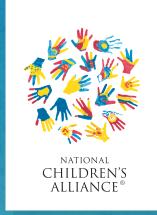
National Children's Alliance

Annual Report 2015

Empowering local communities to serve child victims of abuse.





Contents

Letter from the President	3
What We Do and Why	4
2015: A look back	6
NCA in 2015	8
Our Members in 2015	11
NCA 2020: Our Five-Year Strategic Plan	12
Financials	14
Leadership and Staff	15
Supporters	17
Partners	18
Endnotes	19

A Message from the President

Beth Brandes, NCA Board President

Dear Friends and Supporters,

2015 was an exciting and pivotal year for NCA as we strengthened our partnerships and commitment to vulnerable children and their families. The Children's Advocacy Center (CAC) model that NCA supports is strong and effective, as it promotes a coordinated and compassionate response to child abuse. NCA also continues to serve as a valuable resource to Congress and communities eager to help children and their families.



This year we released our 2017 Standards for Accredited Members, to ensure our accredited CACs give the highest-quality care to child victims of abuse. We expanded the reach of our powerful Chapters to 49 states, through the dedication and tireless efforts of our advocates. We also presented our members with a strategic plan informed by their valuable ideas, their needs, and a vision for a nation where no abused child lacks the resources needed to heal.

Other successes in 2015 included a formal partnership with the FBI to expand the use of CACs to serve child victims of human trafficking. We fought for and won a \$1 million increase in dedicated federal funds that support the work of NCA and its nearly 800 member CACs, thanks to our allies in Washington and our advocates across the country. We also strengthened our partnerships with research institutions and foundations across the country to assure we use data and best practices to inform our work.

2015 truly was a turning point that will affect the direction of our organization and our movement for the future. This report highlights NCA's leadership, its vital network, expertise, use of data, and effective programming. But most of all, this report lifts up the tireless work of caring communities who fight daily to assure that children and their families have a safe and responsive place to move beyond their trauma.

If there has ever been a year to focus on this national movement of committed communities, or to invest in the unique, indispensable ability of NCA to lead it, this is the year.

Thanks for joining us in this important work.

- Beth



What We Do & Why It Matters

What Is the National Children's Alliance?

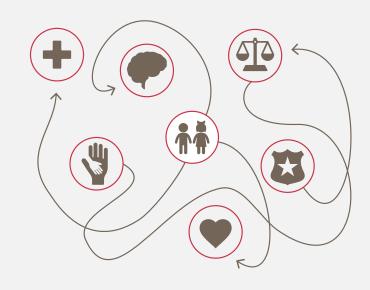
NCA is the national association and accrediting body for a network of 795 Children's Advocacy Centers—CACs. We provide support, advocacy, quality assurance, and national leadership for CACs, all to help support the important work that CACs do in communities across the country. CACs provide a coordinated, evidence-based response to children who have been abused in all 50 states.

What Is a CAC?

To understand what a CAC is, you must understand what children face without one. Without a CAC, the child may end up having to tell the worst story of his or her life over and over again, to doctors, cops, lawyers, therapists, investigators, judges, and others. They may have to talk about that traumatic experience in a police station where they think they might be in trouble, or may be asked the wrong questions by a well-meaning teacher or other adult that could hurt the case against the abuser.

When police or child protective services believe a child is being abused, the child is brought to the CAC-a safe, child-focused environment-by a caregiver or other "safe" adult. At the CAC, the child tells their story once to a trained interviewer who knows the right questions to ask in a way that does not not retraumatize the child. Then, a team that includes medical professionals, law enforcement, mental health, prosecution, child protective services, victim advocacy, and other professionals make decisions together about how to help the child based on the interview. CACs offer therapy and medical exams, plus courtroom preparation, victim advocacy, case management, and other services. This is called the multidisciplinary team (MDT) response and is a core part of the work of CACs.

Without CACs



With CACs



2015: A Look Back

JANUARY

Introduced evidence-based mental health assessments in Mississippi. Funded by the Ronald McDonald House Charities, this project ensured 79 kids got the mental health assessments they needed. Perhaps even more importantly, this project trained 10 Mississippi mental health clinicians to serve kids and train other clinicians, potentially helping hundreds or thousands of additional children and families. Funding for a train-the-trainer program here will serve as the basis for a national cohort.



