Drug Endangered Children

Kid Strong Conference
June 12, 2013
Charleston Civic Center
Drug Endangered Children

- Children who are at risk of suffering physical or emotional harm as a result of illegal drug use, possession, manufacturing, cultivation or distribution.
Drug Endangered Children

**Drug Abuse**
- Impairments (both physical and mental) that occur while under influence
- Expenditure of limited household resources on purchasing alcohol & other drugs
- Time spent seeking out drugs
- Time spent using alcohol or other drugs

**Child Maltreatment**
- Perinatal Drug Exposure
- Medical Complications – Prematurity
- Neglect
- Abuse – Physical / Sexual
- Violence – Domestic/Community
- Chaotic Home Environment
- Multiple Homes
- Child’s “Role” – parent ...
- Previous law enforcement/CPS involvement
Examples of a Drug Endangered Child?

• A child unsupervised because their parents are passed out all the time.
• Child present during drug deals and or cooks.
• Older siblings taking care of younger children in the home.
• Kids at school asking not to be sent home until after meals.
• Kids with knowledge of how to crush a pill or snort a rock.
• Kids living in homes with access to prescription drugs.
• A child being driven around by an impaired caregiver.
What is a Drug Endangered Child?

- Families enabling family members because they do not want to get in trouble.
- Grandparents raising grandchildren.
- Children living in homes with drugs but no blankets.
- Kids without appropriate clothing and shoes.
- Kids exhausted at school because of staying up all night in a hyper vigilant state.
- The unborn child.
- Children with lack of supervision, constantly
Kanawha County

- Ian Kessinger, 30 yrs old
- Nitro man arrested for beating his 6-week old son
- Fractured skull, wrist and clavicle
- “I did a very bad thing. I have a drug problem that I need to seek treatment for.”
Kanawha County

- Mother Leslie Erin Boggs, 25
- Daughter, Rayonna Boggs, 3 months old
- Baby died in May 2010
- Mother was drunk passed out on top the baby and smothered her.
Putnam County

- Child had cystic fibrosis
- Mother didn’t give the child medication
- Child died
- Mother on 29 medications at the time
Cabell County

- Mom arrested for taking baby’s medication, Fentanyl
- 4 month old baby in ICU
- Unhooked tubing from medication pump and emptied into syringe
The History of DEC

- Founder: Sue Webber-Brown, Narcotics Investigator, Butte County, California
- Preventable deaths of children observed
- Lack of multi-disciplinary cooperation prevented adequate response
- The National Alliance for Drug Endangered Children brought DEC to the nation in June 2004
- The WV Drug Endangered Children started in December of 2005
Crisis Roles and Responsibilities

**Law Enforcement**
- Secure scene
- Arrest suspect
- Decontaminate if needed
- Scan scene for dangers
- Remove children from site
- Decontaminate if needed
- Note dangers
- Contact lab certified team to dismantle lab
- Dismantle lab
- Neutralize chemicals
- Log chemicals
- Document crime scene
- Remove hazardous materials
- Complete paperwork

**Child Protection**
- Identify children
- Remove from scene
- Ensure protocol is implemented
- Escort, transport, or meet children at medical facility for medical testing
- Find safe placement
- Investigate options for family placement
- Complete paperwork
Who are DEC Practioners?

- Law Enforcement
- Child Protective Services
- Medical
- Prosecutors
- Courts
- Treatment
- Schools
- Public Health
- Prevention
Profile of a neglected child at school

- Poor attendance rates
- Is less likely to perform at grade level
- Is more likely to have behavior and discipline problems
- Is more likely to be assigned special education classes
- Is less likely to graduate
Why DEC?

- Improved assistance for drug endangered children by increased efficiency and effectiveness on the scene
- Raises public awareness to enhances community understanding of the necessity for community action
- Break the cycle of drug abuse
Neglected & Abused Children

• 50% more likely to be arrested as juveniles
• 40% more likely to be arrested for a violent crime as adults
• 33% more likely to become substance abusers

US Department of Justice
Why is parental modeling of substance use so damaging?
Let’s Talk about DEC in West Virginia
December 26, 2012

Associated Press

Experts: West Virginia must curb drugs to stop child abuse.
Children are dying from abuse and neglect at a higher rate in WV than any other state, a problem that judges, social workers and others say is fueled by rampant substance abuse and likely to grow unless lawmakers get serious about finding and paying for solutions.
Second paragraph

Without sufficient statewide safety nets of suitable foster care, adoptive families, in-home services and community-based prevention and treatment programs for addicted parents and their children, abuse victims are all too likely to repeat what they have learned.
“We are headed for a whole generation of lost souls,” worries Nicholas County Circuit Judge Gary Johnson, who says nearly 90% of the child-welfare cases he hears involve substance abuse. “we don’t address it until we address the drug issue.
It goes on . . .

