

Abstract

In June 1995 The Baltimore Alliance Against Child Sexual Abuse (now known as The Baltimore Alliance Against Child Abuse and Neglect was formed. This group is made up of over (40) forty public and private organizations within The Baltimore area, to include The Baltimore Police Department, Baltimore State's Attorneys Office, Department of Social Services and The Child Advocacy Network. The primary mission of this group was to identify real problems in dealing with how sexual child abuse investigations and services were handled and coming up with viable and workable solutions to deal with this continuing problem.

The biggest problem of concern was the way the sexual child abuse investigations were conducted. The child victims were being subjected to multiple interviews by numerous parties involved in the investigation. The added problem of the victimized child in telling the story to a uniformed police officer also was a problem that was addressed. It was determined that even though Maryland had a Family Law on the books indicating that joint investigations for sexual child abuse would be conducted by the Police, States Attorney and The Department of Social Services, this was actually not the case. There was a lack of coordination and cooperation between all departments and the actual intent of the law was not being followed. Another problem found was that the " Hearsay Law" in Maryland does not allow police officers to testify on the childs behalf, only a licensed doctor/ psychologist, licensed social worker or teacher can testify for the child in a court of law. The Child Advocacy Network was formed in an attempt to provide a neutral setting to interview the child victim and his/her family. This network would provide that valuable link - a Licensed Social Worker / Psychologist to conduct

the interview and also enable the child to undergo a forensic medical examination without the fear and trauma of a hospital. These problems were brought to light because of the continuing problem of child sexual abuse not only in this jurisdiction but, in jurisdictions across the nation. This is a growing problem and there was a need and desire from all parties involved to deal with this issue and to insure that every child victim would be entitled to a proper investigation and support services. This problem seemed to be all over the city and the Alliance wanted to take a position and set out to do (3) three major goals ; 1) to reduce the incidence of sexual victimization, 2) to ensure access to services for children and their families , and 3) to make certain that every person who sexually offends is held accountable and offered intervention services.

Data and information were received from Police Department statistics, records from The Department of Social Services and prosecution information was received from the States Attorney's Office. Additionally, information was collected by the Alliance on how other areas and jurisdictions handle sexual child abuse cases across the nation.

The old system that our Department operated under was a reactive mode. It was time consuming with an extremely high volume of cases for each detective to investigate. Lack of cooperation and coordination with The Department of Social Services and The States Attorney's Office caused poor investigations and multiple interviews and examinations for the child victims.

The new system referred to as our " First responder Program" enabled us to streamline our services and to provide far better quality investigations. The Child Abuse Unit was able to reorganize within the existing budget and manpower to provide the victims of child abuse with a better quality of service.

It took nearly a year with numerous meetings dealing with all parties involved in the

investigation of sexual child abuse to establish a standard operating procedure that was workable for all parties concerned .

This new procedure is also in line with our Department's Community Policing Program to have more uniformed police officers on the streets. It normally takes 4-6 hours to conduct a preliminary sexual child abuse investigation and statistics indicated that we were able to save patrol in excess of 3600 man hours. These hours saved allowed the uniform patrol officers to remain on the street to handle street related crimes and calls for service.

This new procedure also allowed our Unit to effect 390 arrests and obtain 207 exceptional clearances during 1996. The Unit also handled 1312 calls for service of which 911 were under the first response mode and they had a 87.6 % clearance rate. This accomplishment gave us the feeling that we were making a difference in the protection of these abused children. The Unit presently operates 24 hours a day - 7 days a week - maintaining a duty detective for non - office hours. We work maintaining 3 shifts, one being a flex shift that enables that squad to be moved if necessary to help handle the heaviest volume of calls. Therefore, the new system will require continued monitoring to enable us to operate under optimum conditions.

Detectives receive and will continue to receive specialized training provided by our Department and outside agencies dealing with child abuse issues

This new procedure was approved by Police Commissioner Thomas C. Frazier and The Chiefs of The Patrol and Criminal Investigation Bureaus as they also saw a need to improve services to the victims of child abuse and acknowledged that this is a true problem.

Our Department took this stance out of Community concern for the welfare and protection of our children - They are our future.

