

CHILDREN'S ADVOCACY CENTERS: ESSENTIAL INFRASTRUCTURE FOR CHILD PROTECTION



Understanding CACs Essential Role in Virginia's Coordinated Response to Child Abuse

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WHAT IS A CHILDREN'S ADVOCACY CENTER?

A Children's Advocacy Center (CAC) is a nationally recognized, evidence-based model that brings together multidisciplinary partners to respond to child abuse in a coordinated, child-focused way.

CACs provide specialized services, including forensic interviews, family advocacy, mental health treatment & coordination, medical referrals, and multidisciplinary case coordination to support children and strengthen investigations of crimes against children.

One child.

One place.

One coordinated response.



CACS IN THE INVESTIGATIVE PROCESS



Report

Concerns about possible abuse are reported to Child Protective Services or law enforcement, initiating the child protection response.



Forensic Interview

As part of the coordinated investigative response, CPS or law enforcement contacts the local CAC to schedule a developmentally appropriate, trauma-informed forensic interview.



Multidisciplinary Team Coordination

CACs coordinate law enforcement, child protective services, medical professionals, prosecutors, mental health providers, and victim advocates into a unified, trauma-informed response designed to protect children while strengthening investigations.



Prosecution

Evidence-based forensic interviews conducted through CACs strengthen investigations, support plea agreements, and reduce the need for children to repeatedly recount traumatic experiences. CAC professionals may also serve as expert witnesses during court proceedings.



Healing

Healing continues far beyond the investigation. Children and their families are connected to evidence-based therapy and advocacy services that support safety, healing, and hope for the future.



Case Review

CACs coordinate multidisciplinary case review meetings that strengthen communication across agencies, support collaborative decision-making, and help ensure children and families do not become lost within complex systems.

CACs ARE THE OPERATIONAL HUB OF THE MULTIDISCIPLINARY TEAM

We coordinate and operationalize the multidisciplinary team response.



CACs are often the only entity specifically designed to coordinate the entire child abuse response system.

“I talk to suspects all the time. That’s the kind of interviewing I’m trained to do. Talking to children is completely different, and the forensic interviewers at the CAC know how to do it the right way. They’re able to get information from kids that I never could.”

-Virginia Law Enforcement Investigator

CACS STRENGTHEN EVERY SYSTEM THEY PARTNER WITH



LAW ENFORCEMENT

Stronger evidence & more effective investigations



CHILD PROTECTIVE SERVICES

Better information for safety decisions



PROSECUTION

Stronger evidentiary foundations & more reliable testimony



FORENSIC MEDICAL TEAM

Coordinated care and documentation



MENTAL HEALTH PROVIDERS

Early intervention and specialized treatment



FORENSIC INTERVIEWS: EVIDENCE-BASED. CHILD-FOCUSED. LEGALLY SOUND.

- **Key evidence is gathered from the child in a legally defensible manner**
- **Conducted by specially trained professionals**
- **Use nationally validated protocols**
- **Designed to be developmentally/age appropriate and non-leading**
- **Observed by the MDT in real time**
- **Minimizes trauma while maximizing information**



**Better interviews.
Better evidence.
Better outcomes.**

WHEN A CHILD FINDS THE COURAGE TO TELL, EVERYTHING THAT FOLLOWS MATTERS.

A child may only disclose abuse once.
The response they receive can shape:

- 1 their safety
- 2 their healing
- 3 the strength of the investigation
- 4 if justice is achieved



Child abuse cases require more than good intentions. They require systems that are prepared to respond collaboratively, compassionately, and correctly.

That is why Children's Advocacy Centers exist.

VIRTUAL TOUR

DESIGNED WITH PURPOSE

Every room. Every detail. Every decision.

Children's Advocacy Centers are carefully designed to support children, families, and the professionals who walk beside them.

“I thought it was going to be scary, but it wasn't. Everybody was nice to me. They had cool toys. It would be perfect if they had video games.”

