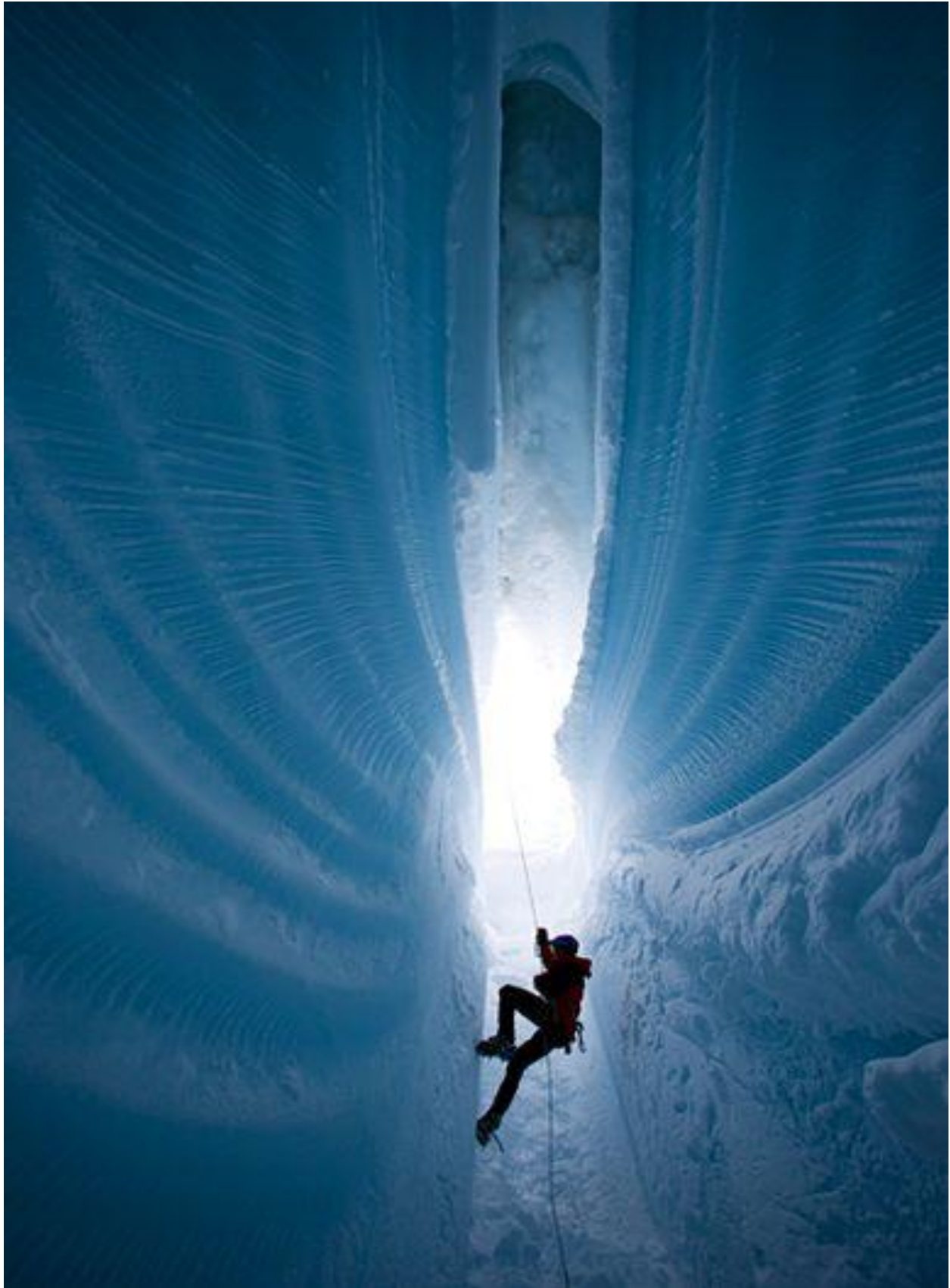


Hope For Children Foundation

Annual Report for 2011



There is light and hope at the end of the tunnel...

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THE SUCCESS OF OUR WORK IS MEASURED BY ONE QUESTION:

Are Texans better off now than when we started?



Patricia Kirby

Executive Director, Co-Founder, President Emeritus

500,000 + TEXANS Received training by Hope For Children Foundation from Year 2000 to date.

5,000,000 + TEXANS In communities throughout Texas are protected by law enforcement officers who received our training from Year 2000, to date.

10,000 + VOLUNTEER HOURS DONATED SINCE 1998

IN THIS ANNUAL REPORT

- The need for training, the mission and the focus.
- Overview of the unique partnerships we build improving lives, addressing and solving issues.
- Information about how to get involved and support Hope For Children Foundation.

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Dear Friends,

We are grateful to the supporters recognized in this report. It's a privilege to do this work, and we're grateful to the dedicated people whose efforts and talents make our programs possible. You have made a difference in the lives of so many individuals served by our agency. Our programs continue meeting challenges, maintaining steadfast determination and showing compassion for the plight of many individuals and families affected by sexual assault and domestic violence; tragedies of staggering proportions. Please review all reports listed within.

Countless families have been, and continue to be, devastated by its ravages. Yet, there is reason to be hopeful. More people are consistently standing up to say, "Sexual assault and battering is not right, it is not acceptable, and it is not a private family matter." Police, legislators, judges, and prosecutors give official voice to society's disapproval. Social workers, teachers, medical professionals, and mental health experts also condemn the once secret abuse that has inflicted irreparable damage in so many families.

