**Child Abuse & Neglect**
**Recognition and Reporting**

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**Introduction**

- Children who are maltreated are 59% more likely to be arrested for juvenile crimes and 28% more likely to be arrested for criminal behavior when they become adults. (www.childwelfare.gov/pubs/factsheets/long_term_consequences.cfm)

- One-third of abused and neglected children will eventually victimize their own children. (www.childwelfare.gov/pubs/factsheets/long_term_consequences.cfm)

- One in 4 girls and 1 in every 6 boys will be sexually abused by age 18. One fourth of the reported sexual abuse cases occur in children under the age of six. (Darkness to Light www.darkness2light.org)

- Children who experience maltreatment are at increased risk for adverse health effects and behaviors as adults—including smoking, alcoholism, drug abuse, eating disorders, severe obesity, depression, suicide, sexual promiscuity, and certain chronic diseases. (http://www.cdc.gov/violenceprevention/facts.html)

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**Objectives**

- To understand the risk and protective factors related to child abuse and neglect

- To educate professionals on the definitions and characteristics of abuse and neglect

- Identify situations that may be abuse and require further evaluation

- To understand the role of mandated reporter
National Statistics – 2009

• 3.3 million referrals, involving the alleged maltreatment of approximately 6.0 million children were received by CPS agencies.
• an estimated 702,000 children were determined to be victims of child abuse and neglect.
• an estimated 1,770 children died from abuse or neglect

Kansas Statistics – FY 2010

• 55,730 reports of child abuse and neglect were made
• 28,066 reports were screened in for investigation
• 1,438 substantiated victims

Substantiated Breakdown of Abuse
FY2010 Kansas Statistics by Type of Abuse
Top Primary Presenting Problems

- Substance Abuse (85%)
- Poverty & Economic Strains (44%)
- Parental Capacity & Skills (22%)
- Domestic Violence (22%)
Risk & Protective Factors

Children who grow up in families and environments with a high number of **risk** factors have a higher probability of experiencing maltreatment.

Children who grow up in families and environments with a high number of **protective** factors have less probability of experiencing maltreatment.

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Risk and Protective Factors

- Risk factors **increase** vulnerability to becoming a victim or perpetrator.
- Protective factors **reduce** vulnerability to becoming a victim or perpetrator.

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Risk Factors

- Parent or Caregiver Factors
  - Personality characteristics and psychological well being
  - History of maltreatment
  - Substance abuse
  - Attitudes and knowledge
  - Age
Risk Factors

• Family Factors
  – Family structure
  – Marital conflict and domestic violence
  – Stress
  – Parent child interaction

Risk Factors

• Child Factors
  – Age
  – Disabilities
  – Other child characteristics

Risk Factors

• Environmental Factors
  – Poverty and unemployment
  – Social isolation and social support
  – Violent communities
Protective Factors

• Nurturing and attachment
• Knowledge of parenting and of child and youth development
• Parental resilience
• Social connections
• Concrete support for parents

Why Focus on Protective Factors?

• Protective factors are positive attributes that strengthen ALL families, not just those at risk, so no family feels singled out.
• Focusing on protective factors helps you build positive relationships with parents
• Strengthening protective factors will naturally increase support networks which are critical for long term success.

Child Abuse Definitions
Physical Abuse: Definition

"Physical, mental or emotional abuse" means the infliction of physical, mental or emotional harm or the causing of a deterioration of a child and may include, but shall not be limited to, maltreatment or exploiting a child to the extent that the child's health or emotional well-being is endangered. (K.S.A. 38-2202)

- Bruises
  - Different colors
  - Back, Buttocks & Back of Legs
  - Groups or Patterns
  - Not common for age & activity level of child
  - Defense wounds to back of arms and hands
  - Shape of bruise & object

Physical Abuse: Behavioral Indicators

- Very passive
- Fear of or avoiding parent or caregiver
- Wary of physical contact
- Excessive hunger for affection
- Fear of returning home from school or child care
- Sudden changes in behavior
- Child starts wetting or soiling clothing or bed
- Sleep problems including nightmares
- Cannot recall how injuries occurred or offers an inconsistent explanation
Lesions initially appear to be bilateral “black eyes.” However, patient has “raccoon eyes” from oncologic problem – neuroblastoma involvement of child’s orbits.

