

# Grants to Assist Children and Youth Exposed to Sexual Assault, Domestic Violence, Dating Violence, and Stalking Program

The goals and objectives of the Grants to Assist Children and Youth Exposed to Sexual Assault, Domestic Violence, Dating Violence, and Stalking Program (CEV Program) are to increase the resources, services, and advocacy available to children, youth, and their non-abusing parent or caretaker, when a child has been exposed to domestic/sexual violence.

**THE CONSOLIDATED GRANT PROGRAM TO ADDRESS CHILDREN AND Youth Experiencing Domestic and Sexual Assault and Engage Men and Boys as Allies (Consolidated Youth or CY Program) has received appropriations in FYs 2013 through 2016. This program, which consolidated four programs previously authorized under earlier iterations of VAWA, including the CEV Program, funds projects that support child, youth, and young adult victims through direct services, training, coordination and collaboration, effective intervention, treatment, response, and prevention strategies. The last grants made under the CEV Program were awarded in FY2011.**

## 17 Grantees Reporting

Between July 1, 2013 and June 30, 2015, 17 unique grantees reported activities funded by the CEV Program.

## 128 Child Victims Served

On average, grantees served 128 child victims during each 6-month reporting period.

## 694 Children Served

On average, grantees served 694 children indirectly exposed to violence during each 6-month reporting period.

*Children who are exposed to or experience violence, can suffer from both immediate and long-term health effects, such as depression, anxiety, difficulty focusing in school, delinquency, and/or post-traumatic stress disorder.<sup>354,355</sup>*



### PA • Grantee Perspective

The CEV grant funding has allowed us to focus on the needs of children who have been exposed to violence, and/or were a direct victim of violence. Often the needs of those children's non-offending caretakers are addressed and focused on, leaving a gap in addressing the challenges faced by the children themselves. Therefore, because of this specific program funding, we were able to provide services such as a psycho-educational group to guide and encourage the non-abusing parents and caretakers in addressing the needs of children exposed to or victimized by violence. We were able to increase services focused on providing clinical level interventions to children in three residential programs, and served children outside of our agency through collaboration with community agencies such as Head Start.

YWCA YORK, PENNSYLVANIA



### NC • Grantee Perspective

This funding allowed us to make significant progress in working collaboratively to help children exposed to violence. The forming of the CEV Collaborative itself created a greater understanding of the policies and protocols specific to each agency and how it impacted services. It allowed increased staff development that was critical to the provision of quality, comprehensive services. It allowed an increase in the number of clinicians trained in evidence-based treatment and it resulted in an expansion of the Parent-Child Interaction Therapy treatment program. This in turn, assisted more children. Overall, systems change was established due to the presence of these funds and allowed for a strong foundation in which to continue our defense of the children we serve.

30TH JUDICIAL DISTRICT DOMESTIC VIOLENCE  
SEXUAL ASSAULT ALLIANCE, NORTH CAROLINA

Grantees provided culturally, linguistically, and community-relevant services to meet the needs of underserved populations, or provided referrals to existing services in the community.

### Grantees engaged in the following purpose areas:

- Provide services for children and youth exposed to domestic/sexual violence, which may include direct counseling, advocacy, or mentoring, and must include support for the non-abusing parent or the child's caretaker; and
- Provide training, coordination, and advocacy for programs that serve children and youth (such as Head Start, child care, and after-school programs), on how to safely and confidentially identify children and families experiencing domestic violence and properly refer them to programs that can provide direct services to the children and family.

### General Grant Information

Information for this report was submitted by **17** individual grantees for the July 1, 2013 to June 30, 2015 progress reporting period.

### Staff

Grant-funded staff provide training to professionals working with children and victim services to both child victims and children indirectly exposed to domestic/sexual violence. **Being able to hire staff is critical to the overall function and success of programs.**

- **17** (100%) grantees used funds for staffing needs.
- Grantees funded an average of **19** full-time equivalent (FTE) staff during each 6-month period.
- Grantees most often used these staffing funds to support mental health professionals and child advocates.

**Table 1** | Staff supported with CEV grant funds, July 2013–June 2015: **Selected groups**

Staff funded	6-month average	
<b>Total FTE staff funded</b>	<b>19</b>	
Mental health professionals	<b>5</b>	<b>24%</b>
Child advocates	<b>4</b>	<b>22%</b>
Counselors	<b>3</b>	<b>15%</b>
Program coordinators	<b>2</b>	<b>11%</b>
Administrators	<b>2</b>	<b>10%</b>
Case managers	<b>1</b>	<b>6%</b>

NOTE: Data presented for the most frequently reported categories only (≥5%).

