B., Gudjonsson, G., Sigurdsson, J. & Sigfusdottir, I. (2010). Protective processes for depressed mood and anger among sexually abused adolescents: The importance of self-esteem. *Personality and Individual Differences*, 49, 402-407.

<sup>41</sup> Whitfield, B. (2003). Retrieved from <http://www.cbwhit.com/Victim-to-survivor.htm>.



### *Recovery & Resilience*

*Many survivors say that with time, they felt the assault had actually made them stronger and better able to assert their right to safety and personal well-being.*



# Resources

## *In Crisis?*

If you are experiencing an emergency, please call 911 immediately.

### *Florida*

#### **Florida Council Against Sexual Violence**

Crisis Hotline: 1.888.956.RAPE (7273)  
Website: [www.fcasv.org](http://www.fcasv.org)

### *United States*

#### **RAINN (Rape Abuse Incest National Network)**

Crisis Hotline: 1.800.656.HOPE (4673)  
Website: [www.RAINN.org](http://www.RAINN.org)

## *Suspect Abuse?*

### *Florida*

In Florida, all citizens are mandatory reporters of suspected abuse. To learn more about signs of abuse and how to report, visit [www.DontMisstheSigns.org](http://www.DontMisstheSigns.org) or call 800.962.2873 to make a report.

### *United States*

Find your local abuse reporting agency or call 1.800.4.A.CHILD to reach Childhelp's National Abuse Hotline.

## *Other Partners in Prevention, Hope and Healing*

### *Florida*

#### **Florida Department of Children and Families: Florida Abuse Hotline**

800.962.2873  
Website: [dcf.state.fl.us/programs/abuse](http://dcf.state.fl.us/programs/abuse)

#### **Florida Department of Law Enforcement: Sex Offender Registry**

Website: [www.fdle.state.fl.us](http://www.fdle.state.fl.us)  
Frequently Asked Questions:  
[offender.fdle.state.fl.us/offender/FAQ.jsp](http://offender.fdle.state.fl.us/offender/FAQ.jsp)

**Florida Agency for Persons with Disabilities:** State of Florida's Zero Tolerance Initiative Against Abuse, Neglect and Exploitation of Floridians with Developmental Disabilities  
Website: <http://apdcares.org/zero-tolerance/>

### *United States*

#### **Lauren's Kids**

18851 NE 29th Avenue, Suite 1010  
Aventura, FL 33180  
Website: [www.laurenskids.org](http://www.laurenskids.org)

#### **Safer, Smarter Kids**

Website: [www.safer smarter kids.org](http://www.safer smarter kids.org)

#### **Safer, Smarter Teens**

Website: [www.safer smarter teens.org](http://www.safer smarter teens.org)

#### **Family Watchdog: National Sex Offender Locator**

Website: [www.familywatchdog.us](http://www.familywatchdog.us)

#### **Childhelp**

National hotline and website offers support in response to all child abuse and can connect you to local reporting agencies.

Hotline: 800.422.4453

Website: [www.childhelp.org](http://www.childhelp.org)

#### **The Child Welfare Information Gateway**

A listing of toll-free child abuse reporting numbers by state  
Website: [www.childwelfare.gov](http://www.childwelfare.gov)

#### **SexualOffenders.com**

The Nationwide Safety Network  
Website: [www.sexualoffenders.com](http://www.sexualoffenders.com)

#### **Bikers Against Child Abuse (BACA)**

For information on Bikers Against Child Abuse, visit [www.bacaworld.org](http://www.bacaworld.org).

## *Therapy Animals*

#### **Courtroom Dogs For Kids & Nature Coast Therapy Dogs**

Office: 352.503.7175  
Email: [courtroomdogsforkids@gmail.com](mailto:courtroomdogsforkids@gmail.com)

#### **Florida Courthouse Therapy Dogs**

Website: [www.flcourthousedogs.com](http://www.flcourthousedogs.com)

## *Florida Sexual Assault Centers*

### *Alachua*

#### **Alachua County Victim Services & Rape Crisis Center**

218 SE 24th Street  
Gainesville, FL 32641  
Office: 352.264.6760  
Fax: 352.264.6703  
Hotline: 866.252.5439  
Website: [www.alachuacounty.us/victim](http://www.alachuacounty.us/victim)

### *Baker*

#### **The Women's Center of Jacksonville**

5644 Colcord Avenue  
Jacksonville, FL 32211  
Office: 904.722.3000  
Fax: 904.722.3100  
Hotline: 904.721.7273  
Website: [www.womenscenterofjax.org](http://www.womenscenterofjax.org)

### *Bay*

#### **Gulf Coast Children's Advocacy Center**

310 East 11th Street  
Panama City, FL 32401  
Office: 850.872.7760  
Fax: 850.872.7780  
Hotline: 866.218.4738  
Website: [www.gulfcoastcac.org](http://www.gulfcoastcac.org)

### *Bradford*

#### **Alachua County Victim Services & Rape Crisis Center**

218 SE 24th Street  
Gainesville, FL 32641  
Office: 352.264.6760  
Fax: 352.264.6703  
Hotline: 866.252.5439  
Website: [www.alachuacounty.us/victim](http://www.alachuacounty.us/victim)

### *Brevard*

#### **Sexual Assault Victim Services (SAVS)**

2725 Judge Fran Jamieson Way, Bldg. D  
Viera, FL 32940  
Office: 321.617.7533  
Fax: 321.617.7532  
Hotline: 321.784.HELP (4357)  
Website: [www.savsinc.com](http://www.savsinc.com)