Physical Abuse: Special Situations

- **Mongolian spots**
- **Cultural Healing Practices**

This child was struck in the eye by the perpetrator’s fist.
Child struck behind ear with a large wooden spoon for misbehavior while caregivers were preparing dinner.

Physical Abuse: Burns

- Abusive Burn Patterns
  - Scald and Immersion Burns
  - Splash Burn Injuries
  - Contact Burns

Burns: What to look for

- Small circular burns appearing on face, arms, hands buttocks or soles of the feet which may have been inflicted by a cigar or cigarette
- Burns with a "sock" or "glove-like" appearance on the hands or feet and "doughnut-shaped" burns to the buttocks. These are usually caused by either dipping or forcing the child to sit in scalding liquid. Look for immersion lines.
- Burns that leave a pattern outlining the object such as an iron, electric burner or fireplace tool
- Burns caused by rope friction are usually found on the legs, arms, neck or torso as a result of being tied up
Plausible history of fall from steps onto heating grate in center of foyer at base of steps. Patterned burn but no suspicion of neglect nor of maltreatment – no report was made after concerns pursued through careful history taking.

An intentional steam iron burn of a 6-year-old boy. Note how clear the pattern is and the visibility of the steam jet holes.

This 18-month old boy was seen in the Emergency Department with a patterned burn to his abdomen.
The location where the injury occurred is consistent with the story of an accidental fall.

Physical Abuse: Abrasions & Lacerations

- Loop type lacerations from belts, straps and extension cords
- Lacerations to the backside of the body (whipping)
- Series or groups of straight line lacerations or welts
Examples of Common Household Items Used

Physical Abuse: Miscellaneous Injuries

- Fractures or Dislocations
  - The most obvious place for abuse fractures are the nose, ribs, hands, and forearms
- Head Injuries
  - Black Eyes
  - Split Lips
  - Lumps on the Head
  - Loose Teeth
  - Facial Bruises
  - Bruises on the Ear
- Bite Marks

Abusive Head Trauma/ Shaken Baby Syndrome

- An inflicted traumatic brain injury that occurs when a baby is violently shaken.
- Shaking has significant impact on a child under age 2 because
  - The head is quite large in comparison with the body
  - The neck muscles are generally weak
  - The brain of an infant is not well protected like that of an adult
  - The skull of an infant is relative unstable and still developing.
Symptoms of Abusive Head Trauma

- Lethargy / decreased muscle tone
- Extreme irritability
- Decreased appetite, poor feeding or vomiting for no apparent reason
- Grab-type bruises on arms or chest are rare
- No smiling or vocalization
- Poor sucking or swallowing
- Rigidity or posturing
- Difficulty breathing
- Seizures
- Head or forehead appears larger than usual or soft-spot on head appears to be bulging
- Inability to lift head
- Inability of eyes to focus or track movement or unequal size of pupils

National Center on Shaken Baby Syndrome

Physical Abuse: Determining Questions

1. Is the explanation consistent with physical evidence?
2. Are there any other physical or behavioral indicators?
3. Are there family/environmental stresses that are apparent?
Emotional Abuse: Definition

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Emotional Abuse: Why Does it Happen?

- Parents are vulnerable to the stresses in their lives if unable to manage these stresses.
- Diminished capacity for understanding and dealing with children (mental retardation, psychopathology, alcoholism, drug abuse)
- False ideas about children's needs
- Abuser’s goal may be to control
- Most physical abuse is accompanied by emotional abuse as well.

What is Emotional Abuse?

Emotional abuse of a child is commonly defined as a pattern of behavior by parents or caregivers that can seriously interfere with a child’s cognitive, emotional, psychological or social development. Emotional abuse of a child — also referred to as psychological maltreatment — can include:

- Ignoring
- Rejecting
- Isolating
- Exploiting or corrupting
- Verbally assaualting
- Terrorizing
- Neglecting the child

www.americanhumane.org
Emotional Abuse: Indicators
- Impaired capacity to enjoy life
- Refuses to defend self
- Sexually precocious behavior
- Lies notably when it is not the protect self but often in circumstances when there is nothing to lose by telling the truth
- Cheats/Steals
- Refuses to accept responsibility for actions; blames others
- Low self-esteem
- Apathy
- Seeking love, acceptance, and affection outside the home
- School learning problems
- Short attention span
- Language delayed
- Lack of exploration or curiosity
- Self-destructive physically and socially
- Eating disorders
- Controlling but lacks self-control

