



EXECUTIVE SUMMARY: **FINDINGS FROM THE UNH MULTI-SITE EVALUATION OF CHILDREN'S ADVOCACY CENTERS (CACs)**

Children's Advocacy Centers (CACs) are non-profit agencies designed to coordinate multi-disciplinary investigations of child abuse in a child-friendly environment. They are playing an increasingly important role in shaping the community response to child abuse victims and their families. The numbers of CACs have grown dramatically in the last twenty years: The first CAC was developed in 1985 and in 2005 over 500 CACs had been admitted as full or associate members of the National Children's Alliance (NCA), the CAC accrediting agency.

The Crimes against Children Research Center at the University of New Hampshire has recently completed the most rigorous, comprehensive evaluation of Children's Advocacy Centers (CACs) to date. The Multi-Site Evaluation of CACs, funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) was designed to evaluate the impact of CACs on children, families, systems, and communities. Using a quasi-experimental design, data from over 1000 cases of sexual abuse were collected from four CACs and from communities without CACs. The four participating CAC sites were Lowcountry Children's Center, Dallas Children's Advocacy Center, National Children's Advocacy Center, and the Pittsburgh Child Advocacy Center.

Findings highlight many benefits of CACs, and establish some of the first research-based support for the CAC model of child abuse investigation:

- **CACs showed significantly more evidence of coordinated investigations.** Police in CAC communities were involved in 81% of child protective service investigations of sexual abuse compared to only 52% of cases in comparison communities. Team interviews (interviews with two or more observers) were more common in CAC cases than comparison cases (28% versus 6%, respectively).
- **More children involved with a CAC received a forensic medical examination.** Forty-eight percent of children in the CAC samples received an exam versus only 21% in the comparison sample.
- **Sixty percent of CAC cases included a referral for mental health services versus only 22% of comparison community cases.** Thirty-one percent of children referred for counseling by CACs were provided those services on-site by a therapist who specialized in treating victims of child abuse.
- **Parents and caregivers in the CAC sample were more satisfied with the investigation than in the comparison sample.** Children from CAC samples were somewhat less likely to describe themselves as feeling scared when they were interviewed than children from comparison samples.
- **All of the CACs in the study were regarded as community leaders and experts in the area of child abuse.** The participating CACs provided many services to the larger community: training to other professionals, consultation to outside agencies, prevention activities, and community education on child maltreatment.

These findings offer new research-based support for the CAC model. Additional findings provide suggestions for improving the response to children:

- **CACs should move beyond promoting themselves as a way to reduce the number of times children are interviewed.** Duplicative interviewing was actually rare in both CAC and comparison sites: most children experienced only one or two forensic interviews in all communities. CACs should instead emphasize their effectiveness at increasing agency involvement in child abuse cases.
- **While interagency coordination was greater at CACs versus comparison sites, it was far from universal.** CAC professionals should identify ways to increase joint law enforcement and CPS interviews and enhance case review procedures.
- **Only CACs with strong involvement from law enforcement and district attorneys' offices showed an impact on criminal justice outcomes.** Criminal justice outcomes were similar in CAC and comparison communities unless a site had strong law enforcement and district attorney involvement. CACs should strive to ensure full law enforcement participation.
- **While most were very satisfied, some caregivers and children in CAC communities did have complaints that need to be addressed.** Caregivers wanted more commitment from investigators and more frequent communication about the case. Some children (15-20%) were dissatisfied with the interview experience. Improving children's comfort should be a high priority for all investigators.
- **CACs differ dramatically one from another in program design, client and case characteristics, referral patterns, agency involvement, and outcomes.** This means that CACs will vary in the ways they are effective. CAC advocates should consider whether greater uniformity is desired, or alternatively, whether CACs should be conceptualized as a package of interventions that can differ from site to site. Either way, it is recommended that CACs use data on procedural and outcome variations to initiate discussions about performance standards and benchmarks of practice.

PROJECT RESEARCHERS: *University of New Hampshire:* Theodore P. Cross, Lisa M. Jones, Wendy A. Walsh, Monique Simone; *Lowcountry Children's Center:* Arthur Cryns, Polly Sosnowski; *Dallas Children's Advocacy Center:* Tonya Lippert-Luikart, Karen Davison; *National Children's Advocacy Center:* Amy Shadoin, Suzanne Magnuson; *Pittsburgh Children's Advocacy Center:* David Kolko, Joyce Szczepanski.

For further information about the evaluation project or for references to papers that provide greater detail on the findings listed above please visit our website at www.unh.edu/ccrc/multi-site_evaluation_children.html or contact:

LISA M. JONES, PH.D., Crimes against Children Research Center (CCRC), University of New Hampshire, 10 West Edge Dr., Durham, NH 03824. Telephone: (603) 862-2515. Email: lisa.jones@unh.edu