The numerous negative health outcomes and the number of people affected by abuse demonstrate that we are dealing with an epidemic. Public health is about promoting health and curbing the ill effects of individual and social behavior which can lead to a wider poor health outcome among communities. We must recognize sexual abuse and domestic violence are preventable public health problems. Sexual assault and domestic violence affects the victim, the abuser, the family and the community surrounding them. These are not isolated incidents; they have a physical, emotional and systemic ripple effect. Like stones dropped in water, these violent abuses spread multiple ills through the community from the epicenter of the affected children, parents, intimate partners and others.

Everyone must be involved in stopping abuse for the sake of our families and communities. Individuals must be empowered within their own towns, families, churches, community centers, businesses and schools to make effective changes. Since abuse is perpetuated by inaction, please join us and together we can enhance better public health and protection for our children.

As we continue our work creating positive responses to strengthen survivors of these crimes, we count on your continued support in 2012. We encourage you to take a few minutes to read about the services performed in 2011 and goals we have for 2012. So please feel free to share this report with your family, friends and colleagues. Thank you for your concern for children.

Sincerely,



Patricia Kirby
Executive Director

Hope For Children Foundation

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Board of Director meeting held on December 14, 2011



Jaye D. Crowder, MD (Spouse of) = **Clarice Grimes MD**
President, Chair, Board Member
Board Member

Sheree Baur
Board Member

Patricia Kirby
Board Member

Pamela Noblitt, (Member of the Board of Directors, not pictured)

Mission, Goals and Objectives:

Hope For Children Foundation's, HFCF, (hereinafter), mission is to prevent cruelty to children, including reducing crimes of sexual assault and domestic violence. By working together, the prospect of precious children living abuse-free lives can be realized.

HFCF provides education to the general public, and to professionals who are charged with protecting children and adults against crimes of sexual assault and domestic violence. Trainees have received the education courses well in Texas. The goals of the training include:

- Train First Responders
- Train the General Public
- Protect Children, Women, and Men
- Provide Various Service Referrals for Victims and Reported Abusers

Our goal is to provide more resources to benefit those who have been victimized; including but not limited to continue developing state of the art training specifically targeting the healing process, and overcoming/coping with symptoms of depression. We intend to offer and distribute the training to families, school districts, churches, colleges, universities and first responders. We will make the training available at no charge on the Web site of Hope For Children Foundation.

HFCF believes education is one of the most important elements of bringing about prevention, protection, safety, accountability, security and justice in each community concerning crimes of sexual assault, domestic violence, stalking, bullying; and also when elements of establishing paternity and/or child custody issues are present. Healing from victimization is necessary in order to experience a productive life; this is a very important objective of our work.

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What If You Were Abused?



Supporting Children Living with Grief and Trauma: A Multidisciplinary Approach

Many complicated issues arise when a child is exposed to a traumatic event as a result of a violent crime. The proposed series of DVD interactive training is designed for victim advocates, parents, children, first responders, educators, clergy, educational institutions and others who want to develop knowledge and skills to provide appropriate services for children experiencing trauma and grief as a result of violence.

We will examine how children perceive victimization of a violent crime; the loss of a loved one, how they process grief and trauma, how one can recognize the signs of grief and trauma in children and support their recovery.

Using a multidisciplinary team approach, victim service providers, mental health professionals, educators, clergy, law enforcement, and the general public can improve existing services and create new opportunities to support children living with grief.

Active participation in each of the following training modules will help accomplish these specific learning objectives:

- **Types and Impacts of Traumatic Events** surrounding sexual assault/domestic violence
- **How Children Perceive and Respond to Victimization**
- **How Children Process Grief and React to Trauma**
- **Effective Responses for Children**
- **A Multidisciplinary Approach**

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Children –

Although we warn our children of “stranger danger,” the sad truth is that children are more likely to be victimized by family members or acquaintances than they are by strangers.

The child victim may experience significant psychological effects of such crime including depression, anxiety, insomnia, nightmares, eating disorders, phobias, dissociation, obsessive-compulsive disorder, and posttraumatic stress disorder, as well as psychosomatic symptoms such as headaches and gastrointestinal pain.

Frequently, children who are abused are not identified as victims during childhood. Children may be too frightened to report their abuse, particularly if the perpetrator is a family member. The child may have been silenced, either with threats of violence or by appealing to the child’s loyalty or affection.

The experience of victimization is frequently amplified by the sense of betrayal that accompanies it, particularly when the perpetrator is a family member or other trusted adult. The child grows to adulthood with confused ideas regarding personal boundaries and what constitutes a healthy relationship. Because of a history of abuse, many individuals are vulnerable to re-victimization. They may lack the capacity to distinguish safe from unsafe persons, environments, and situations. Their vulnerability may actually attract predators.

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Local – Texas - National Child Abuse Reported Including FBI National Statistics

97% of Abused Children Reported to
Legal System Not Protected by It 😞

97% Not Protected



3% Protected



There is light and hope at the end of the tunnel...

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DALLAS COUNTY CHILD ABUSE/NEGLECT SUMMARY

Governmental agencies charged with protecting our most innocent and valuable children are failing them at shocking rates. This information is not provided as an attack upon the Dallas District Attorney's Office but to rally support from the general public to elevate the Dallas District Attorney's Office in every way possible. Donate your resources and support your local District Attorney's Office, Crimes Against Children Division. Many obstacles exist when prosecuting child abusers, pedophiles and others who commit violent crimes against children, preventing victim protection by the legal system. Please get more involved to completely understand the issues preventing child victims from being protected.