≡ 2 Description

The sexual abuse of children is one of the most emotionally inflammatory issues in American Society today, and it is a topic that most people do not want to discuss. Few behaviors of any type, sexual or otherwise, stir up the same fear and panic, or carry the equivalent level of potential moral condemnation as sex between adults and children. The mere thought of sexually abusing a child, challenges the most deeply held morals of contemporary society.

For most Americans, the thought of an adult becoming sexually involved with a child is so horrendous that they choose an attitude of "if I don't know about it, the problem does not exist." Yet others would prefer to believe that the sexual abuse of children is not real, but a perceived hysteria. However, to the supervisors and detectives of the Baltimore Police Department's Child Abuse Unit, who deal with this problem on a daily basis, the sexual abuse of children is real and occurring in epidemic proportions. To these men and women the sexual abuse of children is definitely not a perceived hysteria.

The Child Abuse Unit of The Baltimore Police Department is made up of one Lieutenant, three Sergeants and eighteen Detectives. They are charged with the responsibility of investigating all incidents of sexual child abuse, the rape and sexual assaults of children twelve years of age or younger and all physical child abuse cases that are life threatening and or require hospitalization. The Child Abuse Detectives also conduct parallel investigations with the Homicide Unit on all child deaths regardless of classification.

From its conception in 1985, until the spring of 1990 The Baltimore Police Department's Child Abuse Unit functioned as a reactive unit. Uniformed Police Officers responded to suspected child abuse calls, interviewed the victims, wrote the offense report and forward same to the Child Abuse Unit.

The reactive form of operation for many years caused great concern pertaining to the effectiveness of the Child Abuse Unit's ability to protect abused children from their physical abusers or sexual predators. Sexual abuse victims were directed to various emergency rooms around the City for sexual forensic medical examinations. Many of the examinations were conducted by resident (non- pediatric) physicians less familiar with the gathering of forensic evidence, particularly from frightened children. Because of this, most children had to experience a second forensic vaginal and rectal examination conducted by a pediatric sexual abuse expert, causing added stress to the already emotionally damaged child. In addition, after experiencing several medical examinations , children were being subject to multiple interviews by numerous parties involved in the investigation.

The aforementioned in itself was another problem as the " Hearsay Law" in Maryland does not allow police officers to testify on the child's behalf. Only a licensed physician, licensed psychologist, licensed social worker or teachers can testify for the abused child in a court of law. As a result of this problem the Child Advocacy Network was formed in an attempt to provide a neutral setting to interview the child victim and his or her family. This network would provide that valuable link - a licensed social worker / psychologist to conduct

the interview and also enable the child to receive a forensic medical examination without the fear and trauma associated with a hospital. However, it was soon discovered that this was not enough.

Another concern was that even though Maryland has a Family Law on the books indicating that joint investigations would be conducted by the Police, State's Attorney and the Department of Social Services when advised of a child sexual abuse, this was not always the case. There was a lack of coordination and cooperation between all departments involved and the actual intent of the law was not being followed.

In addition, the volume of cases handled by each detective was another concern. A study was conducted in order to determine the amount of cases handled by the Child Abuse Unit and how it broke down to each detective. The study revealed from 1990 - 1995 the Detectives of the Baltimore Police Department's Child Abuse Unit handled 9,700 reported cases of physical and sexual child abuse. During that time the Unit was operating under strength with approximately 15 detectives. The case load of each detective for that five year period of time was approximately 647 cases. This obviously was a caseload too great for any detective to handle adequately. In addition, as if this was not alarming in itself, national statistics show that of all children that are sexually abused as few as three percent of the girls and one in fifteen boys reported their victimization to the authorities. These figures indicate that the actual number of children sexually abused each year in Baltimore City may be higher than those reported.

Realizing that without a complete overhaul of the Baltimore Police Department's Child Abuse Unit, we would no longer be able to adequately protect the children of Baltimore City.

In June 1995 , The Baltimore Alliance Against Child Abuse and Neglect was formed. This group is made up of over forty public and private organizations within the Baltimore area , to include The Baltimore Police Department, Baltimore State's Attorneys Office , The Department of Social Services and The Child Advocacy Network. The primary mission of the group was to identify real problems in dealing with how sexual child abuse investigations and services were handled and establish viable and workable solutions to deal with this continuing problem.