## Training

Grantees provide training to social service and healthcare professionals, educators and other school staff, child care providers, and other professionals to improve the professional identification of and response to children exposed to domestic/sexual violence. **This training improves the professional response to victims and increases offender accountability.**

- **13** (76%) grantees used funds for training.
- Grantees convened a total of **119** training events.
- Grantees trained a total of **2,417** people.
- Most often these trainings reached child protective service workers (**25%**), mental health professionals (**17%**), educators (**8%**), and child care staff (**8%**).

## Services for Child Victims, Children Indirectly Exposed, and their Non-Abusing Parents/Caregivers

Child victims and children indirectly exposed to violence need comprehensive support services that meet a wide array of needs to help them become and remain safe from violence.

- **16** (94%) grantees used funds for victim services.

## Child Victim Services

Grantees may provide child victims with individual or group counseling services; offer education advocacy with the child's school; assist the child and accompanying parent or caregiver in obtaining a protection order; and provide safety planning, court accompaniment, shelter, and/or transportation.

- Grantees provided services to an average of **128** child victims during each 6-month period.
- Nearly **100%** of child victims who sought services received them during each 6-month period.

### **During each 6-month period, on average, grantees provided:**

- Child advocacy services to **83** victims;
- Crisis intervention services to **55** victims;
- Support group/counseling services to **47** victims; and
- Education advocacy to **18** victims.

## Child Victims Seeking Services

Grantees serve child victims of domestic/sexual violence. Between July 1, 2013 and June 30, 2015:

- The majority of victims served or partially served were victims of **sexual assault** (95%).



### **NC • Grantee Perspective**

We used our CEV funding to hire a social worker to work with English speaking families, which increased our bilingual social worker's capacity to serve more families with limited English proficiency. We were then able to provide linguistically, culturally, and community relevant services to these families, including using bilingual resources, being able to communicate with family members in their native language, and being able to discuss DV issues related to their specific culture. This would not have been possible without CEV funding.

**MECKLENBURG COUNTY CSS WOMEN'S COMMISSION,  
NORTH CAROLINA**



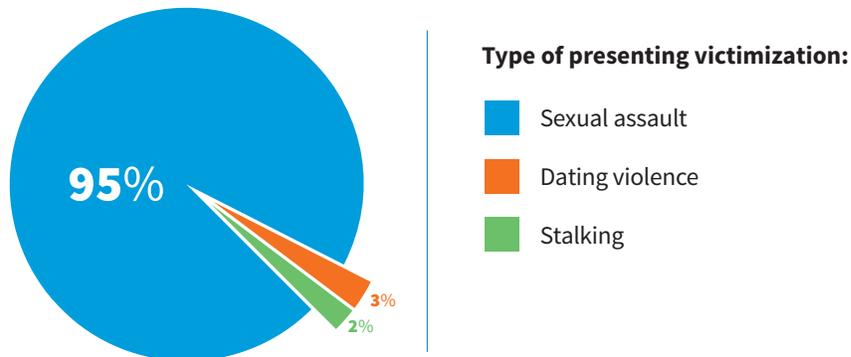
### **IA • Grantee Perspective**

CEV grant funds have allowed Helping Services to train 321 professionals, community members, and volunteers on the impact of domestic violence on children, on identifying and referring children to services, and on responding to a child's disclosure of abuse. One participant wrote, "Now I know what to look for in children. I never really understood how abuse affects children." Collaboration, information, and resource sharing has increased throughout the service area amongst youth-serving agencies as more information is presented.

**HELPING SERVICES FOR NORTHEAST IOWA**

**Figure 1** | Provision of child victim services by CEV Program grantees, by type of presenting victimization

**Child victims served by type of victimization** (6-month average)



**Table 2** | Child victims seeking services with CEV grant funds, July 2013–June 2015

Child victims seeking services	6-month average	
<b>Total child victims seeking services</b>	<b>128</b>	
Child victims served	89	69%
Child victims partially served	39	30%
Child victims not served	< 1	< 1%

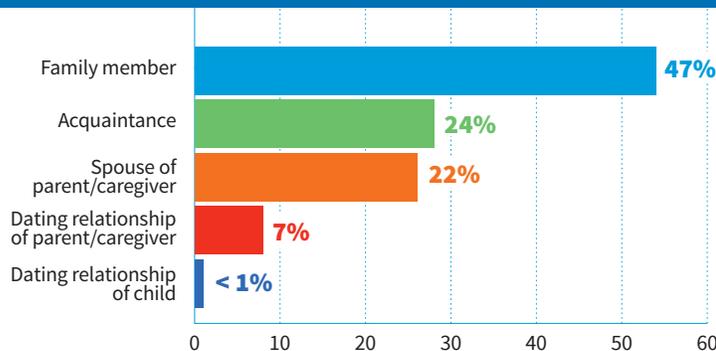
**NOTE:** "Partially served" represents victims who received some but not all of the service(s) they requested, provided those services were funded under the CEV Program grant. "Not served" represents victims who sought services and did not receive the service(s) they were seeking, provided those services were funded under the CEV Program grant.