Unfortunately for children, the research facts are accurate. We intend to level the charge by giving you the facts, hoping you will help cause significant changes, to better protect our precious children.

2005 Facts Compiled from the Dallas County District Attorney's Office Child Abuse Division

Year 2005 Dallas District Attorney's Office filed/ indicted about 633 reported child abuse offenders. About 576 cases were disposed of; (59 were dismissed for various reasons, 18 of these were victim related such as the victim recanting, couldn't be found, etc... 415 were "plea bargain" without a trial - receiving anywhere from a misdemeanor against them to life in prison.) The Dallas District Attorney's Office did not have the details of each plea bargain to release. 87 jury trials resulted with dispositions and sentencing. The Dallas district Attorney's Office rated their jury trial convictions with 87% percent success, meaning they convicted about 76 child abuse perpetrators.

Do the math! Calculate the number of reported cases below - from data gathered by The Texas Department of Family and Protective Services, with the successful prosecutions above, along with the "plea bargain" cases. These statistics are part of the FBI's national statistics. An average of 97% percent of abused children, reported to legal system, are not protected!

The Texas Department of Family and Protective Services stated 20,479 initial intake reports were made alleging abuse/neglect of children in Dallas County (only), Texas in 2005. Of the cases reported, 5,116 child abuse/neglect victims were confirmed by the Dallas County Child Protective Services (CPS).

| | |
|---------|--|
| 659,361 | Total child population in Dallas County in 2005 |
| 20,479 | Dallas County CPS actual intake reports 2005 |
| 19,068 | Total child abuse reports assigned for investigation in Dallas County (CPS) 2005 |
| 12,304 | Total Dallas County (CPS) investigations that were completed 2005 |
| 3,329 | Total case investigations confirmed by Dallas County (CPS) (involving 5,116 children) 2005 |

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Backlash Preparedness

The law is written to protect children and adults but sometimes the “law” fails to protect them. Abuse provokes a variety of responses in different people. Some are instinctively protective of victims while others feel skeptical or want to distance themselves from victims perhaps because of their own shame, self-interests or past experiences.

Consequently, anyone who reports abuse should prepare for the possible backlash of the legal system. Difficult as it is to believe, children are sometimes returned to the abuser due to ignorance, bias or corruption. We encourage reporting of abuse in every instance and the law requires it in a number of circumstances. But, a complainant that reports abuse should be prepared to relentlessly pursue justice despite any setbacks encountered and in full knowledge the road ahead maybe long, painful, difficult, frustrating, expensive and even destructive.

The complainant could be the victim of multiple actions of wrong doing by the offender and its accomplices to deter the complainant from seeking justice. The process of protecting a victim can be nothing less than **heartbreaking** when the system fails a victim, despite extreme emotional investment. There are complications that terribly frustrate those in these trenches.

Therefore, victims and their protectors must be prepared for the emotional torture that could be experienced should the system fail to protect the victim.



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Children and adults who are the victims of criminal acts frequently suffer from chronic psychological symptoms as a result of their experiences. Individuals who have been victimized in childhood are particularly vulnerable to severe, chronic and sometimes debilitating psychological symptoms that interfere with their ability to function in various areas of their lives.

Isolation: Isolation is common but can be destructive in one's life. To avoid additional conflict, one may simply withdraw; the reluctance to socialize outside his/her profession contributes to isolation. Coupled with violence against a child or an intimate partner, the isolation encouraged by some serves to promote abuse within families by keeping the problem "in the closet." Victims learn the coping mechanisms of denial, minimization, and suppression of feelings. In order to function in crises or emotionally overwhelming situations, they will embrace feelings of fear, anger, rage, and revulsion ultimately controlling their emotions, often denying the very existence of any failure at all.

From Victim to Survivor – Surviving Abuse! As soon as it is physically and emotionally possible, it is very important that a victim reach out to others who are hurting and offer help. If it is too difficult to help those victims that deal with similar circumstances, then seek out some way of helping others through a hospital, church or organization where needs can be met. It is only right to help others when we can. Victims who choose to help others have often found their own healing process progressing more quickly. Victims should remove themselves from isolation as soon as possible.

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Sexual Assault and Domestic Violence Can Trigger Depression:

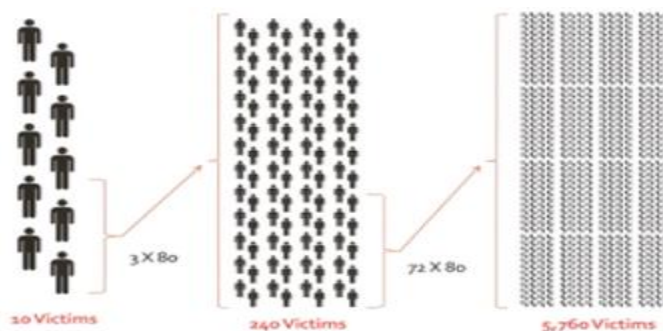
Abuse is another key factor in triggering depression: in the U.S., at least 37 percent of women have been sexually or physically abused by the age of 21 (some experts believe the rate is actually closer to 50 percent).

