

# Resilient Children, Resilient Loudoun!

A COLLABORATIVE REPORT ON **THE NEEDS OF CHILDREN**  
AND RECOMMENDATIONS TO BEST SUPPORT LOUDOUN  
COUNTY'S MOST VULNERABLE CHILDREN & FAMILIES



## ABOUT SCAN

SCAN (Stop Child Abuse Now) of Northern Virginia was founded in 1988 by citizens committed to reducing child abuse and neglect locally and the tragic implications for children, families, and the community.

SCAN's vision is that every child in Northern Virginia will grow up in a safe, stable, nurturing family, with the supports he or she needs to contribute to stronger communities today and as adults tomorrow.

SCAN's mission is to promote the well-being of children, improve parent-child relations and prevent child abuse and neglect by: EDUCATING the community about the scope, nature and consequences of child abuse and neglect and the importance of positive, nurturing parenting; PROVIDING direct parent education; and ADVOCATING for children in the community, the legislature, and the courts.



### THE LOUDOUN COUNTY PARTNERSHIP FOR RESILIENT CHILDREN & FAMILIES

#### STEERING COMMITTEE

HealthWorks for Northern Virginia

INMED Partnerships for Children

Inova Loudoun Hospital Children's Emergency Department

Loudoun Abused Women's Shelter (LAWS)

Loudoun Child Advocacy Center

Loudoun County Department of Family Services  
/Child Protective Services Unit

Loudoun County Mental Health, Substance Abuse  
& Developmental Services

Loudoun County Public Schools

Loudoun County Sheriff's Office

SCAN of Northern Virginia

*Cover Photo courtesy of INMED.*

# INTRODUCTION

In 2016, SCAN of Northern Virginia, with support from the Northern Virginia Health Foundation (NVHF), convened a steering committee of public, private, and non-profit organizations that serve children and families in Loudoun County. Our goal was to assess the needs of vulnerable children and the resources available to support at-risk families; collaboratively develop recommendations for addressing the gaps we identified; and raise awareness of how we as a community can best support vulnerable children and reduce long-term health outcomes for individuals, families, and communities.

We focused our work on the “upstream” non-medical factors that influence health so significantly, recognizing that “most of what makes us sick has less to do with health care and far more to do with where we live, work, play, and pray.”<sup>1</sup> Working upstream to improve health requires a community effort to nurture families and support children who have suffered trauma, witnessed domestic violence, or have not had safe, stable home environments in which to grow and develop.

To prepare this report, steering committee members drew on their own and their organizations’ experiences, conducted seven

focus groups, and analyzed responses from surveys collected at three topical summits that drew a broad range of Loudoun parents and providers. We explored what is working well in Loudoun County, what research says about creating resilient kids and families, and how to address unmet needs and harder-to-reach populations within our neighborhoods.

In this report, we present the themes we identified, pertinent data we found to guide action, and our recommendations. Each of us has a responsibility to help make

our community safe for children so that future community members are healthier. We hope that the information presented here helps you to understand our community’s most urgent

needs and to discover opportunities to effectively support vulnerable families and prevent child abuse. By working “upstream” together, we can all help improve health and well-being for children, their families, and Loudoun County as a whole.

**“Working upstream to improve health requires a community effort to nurture families and support children...”**



**Sonia Quiñónez**

Executive Director, SCAN of Northern Virginia

<sup>1</sup> NVHF 10 Years of Working Together to Improve the Health of Northern Virginia, 2015.

A photograph of a person's hands pouring water from a blue bucket into a red bucket on a sandy beach. The scene is overlaid with a semi-transparent green filter. The person is wearing a grey long-sleeved shirt and white sneakers. The background shows a sandy beach with some debris and a blue bucket.

"We cannot always build the future for our youth,  
but we can **BUILD OUR YOUTH** for the future."

- Franklin Delano Roosevelt

# Key Recommendations in this Report

## RECOMMENDATION 1:

### ***Increase community outreach to underserved and isolated families in Loudoun County.***

We need to increase awareness of the vast array of services and programs available to all families in our community, and we need to ensure that these services are provided in ways that are culturally and linguistically appropriate, in family-friendly settings, and flexible in regards to schedules and locations.

## RECOMMENDATION 2:

### ***Make supports and services more accessible to parents.***

One of the best ways to support and protect children is to help parents navigate the challenges they face every day. Parents in underserved and isolated families often experience high levels of stress and anxiety, with little practical support. They need programs and supports to help them strengthen their families and address difficult issues that may be affecting their children, such as mental health, racism, limited English, acculturation challenges, gender identity, or drug use.

## RECOMMENDATION 3:

### ***Improve and increase reporting of children in danger of abuse or neglect.***

Virginia has clear laws and policies regarding the mandatory reporting of suspected child abuse and neglect; yet, understanding of and compliance with these laws and policies are irregular or unbalanced. We found that not all professionals classified as mandated reporters are aware of their status, and we know from the Loudoun Child Protective Services unit that significant numbers of child abuse and neglect cases are not reported as early as they should because people do not act on their suspicions. Ongoing training is needed to improve reporting of suspected abuse and neglect and ensure the safety of our children.

## RECOMMENDATION 4:

### ***Increase funding and support for Loudoun County human service providers.***

Loudoun County is fortunate to have an excellent network of public and private service providers that coordinate and work well together. However, funding and support for these providers have not kept up with the tremendous population growth that Loudoun has experienced and the associated increase in service needs. This is particularly true in the area of child protective services and mental health. We must correct this deficiency by increasing support for our human service providers, both public agencies and nonprofit organizations. In addition, we must provide appropriate professional and emotional supportive services to providers who can otherwise become “burned out” by the secondary trauma they experience doing their jobs.

## A COMMUNITY OF CONTRASTS

Loudoun County has a long history as a strong, interconnected region of vibrant towns and rural communities. It is evident that our county has experienced significant changes in the first two decades of this millennium, including a doubling of our population since 2000. The high cost of living and the limited availability of affordable housing in the DC metropolitan area have caused many families to move to the furthest jurisdictions in the metropolitan area, including Loudoun. Our community is blessed with many strengths that contribute to a strong quality of life: The median household income is more than double the national median; 76% of the population own their homes; 60% are families with children; and the labor force participation is 75%.<sup>2</sup> The region's exponential population growth has also brought increased diversity: Loudoun is now made up of families who speak at least 109 languages.<sup>3</sup>

During focus groups we conducted with community members and service providers, we heard many positive remarks about the collaboration across human service agencies and non-profits in our community, and about community generosity as reflected in support for local food and clothing pantries that get essential items to children and families in need.

