CHILD ABUSE AND NEGLECT
USER MANUAL SERIES

# The Role of Educators in Preventing and Responding to Child Abuse and Neglect

U.S. Department of Health and Human Services
Administration for Children and Families
Administration on Children, Youth and Families
Children's Bureau
Office on Child Abuse and Neglect

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# Preface

Each day, the safety and well-being of some children across the Nation are threatened by child abuse and neglect. Intervening effectively in the lives of these children and their families is not the sole responsibility of any single agency or professional group, but rather is a shared community concern.

The *Child Abuse and Neglect User Manual Series* has provided guidance on child protection to hundreds of thousands of multidisciplinary professionals and concerned community members since the late 1970s. The *User Manual Series* provides a foundation for understanding child maltreatment and the roles and responsibilities of various practitioners in its prevention, identification, investigation, assessment, and treatment. Through the years, the manuals have served as valuable resources for building knowledge, promoting effective practices, and enhancing community collaboration.

Since the last update of the *User Manual Series* in the early 1990s, a number of changes have occurred that dramatically affect each community's response to child maltreatment. The changing landscape reflects increased recognition of the complexity of issues facing parents and their children, new legislation, practice innovations, and system reform efforts. Significant advances in research have helped shape new directions for interventions, while ongoing evaluations help us to know "what works."

The Office on Child Abuse and Neglect (OCAN) within the Children's Bureau of the Administration for Children and Families (ACF), U.S. Department of Health and Human Services (DHHS), has developed this third edition of the *User Manual Series* to reflect the increased knowledge base and the evolving state of practice. The updated and new manuals are comprehensive in scope while also succinct in presentation. They are easy to follow and address trends and concerns relevant to today's professional.

This manual, *The Role of Educators in Preventing and Responding to Child Abuse and Neglect*, builds upon *A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice*, the keystone publication of the *User Manual Series*. It provides the basis for the involvement of educators in combating the problem of child abuse and neglect. It also may be used by other professionals involved in child abuse and neglect interventions, such as child protective services, mental health, law enforcement, health care, and early childhood professionals, to gain a better understanding of the role of educators in child protection.

## User Manual Series

This manual—along with the entire *Child Abuse and Neglect User Manual Series*—is available from the National Clearinghouse on Child Abuse and Neglect Information. Contact the Clearinghouse for a full list of available manuals and ordering information:

National Clearinghouse on Child Abuse and Neglect Information
330 C Street, SW
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Phone: (800) FYI-3366 or (703) 385-7565
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The manuals also are available online at **http://nccanch.acf.hhs.gov/profess/tools/usermanual.cfm.**

# Acknowledgments

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**Cynthia Crosson-Tower,** Ph.D., taught in the behavioral sciences department at Fitchburg State College in Massachusetts for 24 years and continues to be the director of the Child Protection Institute at the College. Currently, she consults for various schools and social agencies and maintains a private practice, Harvest Counseling and Consultation, which specializes in the treatment of survivors of abuse and the perpetrators of sexual abuse as well as the supervision of other professionals. She offers workshops and trainings, both nationally and internationally, for educators and other human service professionals.

Dr. Crosson-Tower is the author of numerous publications, including: *Understanding Child Abuse and Neglect*, *Exploring Child Welfare: A Practice Perspective, When Children Are Abused: An Educator's Guide to Intervention, Secret Scars: A Guide for Survivors of Child Sexual Abuse, Homeless Students* and *How Schools Can Combat Child Abuse and Neglect*. In addition, she has authored a monograph, *Designing and Implementing a School Reporting Protocol: A How-to Manual for Massachusetts Teachers*, for the Children's Trust Fund in Boston, and is currently working on a child sexual abuse text and a handbook for clergy to aid them in responding to abuse.

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## Acknowledgment of Prior Editions

This manual, originally published in 1979 and 1984 as *The Educator's Role in the Prevention and Treatment of Child Abuse and Neglect*, by Diane D. Broadhurst, was revised and expanded by Cynthia Crosson-Tower in 1992.

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# CHAPTER 1
# Purpose and Overview

This chapter provides a very brief overview of child abuse and neglect and the role of educators in preventing and responding to maltreated children. The reader is referred to the first manual in this series, *A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice*, for an indepth description of the various types of child abuse and neglect.