“Depression, a physical illness involves frequent episodes of intense hopelessness and lowered self-esteem. It can affect an individual's mood, body, behavior, and mind; when left untreated, depression may eventually lead to suicide. “It is estimated that 17 percent of the U.S. population (between 5-12 percent of men and 10-20 percent of women) will suffer from a major depressive episode at least once in their lifetime. Depression has many causes and is often triggered by traumatic life events, such as the death of a loved one, divorce, financial problems, or some other significant loss. In North America, women are 1.7 to 3.0 times more likely than men to experience depression during their lifetime, and one in every four women is likely to experience severe depression. The causes of depression in women are not primarily biological (as was once believed), but are of a variety of biological, social, and psychological origins. The poor and members of minority groups are also extremely vulnerable to depression: women (along with children) make up 75 percent of the population living in poverty in the U.S. Poor or minority women also often lack access to basic mental health care.” The information provided in this paragraph are excerpts from: Consumer Health Digest

Mental Health America study revealed: “Nearly half of Americans (48 percent) are stressed by finances. Native Americans and African Americans pointed to finances as a stressor at a significantly higher rate, 57 percent and 56 percent respectfully, than Asians, 42 percent, Latinos, 49 percent, and non-Hispanic Whites, 47 percent. **Health issues stress more than 34 percent of Americans. Employment issues are the third main source of stress for Americans (32 percent)** – whether on-the-job or lack of work. Latinos, 41 percent, are most likely to be stressed by employment issues, followed by African Americans with 39 percent. **Stressed Americans_Parents feel the most stressed of all demographic groups.** Nearly 40 percent report feeling stressed from at least three sources – among them relationships with significant others or family, employment and finances. Native Americans, 37 percent, and African Americans, 38 percent, report significantly greater stress than non-Hispanic Whites, 30 percent, while Latinos, 34 percent, and Asians, 34 percent, report no difference.”

We will partner with health professionals and develop responses to help those struggling with symptoms of depression and produce our results on DVD. Then, distribute the DVD's to individuals, communities, churches, libraries, businesses in need. This is not intended to replace one's doctor but to enhance the healing process. One of the important messages we will communicate in the DVD, is, joy can be experienced in life by refusing to allow the pain from a negative event to destroy all of the joy in one's life. Don't judge life by one difficult season. The diagram below, visually demonstrates the massive number of people abuse can affect. It is so important to stop the cycle of abuse from multiplying. Please join us in enhancing healthier generations.

30% of the Abused Go On To Abuse Others



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National Child Abuse Reported

Widespread Abuse

In 2007, approximately 5.8 million children were involved in an estimated 3.2 million child abuse reports and allegations.

5.8 million children
reported abused
each year

Affects Every Part of America

Child abuse occurs at every socio-economic level, across ethnic and cultural lines, within all religions and at all levels of education

All Levels of
Socio-
economic

All Ethnic
Lines

All Cultural
Lines

All Religions

All Levels of
Education

Released February 1, 2012 Contact :[CDC Division](#) (404) 639-3286

Child abuse and neglect cost the United States \$124 billion

Rivals cost of other high profile public health problems

The total lifetime estimated financial costs associated with just one year of confirmed cases of child maltreatment (physical abuse, sexual abuse, psychological abuse and neglect) is **approximately \$124 billion**, according to a report released by the Centers for Disease Control and Prevention, published in Child Abuse and Neglect, The International Journal.

This study looked at confirmed child maltreatment cases, 1,740 fatal and 579,000 non-fatal, for a 12-month period. The lifetime cost for each victim of child maltreatment who lived was \$210,012, which is comparable to other costly health conditions, such as stroke with a lifetime cost per person estimated at \$159,846 or type 2 diabetes, which is estimated between \$181,000 and \$253,000. The costs of each death due to child maltreatment are even higher.

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“No child should ever be the victim of abuse or neglect – nor do they have to be. The human and financial costs can be prevented through prevention of child maltreatment,” said Linda C. Degutis, Dr.P.H., M.S.N., director of CDC’s National Center for Injury Prevention and Control.

Child maltreatment has been shown to have many negative effects on survivors, including poorer health, social and emotional difficulties, and decreased economic productivity. This CDC study found these negative effects over a survivor’s lifetime generate many costs that impact the nation’s health care, education, criminal justice and welfare systems. Key Findings:

- The estimated average lifetime cost per victim of nonfatal child maltreatment includes:
 - \$32,648 in childhood health care costs
 - \$10,530 in adult medical costs
 - \$144,360 in productivity losses
 - \$7,728 in child welfare costs
 - \$6,747 in criminal justice costs
 - \$7,999 in special education costs
- The estimated average lifetime cost per death includes:
 - \$14,100 in medical costs
 - \$1,258,800 in productivity losses

Child maltreatment can also be linked to many emotional, behavioral, and physical health problems. Associated emotional and behavioral problems include aggression, conduct disorder, delinquency, antisocial behavior, substance abuse, intimate partner violence, teenage pregnancy, anxiety, depression, and suicide.

Past research suggests that child maltreatment is a complicated problem, and so its solutions cannot be simple. An individual parent or caregiver’s behavior is influenced by a range inter-related factors such as how they were raised, their parenting skills, the level of stress in their life, and the living conditions in their community. Because of this complexity, it is critical to invest in effective strategies that touch on all sectors of society.

“Federal, state, and local public health agencies as well as policymakers must advance the awareness of the lifetime economic impact of child maltreatment and take immediate action with the same momentum and intensity dedicated to other high profile public health problems –in order to save lives, protect the public’s health, and save money,” said Dr. Degutis.

CDC’s Injury Center works to prevent injuries and violence and their adverse health consequences. For more information on public health child maltreatment prevention activities and research, please visit <http://www.cdc.gov/ViolencePrevention/childmaltreatment>.