### *Broward*

#### **Nancy J. Cotterman Center: Broward County's Children's Advocacy Center & Rape Crisis Center**

400 NE 4th Street  
Ft. Lauderdale, FL 33301  
Office: 954.357.5775  
Fax: 954.357.5779  
Hotline: 954.761.RAPE (7273)

Website: [www.broward.org/HumanServices/CommunityPartnerships/NancyJCottermanCenter/Pages/Default.aspx](http://www.broward.org/HumanServices/CommunityPartnerships/NancyJCottermanCenter/Pages/Default.aspx)

### *Calhoun*

#### **Gulf Coast Children's Advocacy Center**

310 East 11th Street  
Panama City, FL 32401  
Office: 850.872.7760  
Fax: 850.872.7780  
Hotline: 866.218.4738  
Website: [www.gulfcoastcac.org](http://www.gulfcoastcac.org)

### *Charlotte*

#### **Center for Abuse and Rape Emergencies (C.A.R.E.)**

P.O. Box 510234  
Punta Gorda, FL 33951  
Office: 941.639.5499  
Fax: 941.639.7079  
Hotline: 941.627.6000 or 888.956.7273;  
Englewood area: 941.475.6465  
Website: [www.carefl.org](http://www.carefl.org)

### *Citrus*

#### **Haven of Lake and Sumter Counties Inc.**

2600 South Street  
Leesburg, FL 34748  
Office: 352.787.5889  
Fax: 352.787.4125  
Hotline: 352.787.1379 (Lake & Sumter) and 352.344.5268 (Citrus)  
Website: [www.havenlakesumter.org](http://www.havenlakesumter.org)

### *Clay*

#### **Quigley House Inc., Adult/Adolescent Sexual Assault Program**

P.O. Box 142  
Orange Park, FL 32067  
Office: 904.284.7273  
Fax: 904.284.5407  
Hotline: 800.339.5017  
Website: [www.quigleyhouse.org](http://www.quigleyhouse.org)

### *Collier*

#### **Project HELP Inc.**

3123 Terrace Avenue  
Naples, FL 34104  
Office: 239.649.1404  
Fax: 239.649.5520  
Hotline: 239.262.7227  
Website: [www.projecthelpnaples.org](http://www.projecthelpnaples.org)

### *Columbia*

#### **Another Way Inc.**

P.O. Box 1028  
Lake City, FL 32056  
Office: 386.719.2700  
Fax: 386.719.2758  
Hotline: 866.875.7983  
Website: [anotherwayinc.net](http://anotherwayinc.net)

### *Dade*

#### **M.U.J.E.R. Inc. (Mujeres, Unidas, en Justicia, Educacion y Reforma, Women, United in Justice, Education and Reform)**

27112 South Dixie Highway  
Naranja, FL 33032  
Office: 305.247.1388  
Fax: 305.247.1362  
Hotline: 305.763.2459  
Website: [www.mujerfla.org](http://www.mujerfla.org)

### *DeSoto*

#### **Safe Place and Rape Crisis Center Inc.**

2139 Main Street  
Sarasota, FL 34237  
Office: 941.365.0208  
Fax: 941.365.4919  
Hotline: 941.365.1976  
Website: [www.sparcc.net](http://www.sparcc.net)

### *Dixie*

#### **Another Way Inc.**

P.O. Box 1028  
Lake City, FL 32056  
Office: 386.719.2700  
Fax: 386.719.2758  
Hotline: 866.875.7983  
Website: [anotherwayinc.net](http://anotherwayinc.net)



### *Duval*

#### **The Women's Center of Jacksonville**

5644 Colcord Avenue  
Jacksonville, FL 32211  
Office: 904.722.3000  
Fax: 904.722.3100  
Hotline: 904.721.7273  
Website: [www.womenscenterofjax.org](http://www.womenscenterofjax.org)

### *Escambia*

#### **Lakeview Center Inc.**

1221 W Lakeview Avenue  
Pensacola, FL 32501  
Office: 850.469.3800  
Fax: 850.595.1420  
Hotline: 850.433.7273  
Website: [www.ebaptisthealthcare.org/BehavioralHealth/SpecialtyServices/VictimsServices.aspx](http://www.ebaptisthealthcare.org/BehavioralHealth/SpecialtyServices/VictimsServices.aspx)

### *Flagler*

#### **Betty Griffin House**

1375 Arapaho Avenue  
St. Augustine, FL 32084  
Office: 904.808.8544  
Fax: 904.808.8338  
Hotline: 904.824.1555  
Website: [www.bettygriffinhouse.org](http://www.bettygriffinhouse.org)

### *Franklin*

#### **Refuge House Inc.**

P.O. Box 20910  
Tallahassee, FL 32316  
Office: 850.922.6062  
Fax: 850.413.0395  
Hotline: 850.681.2111, 800.500.1119  
and 850.584.8808 (Taylor & Madison counties)  
TTY Number: 800.621.5202  
Website: [www.refugehouse.com](http://www.refugehouse.com)

### *Gadsden*

#### **Refuge House Inc.**

P.O. Box 20910  
Tallahassee, FL 32316  
Office: 850.922.6062  
Fax: 850.413.0395

Hotline: 850.681.2111, 800.500.1119  
and 850.584.8808 (Taylor & Madison counties)  
TTY Number: 800.621.5202  
Website: [www.refugehouse.com](http://www.refugehouse.com)