## Guiding Principles

Parents have a fundamental right to raise their children as they see fit, and society presumes that parents will act in their children's best interest. When parents do not protect their children from harm or meet their basic needs—as with cases of child abuse and neglect—society has a responsibility to intervene to protect the health and welfare of these children. Any intervention into family life on behalf of children must be guided by Federal and State laws, sound professional standards for practice, and strong philosophical underpinnings.

The key principles guiding child protection are largely based on Federal statutes, primarily delineated in the Child Abuse Prevention and Treatment Act (CAPTA) and the Adoption and Safe Families Act (ASFA). CAPTA, in its original inception, was signed into law in 1974 (P.L. 93-247) and is reauthorized by Congress every 5 years. CAPTA was reauthorized on June 25, 2003, as part of the Keeping Children and Families Safe Act of 2003 (P.L. 108-36). ASFA was signed into law in 1997 (P.L. 105-89) and built upon earlier laws and reforms to promote the safety and well-being of maltreated children. These laws and other guiding legislation are referenced throughout this publication and are specifically discussed in "Federal Legislation and Programs" in Chapter 8 of *A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice*. ASFA promotes three national goals for child protection:

- **Safety.** All children have the right to live in an environment free from abuse and neglect. The safety of children is the paramount concern that must guide child protection efforts.

- **Permanency.** Children need a family and a permanent place to call home. A sense of continuity and connectedness is central to a child's healthy development.

- **Child and family well-being.** Children deserve nurturing families and environments in which their physical, emotional, educational, and social needs are met. Child protection practices must take into account each child's needs and should promote the healthy development of family relationships.

In addition, ASFA underscores the importance of the accountability of service delivery systems in achieving positive outcomes for children related to each of these goals.

## Child Abuse and Neglect Statistics

To help illustrate the importance of preventing and responding to child abuse and neglect, it may be useful to examine the scope of its occurrence. The following findings describe reported child victimization rates by major types of maltreatment as stated in the National Child Abuse and Neglect Data System (NCANDS) for 2001:

- **Neglect.** More than one-half of all reported victims (59.2 percent) suffered neglect (including medical neglect), an estimated rate of 7 per 1,000 children.

- **Physical abuse.** Approximately one-fifth of all known victims (18.6 percent) were physically abused, an estimated rate of 2 per 1,000 children.

- **Sexual abuse.** Of all reported child maltreatment cases, almost one-tenth (9.6 percent) had been sexually abused, an estimated rate of 1 per 1,000 children.

- **Psychological maltreatment.** Less than one-tenth (6.8 percent) were identified as victims of psychological maltreatment, or less than 1 per 1,000 children.[1]

(Note: Some children are reported as victims of more than one type of maltreatment.)

## The Role of Educators

Children and adolescents spend a large portion of their time in school, which gives educators more access to students than most other professionals. For the purpose of this manual, the term "educator" is meant to encompass not only the classroom teacher, but also other school personnel involved in serving the child. This manual is designed to examine the roles that teachers, school counselors, school social workers, school nurses, special education professionals, administrators, and other school personnel have in helping maltreated children.

*The Role of Educators in Preventing and Responding to Child Abuse and Neglect* is intended to expand the information provided in *A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice* by addressing issues unique to education professionals. Specifically, this manual will address the following topics:

- Identifying reasons why educators are concerned;

- Recognizing child abuse and neglect;

- Reporting child abuse and neglect;

- Providing support after the report—what schools can offer;

- Preventing child abuse and neglect.

Appendices providing sample instruments and other information also are included.

Using this manual, the educator can contribute to the increased well-being of children in a variety of ways. Certainly, the first area of defense against the problem of child maltreatment is one of awareness. Each individual who is involved with children has the obligation of knowing the basics of how to protect children from harm. The protection of children is not only an individual issue, but a community concern as well. Educators are an integral part of the community and, as such, can lead and be involved in community efforts to combat child maltreatment.