If you know or suspect a child is being abused, contact the National Child Abuse Hotline at

| | |
|---|---|
| 1-800-4-A-CHILD or visit the Childhelp website: | http://www.childhelp.org |
| DEPARTMENT OF HEALTH AND HUMAN SERVICES | http://www.hhs.gov |

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Usually prosecutors can expect a 100% conviction rate when the Hope For Children Foundation training is applied to cases of sexual assault and domestic violence. Living an abuse free life...is more than an hope or a dream!

100% Conviction Rate

When officials follow our training and collect:

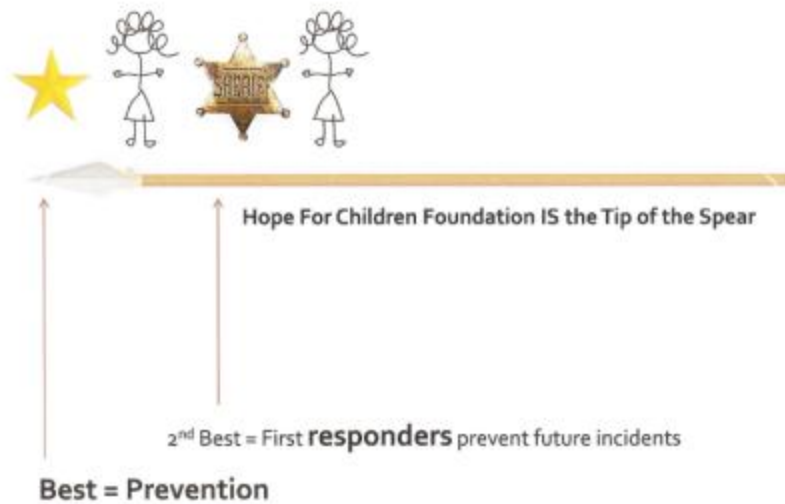
- Assault Investigation Report
- Photos of the Crime Scene
- Photos of the Victim
- DNA Collection
- Recorded Interview of Victim
- Recorded Interview of Perpetrator



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Cycle of Abuse



Those We Train

- Shelter workers
- Psychologists
- Psychiatrists
- Doctors
- Police
- Law enforcement (State and Federal)
- FBI
- Judges
- Prosecutors
- Teachers
- Professors
- Mental health workers
- Clergy
- CPS workers
- Paramedics
- Military



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Why photograph a Victim?

Documenting a violent crime by taking pictures of the Victim (with permission from the victim and/or legal guardian) helps hold a perpetrator of a violent crime accountable. Hope For Children Foundation trains First Responders and the public about the need for and technical details relating to photographic and other documentation of abuse.

The Foundation also educates the public about the need to secure emergency medical care for victims as quickly as possible in addition to alleviating suffering and preventing longer term disability. A rapid medical response also documents the nature of injuries for use in future prosecution of the accused. It is of the utmost importance to get an injured victim emergency medical care as quickly as possible. Call 911 for an emergency ambulance Paramedics to evaluate a victim, determining emergency care. When the victim can be moved, drive the victim to an emergency hospital as soon as possible for treatment.

We suggest taking pictures of bruises of an injury on a daily bases up to about two weeks. More serious injuries may take longer to heal, therefore take pictures until healing occurs. Bruising typical looks worse day to day until the injury heals. At first, a bruise appears as a tender bump on the skin that is red or purplish in color. After a few days, the area turns black and blue and about a week later, it often looks yellow or greenish before it fades to light brown and then disappears. Most bruises heal in about two weeks.

The major function of the police photographer is to document crime scenes and injuries that may be used as evidence in court. Any photograph or video used as evidence in court must be admitted into evidence based on the rules of evidence. The photographer must be able to testify that a photograph or video accurately represents the scene or the victim, and that the photograph was not altered or manipulated in any way to distort the scene or injuries. This has been a particularly difficult task with digital photographs which can be easily altered.

However, most departments have strict protocols when using digital images and typically archive images as RAW files to maintain integrity of the original. Photographs admitted into evidence must be relevant and not intended to bias the jury. Photographs of deceased or injured individuals may be objected to on the basis of how shocking the photographs are to a jury. Unless a particularly gruesome photograph can be shown to be relevant to the facts of the case, it may not be admitted into evidence.

One exception to this rule is during sentencing hearings, where the prosecution wants to show a jury how heinous a particular crime was. A general rule for police photographers is to tell a story with the photographs. For crime scenes, this means showing surrounding areas, entrances and exits to the scene, articles of evidence in their original locations and close-ups of that evidence, as well as the physical environment (property disturbed, like was food on a table, dishes in a sink, furniture knocked over, etc...). This helps the jury understand the context and what was going on at the time of the crime.

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Thank you very much for your support throughout the year. We educated approximately 37,491 people in 2011; about 48,784 people in 2010; and an estimated 35,321 in 2009.

2011 ANNUAL UPDATE:

- **1st Quarter 2011 Update**

We received a letter of support from a former student/attendee of our previous training; he is a Division leader with the Texas Department of Human Services. The letter of support reflects the quality of our training. We distributed our DVD training set containing two DVDs, lasting two hours per DVD, totaling four hours per DVD training set. Educational initiatives were scheduled for 1st, 2nd, 3rd & 4th quarters. About 1,246 persons were trained the 1st quarter.