### *Gilchrist*

#### **Another Way Inc.**

P.O. Box 1028  
Lake City, FL 32056  
Office: 386.719.2700  
Fax: 386.719.2758  
Hotline: 866.875.7983  
Website: [anotherwayinc.net](http://anotherwayinc.net)

### *Glades*

#### **Abuse Counseling and Treatment Inc.**

P.O. Box 60401  
Fort Myers, FL 33906  
Office: 239.939.2553  
Fax: 239.939.4741  
Hotline: 239.939.3112  
Website: [www.actabuse.com](http://www.actabuse.com)

### *Gulf*

#### **Gulf Coast Children's Advocacy Center**

310 East 11th Street  
Panama City, FL 32401  
Office: 850.872.7760  
Fax: 850.872.7780  
Hotline: 866.218.4738  
Website: [www.gulfcoastcac.org](http://www.gulfcoastcac.org)

### *Hamilton*

#### **Another Way Inc.**

P.O. Box 1028  
Lake City, FL 32056  
Office: 386.719.2700  
Fax: 386.719.2758  
Hotline: 866.875.7983  
Website: [anotherwayinc.net](http://anotherwayinc.net)

### *Hardee*

#### **Peace River Center Victim Services**

1860 South Crystal Lake Drive  
Lakeland, FL 33801

Office: 863.413.2708  
Fax: 863.413.3079  
Hotline: 863.413.2707 and  
877.688.5077  
Website: [www.peace-river.com](http://www.peace-river.com)

### *Hendry*

#### **Abuse Counseling and Treatment Inc.**

P.O. Box 60401  
Fort Myers, FL 33906  
Office: 239.939.2553  
Fax: 239.939.4741  
Hotline: 239.939.3112  
Website: [www.actabuse.com](http://www.actabuse.com)

### *Hernando*

#### **Dawn Center of Hernando County**

P.O. Box 6179  
Spring Hill, FL 34611-6179  
Office: 352.684.7191  
Fax: 352.684.7941  
Hotline: 352.686.8430  
Website: [www.dawncenter.org](http://www.dawncenter.org)

### *Highlands*

#### **Peace River Center Victim Services**

1860 South Crystal Lake Drive  
Lakeland, FL 33801  
Office: 863.413.2708  
Fax: 863.413.3079  
Hotline: 863.413.2707 and 877.688.5077  
Website: [www.peace-river.com](http://www.peace-river.com)

### *Hillsborough*

#### **Crisis Center of Tampa Bay**

1 Crisis Center Plaza  
Tampa, FL 33613  
Office: 813.264.9961  
Fax: 813.969.4910  
Hotline: 813.234.1234 or 211  
Website: [www.crisiscenter.com](http://www.crisiscenter.com)

### *Holmes*

#### **Gulf Coast Children's Advocacy Center**

310 East 11th Street  
Panama City, FL 32401

Office: 850.872.7760  
Fax: 850.872.7780  
Hotline: 866.218.4738  
Website: [www.gulfcoastcac.org](http://www.gulfcoastcac.org)

#### *Indian River*

##### **Sexual Assault Assistance Program of the Treasure Coast**

411 South Second Street  
Fort Pierce, FL 34950  
Office: 772.462.1306  
Fax: 772.462.6822  
Hotline: 866.828.7273  
Website: [www.sexualassaultassistanceprogram.org](http://www.sexualassaultassistanceprogram.org)

#### *Jackson*

##### **Gulf Coast Children's Advocacy Center**

310 East 11th Street  
Panama City, FL 32401  
Office: 850.872.7760  
Fax: 850.872.7780  
Hotline: 866.218.4738  
Website: [www.gulfcoastcac.org](http://www.gulfcoastcac.org)

#### *Jefferson*

##### **Refuge House Inc.**

P.O. Box 20910  
Tallahassee, FL 32316  
Office: 850.922.6062  
Fax: 850.413.0395  
Hotline: 850.681.2111, 800.500.1119 and 850.584.8808 (Taylor & Madison counties)  
TTY Number: 800.621.5202  
Website: [www.refugehouse.com](http://www.refugehouse.com)

#### *Lafayette*

##### **Another Way Inc.**

P.O. Box 1028  
Lake City, FL 32056  
Office: 386.719.2700  
Fax: 386.719.2758  
Hotline: 866.875.7983  
Website: [anotherwayinc.net](http://anotherwayinc.net)

#### *Lake*

##### **Haven of Lake and Sumter Counties Inc.**

2600 South Street  
Leesburg, FL 34748  
Office: 352.787.5889  
Fax: 352.787.4125  
Hotline: 352.787.1379 (Lake & Sumter) and 352.344.5268 (Citrus)  
Website: [www.havenlakesumter.org](http://www.havenlakesumter.org)

#### *Lee*

##### **Abuse Counseling and Treatment Inc.**

P.O. Box 60401  
Fort Myers, FL 33906  
Office: 239.939.2553  
Fax: 239.939.4741  
Hotline: 239.939.3112  
Website: [www.actabuse.com](http://www.actabuse.com)

#### *Leon*

##### **Refuge House Inc.**

P.O. Box 20910  
Tallahassee, FL 32316  
Office: 850.922.6062  
Fax: 850.413.0395  
Hotline: 850.681.2111, 800.500.1119 and 850.584.8808 (Taylor & Madison counties)  
TTY Number: 800.621.5202  
Website: [www.refugehouse.com](http://www.refugehouse.com)