# CHAPTER 2
# Identifying Reasons Why Educators Are Concerned About Child Abuse and Neglect

The educator has a vital role in identifying, reporting, and preventing child abuse and neglect. Over the last few decades, various organizations have developed programs directed at informing educators that they are a valuable resource. Professionals submitted more than one-half (56.5 percent) of the cases referred to and assessed or investigated by child protective services (CPS), with education personnel the most frequent source of reports (16.2 percent).[2] This highlights the important role of educators and indicates that many educators are already involved in responding to this issue, yet more can be done to address maltreatment. Several studies indicate that many educators are not entirely clear what the indicators of child abuse and neglect are or how to report suspected maltreatment.[3] One study surveyed 2,793 schools to assess staff readiness to report maltreatment. Because only 51 percent of those completing the questionnaire had received training on reporting child maltreatment, there is still much work to be done to alert educators to their important role in identifying and reporting abuse and neglect.[4]

There are many reasons why educators are so vital in identifying, treating, and preventing child maltreatment. First, they have close and consistent contact with children. Second, educators have a professional and legally mandated responsibility for reporting suspected maltreatment. While educators facilitate children's learning, children cannot learn effectively if their attention or energy is sapped by the conflicts inherent in being maltreated. Third, school personnel have a unique opportunity to advocate for children, as well as provide programs and services that can help children and strengthen families. It is important to realize that a positive relationship with a supporting adult may enhance the resiliency of children who have been abused, are at-risk for being abused, or live in a home where no maltreatment occurs but the family experiences other problems, such as substance abuse.

This chapter discusses a variety of reasons why educators must become involved in preventing and responding to child abuse and neglect. These reasons are related to:

- Community efforts
- Educational opportunities
- Legal concerns
- Professional responsibilities
- Personal commitments

## Community Efforts

Dealing with child abuse and neglect is, in fact, a community effort. As leaders in their communities, educators are often in an ideal position to initiate this type of teamwork. A variety of formal programs involving the schools and the community have been especially effective in addressing the difficult and self-destructive behavior in youth that often is an aftereffect of child abuse.

Model programs use community resources to promote the concepts of cooperation, peer mediation, independence, and acceptance of the common good.[5] A good example of one such community effort took place in a small city and resulted in the conviction for sexual abuse of a popular clergyman who had been involved with a local Boy Scout troop. Once the initial shock had subsided, the church members joined with local school officials and other citizens to address the concerns of the community's children and their parents. Support groups for both the abused boys and the nonabused boys who knew the perpetrator, as well as awareness and educational programs, helped the stunned community recover.

## Educational Opportunities

The primary goal of the education system is to teach. In order to achieve this, it is sometimes necessary to remove barriers that impede a child's ability to learn. Every year, millions of dollars are authorized through various legislative acts for this purpose, including the No Child Left Behind Act of 2001 (P.L. 107-110), the recent reauthorization of the Elementary and Secondary Education Act of 1965, and the Education for All Handicapped Children Act (P.L. 94-142), which is now called the Individuals with Disabilities Education Act or IDEA (P.L. 101-476). These laws protect the right of every child to an education and attest to the Nation's commitment to remove barriers to each child's ability to learn. The trauma and residual effects of child abuse and neglect are barriers to learning as much as any type of academic or physical impediment that schools spend so much time addressing.[6]

Educators are trained to recognize and intervene when children are not able to benefit fully from their educational opportunities. This training makes them uniquely qualified to detect indicators that may signify that a child is being maltreated. Since schools are one of the few places in which children are seen almost daily, educators have a chance to see changes in appearance and behavior. From classroom teachers to guidance counselors, as well as social workers, nurses, psychologists, and administrators—everyone becomes an integral part of the educational team to help children.

To learn more about legislation related to education issues, visit **http://www.ed.gov/index.jsp**.

## Legal Concerns

Every State legally mandates that educators report suspected child abuse and neglect. A mandated reporter is anyone required by State law to report maltreatment to the designated State agency. However, some States clearly define that teachers, principals, nurses, and counselors are included in this mandate, while other States designate all school personnel. In addition, almost every State levies a penalty against mandated reporters who choose not to report. This penalty ranges from a fine, a misdemeanor charge, or time spent in jail. Until recently, most States did not strictly enforce these penalties, but this has changed within the last few years. A number of States have sanctioned nonreporters for failing to obey reporting laws, so it is important that educators know the reporting laws for their State.