- **2nd Quarter 2011 Update**

About 9,439 people were educated via HFCF live training and/or through HFCF DVD sets. 200+ Volunteers were available throughout Texas to assist HFCF's mission. Educational initiatives were scheduled for 2nd, 3rd & 4th quarters.

- **3rd Quarter 2011 Update**

About 15,174 people were educated via HFCF live training and/or HFCF DVD sets. 200 + Volunteers were available throughout Texas to assist HFCF's mission.

- **4th Quarter 2011 Update**

11,632 people were educated via HFCF live training and/or through HFCF DVD sets. 200 + Volunteers were available throughout Texas to assist HFCF's mission.. We are writing grants to help fulfill the financial needs for 2011 & 2012 budgets. The Web site with video streaming training should be ready Feb. 2012.

Use of Funds:

Program Services (88.7)%

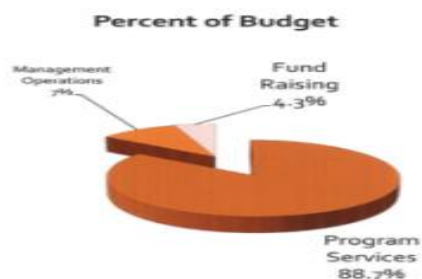
We provide training to First Responders and the General Public to reduce violent crimes; and provide service referrals.

Management Operations (7)%

Administers daily operations.

Fund Raising (4.3)%

Raise funds to provide Program Services and Management expenses



Hope For Children Foundation

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2011 Financials Unaudited

Statement of Financial Position

Assets

| | | | |
|---------------------------|-----|-----------|---------------------|
| Cash | | \$ | 1.18 |
| Contributions | | \$ | 58,961.94 |
| Training Curriculum Value | (+) | \$ | <u>3,104,950.00</u> |
| Total Assets | | \$ | 3,163,913.12 |
| Expenses Paid | (-) | \$ | <u>58,960.66</u> |
| Assets | | \$ | 3,104,952.46 |

Explanation of Evaluation of Training Asset of HFCF

| | |
|---|---------------------|
| A. HFCF certification State Bar of Texas 1,000 attorneys X \$450 Average 15 hours | \$ 450,000 |
| B. HFCF certification Texas Board of Legal Specialization 15 hours | |
| 1. 15 hours criminal law 1,619 attorneys X \$450. Average | \$ 728,550 |
| 2. 15 hours family law 1,000 attorneys X \$450. Average | \$ 450,000 |
| C. HFCF certification Texas Commission on Law Enforcement | |
| 5,500 X \$100 16 hrs. | \$ 550,000 |
| D. HFCF certification Texas For The Judiciary | |
| 100 X \$450 15 hrs. MCLE | \$ 45,000 |
| E. HFCF certification TX Juvenile Probation Commission | |
| (13 hrs.) 1,607 X \$200 | \$ 321,400 |
| F. HFCF certification TX Dept.of Criminal Justice Community J.A.D. | |
| (13.5 hrs.)2,800 X \$200 | \$ <u>560,000</u> |
| TOTAL Assets of Training | \$ 3,104,950 |



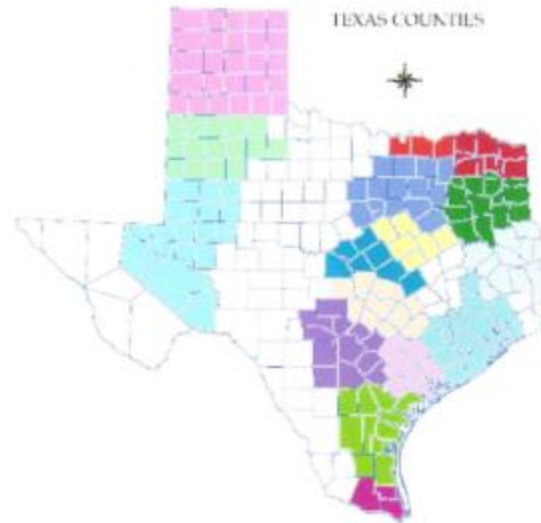
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Texas Counties Received Training

HFCF has trained law enforcement officers and other professionals in 16 of 24 of the Texas council of government regions.

These trained professionals protect **85%** of the population of the state's 24 million people (over **20 million** people).



This represents progress collectively to date, by Hope For Children Foundation.



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Texas Family Violence Reported: Uniform Crime Report for 2010

No access to completed 2011 figures to date.

For additional information: http://www.txdps.state.tx.us/director_staff/public_information/2010CIT.pdf

Victim/offender Relationships

The largest percentage of family violence reports was between other family members. The second most commonly reported relationship among offenders and victims was married spouses and the third most common relationship was common law spouses.

Family Violence 2010

Number of Incidents 193,505

Number of Victims 211,769

Number of Offenders 207,474

Officer assaults - a serious problem inherent to police intervention and investigation of family violence incidents is the potential for law officers to be assaulted. In 2010, during the course of responding to family violence incidents, 358 Texas law officers were assaulted. By contrast, listed 4,424 assaults on law officers during all types of police activity.

Sexual assault in Texas Reported: Uniform Crime Report for 2010

In response to a growing concern about Sexual Assault incidents, the 80th Texas Legislative Session passed HB 76. The Bill requires the Texas DPS to establish guidelines and collect, as part of the UCR Program, data about incidents that contain specific sexual assault offenses. Sexual Assault crime data collection was required to begin in calendar year 2008.