After its formation The Alliance immediately wanted to take a position and set out to complete three major goals:

- 1) To reduce the incidents of sexual victimization.
- 2) To ensure access and services for all sexually abuse children and their families.
- 3) To make certain that every person who sexually offends a child is held accountable and receives help.

On 1 April 1996 The Baltimore Police Department reorganized its Child Abuse Unit and it became a First Responder Unit. The Baltimore Police Department, State's attorneys Office, Department of social Services and The Child Advocacy Network joined forces to provide around the clock response to victims of sexual abuse and sexual assaults. The investigation process of these two forms of sexual maltreatment has become increasingly coordinated and Streamlined. Uniformed officers no longer conduct sexual child abuse investigations nor do they handle serious physical abuse cases or incidents involving children that are burned as a result of abuse.

Uniformed officers respond to a location , identify and locate a child victim and request that a Child Abuse Detective respond to handle the investigation. The Detective immediately responds to the victim's location and transports the victim and a non-offending caretaker to the Child Advocacy Network for an interview. The Child Advocacy Network provides a neutral child friendly location for the interview to take place, as the detective, child protective service worker and prosecutor watch the interview on a closed circuit television. Caretakers get to meet and have their questions answered by the professional investigating their case at one location and the detective is able to complete his/ her investigation. The First Responder mode serves two purposes 1) It minimizes trauma to the child and, 2) Patrol officers are almost immediately returned to service to handle other duties.

The First Responder Program also ensures that priority interviews of children who are victims of sexual abuse and sexual assaults take place within 24 hours of the initial report. Children no longer have to wait long hours in a hospital emergency room, as expert forensic medical examinations for sexually abused children are now coordinated by the Child Advocacy Network at their site or the child is taken to The University of Maryland Pediatric emergency room for treatment. All examinations are completed by trained physicians and only in rare circumstances do examinations have to be repeated. AH Baltimore children up to the age of eighteen are eligible for this service.

After the interviews and medical examination, the Police Detective decides whether a crime has been committed and determines if an arrest is necessary.

The Child Protective Services Worker decides where the child should be placed to ensure the child's safety. The prosecutor decides whether criminal charges will be pursued against the suspected abuser. This streamlined system has allowed the Baltimore Police Department Child Abuse Detectives to cut the time it takes to make an arrest or clear a case from an average of 30-60 days to an average of 1-7 days. A phenomenal 88 % cut in investigative time.

The First Responder Program has also drastically reduced each detective's case load allowing detectives to complete more thorough and quality investigations. During 1996, the eighteen detectives assigned to The Child Abuse Unit Handled :

1312 cases of sexual and physical child abuse complaints,

911 of these cases were handled under the First response mode,

The Child Abuse Detectives were able to effect :

390 Arrest,

207 Exceptional Clearances,

The Detectives also wrote and executed numerous Search and Seizure Warrants .

The Child Abuse Unit completed the year with a 87.6 % clearance rate.

We believe this to be a great accomplishment itself. In addition, using the theory that each case takes approximately 4-6 hours during the preliminary investigation, the Detectives of the Child Abuse Unit were able to save the Patrol Division between :

3644 - 5466 man hours.

This falls directly in line with Commissioner Thomas C. Frazier's Community Policing Plan to keep more officers on the street.

Due to the time saved as a result of the First Responder Program, supervisors of The Child Abuse Unit are now able to provide Child Abuse Training to new probationary police officers at The Baltimore Police Academy , to new Social Workers at both The University of Maryland School of Social Work and The Department of Social Services. They also provide updated training to veteran officers and supervisors at in-service training and roll calls and they provide training to outside Civic Organizations.

The Child Abuse Unit is also responsible for the operation of the State mandated Sexual Offender file for Baltimore City. We also maintain active records on all convicted or known sexual offenders of children who reside in Baltimore City.

Education of children is also a top priority of our Department, one sergeant has developed a program that is taught to elementary school age children. This program is designed not to scare children or rob them of their innocence but, to teach them that they have a right to say no to an adult when something is being done to them to make them feel uncomfortable.

Finally, we are actively involved with the State's attorneys and other Child Advocates in the continued attempt to change the Maryland " Hearsay " exception. This law as it now exist excludes police officers from testifying for children who are so traumatized by either sexual or physical abuse, that they are not able to testify on their own behalf.