- West Virginians are more likely to die from drug overdoses than residents of any other state, and one in 10 adults has a substance abuse problem.

- The Justice Center at the nonpartisan Council of State Government
And goes on . . .

- Nationally, child abuse and neglect reports have fallen for 5 straight years with the number of abuse related deaths hitting a five year low in 2011.
- But WV, where 16 children died last year, had the highest rate at 4.16 children per 100,000, slightly ahead of Louisiana and Oklahoma.

National Child Abuse and Neglect Data Systems.
And goes on . . .

- Cases of abuse and neglect are clogging the court system.
- The number in circuit courts has nearly doubled in less than a decade, from 1,238 in 2002 to 3,354 last year. . . In some circuits, they now consume as much as 40% of a judge’s time.
And goes on . . .

• Troubled Kids
  • Skip school
  • Use drugs
  • Become violent
  • Commit crimes
• And often end up in jail or prison just like their parents
And goes on . . .

• In 2002, WV courts terminated the parental rights of just 34 people . . . In 2011, judges terminated parental rights 1,065 times.

• At any given time, about 4,000 children are in out-of-home care and about 1,000 are awaiting adoption, legally severed from their parents.
And goes on . . .

- “The state must invest in community-based treatment both for the parents and the kids.”
- “Schools, medical and mental health providers, lawmakers and others have an obligation to provide the services.”
- “This is not a DHHR issue. It’s not the courts’ issue. It’s everyone’s issue and everyone’s challenge.”

~ WVDHHR Deputy Commissioner Sue Hage
Nationally in 2011

• 3.4 million referrals alleging maltreatment

• 2 million reports were screened in and had a CPS response.

• CPS found approximately 681,000 children were victims of maltreatment

• Children ages 0–3 years account for 34% of child maltreatment victims.
Nationally in 2011

The highest rate of victimization . . .

- Birth to 1 year had the highest rate of victimization at 21.2 per 1,000
Nationally in 2011: Most common type of maltreatment?

- 75% Neglect
- 15% Physical abuse
- 10% Sexual abuse
West Virginia in 2011:

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>53.4%</td>
<td>Neglect</td>
</tr>
<tr>
<td>34.3%</td>
<td>Physical abuse</td>
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<tr>
<td>4.4%</td>
<td>Sexual abuse</td>
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<tr>
<td>29.7%</td>
<td>Psychological</td>
</tr>
<tr>
<td>1.5%</td>
<td>Medical Neglect</td>
</tr>
</tbody>
</table>
How many children died from abuse and neglect in 2011 in the US?

• 1,545
  • 2.10 deaths per 100,000 children
  • Four-fifths (81.6%) of all fatalities were younger than 4 years old
  • Boys had a higher rate than girls at 2.47 boys per 100,000, girls at 1.77 per 100,000
Who abused the neglected children?

- Four fifths (84.6%) were between the ages of 20 and 49.
- More than one-half (53.6%) were women, 45.1% were men.
- Four fifths (80.8%) of perpetrators were parents.
In West Virginia in 2011

- Child population of 384,794
- In 2011 there were 33,445 referrals that came in
- 16,220 where screened out.
- 17,225 investigations completed
- Determined that 4,139 children were abused. (substantiated)
- Determined that 22,217 were not substantiated.
- WV had 450 total CPS workers that deal with investigation, case management, foster care.
There is child maltreatment

And there is trauma . . .
Children Exposed to Violence
Rules of an Addicted Home

1. Don’t talk
2. Don’t feel
3. Don’t trust
Handle With Care

- Children Exposed to Violence
- Pilot project in Kanawha and Putnam County
- Call Tracy Dorsey-Chapman at the U.S. Attorney’s office, SDWV
- Helping Traumatized Children Learn
- The Purple Book
How do we find drug endangered children?

- Found in meth lab at arrest or explosion
- Come to hospital with illness or injury
- Identified as victim of neglect by school, healthcare provider or neighbor
Recognizing and Reporting Child Abuse
Child abuse & neglect occurs in all cultural, ethnic, occupational and socio economic groups. There are certain known factors which, when combined, increase the likelihood of child maltreatment.