#### *Levy*

##### **Another Way Inc.**

P.O. Box 1028  
Lake City, FL 32056  
Office: 386.719.2700  
Fax: 386.719.2758  
Hotline: 866.875.7983  
Website: [anotherwayinc.net](http://anotherwayinc.net)

#### *Liberty*

##### **Refuge House Inc.**

P.O. Box 20910  
Tallahassee, FL 32316  
Office: 850.922.6062  
Fax: 850.413.0395

Hotline: 850.681.2111, 800.500.1119 and 850.584.8808 (Taylor & Madison counties)  
TTY Number: 800.621.5202  
Website: [www.refugehouse.com](http://www.refugehouse.com)

#### *Madison*

##### **Refuge House Inc.**

P.O. Box 20910  
Tallahassee, FL 32316  
Office: 850.922.6062  
Fax: 850.413.0395  
Hotline: 850.681.2111, 800.500.1119 and 850.584.8808 (Taylor & Madison counties)  
TTY Number: 800.621.5202  
Website: [www.refugehouse.com](http://www.refugehouse.com)

#### *Manatee*

##### **Centerstone**

379 6th Avenue West  
Bradenton, FL 34205-8820  
Office: 941.782.4150  
Fax: 941.782.4395  
Hotline: 941.708.6059  
Website: [www.manateeglens.org](http://www.manateeglens.org)

#### *Marion*

##### **Ocala-Marion County Sexual Assault/ Domestic Violence Center**

P.O. Box 2193  
Ocala, FL 34478  
Office: 352.351.4009  
Fax: 352.351.9455  
Hotline: 352.622.8495 or 352.622.5919  
Website: [www.ocaladvshelter.org](http://www.ocaladvshelter.org)

#### *Martin*

##### **Sexual Assault Assistance Program of the Treasure Coast**

411 South Second Street  
Fort Pierce, FL 34950-1594  
Office: 772.462.1306  
Fax: 772.462.6822  
Hotline: 866.828.7273  
Website: [www.sexualassaultassistanceprogram.org](http://www.sexualassaultassistanceprogram.org)

### *Miami-Dade*

#### **M.U.J.E.R. Inc. (Mujeres, Unidas, en Justicia, Educacion y Reforma, Women, United in Justice, Education and Reform)**

27112 South Dixie Highway  
Naranja, FL 33032  
Office: 305.247.1388  
Fax: 305.247.1362  
Hotline: 305.763.2459  
Website: [www.mujerfla.org](http://www.mujerfla.org)

#### **Roxcy Bolton Treatment Center (RTC)**

1611 NW 12th Avenue  
Miami, FL 33136-1005  
Office: 305.585.5185  
Fax: 305.585.7560  
Hotline: 305.585.7273  
Website: [www.jacksonhealth.org/services-rape-treatment.asp](http://www.jacksonhealth.org/services-rape-treatment.asp)

### *Monroe*

Call 888.956.7273

### *Nassau*

#### **The Women's Center of Jacksonville**

5644 Colcord Avenue  
Jacksonville, FL 32211  
Office: 904.722.3000  
Fax: 904.722.3100  
Hotline: 904.721.7273  
Website: [www.womenscenterofjax.org](http://www.womenscenterofjax.org)

### *Okaloosa*

#### **Shelter House Inc.**

16 Ferry Road, SE  
Fort Walton Beach, FL 32548  
Office: 850.243.1201  
Fax: 850.243.6756  
Hotline: 850.863.4777  
TDD: 711  
Website: [www.shelterhousenwfl.org/sexual\\_violence\\_services.html](http://www.shelterhousenwfl.org/sexual_violence_services.html)

### *Okeechobee*

#### **Sexual Assault Assistance Program of the Treasure Coast**

411 South Second Street  
Fort Pierce, FL 34950-1594  
Office: 772.462.1306  
Fax: 772.462.6822  
Hotline: 866.828.7273  
Website: [www.sexualassaultassistanceprogram.org](http://www.sexualassaultassistanceprogram.org)

### *Orange*

#### **Victim Service Center of Central Florida Inc.**

2111 East Michigan Street, Ste. 210  
Orlando, FL 32806  
Office: 407.254.9415  
Fax: 407.228.1420  
Hotline: 407.497.6701  
Website: [www.victimservicecenter.com](http://www.victimservicecenter.com)

### *Osceola*

#### **Victim Service Center of Central Florida Inc.**

2111 East Michigan Street, Ste. 210  
Orlando, FL 32806  
Office: 407.254.9415  
Fax: 407.228.1420  
Hotline: 407.497.6701  
Website: [www.victimservicecenter.com](http://www.victimservicecenter.com)

### *Palm Beach*

#### **Palm Beach County Victim Services**

205 N Dixie Hwy, Ste. 5.1100  
West Palm Beach, FL 33401  
Office: 561.355.2418 option 3  
Fax: 561.355.3097  
Hotline: 561.833.7273 or 866.891.7273  
TTY Number: 561.355.1772  
Website: [www.pbcgov.com/publicsafety/victimservices/rapecrisis.htm](http://www.pbcgov.com/publicsafety/victimservices/rapecrisis.htm)

### *Pasco*

#### **Sunrise of Pasco County Inc.**

P.O. Box 928  
Dade City, FL 33526-0928  
Office: 352.521.3358

Fax: 352.521.3099

Hotline: 352.521.3120 or 888-668.RAPE (7273) for West and Central Pasco  
Website: [www.sunrisepasco.org](http://www.sunrisepasco.org)