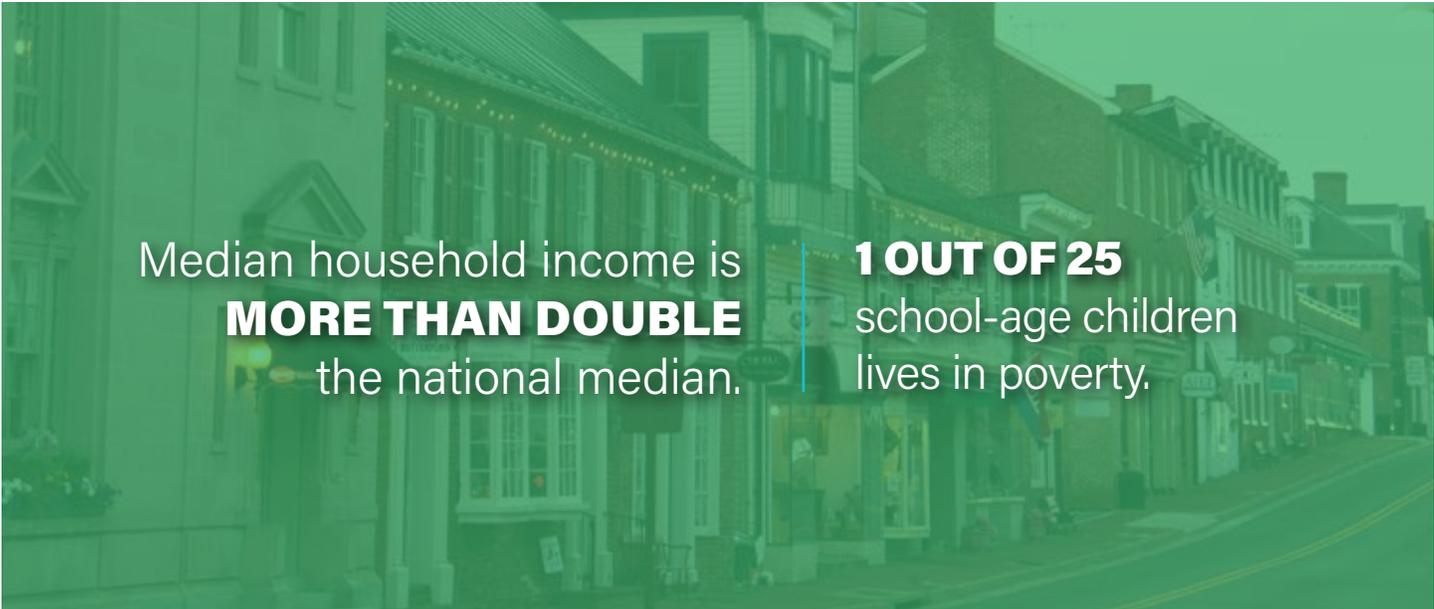
But there's a flip side to this positive picture. In pockets of our community, people are struggling: One in six households has an annual income of less than \$50,000. The average monthly cost of housing is \$2,093 compared to \$1,600 in other areas of the Greater Washington DC region.<sup>4</sup> One out of 25 school-age children lives in poverty.<sup>5</sup>

"Big-city" problems are also becoming a reality in Loudoun County. Between January 2014 and June 2016, arrests for aggravated assault, rape, and larceny all increased.<sup>6</sup> Similarly, crime in Leesburg increased 14.5% in 2016, compared to the previous year, with continued prevalence of narcotic cases, especially heroin-related cases.<sup>7</sup>

And although there are examples of significant generosity across the county, the Chronicle of Philanthropy in 2012 reported that Loudoun County had the lowest giving ratio – 2% – of all five Northern Virginia jurisdictions.<sup>8</sup>

When it comes to health, a community health needs assessment completed in 2016 for Inova Loudoun Hospital identified significant needs:

- access to dental care
- access to primary care
- conditions and care of the elderly
- cultural competency in care
- lack of affordable housing
- Lyme disease
- mental health conditions and services
- obesity and obesity-related concerns
- substance abuse and excessive alcohol use



Median household income is **MORE THAN DOUBLE** the national median.

**1 OUT OF 25** school-age children lives in poverty.

The needs assessment report also highlighted several indicators from a national county health scorecard<sup>9</sup> where Loudoun ranked unfavorably compared to other local jurisdictions with respect to:

- Percent of driving deaths involving alcohol
- Binge plus heavy drinking
- Primary care physicians, dentists, and mental health providers' reimbursement rates
- Percent of diabetic Medicare enrollees that receive regular and timely HbA1c monitoring
- Percent of female Medicare enrollees that receive mammography screening
- Average daily measure of particulate matter (air pollution)
- Percent of workforce that drives alone to work
- Percent of workers who commute in their car alone and drive more than 30 minutes

Our county is a community of real contrasts and starkly different realities.

Change is inevitable in any community. By focusing on the needs of children and families in our community, we have an opportunity to guide that change in a powerful way. The rapid growth Loudoun County has experienced requires all of us to recognize and support the best interests of our growing community.

Even as we work to leverage the full potential of our community's many assets—including high-quality schools, a robust job market, and strong economic growth—we must also work to support the physical and mental health of all our community members. Ensuring strong families will ensure a strong future for our community. Each of us has a role to play in supporting our neighbors who are struggling to manage stress and rise above the obstacles that their families face. When we make purposeful connections between the needs of our children and the future health of the adults in our community, we build a strong community—both for today and for tomorrow.

## PREVENTION & PROTECTION

To build a framework for our effort to assess the needs of vulnerable children and families in Loudoun County, we considered findings from three important research projects related to child abuse and neglect:

The **Adverse Childhood Experiences (ACE) Study**, sponsored by the Centers for Disease Control and Prevention and Kaiser Permanente, was conducted between 1995 and 1997 and found that traumatic events such as abuse, neglect, and exposure to domestic violence experienced early in life frequently have destructive effects that can last into adulthood. It documented a powerful relationship between our emotional experiences as children and our physical and mental health as adults. This relationship was so strong that the researchers concluded that ACEs are “the most important determinant of the health and well-being of our nation.”

It is the number of ACEs experienced—not the type—that predicts a child's likelihood to experience health problems in adulthood. For example, people who had experienced four or more types of ACEs were at substantially higher risk for alcoholism, drug abuse, depression, obesity, sexually transmitted disease, and suicide attempt than people with no ACEs experience. There is a positive, gradient relationship between the number of ACEs experienced and the development of adult diseases, including ischemic heart disease, cancer, and chronic lung disease.<sup>10</sup>



In Virginia,  
**1 in 5 children**  
had experienced  
2 or more ACEs.

- KidsCount 2011-2012

<sup>2</sup> Loudoun County Department of Planning and Zoning, April 14, 2016, Loudoun County Facts.

<sup>3</sup> Virginia Department of Education, 2015-2016 Fall Verification Report.

<sup>4</sup> Commonwealth Institute, Loudoun County: Still Growing, but New Challenges, May 14, 2015.

<sup>5</sup> The Commonwealth Institute for Fiscal Analysis, May 2015.

