

THE MULTI- DISCIPLINARY INTERVIEW CENTER OF YOLO COUNTY



We will coordinate a multi-agency response to child abuse which reduces trauma to victims, increases child protection, and aids in the successful prosecution of offenders by providing a child-friendly center where the investigation of child abuse can be expedited and where victims and their families receive effective and immediate support. We are committed to providing quality care for our child victims and their families while striving to protect our community.

Soroptimist International of Greater Davis will be celebrating our 12th Annual Golf Tournament this year and our beneficiary for the fifth year will be our community partner agency, the Yolo County Multi-Disciplinary Interview Center (MDIC). Our club is committed to continuing our support of the MDIC as we believe in the goals and objectives of this program and are continuously impressed by the growing need for its services in our community. Additionally, Soroptimist International of Greater Davis was thrilled to award the MDIC a total of \$2,000 in grant awards from the Sierra Nevada Region Endowment Fund.

The MDIC provides a child-friendly and psychologically safe environment for child victims of sexual assault to disclose their experiences to a Child Interview Specialist in the most comprehensive and least traumatic manner possible. The staff is Spanish-English bilingual ensuring that 87% of child victims are provided services in their primary language. Interviews are developmentally appropriate and cover multiple agency agendas. The various county and city agencies mandated to respond when a child is abused, respond together working cases as a team. This approach minimizes the amount of times and number of professional contacts (strangers) a child needs to describe his/her experiences to as well as dramatically improving the work product of the involved professionals.

Additionally, the MDIC has a strong support and counseling component that is activated on the day of the interview. MDIC provides victims and their families with case management services, clear and consistent information, victim support/advocacy, sexual assault exams, and clinical mental health services on site. These services continue, as necessary, after the criminal and/or child welfare cases terminate providing ongoing support to victims and families, reducing anxiety, and improving their ability to recover in a healthy manner. The MDIC provides transportation to and from the center for all services. The MDIC Social Worker also makes home visits (when transportation and/or child care is a barrier) to initiate services, provide support, and assist with various forms/applications associated with child abuse cases and support services including emergency assistance programs. By responding immediately, effectively, and comprehensively to today's victims, the MDIC increases the likelihood that our child victims will be able to provide healthy, protective environments for their children thus reducing the occurrence of child abuse/neglect in the future.

Research demonstrates that a comprehensive response to childhood trauma significantly reduces the occurrence of health, relationship, and addiction problems associated with childhood abuse. According to the National Clearinghouse on Child Abuse and Neglect, girls are sexually abused approximately three times more often

than boys are. Being sexually abused is devastating to a girl's self image and potential life fulfillment. However, how the involved agencies and authority figures respond to her disclosure is crucial to her survival and future success. Women who have survived childhood sexual abuse report that one of the most devastating aspects of their experience was the feeling that after going through the investigative process and court systems, the official message at the end was, "We don't believe you." This feeling is common for victims and caused largely in part by how cases used to be processed through the various involved systems.

In January 2006, the MDIC expanded their partnership with UC Davis by providing child sexual assault exams at the center. Now our child victims come to the same familiar place with the same familiar people for all aspects of their case. This has reduced the secondary trauma child victims often experience by reducing the amount of strangers they encounter and agency processes they must endure during the criminal investigation. Yolo County is the first MDIC that the UCDCM CAARE Center has partnered with in this way. They now send a practitioner to the MDIC to perform exams in Yolo County. This enabled the MDIC to provide an outstanding service to our community without losing the expertise of the UCDCM.

The MDIC is in a unique position to effectively and cohesively respond to our community's victims in that it is a collaboration of every local law enforcement agency as well as the District Attorney's Office, Child Protective Services, University of California at Davis Medical Center, County Mental Health, our local rape crisis center, and the various community based organizations in our community serving children. For this reason at the MDIC, the continuum of care starts with the first response and continues as long as needed by the child and family. While the MDIC is a county collaborative, it is not county funded beyond in-kind donations of staff resources. The involved police organizations contribute approximately 60% of the MDIC's annual budget and the MDIC, with the help of Soroptimist International of Greater Davis, holds local fundraisers for the remaining 40%. Without the ongoing support of SIGD, the MDIC could not provide the level of service to our community that it does.

Combating child sexual abuse, and the secondary trauma associated with it, resonates loudly with Soroptimist International's Vision "to be a global voice for women through awareness, advocacy and action" and specifically addresses four out of six of our Strategic Outcomes:

- **Human Rights/Status of Women- *Women will be empowered by being afforded human rights and freedom from all forms of violence. Eliminate all forms of violence against women and girls. Eliminate trafficking of women and girls.***

Sexual exploitation and abuse of women and girls is one of the most misogynistic, prevalent, and destructive influences in our society. Sexual abuse exists in every culture, nation, ethnicity, religion, and socio-economic status. Sexual abuse can annihilate a girl's self-worth and esteem. The common perception that young women and girls are sexual objects eliminates the possibility of equal status.

- **Education- *Women and girls will enjoy enhanced status and will be enabled to achieve their full potential throughout their lifespan.***

One of the more common perpetrators of sexual abuse on a young girl is her parent or careprovider. Many of our victims are sexually abused at home sometimes three to four times a week. Living in a home environment complicated by the physical acts, secrecy, and family dynamics involved in sexual abuse makes it very difficult to focus on education and realize one's full potential.

- **Economic and Social Development- *Women will live and work in safe and equitable environments with equal opportunities for advancement. "Empower young women to meet today's challenges."***

Sexual abuse is anything but empowering. Sexual abuse is insidious. The scars last a lifetime. Victims often feel worthless, powerless, and "labeled." It is viewed by many as a shameful secret, which interferes with a girl's ability to get help. Girls are often blamed for their abuse. Sexual abuse disrupts a girl's ability to trust others and interferes with the development of healthy relationships. All of this dramatically reduces a girl's ability to achieve her full potential.

- **Health- *Women will have optimal mental and physical health throughout their lifespan. This goal specifically targets HIV/AIDS, use of tobacco, and substance abuse.***

Childhood sexual abuse has been correlated with long-term health problems including cancer, heart disease, skeletal fractures, liver disease, chronic depression, morbid obesity, gastrointestinal distress, and recurrent headaches as well as high utilization of medical care, suicide attempts, alcoholism, drug abuse, tobacco use, sexually transmitted disease, and marital instability. How the involved agencies respond to child abuse cases can mitigate many of these life complications or, add to them.