### *Pinellas*

#### **Suncoast Center Inc.**

2960 Roosevelt Blvd.  
Clearwater, FL 33760  
Office: 727.489.5294  
Fax: 727.536.7867  
Hotline: 727.530.RAPE (7273)  
Website: [www.suncoastcenter.org](http://www.suncoastcenter.org)

### *Polk*

#### **Peace River Center Victim Services**

1860 South Crystal Lake Drive  
Lakeland, FL 33801  
Office: 863.413.2708  
Fax: 863.413.3079  
Hotline: 863.413.2707 and 877.688.5077  
Website: [www.peace-river.com](http://www.peace-river.com)

### *Putnam*

#### **Florida Department of Health in Putnam County Sexual and Domestic Violence Intervention and Prevention Program**

2801 Kennedy Street  
Palatka, FL 32177  
Office: 386.326.3200 ext. 3261  
Fax: 386.326.3350  
Hotline: 386.983.1358 and 888.956.7273

### *Santa Rosa*

#### **Lakeview Center Inc.**

1221 W Lakeview Avenue  
Pensacola, FL 32501  
Office: 850.469.3800  
Fax: 850.595.1420  
Hotline: 850.433.7273  
Website: [www.ebaptisthealthcare.org/BehavioralHealth/SpecialtyServices/VictimsServices.aspx](http://www.ebaptisthealthcare.org/BehavioralHealth/SpecialtyServices/VictimsServices.aspx)



### *Sarasota*

#### **Safe Place and Rape Crisis Center Inc.**

2139 Main Street  
Sarasota, FL 34237  
Office: 941.365.0208  
Fax: 941.365.4919  
Hotline: 941.365.1976  
Website: [www.sparcc.net](http://www.sparcc.net)

### *Seminole*

#### **Sexual Assault Victim Services (SAVS)**

2725 Judge Fran Jamieson Way, Bldg. D  
Viera, FL 32940  
Office: 321.617.7533  
Fax: 321.617.7532  
Hotline: 321.784.HELP (4357)  
Website: [www.savsinc.com](http://www.savsinc.com)

### *St. Johns*

#### **Betty Griffin House**

1375 Arapaho Avenue  
St. Augustine, FL 32084  
Office: 904.808.8544  
Fax: 904.808.8338  
Hotline: 904.824.1555  
Website: [www.bettygriffinhouse.org](http://www.bettygriffinhouse.org)

### *St. Lucie*

#### **Sexual Assault Assistance Program of the Treasure Coast**

411 South Second Street  
Fort Pierce, FL 34950-1594  
Office: 772.462.1306  
Fax: 772.462.6822  
Hotline: 866.828.7273  
Website: [www.sexualassaultassistanceprogram.org](http://www.sexualassaultassistanceprogram.org)

### *Sumter*

#### **Haven of Lake and Sumter Counties Inc.**

2600 South Street  
Leesburg, FL 34748  
Office: 352.787.5889  
Fax: 352.787.4125  
Hotline: 352.787.1379 (Lake & Sumter)  
and 352.344.5268 (Citrus)  
Website: [www.havenlakesumter.org](http://www.havenlakesumter.org)

### *Suwannee*

#### **Another Way Inc.**

P.O. Box 1028  
Lake City, FL 32056  
Office: 386.719.2700  
Fax: 386.719.2758  
Hotline: 866.875.7983  
Website: [anotherwayinc.net](http://anotherwayinc.net)

### *Taylor*

#### **Refuge House Inc.**

P.O. Box 20910  
Tallahassee, FL 32316  
Office: 850.922.6062  
Fax: 850.413.0395  
Hotline: 850.681.2111, 800.500.1119  
and 850.584.8808 (Taylor & Madison  
counties)  
TTY Number: 800.621.5202  
Website: [www.refugehouse.com](http://www.refugehouse.com)

### *Union*

#### **Alachua County Victim Services & Rape Crisis Center**

218 SE 24th Street  
Gainesville, FL 32641  
Office: 352.264.6760  
Fax: 352.264.6703  
Hotline: 866.252.5439  
Website: [www.alachuacounty.us/victim](http://www.alachuacounty.us/victim)

### *Volusia*

#### **Volusia Rape Crisis Center**

1000 Big Tree Road  
Daytona Beach, FL 32119  
Office: 386.385.0495  
Fax: 386.236.3178  
Hotline: 800.503.7621  
Website: [www.smabehavioral.org/crisis-services](http://www.smabehavioral.org/crisis-services)

### *Wakulla*

#### **Refuge House Inc.**

P.O. Box 20910  
Tallahassee, FL 32316  
Office: 850.922.6062  
Fax: 850.413.0395

Hotline: 850.681.2111, 800.500.1119  
and 850.584.8808 (Taylor & Madison  
counties)  
TTY Number: 800.621.5202  
Website: [www.refugehouse.com](http://www.refugehouse.com)

### *Walton*

#### **Shelter House Inc.**

16 Ferry Road SE  
Fort Walton Beach, FL 32548  
Office: 850.243.1201  
Fax: 850.243.6756  
Hotline: 850.863.4777  
TDD: 711  
Website: [www.shelterhousenwfl.org/sexual\\_violence\\_services.html](http://www.shelterhousenwfl.org/sexual_violence_services.html)

### *Washington*

#### **Gulf Coast Children's Advocacy Center**

310 East 11th Street  
Panama City, FL 32401  
Office: 850.872.7760  
Fax: 850.872.7780  
Hotline: 866.218.4738  
Website: [www.gulfcoastcac.org](http://www.gulfcoastcac.org)