In conclusion , we believe that Baltimore is a national leader in the investigation of child abuse and sexual assaults on children, however, we will continue to look for ways to improve the services we provide to the citizens of Baltimore.

We believe this program to be a win-win situation for everyone involved. This program was approved by Commissioner Thomas C. Fraizer and the Chiefs of The Patrol and the Criminal Investigation Bureau. This system allowed Patrol to keep more officers on the street, allowed for a better quality investigation and case load , and finally it allowed all victims of sexual child abuse to receive better services and help from everyone involved in the investigation of these crimes.

LEAVING NO CHILD BEHIND

**THE RESPONSE OF BALTIMORE TO
CHILD SEXUAL MALTREATMENT**

BALTIMORE ALLIANCE AGAINST CHILD ABUSE AND NEGLECT

LEAVING NO CHILD BEHIND

BALTIMORE'S RESPONSE TO CHILD SEXUAL MALTREATMENT

INTRODUCTION

Since its inception in June, 1995, the Baltimore Alliance Against Child Sexual Abuse (now the Baltimore Alliance Against Child Abuse & Neglect¹), a group of representatives from over 40 public and private organizations in the Baltimore area, has sought to mount a coordinated, comprehensive response to child sexual maltreatment. In doing so, the Alliance has set forth three goals: to reduce the incidence of child sexual victimization, to ensure access to services for children and their families, and to make certain that every person who sexually offends is held accountable and offered interventionservices.

This report chronicles the Alliance's efforts to reach those goals. As researched by various committees composed of agency representatives and advocates, the report outlines the scope of the problem of child sexual abuse both nationally and ideally, offering a brief overview of coordinated responses developed by other jurisdictions as well as services currently available in Baltimore. The report suggests what needs to be done to make quality services accessible to all in need, and puts forth recommendations designed to move Baltimore toward the goals identified above.

The Alliance is committed to implementing these recommendations and has begun doing so starting in 1997. Realizing that there are segments of the continuum of care that have not been fully assessed in this report, the Alliance is also committed to examining all of Baltimore's systems in order to improve the response to children. The Alliance wishes to assist agencies in the coordination of existing services to increase their effectiveness. When that is achieved, the Alliance seeks to work in partnership with its' member agencies to implement recommendations identifying or creating additional resources.

At present, a major hindrance to a child's ability to access services is Baltimore's practice of separating different kinds of sexual maltreatment. These practices are often based in State law, which has not been consistent in its' approach to these issues. As a result, Baltimore responds differently to children who have been victimized by sexual abuse, sexual assault, and sexual exploitation.¹ Overall, sexually assaulted or exploited children have less access to the full array of services than children who are sexually-abused. Because all children who are sexually mistreated must have the same access to necessary services, the Alliance advocates for elimination of these artificial distinctions.

¹ Under Maryland law, a distinction is made between sexual abuse and sexual assault. Although the behaviors and penalties can be similar, sexual abuse is perpetrated by a family member, caregiver, or someone who resides in the household of the child. Sexual assault is perpetrated by someone who lives outside the home.

This distinction has traditionally determined the action taken in response to a report. In child sexual abuse cases, the Baltimore Police Department, Child Protective Services and the State's Attorney's Office are required by law to conduct joint investigations. In child sexual assault cases, only the police investigate, and the State's Attorney's Office reviews the investigation. In response to Alliance recommendations, these procedures are changing and the distinction is becoming less rigid.

Realizing that every child's family who experiences sexual victimization is entitled to a full range of specialized services, and realizing that everyone who sexually offends must be held accountable and receive intervention, the Alliance hopes to create a streamlined, yet comprehensive, continuum of response. That is the only way to ensure that all children and families affected by sexual victimization have access to the same quality services and that none of Baltimore's children get left behind.

ACCOMPLISHMENTS

Member agencies of the Baltimore Alliance Against Child Sexual Abuse have already taken significant steps to improve and coordinate the services available to sexually abused children and their families. These accomplishments were achieved by re-distributing the resources already in place. None of them has cost the State, City or any agency additional funding; nor have any required additional resources.

*** The Alliance developed comprehensive standards for delivery of services to sexually abused children and used them to assess the strengths and weaknesses of current practices in Baltimore.