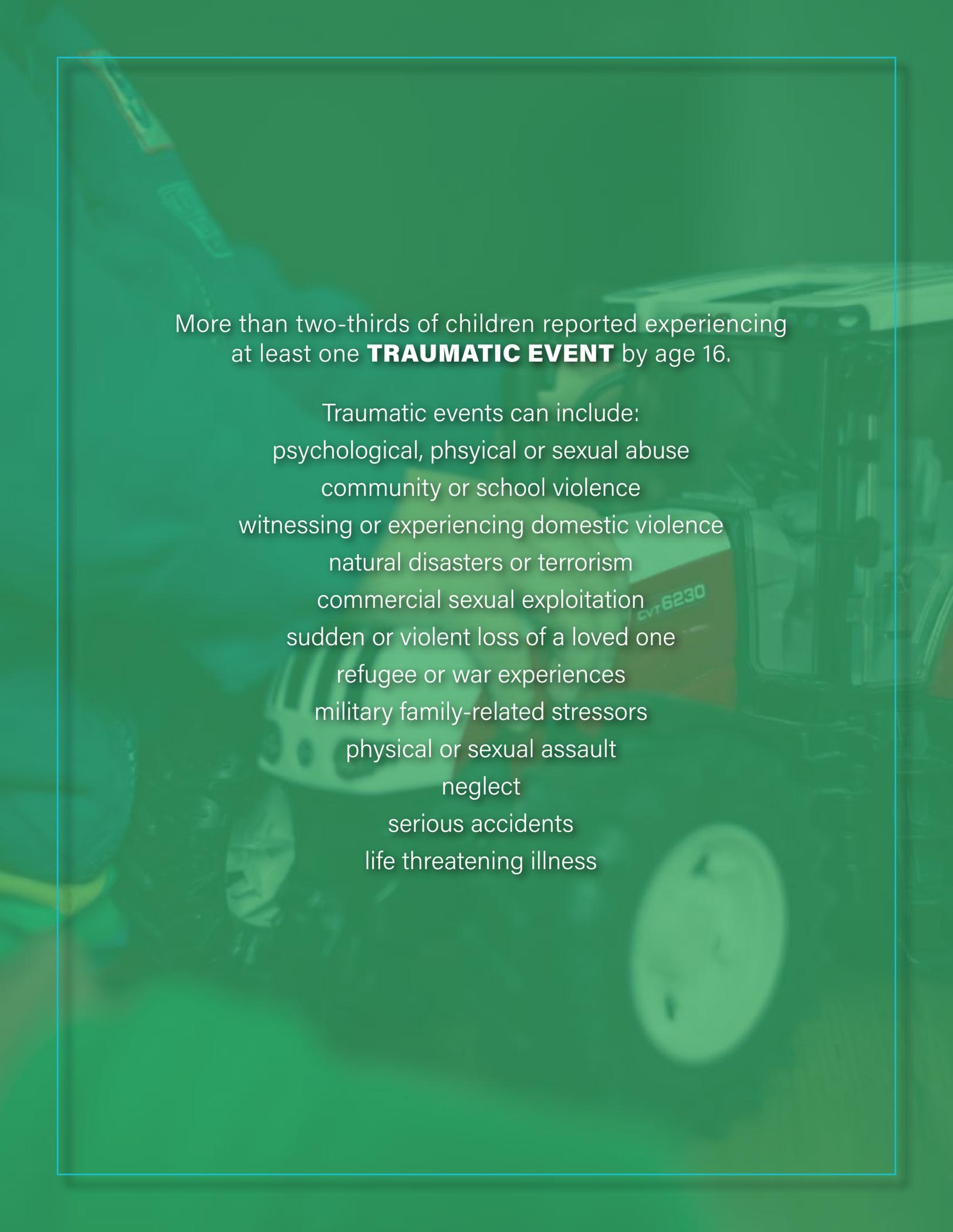
<sup>6</sup> Loudoun County Sheriff's Office, June 2016.

<sup>7</sup> Leesburg Police Quarterly Crime Report, January – March 2016.

<sup>8</sup> The Chronicle of Philanthropy, How America Gives, October 5, 2014.

<sup>9</sup> County Health Rankings Data Compared to Virginia and U.S. Average, 2016.

<sup>10</sup> CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) Study, 1995 to 1997.



More than two-thirds of children reported experiencing at least one **TRAUMATIC EVENT** by age 16.

Traumatic events can include:

- psychological, physical or sexual abuse
- community or school violence
- witnessing or experiencing domestic violence
- natural disasters or terrorism
- commercial sexual exploitation
- sudden or violent loss of a loved one
- refugee or war experiences
- military family-related stressors
- physical or sexual assault
- neglect
- serious accidents
- life threatening illness

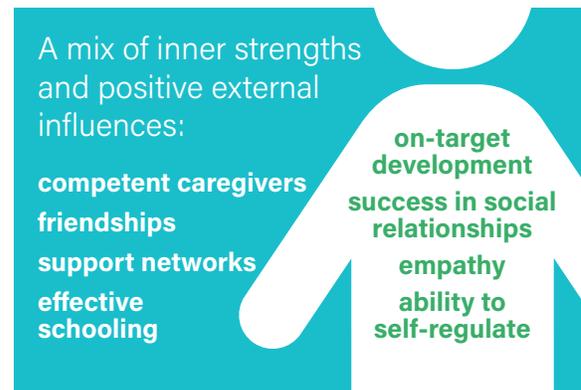
Another body of research we referred to was conducted under the **Strengthening Families Initiative** of the Center for the Study of Social Policy (CSSP). It identified six protective factors that, when present in a family, significantly reduce the likelihood of child abuse:

- Nurturing and attachment
- Knowledge of parenting and child/youth development
- Parental resilience
- Social connections
- Concrete support for parents
- Social and emotional competence of children<sup>11</sup>

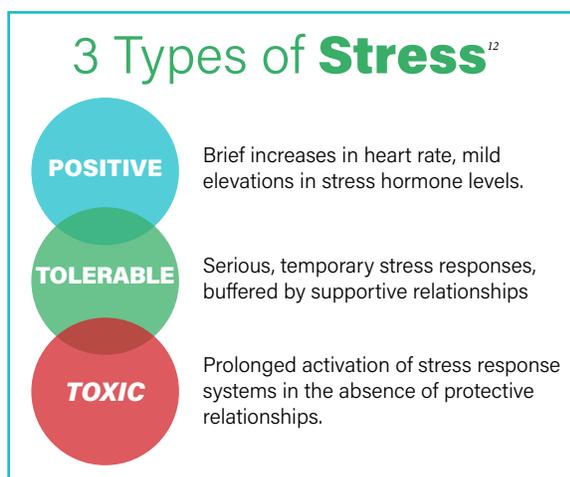
For this project, we used this framework to organize information from our focus groups to gain a better understanding of how protective factors are being met or not met among Loudoun County families. In doing so, we asked service provider participants to consider their work with children and families in a way that directly aligns with this research about “what works” in reducing child abuse. According to the CSSP, using the protective factors benefits all families, it builds on a family’s strengths, and parents can learn to protect their children from abuse and neglect through “small but significant” changes.