### *Statewide Advocacy Programs*

#### **Florida Council Against Sexual Violence**

1820 East Park Avenue, Ste. 100  
Tallahassee, FL 32301  
Phone: 850.297.2000  
Fax: 850.297.2002  
Email: [information@fcasv.org](mailto:information@fcasv.org)  
Website: [www.fcasv.org](http://www.fcasv.org)  
Statewide Referral Hotline:  
888.956.7273

#### **Department of Children and Families**

VAWA/STOP Administrator  
1317 Winewood Blvd.  
Bldg. 3, Room 324  
Tallahassee, FL 32399  
Phone: 850.921.2168

Email: domesticviolence@dcf.state.fl.us  
Website: www.dcf.state.fl.us/domesticviolence/

**Florida Abuse Hotline**

1.800.96.ABUSE (962.2873)  
TDD: 800.453.5145  
Fax: 800.914.0004  
Website: www.dcf.state.fl.us/abuse/report/

**Florida Association for the Treatment of Sexual Abusers**

8800 49th St. N., Ste. 311  
Pinellas Park, FL 33782  
Website: www.floridaatsa.com

**Florida Coalition Against Domestic Violence**

425 Office Plaza Drive  
Tallahassee, FL 32301  
Phone: 850.425.2749  
Website: www.fcadv.org

**Florida Commission on Offender Review**

4070 Esplanade Way  
Tallahassee, FL 32399-2450  
Phone: 850.487.3259  
Email: victimquestions@fcor.state.fl.us  
Website: www.fcor.state.fl.us

**Florida Department of Corrections Victim Information and Notification Everyday (VINE) & Victim Assistance Office**

501 S. Calhoun  
Tallahassee, FL 32399  
Phone: 850.488.9166  
Toll-Free: 1.877.8.VICTIM (877.884.2846)  
Toll-Free VINE Line: 1.877.VINE.4.FL (877.846.3435)  
Website: www.vinelink.com

**Florida Department of Health Sexual Violence Prevention Program**

2585 Merchants Row Boulevard  
Tallahassee, FL 32399  
Phone: 850.245.4455  
Website: http://www.floridahealth.gov/%5C/programs-and-services/prevention/sexual-violence-prevention/index.html

**Florida Department of Law Enforcement**

Sexual Offender/Predator Unit  
P.O. Box 1489  
Tallahassee, FL 32302-1489  
Phone: 850.410.8572 or 888.357.7332  
Website: www.flsexoffender.net

**Florida Network of Children's Advocacy Centers**

2940 East Park Avenue, Ste. A  
Tallahassee, FL 32301  
Phone: 850.671.4791  
Website: www.fncac.org

**Florida Network of Victim Witness Services Inc.**

P.O. Box 7312  
Tallahassee, FL 32314-7312  
Website: www.fnvws.org

**Florida Network of Youth and Family Services**

2850 Pablo Avenue  
Tallahassee, FL 32308  
Phone: 850.922.4324  
Website: www.floridanetwork.org

**Office of the Attorney General**

The Division of Victim Services and Criminal Justice Programs  
Bureau of Advocacy and Grants Management  
Bureau of Victim Compensation  
Bureau of Criminal Justice Programs  
Regional Advocacy Services

The Capitol PL-01  
Tallahassee, FL 32399-1050  
Phone: 850.414.3300 or 866.966.7226  
Website: www.myfloridalegal.com/victims

