

Senator Carney, Representative Moonen, and Members of the Joint Standing Committee on Judiciary:

My name is Joyce Wientzen. I have been a licensed clinical social worker for twenty-five years, and for most of that time I have worked with child abuse and child sexual abuse. I have held a variety of roles, including my current role as the Program Director for the Cumberland County Child Advocacy Center and The Spurwink Center for Safe and Healthy Families. I have published pieces, presented at conferences, and testified as an expert about child sexual abuse on many occasions. I also taught a forensic social work course at the University of New England.

I am submitting testimony today on behalf of the Cumberland County Children's Advocacy Center. In addition, I am speaking on behalf of Maine Network of CACs. I am submitting testimony in strong support of LD 765, "An Act to Permit Recordings of Protected Person to be Admissible in Evidence".

Approximately 85% of children who are sexually abused never tell or delay talking about the abuse. There are many reasons for this, including the likelihood that the perpetrator is known to the victim. 93% of the time the perpetrator is known to the victim enhancing fear of what might happen to the child or their family if they report the abuse. Along with the confusion children may experience because of being victimized, they are also often fearful of what will happen to them if they disclose the abuse. Many perpetrators use threats and intimidation to silence young victims.

A recent study found that nearly one in five adult Maine residents reports that they have been the victim of rape or attempted rape during their lifetime; 32.1% of females surveyed and 5.3% of males surveyed have experienced rape or sexual assault at some point in their lives. In 2012, Maine's sexual assault support programs had over 10,000 contacts with people in our communities impacted by sexual violence, and almost 50% of those were from or about someone who experienced sexual violence under the age of 18. 11.9% of Maine high school students (13.3% of girls, and 10.4% of boys) report having been physically forced to have sexual intercourse in their lifetime. 13.6% (18.1% of girls and 9% of boys) report having been forced to

<sup>&</sup>lt;sup>1</sup> Rubin, Mark. (2011). *Maine Crime Victimization Report: Informing public policy for safer communities*. Muskie School of Public Service, University of Southern Maine.

<sup>&</sup>lt;sup>2</sup> MECASA Center Service Statistics, 2012.

have sexual contact in any way in their lifetime.<sup>3</sup> We know that sexual violence in childhood has a lasting impact on survivors, their families, and significantly impacts our communities.<sup>4</sup>

Children's Advocacy Centers focus on the coordination of investigation and intervention services by engaging a multidisciplinary team to create a child-focused approach to child abuse cases. The National Children's Alliance, the body responsible for accreditation of CACs, describes the range of services provided by children's advocacy centers as including:

- Multidisciplinary Team Response
- Child and Family Friendly Facilities
- Forensic Interviewing Services
- Victim Advocacy and Support
- Specialized Medical Evaluation and Treatment
- Specialized Mental Health Services
- Training, Education, and Support for Child Abuse Professionals
- Community Education and Outreach 5

Maine's CACs are places where children who have been abused can be interviewed by a specially trained forensic interviewer in a neutral, child-friendly environment. Individuals who need the information revealed by the child can witness the interview via closed circuit television in another room and can ask questions to the interviewer, so they receive all the information needed to complete an investigation. While that interview is occurring, a Family Advocate meets with the non-offending parent or caretaker to provide them with information, resources, and support.

This multi-disciplinary approach is first and foremost better for the child, helping to reduce the number of potentially traumatic interviews the child must have, and providing more comprehensive information for the assessment of the child and the investigation of the case. More information on Maine's CACs follows my testimony. (I have also attached the national accreditation standards.)

The CAC forensic interview is also a necessary departure from prior interview techniques that relied on closed-ended questions, ignored children's developmental ability, and sometimes introduced information to the child (Cross et al., 2007). Interviewers follow a structured protocol and rely on their basic and ongoing training as well as mandated peer review with colleagues (Rivard & Compo, 2017). Professional CAC forensic interviewers' lack of investigative responsibility makes them well positioned to act as neutral finders of fact (Rivard & Compo, 2017).

<sup>&</sup>lt;sup>3</sup> Maine Centers for Disease Control and Prevention. (2011). *Maine Integrated Youth Health Survey*. Retrieved from <a href="https://data.mainepublichealth.gov/miyhs/home">https://data.mainepublichealth.gov/miyhs/home</a>

<sup>&</sup>lt;sup>4</sup> Fuentes-Perez, et al. (2013). Prevalence and correlates of child sexual abuse: A national study. *Comprehensive Psychiatry*, *54*(1):16-27.

<sup>&</sup>lt;sup>5</sup> National Children's Alliance. Information retrieved from: http://www.nationalchildrensalliance.org/index.php?s=36

| We look forward to working with the committee as this bill moves forward. I would be pleased to answer any questions you might have. |
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