### Child Victims' Relationship to Offender

Grantees serve child victims of domestic/sexual violence. Between July 1, 2013 and June 30, 2015:

- The majority of child victims served or partially served were victimized by a **family or household member** (44%).
- The remaining child victims were most commonly victimized by an **acquaintance** (23%) or by a **spouse or intimate partner of the parent/caregiver** (22%).

**Figure 2** | Type of victimization by child's relationship to offender: **Sexual assault**



**NOTE:** Numbers for relationship to offender were too small to compute for dating violence and stalking victimizations.

## Reasons Child Victims Were Not Served or Were Partially Served

During each reporting period, grantees noted the following barriers as reasons why child victims were not served or were only partially served:

- Services were not appropriate for victim; or
- Program unable to provide service due to limited resources.

## Services for Children Indirectly Exposed to Violence

Grantees provide a variety of services to children indirectly exposed to domestic/sexual violence, including child advocacy, crisis intervention, and individual or group counseling. Children indirectly exposed to violence may also require assistance with school- and/or health-related issues, transportation needs, and legal issues. **These comprehensive support services address a wide variety of needs to help children become and remain safe from violence.**

- Grantees provided services to an average of **694** children indirectly exposed to violence during each 6-month period.
- **98%** of children indirectly exposed to violence who sought services received them during each 6-month period.

### During each 6-month period, on average, grantees provided:

- Child advocacy services to **439** children;
- Support group/counseling services to **357** children;
- Education advocacy to **203** children;
- Crisis intervention services to **137** children; and
- Parent-child counseling or treatment intervention to **115** children.

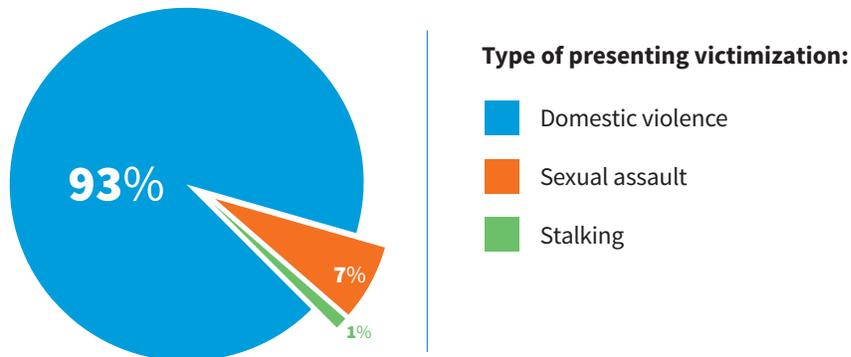
## Children Indirectly Exposed to Violence Seeking Services

Grantees serve children indirectly exposed to domestic/sexual violence. Between July 1, 2013 and June 30, 2015:

- The majority of children served or partially served were indirectly exposed to **domestic violence** (93%).

**Figure 3** | Provision of services to children indirectly exposed to violence by CEV Program grantees, by type of violence

Children served by type of victimization (6-month average)



NOTE: No children reported being indirectly exposed to dating violence.

**Table 3** | Children indirectly exposed to violence seeking services with CEV grant funds, July 2013–June 2015

Children seeking services	6-month average	
<b>Total children seeking services</b>	<b>707</b>	
Children served	637	90%
Children partially served	57	8%
Children not served	13	2%

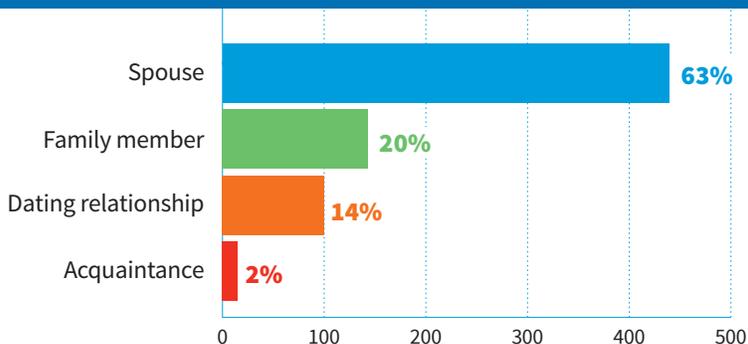
NOTE: "Partially served" represents children who received some but not all of the service(s) they requested, provided those services were funded under the CEV Program grant. "Not served" represents children who sought services and did not receive the service(s) they were seeking, provided those services were funded under the CEV Program grant.