Finally, the **Substance Abuse and Mental Health Services Administration’s (SAMHSA) research on child trauma and toxic stress** greatly informed our work. According to SAMHSA, more than two-thirds of children reported experiencing

## What does a resilient child have?



at least one traumatic event by age 16. Simply removing the child from the environment where the trauma occurred generally is not sufficient to address the impact of trauma, which can last well beyond childhood, especially if the child does not have a caring, non-abusive family member support system or access to service providers who specialize in trauma-informed care. In addition, we must recognize the legacy of childhood trauma for the adults who care for children today and whose own trauma experiences may not have been adequately addressed. Supporting the parents and caregivers of today’s children in this light can help equip them to cope with daily stress in healthier ways, connect with resources in the community, and build resiliency in their children. That resiliency allows children to cope with life’s problems, appropriately identify and express their emotions, and gain inner strength.



<sup>11</sup> Center for the Study of Social Policy, *Strengthening Families A Protective Factors Framework*, 2016.

<sup>12</sup> *The Center on the Developing Child, Harvard University.*

## METHODOLOGY & FINDINGS

The steering committee first met in December 2015 to plan our efforts, including focus groups, summit topics, and gathering of other available data. Over the course of the year, the steering committee met six times.

We conducted seven focus groups with 98 Loudoun community members, introducing them to CSSP's Six Protective Factors and asking how those factors are addressed in Loudoun County for children and families. Responses fell into the following categories:

- Key existing sources of community support for families/children
- Nurturing and attachment: what exists, what is needed
- Knowledge of parenting and child/youth development: what exists, what is needed
- Parental resilience: what exists, what is needed
- Social connections: what exists, what is needed
- Concrete support for parents: what exists, what is needed
- Social and emotional competence of children: what exists, what is needed
- Other areas of improvement not directly related to protective factors

We also collected data from 111 written surveys completed by focus group participants and by others who attended one of our topical summits. The survey included questions regarding residency, the organization in which the respondent works, whether the responder is a mandated reporter, and the respondent's observations on which Loudoun County residents are not served as well as others. Summaries of our findings can be obtained by contacting SCAN of Northern Virginia.

After evaluating data from the focus groups and survey, as well as local and state statistics, the steering committee developed the following four recommendations:

## RECOMMENDATION 1: *Increase community outreach to underserved and isolated families in Loudoun County.*

Focus group participants identified numerous organizations, agencies, and programs in Loudoun County that help children and families. Among those most frequently identified were the faith community, local food pantries, Loudoun County Department of Family Services, Loudoun County Mental Health, Substance Abuse & Developmental Services, the Loudoun Chamber of Commerce, as well as the Loudoun Human Services Network and the vast network of non-profits that it represents. They also consistently named Loudoun County Public Schools and its parent liaisons as a valuable source of support for families.

Yet, even though *Forbes Magazine* named Loudoun County the "wealthiest county" in 2016 and SmartAssets 2016 declared it the "happiest county," focus group participants said that some parents struggle to meet their families' needs. Not everyone in the community knows about the programs and resources available to help them. All of these community supports need to be leveraged more effectively to reach children and families.

Participants identified many groups likely to be isolated from services, especially:

- families who are English language learners
- newly immigrated families
- middle-income families
- youth who are aging out of foster care
- youth with intellectual or physical disabilities
- families who are homeless or precariously housed
- families who lack transportation
- families with low literacy levels.

When concrete supports for parents (one of the 6 Protective Factors) are lacking, then parents must focus on these basic needs, leaving little time or energy to develop the other protective factors, which are also critical to ensure resilient families and prevent child abuse and neglect. Having stable housing is one of those key concrete



Homelessness and  
**HOUSING INSTABILITY**  
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key challenge for families.

supports that families need but some parents struggle to ensure. Homelessness and housing instability surfaced repeatedly as key challenges for families. The Point-in-Time homeless count, which counts people living outside, in shelters, or transitional housing, conducted January 28, 2016 in Loudoun County, identified 44 children in families who were homeless.<sup>13</sup>

A larger number of children are unstably housed. Organizations like Project Hope-Virginia (Virginia’s Program for the Education of Homeless Children and Youth) use the broader definition of homelessness as stated in the McKinney<sup>14</sup>-Vento Act: “children and youth who lack a fixed, regular, and adequate nighttime residence.”

Defined this way, Project Hope-Virginia identified 1,325 youth in Loudoun who were “precariously housed” during the 2014-2015 school year. This larger group of children and families often experiences a greater number of ACEs because of their unstable housing. Furthermore, the stress of trying to secure stable housing frequently prevents parents or primary caretakers from being actively involved in the growth and education of their children, which is critical to the development of children’s academic and life skills. On average, 87% of school-age homeless children are enrolled in school but only 77% of them attend school regularly. These children are four times more likely than their peers to have developmental delays and twice as likely to repeat a grade, usually due to frequent absences and moving.<sup>15</sup>

Service providers in our study often reported multiple families living together in one domicile because they could not afford to live on their own. When multiple families or unrelated adults live together, the children’s well-being



608 families with **1,060 children** were on the childcare subsidies waitlist.

- Loudoun County DFS

may be at risk. According to Darkness to Light, a national organization dedicated to educating and empowering adults to prevent child sexual abuse, “children who live with a single parent that has a live-in partner are at the highest risk; they are 20 times more likely to be victims of child sexual abuse than children living with both biological parents.”

Another study concluded that “[c]hildren living in households with 1 or more male adults that are not related to them are at increased risk for maltreatment injury death.”<sup>16</sup> In addition, these children are sick four times more often than other children, are more likely to suffer emotional and behavioral problems, and are at risk for slower development of motor skills such as crawling and walking due to lack of space.<sup>17</sup>

According to focus group participants, Loudoun County parents frequently lack other important concrete supports such as transportation, all-day kindergarten, flexible childcare (weekends and evenings), affordable childcare, and childcare subsidies. Recently, Loudoun County Department of Family Services reported that 608 families with 1,060 children were on the childcare subsidies wait list. These were working parents whose earnings made them eligible for financial support to pay for childcare. Loudoun County’s wait list is the third-highest among Northern Virginia jurisdictions.



Darkness to Light (D2L) is a national nonprofit organization that provides individuals, organizations, and communities with the tools to protect children from sexual abuse. Using an evidence-informed platform, D2L programs teach adults to prevent, recognize, and react responsibly to child sexual abuse.

**Learn more at [www.scanva.org/d2l](http://www.scanva.org/d2l)**

<sup>13</sup> Homelessness in Metropolitan Washington, Results and Analysis from the Annual Point-in-Time (PIT) Count of Persons Experiencing Homelessness, May 2016.

<sup>14</sup> 42 U.S.C. §11434A(2)(A).

<sup>15</sup> National Coalition for the Homeless, Fact Sheet #10, August 2007.

<sup>16</sup> Household Composition and Risk of Fatal Child Maltreatment, 2002, Stiffman, Schnitzer, Adam, Kruse and Ewigman

<sup>17</sup> Children, Parents and Homelessness, SCAN of Northern Virginia, 2014.