-11 year old boy, Staunton, VA



LOBBY & FAMILY ADVOCACY

Creating Safety From the First Moment

When children first enter, a survivor wall is the first thing they see. This serves as a reminder that they are not alone. **It reflects hope, resilience, and the truth that healing is possible.**

Our lobby is warm and welcoming as family advocates are here to support families with compassion and knowledge.



INTENTIONAL DESIGN

- Visible reminders of strength
- Comfortable, developmentally inclusive design
- Privacy and separation from public spaces and other families
- Seperate entrance for families and MDT

FORENSIC INTERVIEW ROOMS

Specialized Spaces for Specialized Interviews

Forensic Interview Rooms are intentionally designed to be neutral, calm, and developmentally appropriate.

Decor is carefully selected to be inclusive and non-suggestive, ensuring interviews are legally defensible and trauma-informed.



INTENTIONAL DESIGN

- Earthy grounding and calming themes and colors
- Equipment designed to enhance sound and privacy
- Appropriate for specific age groups
- Furniture for small children to feel comfortable and larger furniture for older kids

MDT OBSERVATION ROOM

Built for a Coordinated Response

In this room, our multidisciplinary team observes interviews in real-time, ensuring children only have to tell their account once.

It also serves as the space for pre-interview preparation among the team and post-interview case coordination and discussion.



INTENTIONAL DESIGN

- Clear view of child and other MDT members
- Sound proofed for confidentiality
- Space for collaboration and coordination
- Separate entrances for MDT & children/families.

FAMILY MEETING ROOM

Difficult Conversations Happen Here

This private, comfortable space is where our team meets with non-offending caregivers to share information, discuss next steps, and support safety planning.

Some of the hardest conversations a family will ever experience happen in this room.



INTENTIONAL DESIGN

- Private and confidential
- Comfortable setting for families
- Calm environment to support difficult conversations
- Resource wall with brochures for partner agencies
- Video monitored for safety

FORENSIC MEDICAL ROOM

Designed to Protect Privacy, Dignity, and Emotional Safety

This child-centered room is where child victims and their families will have their forensic medical exam performed by a trained pediatric forensic nurse.

Having an onsite medical room reduces trauma, increases participation in the exams, and provides a calm space where child victims receive specialized care and ask any wellness questions about their body, combatting shame and misinformation.



INTENTIONAL DESIGN

- Private entrances and waiting areas for victims and their families
- Attached bathrooms and changing areas
- Adjustable height bed to be lower for very small children
- Age appropriate toys to assist in the exam



THE THERAPY ROOM

Where Healing Takes Hold

Therapy spaces are intentionally designed to help children feel safe, build trust, and express what they might not have words for yet.

Tools like sand tray therapy, along with specialized treatment modalities, support healing in ways that are meaningful and evidence-based.



INTENTIONAL DESIGN

- Private entrances and waiting areas for therapy clients
- Sound proofing to enhance confidentiality
- Enough space in rooms for children to explore healing through movement and play



CASE EXAMPLE: THE DIFFERENCE A CAC COORDINATED RESPONSE MAKES

WITHOUT A CAC

- ✗ Child interviewed multiple times by unreliable interviewers
- ✗ Poor question structure resulting in inconsistent details
- ✗ Increased # of interviews done by untrained interviewers puts evidence at risk
- ✗ Child has to tell their story repeatedly, increasing trauma to the child
- ✗ Statement inconsistencies, siloed investigations, and lack of coordination makes for weaker cases

WITH A CAC

- ✓ One forensic interview by a trained professional utilizing nationally recognized protocols
- ✓ MDT observes in real time while sharing information with all investigative parties
- ✓ Coordinated next steps between agencies
- ✓ Wrap around, child-centered approach where families are connected to resources to help them on their healing journey
- ✓ Stronger cases for investigative teams and less trauma for children and their families

“You never expect to go through something like this with your child. The CAC made us feel supported from day one. They treated us with compassion, answered our questions, and helped us feel less alone.”

-Mother of 7 year old survivor, Waynesboro, VA

WITHOUT CAC INFRASTRUCTURE SYSTEMS FRAGMENT.