Emotional Abuse: Consequences
- Psychiatric disorders- depression, character disorder, borderline personality disorder, multiple personality disorder
- Self-destructive behaviors
- Antisocial and delinquent behaviors, often violent
- Increased vulnerability
- Cognitive & Language delayed
- Relationship problems
- Negative view of self and others
- Munchausen Syndrome by Proxy
- Failure to Thrive
- Learned Helplessness

Emotional Abuse: Failure to Thrive
- Appearance:
  - Short stature
  - Usually thin
  - Infantile proportions
  - Pot belly
  - Episodes of diarrhea
  - Skin dull, pale and cold
  - Poor skin care, abrasions
  - Sparse dry hair
- Behavior:
  - Passive
  - Rocking or head banging
  - Retarded speech
  - Delayed development
  - Solitary and unable to play
  - Easily bullied
  - Gorging food and scavenging from wastebaskets
This 6-month-old infant was born to a mother who did not bond effectively because of postpartum depression. He has evidence of severe wasting and neglectful care as also evidenced by the diaper excoriation. Weight gain was achieved by placement in foster home.

**Emotional Abuse:**

**Determining Questions**

1. Do interactions between parent/caregiver and child seem mostly negative?

2. Are specific instances of emotional abuse or maltreatment frequently observed?

**Sexual Abuse:**

"Sexual abuse" means any contact or interaction with a child in which the child is being used for the sexual stimulation of the perpetrator, the child or another person. Sexual abuse shall include allowing, permitting or encouraging a child to engage in prostitution or to be photographed, filmed or depicted in pornographic material. K.S.A. 38-2202
Sexual Abuse: Types

- Forms of Contact Sexual Abuse
  - Open-mouth kissing
  - Handling or fondling
  - Oral sex
  - Frottage (rubbing against each other)
  - Pornography
  - Intercourse
  - Bondage
  - Anal sex
  - Bestiality

- Forms of Non-Contact Sexual Abuse
  - Sexual comments
  - Exhibitionism
  - Voyeurism
  - Watching pornographic films/videos

Sexual Abuse: Statistics

- It is estimated that 20% of American women and 5-16% of American men experienced some form of sexual abuse as children. (Prevent Child Abuse America)

- The majority of sexual abuse of children is done by someone the child knows. (Prevent Child Abuse America)

- 1 in 5 children are solicited sexually while on the internet. (Darkness to Light (www.darkness2light.org))

Sexual Abuse: Risk Factors

- Factors that may increase a child’s risk of sexual abuse:
  - include being between the ages of 7 and 13,
  - having the absence of a parent from the home,
  - being a young child who appears isolated, depressed, or lonely.

- Common characteristics of the families in which sexual abuse of children occur:
  - Social isolation
  - A domineering father
  - An absent mother (physically or emotionally)
  - Few role boundaries
  - Parents with a history of being abused as children

Prevent Child Abuse America

Darkness to Light (www.darkness2light.org)
Sexual Abuse: Behavioral Indicators

- Major familial disruptions, role changes
  - Substance abuse among family members
  - Jealousy, extreme protection of child
  - Isolation from outside world
  - Restrictive control by father, dominating household members
  - Frequent absences from school which are justified by male caretaker
  - Lack of Consent
  - Exploitation
  - Ambivalence (not caring)
  - Secrecy
  - Mother or father displays extreme dominance, restrictiveness or protectiveness
  - History of sexual abuse exists for either parent
  - Parents label a child as "seductive"

Neglect: Definition

"Neglect" means acts or omissions by a parent, guardian or person responsible for the care of a child resulting in harm to a child, or presenting a likelihood of harm, and the acts or omissions are not due solely to the lack of financial means of the child's parents or other custodian. Neglect may include, but shall not be limited to:

1. Failure to provide the child with food, clothing or shelter necessary to sustain the life or health of the child;
2. Failure to provide adequate supervision of a child or to remove a child from a situation which requires judgment or actions beyond the child's level of maturity, physical condition or mental abilities and that results in bodily injury or a likelihood of harm to the child; or
3. Failure to use resources available to treat a diagnosed medical condition if such treatment will make a child substantially more comfortable, reduce pain and suffering, or correct or substantially diminish a crippling condition from worsening. A parent legitimately practicing religious beliefs who does not provide specified medical treatment for a child because of religious beliefs shall not for that reason be considered a negligent parent; however, this exception shall not preclude a court from entering an order pursuant to subsection (a)(2) of K.S.A. 2009 Supp. 38-2217, and amendments thereto. K.S.A. 38-2202