APRIL

Reached an agreement with the FBI to provide services through Accredited CACs to children who have been sexually exploited or trafficked. To date, 160 CACs (and counting!) have signed on to participate

JUNE

Brought more than 400 CAC leaders to Washington for our annual Leadership Conference, where we met with Congressional staff to promote the work of CACs



Introduced our new 2017 Standards for **Accredited Members** to the field, ensuring

our Accredited Members deliver the highest quality, evidencebased interventions to the children and families they serve

OCTOBER

Gathered in Salt Lake City with more than 100 Chapter leaders from 49 states for our biannual Chapter Summit



Launched NCA 2020, our strategic plan and roadmap for our next five years (see p.12 to read the plan)



MARCH

Held the first meetings with our Chapter Collaborative Workgroup, where State Chapter leader work together to share common issues and solutions.



Kicked off partnership with the Duke Endowment, Yale Child Study Center, and our State Chapters and Member CACs in

North and South Carolina with two-day training of 29 mental health providers from participating CACs in Child and Family Traumatic Symptom Intervention (CFTSI), a crucial form of trauma therapy used to help abused kids recover.

MAY

NCA fought for and won passage of the Justice for Victims of Trafficking Act (JVTA), a comprehensive new law that provides new tools to go after buyers and traffickers and new resources for victims. Under the law, CACs will receive at least \$2 million in funding to develop anti-trafficking programs within their centers.



Launched a new PSA on Giving Tuesday highlighting the gap between giving to animal welfare charities and charities that help child victims of abuse, viewed by more than 175,000 people





Successfully fought for an increase in Victims of Child Abuse Act funding, securing CACs and NCA are funded at our congressionally authorized level of \$20 million

The final numbers came in: NCA gained 45 new Accredited Member CACs in 2015, bringing the total number up to 656 Accredited Members and 795 total Members!





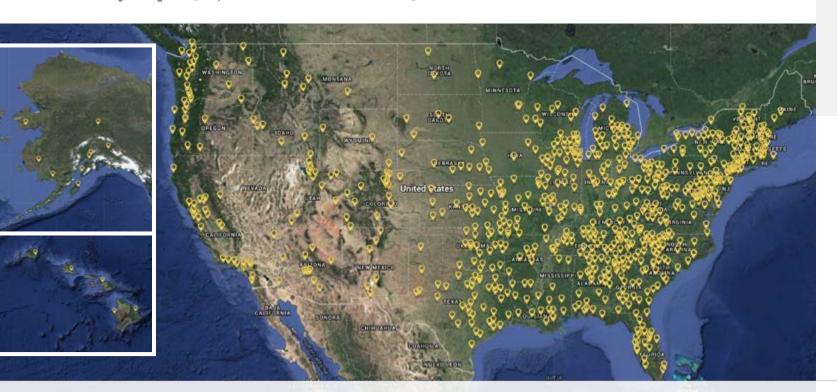




NCA in 2015

Expanding Access to Serve More Kids

As of the end of 2015, we have 795 member CACs—and counting! They helped 311,688 abused kids in 2015. 4

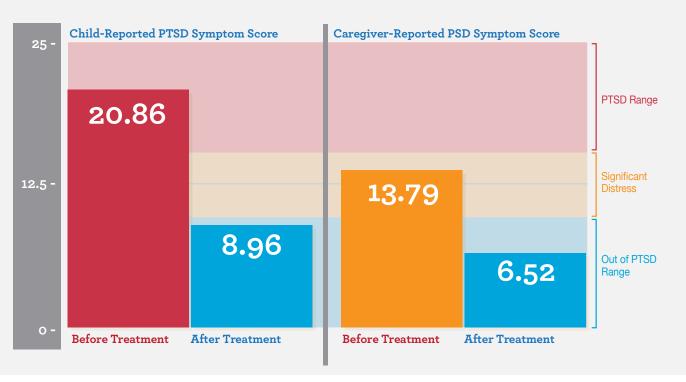


Project Highlight: Healing Trauma in the Carolinas

In a collaborative partnership among NCA, The Duke Endowment, Yale University, Children's Advocacy Centers of North Carolina, and the South Carolina Network of Children's Advocacy Centers, we launched an initiative to bring a promising, evidence-based treatment to children in the Carolinas who needed it. The Child & Family Traumatic Stress Intervention (CFTSI) has already demonstrated significant results. NCA will expand this important work in 2016.

