



Child Advocacy Center of Sedgwick County

The Mid-Month Memo

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Primary Partner Agencies

COMCARE of Sedgwick County
Exploited and Missing Child Unit
KS Dept. for Children and Families
Wichita Regional Office
KU School of Medicine - Wichita
Office of the District Attorney, 18th
Judicial District, Sedgwick County
Sedgwick County Sheriff's Office
Via Christi Health
Wesley Medical Center
Wichita Area Sexual Assault Center
Wichita Police Department

~ To lead our community in eliminating the suffering of abused children. ~

We Welcome Our New CACSC Business Manager

Theresa Lewis is the new Business Manager for the CACSC. She recently left her position as Business Manager at ResCare here in Wichita to join the CACSC and our multidisciplinary team. Theresa has a Bachelor's degree in Business Administration and a Master's degree in Management, both from Friends University. She says she is excited to be working for such a great organization with people who care so much for children and are committed to making their lives better. She hopes to use her experience from working in industries such as insurance, lab, financial and health food services, and most recently for a company providing services for developmentally disabled adults to help the CACSC. Theresa was looking for a place where she could be part of a team that helps others and is glad she found the Child Advocacy Center. In her short time here, Theresa has demonstrated that "fit" with our team and the passion and desire to help the CACSC continue to grow and better the lives of children affected by child abuse.

For Your Calendar:

June 28, 2014, from 11 AM to 1 PM: Get a free Original Chick-fil-A Sandwich and help children at the CACSC!



Bring individually packaged snacks, juice boxes, bottled water, new toys, or \$5 gas or meal cards to Chick-fil-A at Central & Rock Road! All donated items are given to children receiving CACSC services!

Oct. 15-17, 2014: Governor's Conference for the Prevention of Child Abuse and Neglect, Wichita; Info at: www.kcsl.org

Nov. 1, 2014: CACSC Heroes Gala, Scottish Rite Center

Child Advocacy Center of Sedgwick County

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Addressing the Problem of Physical Punishment in Child Abuse Prevention

The relationship between corporal (physical) punishment and risk for abuse has been well researched. Corporal punishment is a discipline method that uses physical force to change behavior. In the US, 90% of parents report using spanking, 70% of mothers self report spanking 2 year olds and 2% of parents have spanked a child less than 6 months old . Rooted in personal, cultural, religious, and societal views of children and discipline, corporal punishment includes pinching, spanking, slapping, shoving, shaking, hair pulling, choking; isolated, prolonged confinement; excessive exercise and denial of needs.

Medical and social sciences research does not support corporal punishment as being effective in the long term. There is considerable, clear evidence that physical punishment puts children at risk for increased mental health problems. When physical force is used for discipline, children become more, not less, defiant and aggressive in the future. Whether or not injuring the child was the intended outcome, the end result for the child is that he or she has been hurt instead of being taught appropriate problem solving.

Caregivers who use corporal punishment are often angry, irritable, depressed, fatigued, or stressed. They apply punishment at a time when they have "lost it," and frequently express remorse and agitation while punishing their child. Discipline is an essential part of childrearing. However, it should be focused on consistent limit setting, decision-making, teaching right from wrong and fostering in children a sense of self-control. To avoid harming a child and to model nonviolent behavior, discipline should be consistent and nonphysical: "time out," expression or discussion of parental disappointment, and grounding or loss of privileges as appropriate for the child's age.

Report on Physical Punishment in the US: What Research Tells Us About Its Effects on Children;
E. Gershoff, PhD., Columbus, OH: Center for Effective Discipline, 2008.

More to come on words to live by for parents!

Featuring a New Board Member

Angie Jennings is a community representative who received her Master's degree in social work from the University of Kansas. During her work as a hospital pediatric social worker she discovered a passion for working with families and children experiencing some of the most difficult times in their lives. Angie recalls finding it particularly rewarding to be able to advocate for children in need. Her continued interest in this area led her to the CACSC. Angie strongly believes that families in crisis should not be further burdened by the system designed to help them, and that the Child Advocacy Center is the solution to that dilemma. As a volunteer on various community boards, committees, and in the classrooms for her three children, as well as part time work for her husband's business, the Veterinary Emergency & Specialty Hospital of Wichita, Angie stays quite busy. The CACSC will benefit from her tremendous passion and organizational skills.

If you suspect child abuse or neglect call 911 or 1.800.922.5330

**"The purpose of child advocacy centers is to provide
a comprehensive, culturally competent, multidisciplinary team
response to reports of child abuse, in a dedicated, child-focused setting."**

**National Children's Alliance
Empowering Local Communities to Serve Child Victims of Abuse**