Special consideration had to be taken to disseminate the data collection guidelines for Sexual Assault reporting due to the nature of the difference between UCR offense definitions and Texas penal code definitions. In the Texas UCR program, rape is the only offense collected under the crime index, and that limits the reporting to that of only female victims with male offenders. Because there is greater variance in the offenses collected in the compilation of Sexual Assault data, this data collection should in no way be compared to the statistics maintained in the UCR Program.

Volume

The total number of Texas Sexual Assault incidents in 2010 was 19,007. These incidents involved 20,131 victims and 20,379 offenders.

Offenders

In 2010, 20,379 offenders were involved in incidents of sexual assault. Of the offenders whose sex was known, 96 percent were male and 4 percent were female. The age group showing the highest number of offenders was the 15-to-19 year old bracket.

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The National Intimate Partner and Sexual Violence Survey:

2010 Summary Report

Executive Summary

November 2011

National Center for Injury Prevention and Control Centers for Disease Control and Prevention

EXECUTIVE SUMMARY

Sexual violence, stalking, and intimate partner violence are major public health problems in the United States. Many survivors of these forms of violence can experience physical injury, mental health consequences such as depression, anxiety, low self-esteem, and suicide attempts, and other health consequences such as gastrointestinal disorders, substance abuse, sexually transmitted diseases, and gynecological or pregnancy complications. These consequences can lead to hospitalization, disability, or death.

Our understanding of these forms of violence has grown substantially over the years. However, timely, ongoing, and comparable national and state-level data are lacking. Less is also known about how these forms of violence impact specific populations in the United States or the extent to which rape, stalking, or violence by a romantic or sexual partner are experienced in childhood and adolescence.

CDC's National Center for Injury Prevention and Control launched the National Intimate Partner and Sexual Violence Survey in 2010 with the support of the National Institute of Justice and the Department of Defense to address these gaps.

The primary objectives of the National Intimate Partner and Sexual Violence Survey describe:
The prevalence and characteristics of sexual violence, stalking, and intimate partner violence;
Who is most likely to experience these forms of violence;
The patterns and impact of the violence experienced by specific perpetrators;
The health consequences of these forms of violence.

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This report presents information related to several types of violence that have not previously been measured in a national population-based survey, including types of sexual violence other than rape; expressive psychological aggression and coercive control, and control of reproductive or sexual health. This report also provides the first ever simultaneous national and state-level prevalence estimates of violence for all states.

Health Consequences

Men and women who experienced rape or stalking by any perpetrator or physical violence by an intimate partner in their lifetime were more likely to report frequent headaches, chronic pain, difficulty with sleeping, activity limitations, poor physical health and poor mental health than men and women who did not experience these forms of violence. Women who had experienced these forms of violence were also more likely to report having asthma, irritable bowel syndrome, and diabetes than women who did not experience these forms of violence.

Implications for Prevention

The findings in this report underscore the heavy toll that sexual violence, stalking, and intimate partner violence places on women, men, and children in the United States. Violence often begins at an early age and commonly leads to negative health consequences across the lifespan. Collective action is needed to implement prevention approaches, ensure appropriate responses, and support these efforts based on strong data and research.

Prevention efforts should start early by promoting healthy, respectful relationships in families by fostering healthy parent-child relationships and developing positive family dynamics and emotionally supportive environments. These environments provide a strong foundation for children, help them to adopt positive interactions based on respect and trust, and foster effective and non-violent communication and conflict resolution in their peer and dating relationships. It is equally important to continue addressing the beliefs, attitudes and messages that are deeply embedded in our social structures and that create a climate that condones sexual violence, stalking, and intimate partner violence. For example, this can be done through norms change, changing policies and enforcing existing policies against violence, and promoting bystander approaches to prevent violence before it happens.

In addition to prevention efforts, survivors of sexual violence, stalking, and intimate partner violence need coordinated services to ensure healing and prevent recurrence of victimization. The healthcare system's response must be strengthened and better coordinated for both sexual violence and intimate partner violence survivors to help navigate the health care system and access needed services and resources in the short and long term. One way to strengthen the response to survivors is through increased training of healthcare professionals. It is also critically important to ensure that legal, housing, mental health, and other services and resources are available and accessible to survivors.

An important part of any response to sexual violence, stalking, and intimate partner violence is to hold perpetrators accountable. Survivors may be reluctant to disclose their victimization for a variety of reasons including shame, embarrassment, fear of retribution from perpetrators, or a belief that they may not receive support from law enforcement. Laws may also not be enforced

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adequately or consistently and perpetrators may become more dangerous after their victims report these crimes. It is important to enhance training efforts within the criminal justice system to better engage and support survivors and thus hold perpetrators accountable for their crimes.

Much progress has been made in the prevention of violence. There is strong reason to believe that the application of effective strategies combined with the capacity to implement them will make a difference. The lessons already learned during public health's short experience with violence prevention are consistent with those from public health's much longer experience with the prevention of infectious and chronic diseases. Sexual violence, stalking, and intimate partner violence can be prevented with data-driven, collaborative action.

CDC's National Intimate Partner and Sexual Violence Survey (NISVS) is an ongoing, nationally-representative telephone survey that collects detailed information on sexual violence, stalking, and intimate partner violence victimization of adult women and men in the United States. The survey collects data on past-year experiences of violence as well as lifetime experiences of violence. The 2010 survey is the first year of the survey and provides baseline data that will be used to track trends in sexual violence, stalking and intimate partner violence. CDC developed NISVS to better describe and monitor the magnitude of these forms of violence in the United States.