CACs were created because fragmented responses were failing children.

- X Children may be interviewed multiple times**
- X Evidence can be lost or contaminated**
- X Coordination gaps lead to delays and duplication of interviews & work by professionals**
- X Increased trauma for children and families**
- X Weaker investigations and prosecution**

ACCESS TO A CAC SHOULD NOT DEPEND ON GEOGRAPHY

Access to a Children's Advocacy Center is not a privilege. Every child has the right to a coordinated, evidence-based, trauma-informed response during one of the most vulnerable moments of their life. Due to limited access:

- 📍 Children may travel long distances for services
- 📍 Investigations may become fragmented
- 📍 Families may struggle to access therapy or advocacy support
- 📍 MDT coordination may weaken
- 📍 Children are at greater risk of falling through system gaps

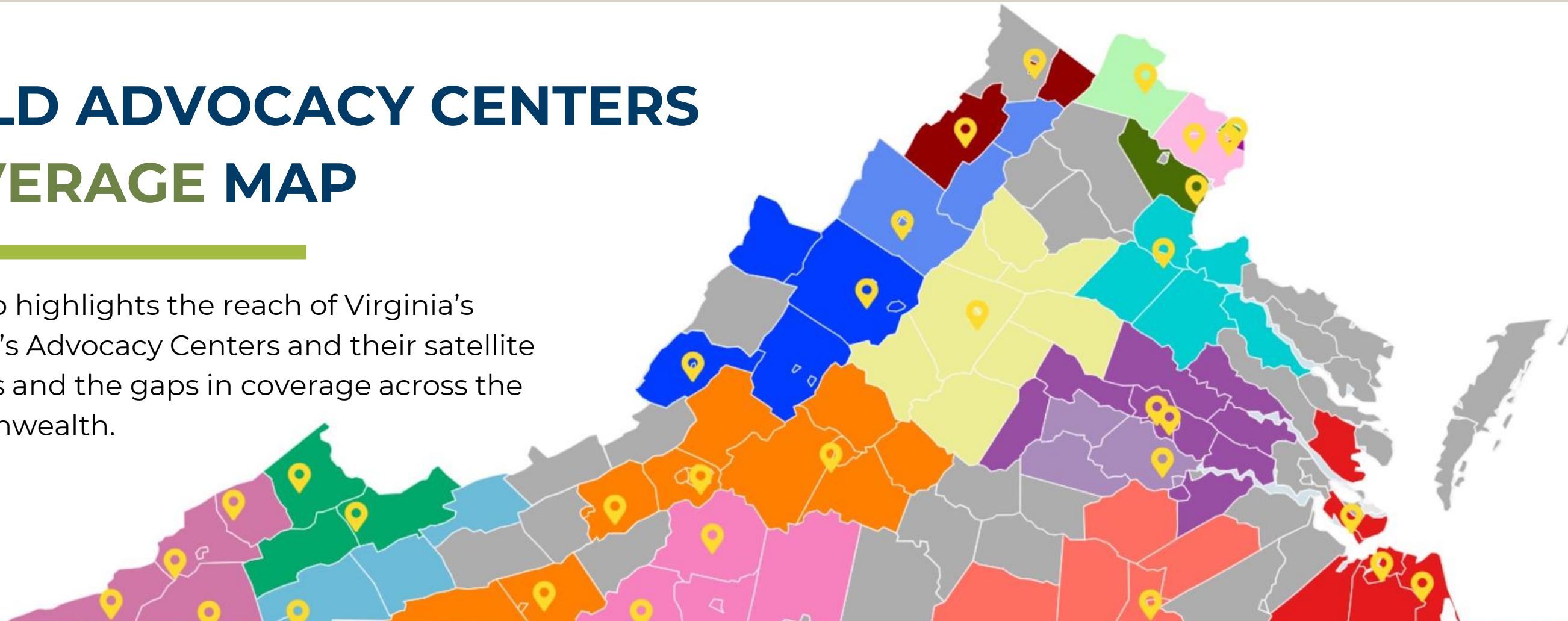
Children do not choose where abuse occurs. Every child deserves the same access to safety.