They may include:

• Parental predisposition towards maltreatment (abused as a child)
• Stress within the home due to marital, employment, financial problems
• Parental substance, alcohol, or drug abuse
• Lack of knowledge of child development/inadequate parenting skills
• Low self esteem, poor impulse control, low level of frustration tolerance, isolation from the support of family and friends
• Disabilities, which increase the risk of abuse and neglect of children
Types of Child Abuse and Neglect

- Physical abuse
- Physical neglect
- Sexual abuse
- Emotional/mental maltreatment

*Most child abuse and neglect is not a one time event, but more often occurs in a pattern over time. Many children are subject to more then one form of maltreatment.*
• Physical Neglect
  Inadequate nutrition, clothing, and hygiene, refusal of health care, delay in health care, abandonment, inadequate supervision

• Emotional Neglect
  Inadequate nurturing or affection, family violence, refusal of psychological care

• Educational Neglect
  Permitted chronic truancy

What to look for:
• Inappropriate dress
• Unclean body and clothes
• Hungry/Tired
• Poor growth
• Dental decay
• Needy for attention, acting out
• Homework incomplete
• Parent disconnected with school
• Child takes on adult roles
Questionable Child Abuse and Neglect Situations

**Corporal Punishment**

- The intent of the reporting law is not to interfere with appropriate parental discipline but to respond to extreme or inappropriate parental actions.

- Excessive corporal punishment can easily result in injury due to size, anger and force.

- Actions that are excessive or forceful enough to leave injuries may be considered abusive.

**Distinguishing Abuse From Accident**

**Consider:**

- **Location of the injury**
  - Certain locations of the body are more likely to sustain injury: knees, elbows, shins, forehead
  - Protected body parts are less likely to injure: back, thighs, genital areas, buttocks, back of legs and face.

- **Number & frequency of injury**
  - The greater number of injuries, the greater cause for concern, especially in different stages of healing.

- **Size and shape of injury**
  - Look at the marks, look for defined shapes: belt, stick, board, coat hanger, hair brush.
Questionable Child Abuse and Neglect Situations (cont.)

Description of How Injury Occurred

- An accident should have a reasonable explanation.

- When the description of how the injury occurred and in the injury are inconsistent, there is cause for concern.

- For example, it is not likely that a fall off a chair onto a rug would produce bruises all over the body

Consistency of Injury with the Child’s Capability

- As a child grows and gains new skills, his/her ability to engage in activities which can cause injury increases.

- A toddler trying to run is likely to suffer bruised knees or a bump on the head and less likely to suffer a broken arm than is an eight year old learning to climb trees.

- A two week old does not have the movement capability to self-inflict bruise.
Signs of Child Abuse
Some signs are more obvious than others, trust your instincts, suspected abuse is enough of a reason to report, you do not need proof.

1. Unexplained injuries
   (With unconvincing explanations)

2. Changes in Behavior
   (Anxious, depressed, more aggressive)

3. Returning to Earlier Behaviors
   (thumb sucking, bed wetting)

4. Fear of going home
   (leaving school)

5. Changes in eating
   (weight gain or loss)

6. Changes in sleeping
   (may appear tired from lack of sleep)

7. Changes in school performance
   (difficulty concentrating, continued absences)

8. Lack of personnel care or hygiene
   (appear dirty and uncared for)

9. Risk taking behaviors
   (using drugs or carrying weapons)

10. Inappropriate sexual behaviors
    (overly sexualized behaviors and language)
If a Child Reaches Out to You

**DO:**
- Remain calm.
- Believe the child.
- Allow the child to talk.
- Show interest and concern.
- Reassure and support the child.
- Take action. It could save a child’s life.

**DON’T:**
- Panic or overreact.
- Press to child to talk.
- Promise anything you can’t control.
- Confront the offender.
- Blame or minimize the child’s feelings.
- Overwhelm the child with questions
Persons mandated to report suspected abuse and neglect – 49-6A-2

Any medical, dental or mental health professional, Christian Science practitioner, religious healer, school teacher or other school personnel, social service worker, child care or foster care worker, emergency medical services personnel, peace officer or law-enforcement official, humane officer, member of the clergy, circuit court judge, family court judge, employee of the Division of Juvenile Services, magistrate, youth camp administrator or counselor, employee, coach or volunteer of an entity that provides organized activities for children, or commercial film or photographic print processor who has reasonable cause to suspect that a child is neglected or abused or observes the child being subjected to conditions that are likely to result in abuse or neglect shall immediately, and not more than forty-eight hours after suspecting this abuse or neglect, report the circumstances or cause a report to be made to the Department of Health and Human Resources.
Frustrations

You call and call CPS and nothing happens . . .