An additional subset of parents earns just enough to be ineligible for childcare subsidies but still cannot afford market-rate, quality childcare in Loudoun County, especially for licensed care of children ages newborn to 2 and children with special needs. There are some low-cost after-school programs, but parents are not always aware of them or they may be unable to arrange transportation. Many parents are challenged to secure their families' economic stability and well-being when they cannot get to services or if there is no one to safely care for their children. Parents confront tough decisions about the care and safety of their children during the workday.

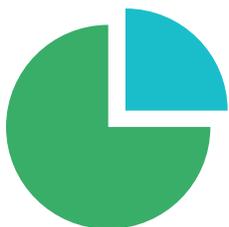
Stigma associated with seeking services is also a significant problem. According to participants in our focus groups, many parents feel embarrassed or ashamed to seek out services for children who have special education needs, for their own mental illness or substance abuse problems, or for dealing with domestic violence and abuse. Recent high-profile convictions are bringing attention to the fact that child abuse, neglect, and domestic violence do, in fact, happen in Loudoun County at all socioeconomic levels. It is important to build public awareness of the strong community resources available here to help families experiencing violence.

Our research also found that many families are not connecting to services and supports because of issues related to culture and language. From 2000 to 2014, Loudoun's Hispanic population more than quadrupled, to 13.4% of the total population. The county's foreign-born population has more than quadrupled and now accounts for nearly a quarter of the total population.<sup>18</sup> These families often face language and cultural barriers that can isolate them from

services for which they are eligible and which could enhance their positive contribution to the community. Parents sometimes immigrate to the United States, leaving young children behind in their home countries while they secure employment and housing. This often takes longer than planned, and it may be years before these families reunite. Reunification can be a significant challenge for pre-teen and adolescent youth and their families, putting youth at risk for behavioral and academic problems in school, attraction to gang culture, vulnerability to human/sex trafficking, and other dangers.

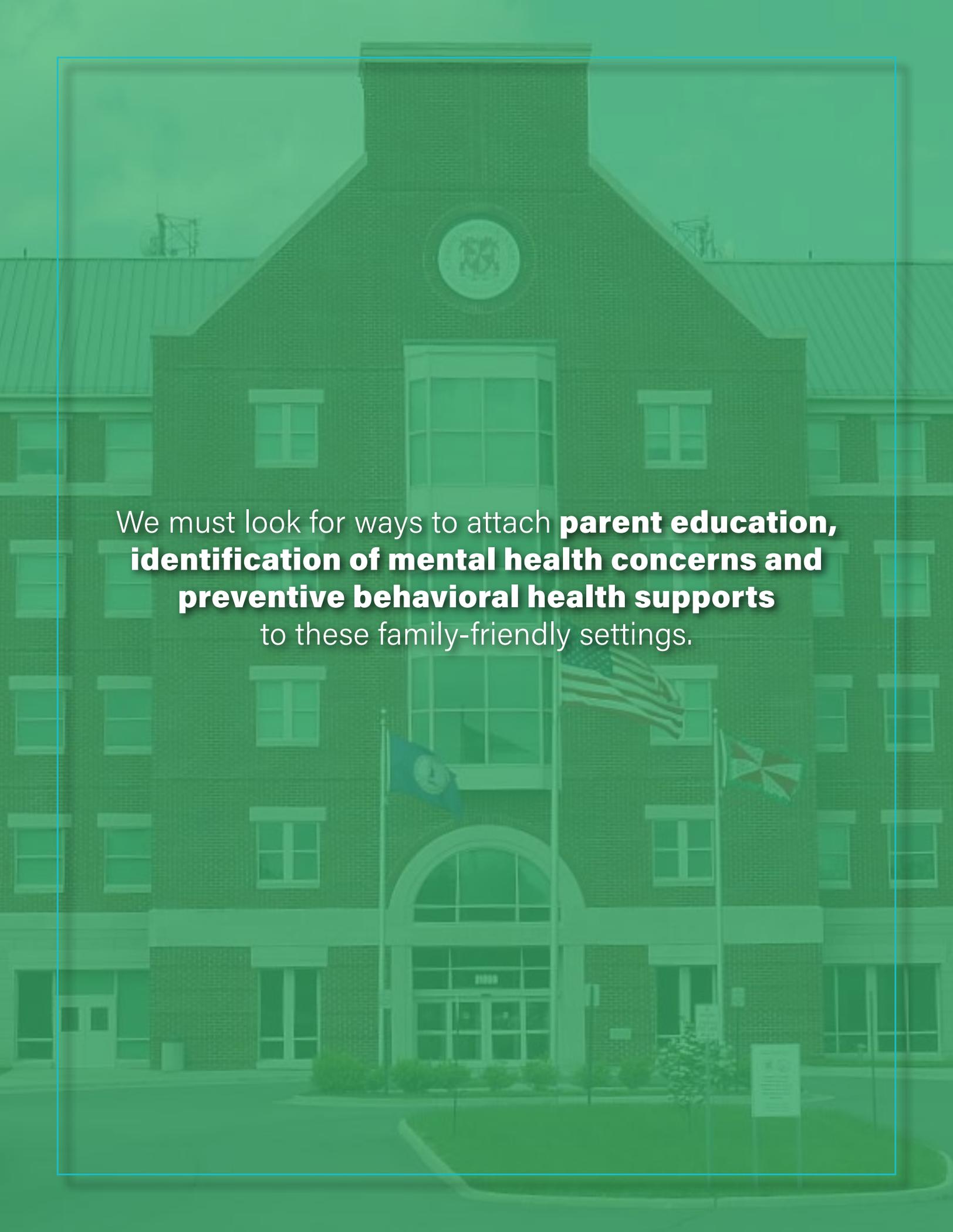
Additional attention needs to focus on correcting the misperceptions that some immigrants have that assistance is not available to them. At the same time, local providers (in both local government agencies and non-profits) expressed a commitment to recruiting and retaining culturally competent and linguistically diverse staff, but also reported that market factors and regional competition for these "in-demand" professionals make this difficult. Service providers told us they want more training that addresses cultural barriers, cultural understanding, immigrant eligibility requirements, and how their organizations can provide culturally competent services.

***Participants in our focus groups recommended that the greater Loudoun community connect with isolated families, including those isolated by poverty, stigma, crisis or immigration; work to increase cultural awareness and appreciation for the increasing diversity of our residents; and become advocates for vulnerable families in our community.***



From 2000 to 2014, Loudoun County's foreignborn population has more than quadrupled and now accounts for **nearly a quarter of the total population.**

<sup>18</sup> Limited English Proficiency (LEP) Title VI Plan, Updated May 2016, prepared by Loudoun County Government.



We must look for ways to attach **parent education, identification of mental health concerns and preventive behavioral health supports** to these family-friendly settings.