CHILD ADVOCACY CENTERS COVERAGE MAP

This map highlights the reach of Virginia's Children's Advocacy Centers and their satellite locations and the gaps in coverage across the Commonwealth.



- 1 **Southwest Virginia Children's Advocacy Center**
1501 3rd Avenue East
Big Stone Gap, Virginia
24219
- 2 **Children's Advocacy Center of Highlands Community Services**
21451 Sugar Hollow Road
Bristol, Virginia 24201
- 3 **C.A.R.E. of Southwest VA**
406 Suffolk Avenue
Richlands, Virginia 24641
- 4 **Children's Trust**
541 Luck Avenue, Suite 308
Roanoke, Virginia 24018

- 5 **Foothills Child Advocacy Center**
1106 East High Street
Charlottesville, Virginia
22902
- 6 **Loudoun Child Advocacy Center**
105 East Market Street
Leesburg, Virginia 20176
- 7 **Arlington County Child Advocacy Center**
2100 Washington Blvd.
Arlington, Virginia 22204
- 8 **Center for Alexandria's Children**
4850 Mark Center Drive, 5th Floor
Alexandria, Virginia 22311

- 9 **Safe Harbor Child Advocacy Center**
305 Hanson Avenue, Suite 180
Fredericksburg, Virginia 22401
- 10 **The Davis Child Advocacy Center**
12204 Iron Bridge Road
Chester, Virginia 23831
- 11 **Valley Children's Advocacy Center**
1105 Greenville Ave
Staunton, Virginia 24401
- 12 **ChildSafe Center-CAC**
117 East Piccadilly Street Suite 300
Winchester Virginia 22601

- 1 **Children's Advocacy Programs of the Blue Ridge Inc**
300 S. Main St.
Rocky Mount Virginia, 24151
- 14 **Greater Richmond SCAN**
103 E. Grace Street Richmond
Virginia 23219
- 15 **Collins Center**
217 S. Liberty St
Harrisonburg, Virginia 22801
- 16 **FVSAU Child Advocacy Center**
320 S. Main Street
Emporia, Virginia 23847

- 17 **Children's Hospital of The King's Daughters Child Advocacy Center**
103 E. Grace Street Richmond
Virginia 23219
- 18 **SafeSpot Children's Advocacy Center of Fairfax County**
PO Box 148
Fairfax, Virginia 22038
- 19 **Prince William County Child Advocacy Center**
15941 Donald Curtis Dr.
Woodbridge ,Virginia 22191

THE REAL COST OF UNDERINVESTMENT IN CACS

- **Weaker investigations**
- **Increased system costs**
(duplication of interviews, delays in information sharing, court backlogs)
- **Greater trauma and long-term mental health impacts**
- **Increased burden on law enforcement, CPS, and prosecution**
- **Unequal access across Virginia**



“People think kids just grow up and move on, but that’s not how it works. I’m a grown woman in my 60s and I still deal with things that happened to me as a child. I still remember feeling completely alone and like nobody really knew how to help me.

If there had been a place like a Children’s Advocacy Center when I was little, I really believe my life could have looked different. Maybe I wouldn’t have carried so much shame for so long. Maybe healing would have started sooner. That’s why it’s hard for me to hear that some kids still don’t have access to a CAC today, simply because of where they live.”

— Survivor of Childhood Abuse, Augusta County, VA



WHAT COMES NEXT?

STRENGTHENING CACS

STRENGTHENS VIRGINIA'S CHILD PROTECTION INFRASTRUCTURE



Sustainable and consistent funding to improve/expand critical services



Statewide access for every community



Strengthening the specialized workforce behind child abuse investigations



Providing meaningful improvements that increase Virginia's response to crimes against children

We already know the CAC model works. The question is no longer whether these services matter, but whether every child in Virginia will truly have access to them when it matters most.