*Campus Advocacy Programs*

**Barry University**  
305.899.4928

**Beacon College**  
352.787.0721

**Bethune-Cookman University**  
386.481.2325

**Broward College**  
954.424.6916

**Chipola College**  
850.718.2209

**College of Central Florida**  
800.878.5470  
352.854.2322  
352.873.5841

**Daytona State College**  
386.239.7720

**Eastern Florida State College**  
800.878.5470

**Eckerd College**  
727.864.8248

**Edward Waters College**  
904.470.8990

**Flagler College**  
904.819.6210

**Florida A&M University**  
850.599.3145

**Florida Atlantic University**  
561.297.0247

**Florida Coastal School of Law**  
904.256.1120

**Florida Gateway**  
800.878.5470

**Florida Gulf Coast University**  
239.590.7950

**Florida Institute of Technology**  
321.674.8050  
321.953.8998

**Florida International University**  
305.348.3000

**Florida Memorial University**  
305.626.3772  
305.626.3771

**Florida State University**  
850.644.7161  
850.644.1234

**Florida Southern College**  
863.688.0103

**Florida SouthWestern State College**  
239.732.3414

**Gulf Coast State College**  
850.769.1551

**Hillsborough Community College**  
813.259.6377

**Hodges University**  
800.466.8017

**Indian River State College**  
772.465.7825

**Jacksonville University**  
904.256.7180

**Lake-Sumter State College**  
352.787.1379

**Lynn University**  
561.237.7955  
561.237.7237

**Miami Dade College**  
800.500.1119  
305.237.8701

**New College of Florida**  
941.487.4254

**North Florida Community College**  
877.501.0956  
850.431.5190

**Northwest Florida State College**  
850.729.5335

**Nova Southeastern University**  
954.424.6911

**Palm Beach Atlantic University**  
561.803.2563

**Palm Beach State College**  
561.868.3980

**Pasco-Hernando State College**  
800.878.5470

**Pensacola Christian College**  
850.478.8496

**Pensacola State College**  
850.433.7273  
850.484.2028

**Polk State College**  
863.519.3744  
863.297.1000

**Rollins College**  
407.425.2624  
407.628.6340

**St. Johns River State College**  
800.878.5470

**St. Petersburg College**  
800.878.5470

**St. Thomas University**  
305.628.6546

**Saint Leo University**  
352.588.8457

**Santa Fe College**  
352.395.5508

**Seminole State College**  
407.416.9976  
407.708.2337

**South Florida State College**  
863.784.7131

**Southeastern University**  
863.667.5181

**State College of Florida, Manatee**  
941.363.0878

**Stetson University**  
386.822.8900  
386.822.7300

**Tallahassee Community College**  
850.617.6333  
850.201.8918

**University of Central Florida**  
407.823.2425  
407.823.1200

**University of Florida**  
352.392.1111  
352.392.5648

**University of Miami**  
305.798.6666



**University of North Florida**  
904.620.1010

**University of South Florida**  
813.974.5757

**University of Tampa**  
813.257.3900  
813.257.7777

**University of West Florida**  
850.474.2420

**Valencia College**  
407.497.6701

**Virginia College**  
904.520.7401

### *Military Advocacy Programs*

**Department of Defense Safe Helpline**  
Website: [www.safehelpline.org](http://www.safehelpline.org)

**Eglin Air Force Base**  
96 ABW/CVK  
Eglin AFB, FL 23542  
Phone: 850.240.3219  
Website: [www.eglin.af.mil](http://www.eglin.af.mil)

**Florida Department of Military Affairs, National Guard**  
St. Francis Barracks  
82 Marine Street  
St. Augustine, FL 32084  
Phone: 877.816.3893  
Website: <http://dma.myflorida.com>

**Hurlburt Air Force Base**  
16 SOW/CVK  
424 Cody Avenue, Ste. 7  
Hurlburt Field, FL 32544  
Phone: 850.884.7272  
Website: [www.hurlburt.af.mil](http://www.hurlburt.af.mil)

**MacDill Air Force Base**  
6th Air Mobility Wing/CVK  
MacDill AFB, FL 33621  
Phone: 813.828.7272  
Website: [www.macdill.af.mil](http://www.macdill.af.mil)

**Naval Air Station, Pensacola**  
150 Hase Road, Ste. A  
Pensacola, FL 32508-1051  
Phone: 850.449.9231  
Website: [www.cnmc.navy.mil/Pensacola/](http://www.cnmc.navy.mil/Pensacola/)

**Naval Air Station, Jacksonville**  
P.O. Box 136  
Jacksonville, FL 32212-5000  
Phone: 904.910.9075  
Website: [www.cnmc.navy.mil/Jacksonville/](http://www.cnmc.navy.mil/Jacksonville/)

**Naval Air Station, Key West**  
Fleet and Family Support Center  
804 Sigsbee Road  
Key West, FL 33040  
Phone: 305.797.1408  
Website: [www.cnmc.navy.mil/regions/cnrse/installations/nas\\_key\\_west.html](http://www.cnmc.navy.mil/regions/cnrse/installations/nas_key_west.html)

**Naval Station Mayport**  
Bldg 1, Massey Ave.  
Mayport, FL 32228  
Phone: 904.563.1254  
Website: [www.cnmc.navy.mil/Mayport/](http://www.cnmc.navy.mil/Mayport/)

**Naval Support Activity, Panama City**  
484 Vernon Ave.  
Panama City, FL 32407  
Phone: 850.625.1413  
Website: [www.cnmc.navy.mil/panamacity](http://www.cnmc.navy.mil/panamacity)

**Patrick Air Force Base, Cape Canaveral**  
1201 Edward H. White II St.  
Room S-211  
Patrick Air Force Base, FL 32925  
Phone: 321.494.7272  
Website: [www.patrick.af.mil](http://www.patrick.af.mil)

**Tyndall Air Force Base, Panama City**  
325 FW/CVK  
445 Suwannee Road  
Bldg. 662, Room 243  
Tyndall AFB, FL 32403  
Phone: 850.625.1231  
Website: [www.tyndall.af.mil](http://www.tyndall.af.mil)

**United States Army Garrison, Miami**  
9301 NW 33rd St.  
Miami, FL 33170  
Phone: 305.753.5923  
Website: [www2.southcom.mil/usag-miami/sites/local/](http://www2.southcom.mil/usag-miami/sites/local/)

**United States Department of Defense Sexual Assault Prevention and Response**  
1401 Wilson Blvd, Ste. 402  
Arlington, VA 22209  
Phone: 571.372.2657  
Website: [www.sapr.mil](http://www.sapr.mil)

### *Florida Network of Children's Advocacy Centers*

**Alachua County Child Advocacy Center Inc.**  
P.O. Box 13454  
Gainesville, FL 32604  
Phone: 352.376.9161  
Fax: 352.376.9165

**Bay, Calhoun, Gulf, Holmes, Jackson and Washington Counties Gulf Coast Children's Advocacy Center**  
210 East 11th Street  
Panama City, FL 32401  
Phone: 850.872.7760  
Fax: 850.872.7780

**Brevard County Children's Advocacy Center of Brevard County**  
6905 N. Wickham Rd. #403  
Melbourne, FL 32940  
Phone: 321.241.6610  
Fax: 321.241.6531

