**Pilot Implementation of the Violence Against Children and Youth Survey (VACS) in The United States**

**Response Plan, Mandatory Reporting, and Distress Protocol**

1. Response Plan**: all** **respondents** will be provided with a list of services consisting of contact details for a range of resources that offer free programs, services, and amenities. All respondents will also be offered a referral to services through the Baltimore integrated behavioral health service system. The referral includes a system of care to provide services for individuals and families. The referral will include interdisciplinary services and direct contact to a counselor or social worker, if the respondent agrees to the referral. The counselors or social workers will be trained to respond to requests for services and support from study referrals. If child abuse or neglect is suspected, the counselor or social worker can obtain information necessary to meet mandatory reporting requirements, as a complement to mandatory reporting procedures the interviewers will follow.
2. Mandatory Reporting: Specific **criteria require mandatory reporting** to the local Department of Human Services. Maryland law which requires any person who has reason to believe that a person has been subjected to abuse or neglect as a child to notify the local Department of Human Services Child Protective Services office or the appropriate law enforcement agency. Md. Fam L Code. § 5-705(a)(1). If a respondent meets one or more of the below criteria, the interviewer will make a report to the local Office of Child Protective Services in Maryland, as consistent with Maryland law. Interviewers will strictly follow guidance from Child Protective Services in the Maryland Department of Human Services with respect to the timelines and procedures for reporting cases of child abuse or neglect, including calling the local Child Protective Services Office immediately and subsequent submission of a written report within 48 hours of contact.
   1. A minor respondent reports that he or she is in immediate danger. Although the VACS questionnaire does not collect information on respondents’ concerns about the threat of imminent physical harm, either in ACASI or directly to the interviewer, action will be taken if participants verbally volunteer this information to the interviewer. In the case of immediate danger, interviewers will also follow the Distress Protocol.
   2. A respondent of any age provides information to the interviewer that indicates the respondent experienced child abuse or neglect as defined by Maryland law. Abuse is defined in Maryland as the physical or mental injury of a child under circumstances that indicate that the child’s health or welfare is harmed or at substantial risk of being harmed. Md. Fam L Code § 5-701(i). This harm or potential for harm can come from a parent, a household or family member, a person who has permanent or temporary custody of the child, a person who is responsible for supervising the child, or a person who, because of the person’s position or occupation, exercises authority over the child. Md. Fam L Code § 5-701((i). Maryland also defines abuse as sexual abuse whether or not physical injuries are sustained. Md. Fam L Code § 5-701 (ii).
3. Distress Protocol: if a respondent shows signs of emotional distress, the interviewer will follow the steps outlined in the Distress Protocol (see below). Signs of emotional distress could include: crying, change in mood or tone, shaking or trembling voice, appears non-responsive, physically restless (e.g., excessive shifting or tapping), regressive or self-soothing behavior (e.g., sucking thumb or hair, rocking).
   1. If the interviewer feels he or she is in immediate danger, the interviewer will call 911.
   2. If the interviewer determines that the respondent also meets criteria for mandatory reporting, the interviewer will follow above procedures for making a report to the local Child Protective Services Office.

**Distress Protocol: U.S. VACS Pilot Implementation**

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| **STEP** | **INTERVIEWER INQUIRY** | **RESPONDENT RESPONSE** | **INTERVIEWER ACTION** |
| **Step 1** | “Are you ok?”  “How are you doing”  “Do you have any questions” | “OK” or “I am fine” | Continue |
| No response or indicates distress | Go to Step 2 |
| **Step 2** | “Do you need to take a short break?” | “Yes” | **Adults:** take a short break, then proceed to Step 4  **Minors:** go to Step 3 |
| “No” | Continue |
| **Step 3** | **Minor only:** “Would you like to get your [mom/dad/another adult at home]?” | “Yes” | Find parent/adult, and update them that the respondent has become upset and would like a short break  After the break, go to Step 4 |
| “No” | Take a short break, then proceed to Step 4 |
| **Step 4** | “Are you OK to continue?” | “Yes” | Continue |
| “No” | Go to Step 5 |
| **Step 5** | “I am sorry you are upset. Thank you for the time you took to answer questions on the survey, but we will end the interview now. It may be helpful to talk to a trained counselor. I can connect you with a counselor now or I can provide you with some resources that you can contact on your own. Which would you prefer?” | “Counselor” | Contact the counselor/social worker by phone. |
| “Neither” or “Resources” | “Thank you for participating in this study. I am going to provide you the Resources Handout. It has contact information for organizations that you can use if you want to talk about any feelings or emotions you experience. Also, if you are interested then I can directly connect you to a counselor now.”   * Provide Resources Handout * Make a Direct Referral, if applicable * Conclude the visit |