Neglect: Indicators

- Failure to provide the child with food, clothing or shelter necessary to sustain the life or health of the child;
- Failure to provide adequate supervision of a child or to remove a child from a situation that requires judgment or actions beyond the child’s level of maturity, physical condition, or mental abilities and that results in bodily injury or a likelihood of harm to the child;
- Failure to use resources available to treat a diagnosed medical condition if such treatment will make a child substantially more comfortable, reduce pain and suffering, correct or substantially diminish a crippling condition, lengthen the life span, or prevent the condition from worsening.
Neglect: Physical Signs

- Constant hunger
- Malnutrition
- Poor language skills and coordination
- Poor hygiene - consistent lack of cleanliness or an intense obsession with cleanliness
- Clothing not suitable for weather conditions
- Evidence that the child's physical or medical needs are not being met. This may include decayed teeth, gum disease, untreated sores, and not being immunized against diseases

Neglect: Characteristics

- Abandoned by their parents
- Malnourished and dehydrated
- Ill and injured and who does not receive medical care
- Dangerous physical environment
- Left unsupervised
- Lack basic physical care and hygiene
- Inadequately clothed

This house was investigated after a report came in that the five children were coming to school hungry, dirty, and smelling like cat urine.

The children were taken into protective custody and placed at the parent’s home under the court order to clean the place up and remove the animals.

The parents never did.

One month later, the children were found in this condition.
Neglect Case: Virginia
Poor Living Conditions

- Bugs in the Sink
- Ceiling Caving In
- Dog Feces in Bathroom
- Hot Sweating Upstairs Bedroom of Girl
Direct Costs of Child Abuse and Neglect in the United States

- Hospitalization: $6,625,959,263
- Mental Health Care System: $1,080,706,049
- Child Welfare System: $25,361,329,051
- Law Enforcement: $33,307,770
- Total Direct Costs: $33,101,302,133

Indirect Costs of Child Abuse and Neglect in the United States

- Special Education: $2,410,306,242
- Mental Health / Health Care: $67,863,457
- Juvenile Delinquency: $7,147,814,134
- Lost Productivity to Society: $33,019,919,544
- Adult Criminal Justice System: $27,979,811,982
- Total Indirect Costs: $70,652,715,359
Total Annual Costs

$103,754,017,492

Mandated Reporting

- Mandated Reporter Professions:
  - Licensed Mental Health Professionals, Medical Professionals, School District Employees, Child Care Providers, Social Workers, Fire Fighters/EMS, Law Enforcement Officers, Mediators, Juvenile Intake & Assessment Workers

- How to report:
  - Reporting Hotline: State/ National
  - Protection from Lawsuits
  - Law does not require proof

- Information to report:
  - Name & address of child, child’s parents
  - Child’s location
  - Child’s condition including nature and extent of injury
  - Whether the alleged perpetrator has access to the child

Kansas Law

- Failure to report a case is a class B misdemeanor and can result in a $1000 fine or up to 6 months in jail.

- Kansas law provides immunity from lawsuits against reporters of child abuse.

- A report must be made by a mandated reporter if there is a reason to suspect, which means that there is credible evidence or a discrepant or inconsistent history in explaining a child’s injury.
If 20 million people were infected by a virus that caused anxiety, impulsivity, aggression, sleep problems, depression, respiratory and heart problems, vulnerability to substance abuse, antisocial and criminal behavior, retardation and school failure, we would consider it an urgent public health crisis.

Yet in the United States alone, there are more than 20 million abused, neglected and traumatized children vulnerable to these problems. Our society has yet to recognize the epidemic, let alone develop an immunization strategy.

- Bruce Perry, M.D., Ph.D.

Resources

- This website has a free download of Child Maltreatment 2009 statistics
- Kansas Children’s Service League [www.kcsl.org](http://www.kcsl.org)
- Kansas Department of Social and Rehabilitation Services [www.srskansas.org](http://www.srskansas.org)
- National Center on Shaken Baby Syndrome [www.don’tshakes.org](http://www.don’tshakes.org)
- Prevent Child Abuse America [www.preventchildabuse.org](http://www.preventchildabuse.org)