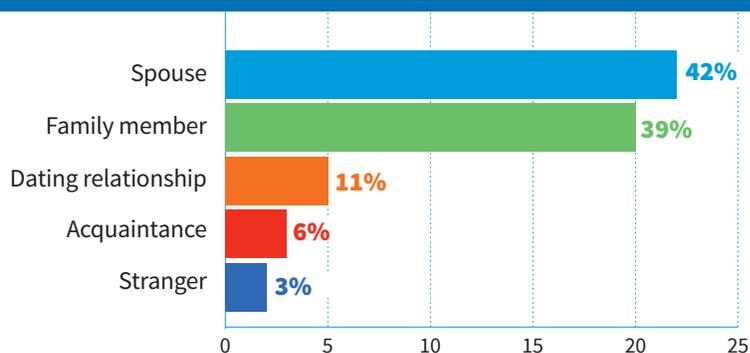
### Indirectly Exposed Children’s Relationship to Offender

Grantees serve children indirectly exposed to domestic/sexual violence. Between July 1, 2013 and June 30, 2015:

- The majority of children served or partially served were indirectly exposed to violence by a **spouse or intimate partner of a parent/caregiver** (61%); and
- The remaining children were most commonly exposed to violence by another **family or household member** (22%).

**Figure 4** | Type of indirect exposure by child’s relationship to offender: Domestic violence



**Figure 5** | Type of indirect exposure by child's relationship to offender: **Sexual assault**

**NOTE:** Numbers for relationship to offender were too small to compute for dating violence and stalking victimizations.

## Reasons Children Indirectly Exposed to Violence Were Not Served or Were Partially Served

During each reporting period, grantees noted the following barriers as reasons why children indirectly exposed to violence were not served or were only partially served:

- Program reached capacity;
- Hours of operation;
- Services were not appropriate for child;
- Program unable to provide service due to limited resources; or
- Transportation.

## Demographics of Children Served and Partially Served

Grantees served or partially served an average of **128** child victims and **694** children indirectly exposed to violence during each 6-month period. The majority of child victims were **white** (78%), **female** (71%), and between the ages of **0 and 12** (70%). The majority of children indirectly exposed to violence were **white** (49%), **female** (53%), and between the ages of **0 and 12** (89%).

**Table 4** | Demographic characteristics of children served with CEV grant funds, July 2013–June 2015

Characteristic	6-month average			
	Child victims		Children indirectly exposed	
	N	%	N	%
<b>Race</b>				
Asian	0	0%	6	1%
American Indian and Alaska Native	2	2%	19	3%
Black or African American	9	7%	140	22%
Hispanic or Latino	17	14%	202	32%
Native Hawaiian or Other Pacific Islander	< 1	< 1%	3	< 1%
White	95	78%	308	49%
Unknown (missing)	7		64	
<b>Gender</b>				
Female	90	71%	364	53%
Male	37	29%	329	47%
Total	127		693	
Unknown (missing)	1		< 1	
<b>Age</b>				
0–12	89	70%	617	89%
13–17	38	30%	75	11%
Total	127		692	
Unknown (missing)	1		2	
<b>Other</b>				
Children with disabilities	7	5%	26	4%
Children who are Deaf or hard of hearing	1	< 1%	2	< 1%
Children with limited English proficiency	1	< 1%	21	3%
Children who are immigrants, refugees, or asylum seekers	2	2%	10	1%
Children who live in rural areas	102	79%	284	41%
Children who are lesbian, gay, bisexual, transgender, or intersex	1	< 1%	1	< 1%
Children who are homeless/runaways	1	1%	26	4%
Children with mental health issues	25	19%	67	10%

## Support Services and Referrals for Non-Abusing Parents/Caregivers

In addition to services for children, grantees provide support services and referrals to non-abusing parents/caregivers of child victims and children indirectly exposed to violence. Grantees may either provide these services directly, or refer parents to other agencies.

- Grantees provided support services to an average of **354** non-abusing parents/caregivers.
- Grantees provided referrals to an average of **250** non-abusing parents/caregivers.

**During each 6-month period, grantees provided the following services and/or referrals to non-abusing parents/caregivers:**

- Advocacy services;
- Case management;
- Support group/counseling services;
- Parent education or classes; and
- Education advocacy.