CPS will not tell me what is going on . . .

After the second or third call you give up . . .
You are a Mandated Reporter

• You need to report
• Now
• You are making a record and building a case.
• 49-6A-2
• Be specific
• Always report to CPS; better safe then sorry
• Call it in
• Use your email (photo’s)

• Call the office or hotline
  If no response
• Ask for the supervisor
  If no response
• Ask for the CSM
Reporting Abuse and Neglect

**DO’S**

- I saw
- I witnessed
- I heard
- The car was a . . .
- The child had a bruise on her neck
- The address is
- Her name is
- She goes to ___school and her teachers name is

**DON’TS**

- I think
- I feel
- I believe
- I know but I can’t tell you why
- So and so told me
- He lives around the corner from the Go-mart
What should someone expect to have ready when making referral to CPS?

- **Demographic Information** (names, birthdays/approximate age, address, places of employment, children’s schools, etc.).

- **Alleged Maltreatment** – What is the story? When did it occur? Who else know about it? What is the condition of the children? How long has it been happening.

- **Child information**—functioning, verbal ability, physical/mental health issues.

- **Adult/Caregiver information** – substance abuse, DV, general functioning, parenting, physical/mental health issues, schedule, criminal history, support network, disciplinary practices, good/bad aspects of care giving.

  Don’t let lack of information keep you from making a report
Reporting Abuse and Neglect

• If it’s a sex crime or one of serious physical abuse you must also report it to law enforcement
• They will ask a lot of questions
• Request in writing whether or not the referral was accepted.
• Request notification when the case is closed.

800-352-6513
CPS Purpose

• There are two primary purposes for CPS intervention;
  • To protect and control the safety of children who are at risk of maltreatment, and;
  • To provide services to alter the conditions which created the risk of maltreatment.
When does CPS become involved with a family where there is drug abuse?

- CPS becomes involved in drug cases when there is evidence that drug use/abuse/distribution has a direct effect on the caregiver’s parenting or on the children themselves.
Imminent danger

An emergency situation in which the welfare or the life of a child is threatened.

• Non accidental trauma inflicted by parent, guardian, sibling or a babysitter or other caretaker; or

• A combination of physical and other signs indicating a pattern of abuse which may be medically diagnosed as a battered child syndrom; or
Imminent danger (cont.)

- Nutritional deprivation; or
- Abandonment by a parent, guardian or custodian; or
- Inadequate treatment of serious illness or disease; or
- Substantial emotional injury inflicted by a parent, guardian or custodian; or
- Sale or attempted sale of the child by the parent, guardian or custodian.
A single mother of a four year old and two year old, works part time at a convenience store. Every evening after work she picks the kids up from daycare. Upon arriving home she settles the kids in for the evening, prepares dinner and they eat as a family. After eating she plays with both children paying attention to their particular needs, than settles them down for bed.

CPS no involvement

LE no involvement
Same scenario as above except after settling the kids in for the evening mom goes to the bathroom and does a line of cocaine before preparing dinner. All other information stays the same.

*CPS no involvement, based on these facts the kids are taken care of*

*LE could arrest for cocaine*
Add in the drug dealer delivering the cocaine sexually assaults one of the kids

*CPS involvement is failure to protect*

*LE could arrest for the sexual assault*
Same scenario as above except before leaving work moms gets a twelve pack of beer. She does not drink any of the beer until she gets home and she drinks while cooking, during dinner and while playing with the kids.

CPS no involvement, beer is legal and she is taking care of the kids

LE no involvement, she is not drinking and driving
Same set of facts except upon getting home mom gives the two year old a bottle and fixes a sandwich for the four year old. She goes to the living room and does a line of cocaine off the coffee table. She leaves the straw and residue lying on the coffee table within easy reach of the kids. She then starts drinking heavily while watching TV. She passes out on the couch leaving both children unattended.

Everyone responds in mass, in fact they car pool. When they arrive there is a neighbor standing outside on his front porch yelling “I told you so, they do this all the time!”
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