## RECOMMENDATION 2: *Make supports and services more accessible to parents.*

Many youth are struggling with significant stress, anxiety, or even more serious mental health challenges. Many providers offered evidence of this trend. For example, Loudoun County Public Schools (LCPS) has seen a significant increase in intensive case management around students' mental health needs and a huge increase in home-bound requests. Over the past 24 months, through HealthWorks' integrated behavioral health-primary care model, 60% of 0-18 year old patients were identified at the time of enrollment to have mental health concerns, frequently with moderate to high depression scores on a widely used depression index. When subsequently seen by HealthWorks' behavioral health staff, 97% had identified behavioral concerns, many of which reflect parenting dynamics, divorce, or instability at home. Loudoun's Mental Health, Substance Abuse & Developmental Services has also seen a significant increase in unduplicated child/youth clients (ages 0-17) from 1,545 in fiscal year 2013 to a projected 1,982 for fiscal year 2016—a 23.3% increase in just three years.<sup>19</sup> Dr. Jill McCabe, a pediatric emergency doctor at Inova, also observed that health care providers are challenged to secure mental health services for children at risk but whose symptoms have yet to reach a crisis.

Parents are key to preparing youth for today's world. Yet, stress and anxiety are also very high among parents. When parents can't manage stress in healthy ways or get help when they need it, their anxiety is often passed on to their children. We

need more behavioral health supports that help parents and youth cope with the stress of daily life in ways that prevent more serious mental health problems. Faith groups, support groups, or play groups can provide this kind of support informally when they are intentional about this focus; other times, a family may need a licensed therapist, therapy groups or case management, so the availability of both kinds of mental health supports are critical to a strong community. We need more local options for residential psychiatric services and affordable child psychiatry services. Because schools and primary health care providers are the institutions that are most universally accessed by families, we must look for ways to attach parent education, identification of mental health concerns and preventive behavioral health supports to these family-friendly settings.

One of our focus group discussions highlighted a particular need to provide educational supports for parents of middle school students. Children in this age group are particularly vulnerable to outside influences such as gang activity, human/sex trafficking, and drug/alcohol abuse. Greater engagement with prevention-focused services could protect young people from these dangers. Focus group participants described children who are too young to get a job, cannot attend after-school care because they have no way to get home, and spend long summer days unsupervised or charged with watching younger siblings and relatives.

Focus group participants also mentioned that immigrant youth in middle and high school often acculturate to American lifestyle and develop English language skills much more quickly than their parents. This can lead to a power shift within the family. Parents may feel helpless and



LCPS has seen a **significant increase** in intensive case management around students' mental health needs and a huge increase in home-bound requests.

<sup>19</sup> Loudoun County Mental Health, Substance Abuse & Developmental Services, data, 2016.

sometimes will relinquish their disciplinary role or fail to provide the needed structure that can keep adolescents on a healthy and productive path.

INMED Partnerships for Children, Loudoun Abused Women's Shelter (LAWS), the Loudoun Department of Family Services, Early Head Start, Head Start, and several other private organizations provide parenting classes in Loudoun. These curriculum-rich and evidence-based parenting classes enhance participating families' resilience by introducing parents to techniques and community resources that can help them manage stress, model healthy life skills for their children, strengthen their families, and keep their children safe.

Yet, these programs serve only a small percentage of parents. For example, the Family Connections Program in the Department of Family Services has been successful with families of at risk adolescents. However, their ability to serve families is limited because there are only three staff members, and no Spanish-language group.

Many parents simply don't have the time to take advantage of these programs. According to Voices for Virginia's Children, 62.2% of children younger than 6 live in families where both parents work. These parents often feel overwhelmed by the demands on their time, especially in jobs that provide limited or no leave time or flexibility to attend to family needs. As these families prioritize what is needed to meet their immediate and basic needs, time to learn new parenting strategies feels like a luxury that they cannot afford. Furthermore, many "working poor" families may not meet eligibility criteria for certain programs and supports. They may make too much to qualify for help but not enough to meet their families' basic needs.

Across the United States, parents also want more information and support on how to address issues like racism, gender identity and suicide with their children. Yet, because of the stigma attached to these issues, parents can be reluctant to seek such support. Focus group participants repeatedly said that parents would be embarrassed to attend such workshops or trainings, fearing that they would be



By supporting parents in learning and building their own **resiliency**, we can help them raise **more resilient children**.

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viewed as abusers or inadequate parents rather than as parents educating themselves on how to protect their children. These kinds of controversial topics need to be framed as "family issues" in order to reduce the stigma around learning and asking for help. It is also important to build the capacity of front-line human services and school staff to effectively address these diverse issues in their work with families in more private, natural interactions. By supporting parents in learning and building their own resiliency, we can help them raise more resilient children.

By strengthening a family's capacity to provide a healthy, secure, nurturing environment for their children, parent education efforts can work "upstream" to reduce the incidence and impact of more serious issues among today's children.

***More universal, accessible and culturally sensitive mechanisms for supporting parents and building their repertoire of family management strategies would create ripples of positive impact for children, families, and the community at large.***

### RECOMMENDATION 3: *Improve and increase reporting of children in danger of abuse or neglect.*

As a community, we have a paramount duty to protect our children from abuse and neglect. Yet, our findings from this project suggest that we need to do a better job in that regard.

*Under Virginia law, “[a]nyone can report suspected child abuse or neglect, but if you are identified in the Code of Virginia as a mandated reporter or you have received training in recognizing and reporting suspected child abuse and neglect, you are required by law to immediately report your concerns to the local department of social services or to the Child Abuse and Neglect Hotline.”<sup>20 21</sup>*

In our written survey, we asked respondents “Are you a mandated reporter?” Most respondents answered as expected but several providers answered “no” or “not sure,” even though they should have answered affirmatively, on the basis of their professional occupation.

We know that reporting of suspected child abuse in Loudoun County does not always happen even when an adult becomes aware. Many investigations by the Loudoun Child Protective Services (CPS) Unit have discovered, after the fact, that child victims had interacted with mandated reporters who had reason to suspect abuse was occurring but did not act on that suspicion. That kind of failure to act exposes children to greater harm for a longer time. People may be uncomfortable reporting “suspicions” to CPS, but it is absolutely necessary to ensure children’s safety. A reporter does not need proof that abuse or neglect has occurred; reasonable concern is

enough to make the call, and it opens the door for CPS to investigate or offer support to families who may otherwise not know where to turn. CPS is responsible for evaluating every report of suspected abuse or neglect and determining appropriate action. Even if an initial report is not taken as “valid” when it is made, a record of the report is kept by the local agency for one year. If another report comes in during that time, it raises a red flag that can elevate the response of child protective services staff.

Members of our steering committee cited several reasons why people fail to act on their suspicions. For example, a person:

- may be uncertain that what was observed or learned should be reported;
- may believe that someone else will make a report;
- may fear personal consequences to the relationship with the family if he/she makes a report.

Employers of mandated reporters should discuss these issues with their employees. For example, all mandated reporters should be aware that if a child has witnessed domestic violence between adults in the home, it must be reported to CPS, regardless of whether the child was physically harmed. Loudoun has led on this issue, as one of the first jurisdictions in Virginia to accept all witness reports of domestic violence for CPS investigation.