*** The Alliance developed standards for working with adolescents who sexually offend.

*** The Baltimore Police Department, Baltimore Department of Social Services, and the State's Attorney's Office for Baltimore entered a joint agreement to provide 24-hour, seven-day-a-week multidisciplinary team services for children who may have been victimized by sexual abuse. The services are coordinated by the Baltimore Child Abuse Center/Child Advocacy Network. (CAN) at one site. As a result:

- Baltimore Police have reduced their investigation time for child sexual offenses by 58%.
- The number of investigative interviews Baltimore's children receive has been drastically reduced.
- Rather than waiting hours in local emergency rooms for a medical examination that often had to be re-done by experts, sexually abused children are now examined at the University of Maryland Pediatric Emergency room or by pediatric child abuse specialists at the Child Advocacy Network.
- Every family and child who needs one receives a referral to specialized sexual abuse treatment.
- Baltimore's investigation system received the Greenstein Memorial Award for an outstanding domestic violence program, and was selected as a "Top 25th" community health leader by the Robert Wood Johnson Foundation.

*** The Baltimore Police Department expanded its specialized services for all child victims of sexual, abuse and assault. Child Abuse and Sexual Assault detectives have shifted to an innovative "first responder" system - an essential link in coordinating services and reducing the number of investigative interviews children receive. The significant shift in focus is consistent with the Police Commissioner's edict to put more patrol officers on the street, by saving hours of patrol time spent interviewing sexually abused children and waiting hours in hospital emergency rooms.

* The Alliance provided training to Juvenile Court judges and masters on child sexual maltreatment. This two-day training offered an overview of child sexual victimization, the role of the courts, and treatment for

victims and adolescent offenders.

•*** Programs serving adolescent offenders have joined forces to develop a stronger continuum of care system, in the past, there had been no attempt to coordinate services or monitor adolescent offenders once they leave a residential or secure facility.

** The Alliance has established a network of treatment providers for sexually abused children.

** The Abel! Foundation has funded the Child Advocacy Network and Alliance members to develop a pilot program for Baltimore's response to statutory-rape.

TENETS

Following are the principal tenets of child sexual victimization that members of the Baltimore Alliance Against Child Sexual Abuse and Neglect hold as true:

All forms of sexual victimization are inherently damaging for any child.

Reactions on the part of those closest to the child and those who first hear the disclosure are directly related to the degree of trauma the child experiences.

While the effects of sexual maltreatment on children may not be evident early on, they may appear in the future.

Sexually victimized children must receive quality care by mental health professionals specially trained in treating sexual trauma.

Child sexual victimization can traumatize an entire family: all need quality services.

The families of sexual offenders also need the full range of services.

Those who sexually offend must be adjudicated quickly, held accountable for their offenses, and offered intervention services.

Intervention with adolescent and adult offenders must take place after the first report and be closely linked to the judicial process.

Appropriate and early intervention with adolescent offenders plays a vital role in preventing future offenses.

Adolescent offenders must be screened for previous trauma. While held completely accountable for their abusive behaviors, they must also have access to treatment for the trauma of their own victimization.

Education works. Teaching offenders ways to keep from being abusive and others how to intervene appropriately and nonviolently when a child is victimized is essential.

Responding to children who have been sexually victimized is the responsibility of the entire community.

Duluth, Minnesota and Cambridge, Massachusetts-- have innovative systems that could serve as models in the response to child sexual maltreatment.

Duluth, Minnesota launched a project that coordinates all services for battered women. Now, services - including legal, medical, educational, religious, and mental health -- work together to ensure the safety of battered women. The "Duluth Model" is perhaps the most comprehensive model in the country in terms of a community-wide coordinated response to domestic violence.

Cambridge, Massachusetts launched an ambitious campaign to establish itself as a "domestic violence free zone" in 1995. This aggressive campaign defines the roles of each component (education/schools, medical/health, criminal justice and legal services, economic, housing and community development, religious, and human and community services) in confronting domestic violence. Like Duluth, Cambridge provides an example of a comprehensive community-wide coordinated response to domestic violence. The Alliance looks to both models to identify ways to develop a similar response to fight child sexual maltreatment in Baltimore.