#### *Broward County*

##### **Nancy J. Cotterman Sexual Assault Treatment Center**

400 Northeast 4th Street  
Fort Lauderdale, FL 33301  
Phone: 954.357.5775  
Fax: 954.357.5779

#### *Citrus County*

##### **Citrus County Children's Advocacy Center: "Jessie's Place"**

1410 South Lecanto Highway  
Beverly Hills, FL 34461  
Phone: 352.270.8814  
Fax: 352.270.8816

#### *Collier County*

##### **Children's Advocacy Center of Collier County**

1036 6th Avenue North  
Naples, FL 34102  
Phone: 239.263.8383  
Fax: 239.263.7931

#### *Miami-Dade County*

##### **Kristi House Inc. Orlowitz-Lee Children's Advocacy Center**

1265 NW 12th Avenue  
Miami, FL 33136  
Phone: 305.547.6800  
Fax: 305.547.6816

#### *Duval, Baker, Clay, Nassau, Volusia, Flagler and St. Johns Counties*

##### **First Coast Child Protection Team**

4539 Beach Blvd.  
Jacksonville, FL 32207  
Phone: 904.633.0300

#### *Escambia County*

##### **Gulf Coast Kid's House Inc.**

3401 N. 12th Ave  
Pensacola, FL 32503  
Phone: 850.595.5800  
Fax: 850.595.5782

#### *Hamilton, Lafayette, Suwannee, Taylor and Columbia Counties*

##### **Chances for Children Child Advocacy Center**

405 East Duval Street  
Lake City, FL 32055  
Phone: 386.752.4453  
Fax: 386.243.8748

#### *Hernando County*

##### **The CAC of Hernando County**

880 Kennedy Blvd.  
Brooksville, FL 34605  
Phone: 352.754.8809  
Fax: 352.754.6154

#### *Highlands County*

##### **Champion for Children Advocacy Center**

1968 Sebring Parkway  
Sebring, FL 33870  
Phone: 863.402.6845  
Fax: 863.402.6869

#### *Hillsborough County*

##### **Children's Justice Center**

700 East Twiggs Street  
Tampa, FL 33602  
Phone: 813.272.5437  
Fax: 813.276.2404

#### *Lake and Sumter Counties*

##### **Lake/Sumter Children's Advocacy Center**

300 South Canal Street  
Leesburg, FL 34748  
Phone: 352.323.8303  
Fax: 352.323.1263

#### *Lee, Charlotte, Hendry and Glades Counties*

##### **Children's Advocacy Center of Southwest Florida**

3830 Evans Avenue  
Fort Myers, FL 33901  
Phone: 239.939.2808  
Fax: 239.939.4794

#### *Leon, Jefferson, Liberty, Franklin, Wakulla, Gadsden and Madison Counties*

##### **Children's Home Society of FL**

1801 Miccosukee Commons Drive  
Tallahassee, FL 32308  
Phone: 850.921.0772  
Fax: 850.414.2494

#### *Manatee County*

##### **Manatee Children's Services Inc.**

1227 9th Avenue W.  
Bradenton, FL 34205  
Phone: 941.345.1200  
Fax: 941.345.1213

#### *Marion County*

##### **Kimberly's Center for Child Protection**

2800 NE 14th St.  
Ocala, FL 34470  
Phone: 352.873.4739  
Fax: 352.873.6795

#### *Okaloosa and Walton Counties*

##### **Emerald Coast Children's Advocacy Center Inc.**

Post Office Box 1237  
Niceville, FL 32588-1237  
Phone: 850.833.9237  
Fax: 850.833.9238

#### *Orange County*

##### **Orange County Children's Advocacy Center**

**Howard Phillips Center for Children and Families**  
601 West Michigan Street  
Orlando, FL 32805  
Phone: 407.317.7430  
Fax: 407.648.8213

#### *Osceola County*

##### **Children's Advocacy Center for Osceola County Inc.**

110 West Neptune Rd.  
Kissimmee, FL 34741  
Phone: 407.518.6936  
Fax: 407.518.1289

**Pasco County**  
**Pasco Kids First Inc.**  
7344 Little Road  
New Port Richey, FL 34654  
Phone: 727.845.8080  
Fax: 727.848.1292

7344 Little Road  
New Port Richey, FL 34654

Fax: 727.848.1292

**Suncoast Center Inc.**  
P.O. Box 10970  
St. Petersburg, FL 33733  
Phone: 727.388.1220  
Fax: 727.343.4234

P.O. Box 10970  
St. Petersburg, FL 33733

Fax: 727.343.4234

**Children's Advocacy Center**  
**Children's Home Society**  
1260 South Golfview Avenue  
Bartow, FL 33830  
Phone: 863.519.3900  
Fax: 863.519.3912

**Children's Home Society**  
1260 South Golfview Avenue

Phone: 863.519.3900

Fax: 863.519.3912

**Santa Rosa Kid's House**  
5643 North Stewart Street  
Milton, FL 32570  
Phone: 850.623.1112  
Fax: 850.623.1219

5643 North Stewart Street  
Milton, FL 32570

Phone: 850.623.1112

Fax: 850.623.1219

**Child Protection Center**  
720 South Orange Avenue  
Sarasota, FL 34236-7718  
Phone: 941.365.1277  
Fax: 941.366.1849

720 South Orange Avenue  
Sarasota, FL 34236-7718

Fax: 941.366.1849

**Kids House of Seminole Inc.**  
5467 North Ronald Reagan Boulevard  
Sanford, FL 32773-6332  
Phone: 407.324.3036  
Fax: 407.324.3045

5467 North Ronald Reagan Boulevard  
Sanford, FL 32773-6332

Fax: 407.324.3045

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*Safer, Smarter*  
FAMILIES



LAUREN'S KIDS