A reporter does not need proof that abuse or neglect has occurred; **reasonable concern is enough** to make the call, and it opens the door for CPS to investigate or offer support to families.



<sup>20</sup> Virginia Department of Social Services, *A Guide for Mandated Reporters in Recognizing and Reporting Child Abuse and Neglect*.

<sup>21</sup> Under Virginia law, these professionals include: persons licensed to practice medicine or any of the healing arts; hospital residents or interns; persons employed in the nursing profession; social workers; eligibility workers in a local department of social services; probation officers; teachers or other persons employed in a public or private school, kindergarten, or nursery school; persons providing full or part-time child care for pay on a regular basis; mental health professionals; law enforcement officers; professional staff persons employed by a public or private hospital, institution, or facility in which children are placed; persons 18 years or older associated with or employed by any public or private organization responsible for the care, custody, and control of children; mediators certified to receive court referrals; volunteer Court Appointed Special Advocates (CASA); persons employed by public or private institutions of higher education other than attorneys employed by institutions of higher education as it relates to information gained in the course of providing legal representation to a client; athletic coaches, directors or other persons 18 years of age or older, employed by or volunteering with a private sports organization or team; administrators or employees, 18 years of age or older, of public or private day camps, youth centers and youth recreation programs; and any person 18 years of age or older, who has received training approved by the Department of Social Services for the purposes of recognizing and reporting child abuse and neglect. § 8.01-400 or 19.2-271.3



By **taking strong action** to identify and intervene swiftly with children in potentially traumatic home environments, CPS can guide the family to supportive services that can **help ensure family safety and reduce long-term impact on the child.**

CPS and DFS work closely to ensure the victims and their children get services and support through LAWS and that there is a coordinated community response to meet the needs of victims of domestic violence. By taking strong action to identify and intervene swiftly with children in potentially traumatic home environments, CPS can guide the family to supportive services that can help ensure family safety and reduce long-term impact on the child.

Many mandated reporters, especially those in education and childcare, are required to undergo training, either in person or online, that meets standards established by the Virginia Department of Social Services.<sup>22</sup> All organizations that work with children and families should conduct annual, in-person trainings with their employees and volunteers, so that everyone can openly discuss the organization's policies, including how and when to report and what happens to families after a report is made. In-person trainings can address barriers and give mandated reporters the confidence to know that they are acting appropriately to protect children.

Focus group participants frequently stressed that CPS workers are passionate, skilled, and dedicated to the children and families they serve. They also noted that CPS works closely with law enforcement, Loudoun Child Advocacy Center, and LAWS to coordinate around helping children and families in Loudoun County.

***The goal of a CPS intervention is to ensure the safety of the child and provide support to keep the family intact when possible. Making a report to CPS opens the door and can link the child and family to needed services.***

## RECOMMENDATION 4: ***Increase funding and training opportunities for Loudoun County human service providers.***

Earlier this year, Loudoun County Board of Supervisors Chair Phyllis J. Randall noted that nonprofits are “sorely underfunded.” Although county revenues have been transferred to nonprofits, the amount of the transfer has never been adjusted for population growth, leaving nonprofits underfinanced to meet growing service needs.<sup>23</sup> Loudoun County's population has grown 20% since the 2010 Census.<sup>24</sup> Student enrollment has increased 16% from 2011–2015, and school construction has increased to meet that growth, from 80 schools in 2011 to 88 in 2016.<sup>25</sup>

Capacity to keep up with the growing population challenges both local government agencies and nonprofit providers. For example:

- Despite dramatic increases in the child population and school construction, there has been no parallel increased investment in child and family services within Loudoun County's Department of Social Services. It has either flattened or fallen. In fact, Loudoun County's investment in child and family services decreased from \$15.77 million in fiscal 2012 to \$13.98 million in FY2016.
- Loudoun's CPS staff has one of the highest caseload levels among similarly sized nearby jurisdictions. Having adequate staffing levels to respond to children in need is key to demonstrating that Loudoun County makes children and families a priority.
- In FY2016, the Child Protective Services unit assessed or investigated 1209 valid referrals and provided intensive ongoing services to 59 families. This was the fourth largest number of valid referrals received by a local Department of Social Services agency in Virginia in FY2016. Not only has the CPS unit experienced increases in the overall number of cases coming in, but the increasing complexity of those cases has also added to the overall workload within the unit. Between FY2015 and FY2016, the unit saw a 37%

<sup>22</sup> *Minimum Standards for a Curriculum for Mandated Reporters on Recognizing and Reporting Child Abuse and Neglect.*

<sup>23</sup> Phyllis J. Randall, *State of the County Address*, May 25, 2016.

<sup>24</sup> *Loudoun Times-Mirror*, January 27, 2016.

<sup>25</sup> *Loudoun County Public Schools fact sheets.*

increase in the number of valid referrals involving domestic violence; a 33% increase in the number of after-hours emergency calls and a 43% increase in the number of criminal hearings attended. The number and complexity of sex trafficking cases have also been increasing.

- Virginia State Child Welfare policy states it is best practice that families whose children are at risk of removal participate in a Family Engagement process to try to prevent the need to remove a child to foster care. This process has shown to be very successful. In FY2016, thirty-two Loudoun children went through the process and 100% of these youth were diverted from foster care. However, the family engagement process is time consuming and must be done within a very quick time frame. Due to workload, this process was not always able to be completed. In FY2016, sixteen children came into care through the CPS unit. Ideally, every family whose child is at risk of removal from the home would be involved in the family engagement process. Having more CPS workers would result in fewer cases per worker, decrease the chances the child needs to enter foster care, and allow more time to engage families and ensure that resources are in place before the case is closed.
- Loudoun County Department of Mental Health, Substance Abuse, & Developmental Services has seen a 23% increase in child/youth clients and has risen to that challenge, successfully scheduling 61% of those clients, ages 0-17, within 15 days. However, that leaves more than one in three children/youth without services when they need them, due to capacity challenges and factors like staff turnover; recruitment challenges; inability of the parent to bring the child in, even during extended provider hours; and/or the cultural and language competency of the staff.

- HealthWorks for Northern Virginia reports that, in the last six months, the clinic has diagnosed 10 children with post-traumatic stress disorder but until recently has had great difficulty hiring a therapist who specializes in treating children.

Randall has noted that “[c]hallenges with recruitment and retention are also barriers to meeting the demand for services . . . We can and we should support our mental health professionals with increased training opportunities and we should ensure that they have adequate staff to fulfill their needs to our community.”<sup>26</sup>

Participants in our study agreed with her call to action. They voiced the need for service providers who speak languages other than English and who are trained in trauma-informed care.

In an effort to support providers, we organized three summits in Loudoun County during 2016:

- An April event at a local high school screened a documentary on child sexual abuse, followed by a panel of local experts who focused on empowering the community to prevent child sexual abuse;
- a June training brought together a panel of experts to discuss building bridges to the immigrant community; and
- a full-day training seminar in October addressed the neurobiology of trauma for providers who work with children and adults who have experienced family violence, sexual assault, and other traumatic events.