Highlights of 2010 Findings

Sexual violence, stalking, and intimate partner violence are widespread in the United States. The findings in this report underscore the heavy toll of this violence, the immediate impacts of victimization, and the lifelong health consequences.

Summary

Overall, lifetime and one year estimates for sexual violence, stalking and intimate partner violence were alarmingly high for adult Americans; with IPV alone affecting more than 12 million people each year. Women are disproportionately impacted. They experienced high rates of severe intimate partner violence, rape and stalking, and long-term chronic disease and other health impacts such as PTSD symptoms. NISVS also shows that most rape and IPV is first experienced before age 24, highlighting the importance of preventing this violence before it occurs to ensure that all people can live life to their fullest potential.

The majority of this victimization starts early in life.

- Approximately 80% of female victims experienced their first rape before the age of 25 and almost half experienced the first rape before age 18 (30% between 11-17 years old and 12% at or before the age of 10).
- About 35% of women who were raped as minors were also raped as adults compared to 14% of women without an early rape history.
- 28% of male victims of rape were first raped when they were 10 years old or younger.

Provided by: **National Intimate Partner and Sexual Violence Survey**

1-800-CDC-INFO (232-4636) • cdcinfo@cdc.gov • www.cdc.gov/violenceprevention/nisvs

For additional National statistics go to: <http://www.ucrdatatool.gov/twomeasures.cfm>

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Our Recommendations to Reduce Violent Crime

The Foundation's recommendations may literally require an act of the U.S. Congress and/or a constitutional amendment, but we firmly believe our nation's children are worth it! According to the U. S. Department of Human Services, about 5.8 million children are reported abused each year. Please unite with us to protect our most vulnerable treasures!

All children and adults deserve to feel confident to better protect themselves from abuse throughout their lives. We recommend the integration of training focussed on prevention of abuse into the national accademic curriculum. While the specific details of the curriculum's implementation will need to be worked out with variouse stake holders, teachers, parents, legal authorities, we suggest thirty minute daily classes from kindergarten through university level students to impact the decrease of violent crime. We would also offer similar criteria curriculum to adults. These classes would address:

1. Building character, including respect for self and others;
2. Signs and symptoms of sexual assault/domestic violence and what to do if you suspect someone being abused;
3. Awareness and prevention of mass violence.



Children – using proven age appropriate developed curricula in school through university level.
Adults – similar curricula offered to businesses, churches and interested community entities.

Course objectives

- Build Character;
- Instill respect for self, friends, family, teachers, coworkers, neighbors and the general public;
- Equip students to recognize and respond to signs and symptoms of sexual assault and domestic violence;
- Educate students about how to recognize, prevent and respond to substance abuse;
- Teach students about healing and recovery from abuse;
- Teach citizens of all ages how to respond to mass violence, including attacks at schools;
- Empower children as well as adults to make educated and informed decisions.

Some programs making a positive impact on Americans are reference on CDC's Web site:

<http://www.cdc.gov/ViolencePrevention/childmaltreatment>.

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Please donate your help and support!

Help Protect Her and Millions Like Her



What Works Best For You?

Lots of options for involvement:

- Donate Time
 - Fundraising
 - Training
 - Leadership
- Donate Money
 - DVDs
 - Live Training
- Donate Resources
 - Meeting Rooms
 - Duplication Services
 - Fulfillment

Donate Time

Donate Money

Donate Resources

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ONLINE

Contribute securely online at www.hopeforchildrenfoundation.org Click on Donate

PHONE

You can make a tax-deductible contribution to Hope For Children Foundation using your credit card by calling 214.382.4673 between the hours of 9:00 a.m. and 5 p.m. CST Monday through Friday.

CHECK

Send your check (along with an address to which we can send your acknowledgement), made payable to the Hope For Children Foundation, and mail to: Hope For Children Foundation, PO Box 191028, Dallas, TX 75219

WIRE TRANSFER

Should you desire to make your donation through a wire account, call 214.382.4673 for details.

APPRECIATED SECURITIES

Owning an appreciated security for more than one year, allows for a tax deduction based upon the current market value avoiding paying capital-gains tax on the increase when donating. Call 214.382.4673 for details.

GET YOUR COMPANY INVOLVED

Many companies have matching-gift programs and will match charitable contributions made by their employees. Ask your human resources office if your office if they have such a program.

PLAN YOUR GIFT THROUGH WILLS, TRUSTS, AND ESTATE GIVING

Planned giving consists of various planned gifts available to help you support the fight against child abuse.

CREATE YOUR OWN EVENT

Our online fundraising tool can help you customize an event that's right for you, just contact us.

HONOR A LOVED ONE

A memorial or tribute is a meaningful way to celebrate someone important to you. 214-382-4673

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There's one message I hope to leave with you today. Everyone has a role to play in giving children a good start in life!

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Thank you for your generous support! You really care!



Please help us, help children and adults learn how to protect and balance their lives.

We believe...living an abuse free life... is more than an hope or a dream...please help!

For all emergencies please call 911 or your local police department.

For the National Child Abuse Hotline at 1-800-4-A-CHILD

For the National Sexual Assault Hotline call 1-800-656-4673

For the National Domestic Violence Hotline call 1-800-799-7233.

They should be able to help you with referrals and/or resources in your location.

Thank you!

Contact Information: Hope For Children Foundation

Address: 4925 Greenville Ave. Suite 200 Dallas, Texas 75206

Phone: 214-382-4673 www.hopeforchildrenfoundation.org