## Shelter Services

Grantees provided emergency housing to an average of **22** non-abusing parents/caregivers and **37** accompanying family members for a total of **6,786** bed nights.

## Remaining Areas of Need

Grantees most frequently cited the need for **more staff, especially clinicians, to treat children exposed to violence**, and for **expanded options for treatment**.

Grantees also cited a number of **barriers that prevent children from receiving treatment**, including:

- Limited transportation;
- A lack of adequate screening for exposure to violence;
- Difficulty providing appropriate services for underserved populations, including immigrants, LGBT populations, and adult male victims;
- Limited bilingual staff and translation services; and
- Limited understanding among school personnel, service providers, and parents about the impact of violence on children.



### WA • Grantee Perspective

This CEV grant-funded initiative allowed KCSARC to create a solid working relationship with agencies that can partner with us to enhance the services delivered to child victims and their families. KCSARC specializes in resolving the trauma. However, many families have other needs that are better addressed by the youth-serving agencies in the community. Our partnerships with the two youth-serving agencies will remain in place. They have become accustomed to the treatment that we provide here, and are more knowledgeable as to the follow-up services that will benefit the families.

**KING COUNTY SEXUAL ASSAULT RESOURCE CENTER, WASHINGTON**



### TX • Grantee Perspective

With CEV grant funding, our agency was able to provide a therapeutic classroom for children and families living in emergency shelter. With increased need for child care for working parents, the on-site center was unable to consistently meet the immediate needs of families recently displaced from their homes because of violence. Through our work, we have grown to understand the specific needs of families who enter emergency shelter; one of those being a need for sensitive and specialized child care. For parents, it provides much needed time to heal and time to plan for what comes next. For children, this care is a space to begin processing the trauma in a safe environment and a time to play and begin to rebuild their understanding of safe relations with adults and peers.

**TRAVIS COUNTY DOMESTIC VIOLENCE AND SEXUAL ASSAULT SURVIVAL CENTER, TEXAS**



### NC • Grantee Perspective

Currently, there are waiting lists for services and there needs to be increased staffing and clinicians to assist with this, especially during the summer months when many children find themselves without a safe place. There is a need to expand the evidence-based curriculum to include a school-based treatment program; the Cognitive Behavioral Intervention for Trauma in Schools Program is a recommended expansion. There also continues to be a need for additional therapy types and for our area, the use of animal assisted therapy is a good option.

**30<sup>TH</sup> JUDICIAL DISTRICT DOMESTIC VIOLENCE SEXUAL ASSAULT ALLIANCE, NORTH CAROLINA**



### NY • Grantee Perspective

One of the most significant areas of remaining need continues to be the need for more accessible, safe, and inexpensive forms of public transportation here on Long Island. The geography of Long Island, New York, especially Suffolk County, is itself a huge obstacle when it comes to having to rely on public transportation services. Suffolk County is a mixture of suburban and rural communities and the distance between some towns can be lengthy. Public transportation in Suffolk County often requires multiple transfers and long waiting times even for short distance travels. It is also frequently exposed to budget cuts which ultimately impact service routes.

**VICTIMS INFORMATION BUREAU OF SUFFOLK, INC.,  
NEW YORK**

Grantees also reported a need for **improved training for law enforcement, hospital personnel, and prosecutors on trauma-informed practices and on recognizing signs of exposure to violence.**

Finally, some grantees mentioned the need for enhanced **community collaboration** between service providers, courts, and law enforcement.



### TX • Grantee Perspective

Service providers generally do not have an in-depth understanding of how trauma affects young children's development and behavior, and ability to succeed in group settings. School personnel, after school programming staff, community child care facility staff, and extracurricular activity staff often are not able to identify how trauma, such as domestic and/or sexual violence, can impact behaviors, development, and a child's success in academics or group settings. Subsequently, children with "disruptive behaviors" are often labeled, and referred to medical professionals, who also may not recognize signs of trauma and may prescribe medications to manage behavior. Symptoms may subside, but healing from exposure to violence will likely not occur.

**TRAVIS COUNTY DOMESTIC VIOLENCE AND SEXUAL  
ASSAULT SURVIVAL CENTER, TEXAS**



### NJ • Grantee Perspective

It has been noted in previous reports that children exposed to sexual assault, domestic violence, dating violence, and stalking, and their non-abusing parents and caregivers would benefit from strengthened relationships between the criminal and family court systems and the community agencies providing services to these families. Establishing formalized partnerships between the courts, law enforcement, child protective services, and community agencies, to improve the community response to families affected by domestic violence continues to be an issue for consideration.

**SHELTER OUR SISTERS, NEW JERSEY**