

Impact of COVID-19 on Children and Families

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Roxanne Roller, Child Protection Specialist Supervisor Calls into
Centralized
Intake

► April 2019

Approximately 3100

► April 2020

Approximately 2200

Investigations Assigned to the Field

► April 2019

► April 2020

Approximately 990

Approximately 650

CENTRALIZED INTAKE Reporting Child Abuse and Neglect 1-866-820-5437

■ When professionals know or have reasonable cause to suspect, as a result of information they receive in their professional or official capacity, that a child is abused or neglected by anyone regardless of whether the person suspected of causing the abuse or neglect is a parent or other person responsible for the child's welfare, they shall report the matter promptly to the department. MCA 41-3-201











(a) Physician, resident, intern, or other member of a hospitals staff engaged in the admission, examination, care, or treatment of persons.

(b) A nurse, osteopath, chiropractor, podiatrist, medical examiner, coroner, dentist, optometrist, or any other health or mental health professional; (c) Religious healers

(d) School teachers, other school officials, and employees who work during regular school hours;







(e) A social worker, registered or licensed day-care or care facility (f-i) Foster care, residential worker, and law enforcement.

Do **NOT** wait for your teammate or coworker to make the call. **EVERYONE** needs to make a report. If you see it or have reasonable cause to suspect that abuse and or neglect is taking place, call the hotline.

COVID-19 Impact

- Connect by reaching out to parents to provide support
- Don't let social distancing create a barrier to connecting and supporting
- Continue to let children know you remain a supportive, caring adult in their lives
- Making a report is asking for help and services
- Report Effectively
- You may be the only person to act

COVID-19 Impact Practices CFSD Maintained

- Investigate Reports
- Visit homes with Safety Plans
- Maintain Services
- Maintain contact between children and parents
- Foster Care Reviews
- Family Engagement Meetings

COVID-19 Impact Services and Resources

- Virtual parenting time
- Teletherapy
- Tele-Court
- Substance Use Disorder Evaluations and Treatment
- AA/NA Meetings
- SafeCare (Parenting Education Evidence Based Model)

COVID-19 Impact Challenges

- Increase Level of Family Violence
- Acuity of Reports
- Increased Challenges to Engage Parents
- Work Efficiency
- Technology Resources for Families

COVID-19 Impact Successes During the New Normal

- Improved Relationships between Parents and Resource Parents
- Increased Resourcefulness by Parents
- Reunifications with Engaged Parents
- Provider Flexibility and Creativity
- Staff Flexibility and Creativity
- Social Media Platforms

When in doubt, REPORT! 1-866-820-5437

- If you are uncertain if the information is abuse or neglect, let us decide and you make the call to the hotline.
- The hotline is staffed 24/7,365 days a year.



Impact of Shelter in Place / COVID-19

Responding to the Early Warning signs

Tiers of engagement

Prevention - Reducing risk factors, increasing protective capacity

Intervention - Child is at risk or unsafe but services can remedy

Treatment - Major rehabilitative efforts are required for safety

Early Signs and Symptoms

- Loud noises startle
- Lack of eye contact
- Aggressive behavior or acting out
- Parent or caretaker speaks for the child
- Child appears or sounds fearful of being spoken too
- Back ground noises of shouting, crying, unsettling comments
- Change in demeanor if someone else enters or leaves the room
- Comments of harm such as "I could kill him"
- Excessive missed appointments

- Deflecting questions
- Inconsistent explanations
- Any disclosure, even is small
- Dysthymic behavior
- Deteriorating physical appearance
- Child's participation changes or is lacking
- Changes in mood or presentation
- Who is supervising the child
- Past family violence, substance abuse
- Role reversal may indicate sexual abuse
- Knowledge of sexual behavior beyond child's age

Factors to Watch

- Stress
- Stress
- Stress + frustration + hopelessness
- Financial concerns
- Learned behavior
- Relationship problems
- Lack of attachment
- Adverse Childhood Experiences

Domestic violence

- Control is the issue, violence is a symptom
- Controlling finances
- Controlling relationships
- Controlling work
- Sexual control or violence
- Tends to escalate over time
- Dominating conversation and the other's participation

Other Concerns during isolation

- Teens watching siblings
- Others watching children
- Teens not knowing to not hake a baby or infant
- Day cares are closed
- ▶ 80% of children are abused by a family member

Answers

- Constructive communication
- Family Contact by zoom, skype, phone
- Reduce media exposure
- Social distancing is the "new normal" --- No it's not.
- Stress relief
- Exercise
- Deep breath
- ► Talk to others; name it to tame it
- Share resources
- Share that it is alright to get help; model that you get help
- Get families engaged in activites

Healthy Montana Families Maternal and Early Childhood Home Visiting

https://dphhs.mt.gov/publichealth/home-visiting

Eligibility:

Eligibility is broad and varies by each home visiting model. Generally, HMF serves pregnant or post-natal women and families/caregivers with children under the age of 5 who also experience at least one of the following:

Low income (under 200% of the Federal Poverty Level)

Pregnant women under 21 years

History of child abuse or neglect or interactions with child welfare (Caregiver or enrolled child)

History of substance abuse or need substance abuse treatment (Self reported or identified through referral)

Users of tobacco products in the home (nicotine delivery systems)

Low student achievement (caregiver or child)

Child with developmental delays or disabilities (enrolled child or another child in the household)

Families that include current or former members of the armed forces

Montana Evidence-Based Home Visiting Programs