INCIDENCE/STATISTICS

In 1995, the Baltimore Police Department responded to 783 reports of child sexual abuse or assault. This figure represents just over 50 percent of all reports the police department received on child maltreatment, an increase of nearly seven percent over 1994. Over the past five years, child sexual abuse reports made to the police have grown from a minority of all reports of child maltreatment to the most common report made, (see Table 1).

The Baltimore Department of Social Services received 898 reports of child sexual abuse in 1996. Reports of sexual abuse constitute between 20 - 25% of all reports of abuse. The agency does not accept reports child sexual assault.

TABLE I
REPORTS MADE TO THE BALTIMORE POLICE DEPARTMENT
CHILD ABUSE UNIT
1990-1995

| YEAR | SEXUAL | PHYSICAL | TOTAL |
|------|--------|----------|-------|
| 1990 | 773 | 913 | 1686 |
| 1991 | 743 | 968 | 1711 |
| 1992 | 812 | 917 | 1729 |
| 1993 | 790 | 732 | 1522 |
| 1994 | 730 | 330 | 1560 |
| 1995 | 783 | 709 | 1492 |

TABLE 2
 REPORTS MADE TO CHILD PROTECTIVE SERVICES
 1990-1995

| YEAR | SEXUAL | PHYSICAL | TOTAL |
|------|--------|----------|-------|
| 1990 | 1081 | 3158 | 4176 |
| 1991 | 1036 | 3262 | 4298 |
| 1992 | 1143 | 3444 | 4587 |
| 1993 | 1090 | 3393 | 4433 |
| 1994 | 974 | 3016 | 3990 |
| 1995 | 929 | 3152 | 4081 |
| 1996 | 898 | 3147 | 4045 |

The Baltimore Police Department and Child Protective Services could not account for the discrepancy between their numbers. Clearly, this is an example of the lack of coordinated information systems, that results in the inability to properly track children who have been sexually victimized.

It is estimated that of all children who are sexually victimized, as few as three percent of girls and one in fifteen boys report their victimization to the authorities. National statistics extrapolated for Baltimore indicate that the actual number of children sexually victimized each year in Baltimore may be closer to 59,000. Because Baltimore has no unified tracking system, it is impossible, at this time, to easily identify these cases.

Conclusion

More child sexual maltreatment is now being reported to the Baltimore Police Department than ever before. Whether there is an actual increase in the incidence of abuse, or merely an increase in reporting, is unknown. Based on national statistics, Baltimore is far from meeting the needs of sexually victimized children. Too few incidents of maltreatment get reported; too few victims have access to services currently in place. Furthermore, there are not adequate resources to meet the needs of the current numbers, much less the actual number of children who, according to national statistics, are likely being sexually victimized.

Recommendation

It is recommended that Baltimore develop one tracking system for all children who have been victimized by sexual maltreatment with a central registry that would make reporting easy and accurate.

EDUCATION/PREVENTION

Education raises awareness about sexual victimization and its effects on children, their families, and society. Education also informs the community about available services. Prevention focuses primarily on helping people recognize and interrupt abusive tendencies and teaches them how to intervene. Prevention includes early, intensive services that strengthen families by improving their abilities to protect their children before sexual ma [treatment occurs.

Baltimore's new "first responder" system ensures that priority interviews of child sexual abuse and assault victims take place within 24 hours of the initial report at the Baltimore Child Abuse Center/Child Advocacy Network. All Baltimore children up to age eighteen are eligible for this service. The Child Advocacy Network provides a neutral, child-friendly location for the interview to take place. Police respond to the site of the report to verify that a complaint was made from that location. A plainclothes detective in an unmarked car brings the child and non-offending caretaker to the Child Advocacy Network for the interview. The detective, the Child Protective Services worker and a prosecutor watch the interview on closed circuit television. Caretakers get to meet and have their questions answered by the professionals investigating their case at one location.

Children used to have to wait hours at various emergency rooms around the city for a sexual abuse forensic medical examination. Some of the examinations were conducted by resident (non-pediatric) physicians less familiar with the gathering of forensic evidence, particularly from frightened children. Most of these forensic vaginal and rectal examinations had to be re-done by pediatric sexual abuse experts. Expert forensic medical examinations for sexually abused children are now coordinated by the Child Advocacy Network, and conducted either at the University of Maryland Pediatric Emergency room or at the Child Advocacy Network's medical clinic. All examinations are done by trained physicians, and only in very rare circumstances have to be repeated.