In this ongoing project, many children came in presenting high levels of Post-Traumatic Stress Disorder (PTSD) symptoms. Caregivers also reported that their children had high levels of PTSD symptoms. These symptoms included things like nightmares, feeling scared, feeling worried, having trouble concentrating in school, feeling lonely, not wanting to play, and having intrusive thoughts.

Kids and caregivers report kids have fewer PTSD symptoms after trauma treatment at CACs ¹



In the chart above, the Child PTSD Symptom Scale (or CPSS, a common PTSD assessment for kids), shows the average child- and caregiver-reported symptom score before and after receiving the CFTSI therapy. Researchers and clinicians agree that scores of 11 or higher reflect significant distress, and indicate that a child may eventually qualify for a diagnosis PTSD upon further assessment. Children with scores of 15 or higher are almost certain to meet the full criteria for PTSD.

Children treated through this program whose symptoms were assessed before receiving CFTSI reported an average score of 20.86. On average, children reported high levels of trauma symptoms at the time they were first seen at the CAC. Following the brief mental health treatment, children and their caregivers both reported much lower levels of symptoms. Children reported with an average score of 8.96, which is below clinically significant levels.

8 | National Children's Alliance • Annual Report 2015 | 9

Measuring Results

Children are usually brought to CACs by caregivers, who will support them in the months and years ahead as they recover from the abuse. NCA provides a standardized tool called the Outcome Measurement System (OMS) to CACs to collect feedback from caregivers and team partners to ensure CACs are doing the best possible job to support children and their families. 580 CACs participate in this program to ensure they are providing the highest quality care to caregivers.

Caregivers and kids feel safe

95% of caregivers agree their children feel safe at CACs. 2



Caregiver of a child served by a CAC³

"It was not as scary as I thought it would be. You all took the fear out of coming in there and talking. You also did a great job at explaining everything that was happening."

Caregivers feel informed

By the end of the first visit, **93% of caregivers** report they know what to expect with the situation facing them and their children. Weeks later, **92% of caregivers** still agree that, as a result of their contact with the CAC, they knew what to expect in the days and weeks after their visit. ²

93% of caregivers agree they received information that helped them understand how to best keep their children safe in the future. ²

"We felt like someone was finally on our side and willing to listen."



Caregiver of a child served by a CAC

Caregivers and kids leave feeling better



Caregiver of a child served by a CAC

"[I appreciate] the kindness and support of every person we interacted with here! I think this is an amazing place with great people who definitely are in the right field of work. I couldn't be more pleased with the care we received."

96% of caregivers agree, if they knew anyone else who was dealing like a situation the one their family faced, they would tell that person about the CAC. ²



Our Members in 2015

Serving Kids

Our 795 Member CACs served 311,686 child victims of abuse in 2015.4

Preventing Child Abuse

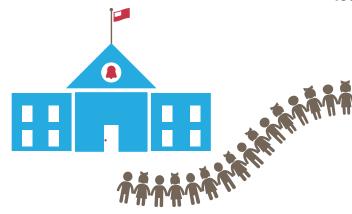
CACs provided **1,841,576 people** with child abuse prevention training in 2015. ⁴

Providing Case Management

We also provided case management and coordination to **1,326,555 people** last year —not just to the abused kids we served but also to their families, brothers, sisters, and parents. ⁴

Helping Kids Heal from Abuse

CACs provided mental health treatment to **190,429 kids** in 2015. 4



1.3 MILLION PEOPLE!

That's one person served for every child expected to enroll in public Pre-K programs in the entire country.



NCA 2020 Our Next 5 Years

Our Five-Year Strategic Plan and Its Purpose

To ensure that we are constantly meeting the needs of our membership and responding to emerging issues, every five years, the National Children's Alliance takes the next step in an ongoing, iterative, comprehensive strategic planning process, arriving at a new plan for serving Children's Advocacy Centers (CACs), children, and families even better. Our guiding principles throughout this process are to:

- Assess the changing environment in which CACs and Chapters operate so that our plan is timely and relevant;
- Focus NCA's energy towards those opportunities that will deliver the greatest value to member organizations and the children, families and communities we serve;
- Create a strategic framework for practical action over the next five years to achieve NCA's vision for the future; and
- Have a planning culture that is both inclusive and transparent.