Feedback from these events consistently reinforced the need not only for more training for human service providers, but also for more opportunities to network and share resources. Asked what they valued most from the summits, attendees provided responses like:

- “I saw some chances/opportunities for partnership.”
- “I received helpful information to better serve my families.”
- “I value the educational process of helping professionals to better understand the immigrant community and how to serve their needs.”
- “Gaining a greater understanding of how trauma and the brain interact will assist me in helping clients gain their own understanding.”
- “Great training! I would love a second day.”

Loudoun County's population has **grown by 20%** since the 2010 Census; no parallel increase in funding of human services means providers cannot keep up with the needs of the growing population.



- “I will be more sensitive to children and families I work with in terms of trauma.”
- “I have a better understanding of why kids often testify the way they do and can use the knowledge to help educate foster parents.”
- “I feel like I have a much better understanding of the neurobiology of trauma and this will have a definite impact on the work I do with students.”
- “I will be more cognizant of my reactions, expressions, and non-verbal ways I communicate.”
- “I have worked in community mental health for over 34 years. Been to many, many good trainings. But I will honestly say that this was about the best I’ve ever attended.”

Randall has said that “[o]ur partners in the community often bridge gaps in services and are vital resources for all of us. Loudoun’s nonprofit community, for example, fills in the gap for our most at risk and our most at need.”

Loudoun County Public Schools (LCPS) offers a meet-and-greet at the beginning of the school year where staff can connect with local organizations that help children and families. Since LCPS is the primary institution in regular contact with most children in the county,<sup>27</sup> this type of facilitated networking with local nonprofit providers is key. Connecting LCPS staff and Loudoun’s nonprofit network is vital to ensure that we are all aware of how we can best meet the needs of our children and families.

***“Compassion Fatigue is a state experienced by those helping people or animals in distress; it is an extreme state of tension and preoccupation with the suffering of those being helped to the degree that it can create a secondary traumatic stress for the helper.”***

—Dr. Charles Figley, Professor,  
Paul Henry Kurzweg Distinguished Chair,  
Director, Tulane Traumatology Institute

In addition to connecting service providers across agencies and institutions, we need to strengthen the individual providers who care for our community’s most vulnerable members. In order to best serve children and families, a provider must understand the full family story and events that have led the family to where it is in the moment.

<sup>26</sup> Randall, *State of the County Address*.

<sup>27</sup> 76,228 children in pre-kindergarten through twelfth grade according to the Virginia Department of Education, 2015-2016 Fall Verification Report.

**“Our partners in the community often bridge gaps in services and are vital resources...Loudoun’s nonprofit community fills in the gap for our most at risk and our most at need.”**

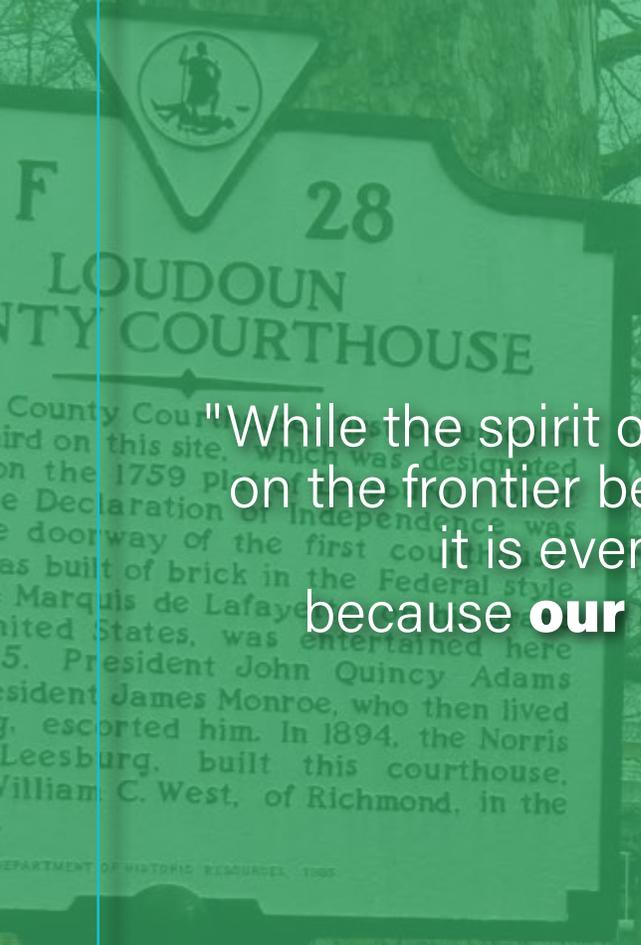
- Phyllis J. Randall, Loudoun County  
Board of Supervisors Chair

Many times, these family stories are filled with despair, trauma, tragedy, violence, and hostility. A human service provider cannot “unhear” this; instead, she/he must have a way to process these personal narratives with support from her/his organization. Service providers who participated in our focus groups mentioned that they experience compassion fatigue and vicarious trauma, as well as burnout, yet they have few places to turn for help themselves. It is a price they pay for the work that they do.

Compassion fatigue can be addressed effectively through professional development, training, professional support groups, and other resources. Participants in our focus groups wanted more training opportunities but recognized the constraints of their organizations’ limited budgets. Furthermore, many reported that heavy workloads sometimes prevent them from attending training.

Many participants praised the effective multidisciplinary teams and strong relationships between nonprofit service organizations and public agencies in Loudoun. We should all continue to develop these connections and focus on pooling resources together in ways that promote cross-collaboration, create shared training opportunities, and validate the efforts and emotions of those working with children and families in order to retain quality, experienced providers.

***By increasing awareness of the services that Loudoun County human service agencies provide and strengthening supports for those providing the services, we can maximize positive outcomes for children and families.***



"While the spirit of neighborliness was important on the frontier because neighbors were so few, it is even more important now because **our neighbors are so many.**"

- Lady Bird Johnson



# CALLS TO ACTION

Loudoun County truly is a place *Where Tradition Meets Innovation*, but we must make sure that this vision permeates all aspects of life for all families in our County. We help that dream emerge...

- when we **use innovative ways to reach underserved families** and understand the cultural traditions of all of our residents so no families live in isolation;
- when we **support children and parents as they develop resiliency skills** to overcome adverse childhood experiences and the stresses of today's society;
- when we **ensure the safety of our children** and connect parents to resources;
- when we **increase awareness of the variety of services provided by human service agencies** in our community; and
- when we **provide support to those working in the human services professions** to ensure high quality, sustainable services across the county.

These strategies can help nurture Resilient Children,  
and in turn, a Resilient Loudoun.



*If you would like to know more about what you or your group can do, please invite any of the steering committee partners to your next meeting or event. We must continue the dialogue beyond the pages of this report. This report is only one tool in an arsenal of advocacy tools that we can use to ensure Resilient Children, and a Resilient Loudoun.*



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