After the interview and medical exam, police detectives decide whether a crime has been committed and whether to make an arrest. Child Protective Services decides where the child should be placed to ensure the child's safety. The prosecutor decides whether criminal charges will be pursued against the suspected abuser.

The Child Advocacy Network's treatment resources coordinator and home interventionist assist each child and family in obtaining appropriate counseling and treatment. Under the auspices of the Baltimore Alliance Against Child Abuse and Neglect, a network of sexual abuse treatment providers, to whom the Child Advocacy Network provides referrals, meets monthly.

The investigation of child sexual maltreatment is a very involved process. The many protocols that exist within each agency, the various specialized units that respond to reports, not to mention the wide range in types of maltreatment, all contribute to the complexity of the procedure.

The police, Social Services and the State's Attorney's Office, for example, all make distinctions on the basis of age, gender, where the report is made, and the nature of the maltreatment. Cases of sexual abuse are investigated jointly by Child Protective Services and the police; cases of sexual assault and exploitation, solely by the police.

Police respond with specialized units based on age and type of offense. The Child Abuse Unit responds to children age thirteen or under, whether they are abused or assaulted; the Sexual Assault Unit responds to reports of stranger assaults of girls over age thirteen, and to boys over age thirteen who were reportedly sodomized. Local district uniformed police officers respond to complaints, other than sodomy and sexual abuse, of boys over thirteen (such as fondling by strangers). The Police Department's Vice Unit responds to children who are sexually exploited. The Vice Unit lacks the training and resources to put a program into place to investigate and respond comprehensively to child sexual exploitation complaints.

Adding to this array of services and scenarios is the fact that Baltimore Schools, Baltimore Transit Authority, and the Baltimore Housing Authority all have independent police departments that also respond to reports of child sexual maltreatment. While these entities report that it is their policy to refer all reports of sexual abuse to the police and Child Protective Services, many reports of child sexual assault - particularly

acquaintance rape and peer sexual harassment-- simply fall through the cracks.

In addition, the Baltimore Police Department lacks the funding and resources to establish a pedophile unit. The Alliance has received information that Baltimore's Patterson Park area has been named on the internet as one of the top locations to access child prostitutes. In addition, Baltimore is the location of a nationally known treatment facility for pedophiles. The Police Department lacks the resources to track and monitor in-state and out-of-state pedophiles receiving treatment at this clinic.

What do these discrepancies mean? That not all cases get reported. That not all interviews are coordinated or occur at the Child Advocacy Network. Boys and girls over 13 who have been sexually assaulted, for instance, as well as most children who have been sexually exploited do not necessarily have access to the joint interview process. The Baltimore Police Department needs additional resources to respond to a serious pedophile problem in Baltimore, and a plan to respond to child sexual exploitation. Finally, discrepancies mean variations in the degree of specialized training on the part of police officers who respond to reports of sexual offense.

Conclusion

Baltimore is a national leader in the investigation of child sexual abuse and assault. Even so, discrepancies exist. Adolescents who are sexually abused by peers or harassed by adults, children who are abused by pornography or prostitution currently receive different responses from those who are abused or assaulted. The Police Department needs the resources to adequately track and monitor pedophiles in our city. The Alliance believes that all allegations of child sexual maltreatment should be investigated by specially trained personnel with access to the resources they need to protect our children and bring offenders to justice.

Recommendations

Broaden mandatory reporting requirements to include all children who experience sexual maltreatment.

Create and provide adequate resources to implement a central registry where all reports of child sexual maltreatment are reported.

Assist the Baltimore Police Department in obtaining additional resources to establish a pedophile unit.

Assist the Baltimore Police Department in obtaining additional resources to plan and implement a strategy for the city to respond to child exploitation.

Make the Child Advocacy Center available to all children who are sexually victimized.

Ensure that all Child Protective Services staff have the knowledge and skills necessary to meet the needs of victimized children and their families.

Ensure that investigation of 2H forms of child sexual maltreatment by an interagency team are appropriate to the needs of the child.