NCA Mission

To promote and support communities in providing a coordinated investigation and comprehensive response to child victims of abuse through Children's Advocacy Centers and multi-disciplinary teams.

NCA Strategic Goals

NOTE: Numbering is for convenience of discussion and does not indicate an order of priority; objectives have been developed based on the priority conditions.

Expanding Access

All children and families are deserving of a high-quality, seamless response which is easily accessible. NCA will promote the

is easily accessible. NCA will promote the CAC model as the preferred response for all forms of child maltreatment.

2 Branding

Create a strong, recognizable brand for Children's Advocacy Centers to become the undisputed authority that empowers local communities to serve/respond to child victims of trauma/abuse.

3 Leadership and Collaboration

NCA cultivates meaningful and sustainable collaborations among CACs, Chapters, and RCACs to capitalize on unique strengths for maximum impact and seamless, non-duplicative service delivery.

4 Leveraging Partnerships and Resource Development

NCA engages and cultivates public and private partners to expand resources, amplify our collective voice and strengthen research, education, and advocacy to improve child health and well-being.

5 Improving Outcomes for Children and Their Families

NCA supports the development of an operational framework that utilizes/ leverages research, shared data, platforms, and best practices to make data-driven decisions about service delivery to improve well-being outcomes for children and families.

Organizational Excellence

NCA is committed to organizational excellence, ensuring a fiscally sound and effectively governed organization with a strong and innovative workforce that creates value for its members.

To see details on our strategic plan, including objectives and strategies to achieve it, please visit www.nationalchildrensalliance.org/nca2020

Financials

Statement of Financial Activities

Revenue, Support, and Other Changes

10,979 413,122 203 19,850 292,000
10,979 413,122 203
10,979 413,122
10,979
,
389,284
200,500
590,000
803,542
11,663,948

Expenses

Total Expenses	\$13,615,433
Fundraising	230,740
Management and General	853,092
Public Awareness	494,495
Programs Services	1,681,877
Program Services – Grants	10,355,229
LAPENSES	

Statement of Financial Position

Assets

Change in Net Assets	\$776,995
Unrestricted Net Assets (beginning of year)	\$3,220,702
Unrestricted Net Assets (end of year)	\$3,997,697

92¢ of every NCA dollar is used for services that directly benefit CACs

NCA Leadership

Executive Committee

Beth Brandes

President

Dave Betz

Immediate Past President

Manager of Security Operations John Deere

Ernestine Briggs-King

Vice President and Strengthening Practices Committee Chair

Director of Trauma Treatment and Research **Duke University Center for Child Traumatic** Stress / National Center for Child Traumatic Stress

Doug Dean

Treasurer

Justin Fitzsimmons

Secretary

Program Manager - High Tech Crimes Training Services

SEARCH. The National Consortium for Justice and Statistics

Karen Meyer

Development Committee Chair

VP of Sales and Partnerships Welltok. Inc.

Karen Farst

Accreditation Committee Chair

Associate Director

Center for Children at Risk, University of Arkansas for Medical Sciences

Board of Directors

Dave Betz

Manager of Security Operations John Deere

Beth Brandes

Ernestine Briggs-King

Director of Trauma Treatment and Research Duke University Center for Child & Family Health / National Center for Child Traumatic

Stress

Doug Dean

Jenny DiJames

Partner

Alignment Government Strategies

Kevin Dowling

Program Manager **CARES Northwest**

Karen Farst

Associate Director Center for Children at Risk, University of Arkansas for **Medical Sciences**

Justin Fitzsimmons

Program Manager - High Tech Crimes Training Services **SEARCH** The National Consortium for

Justice and Statistics Karen Meyer

VP of Sales and Partnerships Welltok, Inc.

Alethea Miller

Forensic Interview and Victim Advocate

Harford County Child Advocacy Center/Harford County DSS

Adam Rosenberg

Executive Director Baltimore Child Abuse Center

Carole Swiecicki

Executive Director Dee Norton Lowcountry Children's Center

Leanda Welker, LCSW-CCPS

Supervisor

Harford County Child Advocacy Center/Harford County DSS

NCA Staff

Administration

Teresa Huizar

Executive Director

Kaylee Robinson

Executive Assistant

Kim Day

Deputy Director

Nicole Wilbon

Administrative Assistant/Office

Manager

Debbie Fletcher

Bookkeeper

Mental Health Projects

Michelle Miller

Coordinator of Mental Health

Projects

Accreditation

Jan Dunn

Director of Accreditation

Alyson MacKenzie

Senior Accreditation Associate

Chapter Development

Kristie Palestino

Director of Chapter Development

Communications and Media Relations

Blake Warenik

Director of Communications

Development

Brvan Boeskin

Senior Director of Development

Kathleen McCormac

Development Assistant

Government **Affairs**

Denise Edwards

Director of Government Affairs

Will Laird

State Government Affairs Officer

Membership Relations and Grants

Irina Hein

Director of Member Relations and Grants

Jillian Malone

Administrative Assistant

Membership and Grants

Kiley Pogas

Program Associate - Midwest Region

Montika Brooks

Program Associate - Southern Region

Dara Cummings

Program Associate -Northeast Region

Sarah Coker-Robinson

Program Associate - Special **Projects**

Outcome Measurement System

Kaitlin Lounsbury

OMS Coordinator

NCAtrak and

Information Services

Jonathan Picklesimer

Coordinator of Information

Services

Thanks to Our Supporters

Individual Donors

NCA Benefactor - \$2,500+

Mathias H. Heck. Jr. Teresa Huizar

NCA Guardian - \$1,000+

Denise Edwards

Henry Shiembob

In honor of Olivia Cinquegrana

Karen J. Meyer Anonymous

NCA Steward - \$500+

Darren Bullock

Doug F. Dean, Jr.

Janet Fine

NCA Protector \$250+

Adam Rosenberg

Blake Warenik

Bryan & Katherine Boeskin

Cheryl Peterson

David Betz

Elizabeth Brandes

Jillian Kahn

Kathleen McCormac

Kimberly Day

Will Laird & Emily Chittenden-Laird

2 Anonymous Supporters

NCA Friend - \$100+

Alexis Moncada

Anna Frissell

Betsy Goulet

Carole Swiecicki

Christina Kirchner

Clarissa McCormac

Connie Shih

Dara Cummings

Dave & Lorraine Pettit

Dean & Karen Pogas

Ernestine Briggs-King

Heather Teles

In honor of Sandy & Gary Garver

Ivy Svoboda

Jack & Cathy Crabtree

Jillian Malone

John Viviano

Jonathan Picklesimer

Joseph Demitris Velazquez

Juliana Jones

Kaitlin Lounsbury

Karen & Brian MacCracken

Kathleen McChesney

Kaylee Robinson

Kayleigh McCormac

Kevin & Tricia Dowling

Kiley Pogas

Lisa Auger

Marie Day

Maureen Fitzgerald

Michelle Harry

Mike Iddings

Mike Palestina

Nicole Wilbon

Pamela Wharton

Rebecca Sartorelli Sarah Coker-Robinson

Simone Wheeler

Stacey Thompson

Thomas King

Timothy Bassman

Wanda Ostrander

34 Anonymous Supporters

Partners In Our Success

PUBLIC & FOUNDATION PARTNERS









NATIONAL CORPORATE PARTNERS (\$2,500/year)





SPONSORS & OTHER CORPORATE PARTNERS



(\$2,500)



(In-kind)

NCA GUARDIAN (\$2,500-\$4,999)







NCA PROTECTOR (\$500-\$999)





NCA FRIEND (\$250-\$499)





EDUCATIONAL PARTNERS

National Child Traumatic Stress Network

University of New Hampshire-Crimes Against Children Research Center

Yale School of Medicine Child Study Center

Thanks to these partners for their crucial support for NCA as we empower local communities to serve child victims of abuse.

References

- 1. Ongoing National Children's Alliance/Yale University/Duke Endowment study, "Change in Trauma Symptoms in CFTSI Cases Completed at North Carolina and South Carolina Sites 3/1/15-1/31/16." N = 97
- 2. 2015 Annual National Report for the Outcome Measurement System (OMS). National Children's Alliance, February 2016.
- 3. Caregiver surveys are collected anonymously to protect the privacy of the families we serve. Photos are for illustration only.
- 4. National Children's Alliance 2015 outcome measurements surveys from Children's Advocacy Center members.

National Children's Alliance 516 C Street, NE Washington, DC 20002 US

nationalchildrensalliance.org