In addition to penalties for not reporting abuse and neglect, all States provide immunity from civil liability and criminal penalty for mandated reporters who report in good faith. In other words, the law

requires educators to report child abuse and neglect, provides protection for those educators who become involved, and penalizes those who fail to meet their obligations.

## Professional Responsibilities

Educators have a keen sense of their professional responsibility to the children in their care. They are concerned about the health, safety, and happiness of these children. Educators are aware that they are role models for the children they teach and that they may be an important source of support, concern, and care for many children. Educators want to do what is best for the children in their care because their professional standards require it. As mandated reporters, all educators have the responsibility not only to report suspected abuse, but also to know how to make a report, to be familiar with their district's policies and reporting procedures, and to communicate with CPS.

Additionally, as adults in constant contact with children, educators must be aware of issues surrounding physical contact with a child—what is considered appropriate versus inappropriate in everyday classroom activities—as well as the issue of corporal punishment.

Many daycare centers and schools are requesting or even mandating that their staff not touch children because of fears that allegations of child abuse will be made against the educators. Nurturing touch, however, may enhance learning for some children. All children, and certainly those who are not nurtured at home, may be robbed of this important element.

Educators should not be afraid of "normal" touching, as it is another positive gesture or affirmation that they can give. It is important to realize, however, that what is considered "normal" varies between individuals and is affected by such factors as personal experience and cultural background. Touching is always a concern if it is done in secrecy or isolation from others or for the sexual gratification of the educator. Children need to be informed and empowered about what is appropriate and inappropriate touching.[7] Prevention programs are now designed to inform children about good, bad, and confusing touch. "Good touch" usually refers to hugs, encouraging pats, and other positive gestures. It is important to remember that people may interpret these gestures differently. For example, some people prefer not to be hugged; for them this is not "good touching." "Bad touch" usually refers to hitting, punching, biting, and other acts that hurt. "Confusing touch" refers to contact that may not feel quite right to children. For instance, the child may feel that the touch lasts too long or is different in some way from the way in which other children are touched.

Once children are informed about "good," "bad," or "confusing" touch, respect for children requires that they be given permission to express their feelings about receiving such touches. Children who are trained to recognize how certain touches feel to them and who are encouraged to express their feelings should be allowed to tell the teacher when something does not feel good. Certainly, no child should be made to feel solely responsible for his or her own protection. This training, however, may help children to feel more confident and comfortable talking with adults about potentially inappropriate touch.

One type of touch used in some schools is corporal punishment. Currently, over half of the States have legally prohibited the practices of hitting, paddling, or punishing children with physical force. Practice varies across school systems and jurisdictions. Additionally, research and opinion vary regarding both the effectiveness and impact of corporal punishment. Most studies imply that corporal punishment, on its own, does not teach right from wrong or deter future misbehavior. [8]

There are several considerations regarding physical punishment in schools. When children are "paddled," school personnel may not always consider alternative or other, more creative forms of punishment. The following case example illustrates the potential benefits of seeking inventive, alternative forms of discipline.

Educators also should be aware that any method of discipline, whether it is time-outs, corporal punishment, or exclusion from activities, can have an unintended impact on an abused or neglected child. Some children who have been abused may actually invite such discipline, if it is the only attention they believe they can get or to which they are entitled. The punishment may be ineffective as a way to stop misbehavior in such instances. Therefore, it is important to try to understand what motivates the child's actions to determine appropriate discipline and encourage good behavior.

## Personal Commitments

For many educators, their professional responsibility is supported by a deep personal commitment to the welfare of children. The value of this personal commitment is significant because without it, child abuse and neglect prevention and treatment efforts would be only superficial or ineffective. It is this sense of personal responsibility to and for children that is perhaps the strongest reason for educators to become involved in the prevention and intervention of child abuse and neglect.

The helping professions, including education, often attract those who would like to help improve the lives of others. Some educators were victims of maltreatment in their own families and these abuses may have left residual scars. As educators learn more about child maltreatment, they may find themselves experiencing strong emotions or feelings. The best solution is to try to understand these feelings and not to ignore them. There are numerous books for people who have survived abusive childhoods that may help, while some educators may want to increase their understanding through therapy. Whatever means they choose, educators need to understand their own personal feelings surrounding child maltreatment.

### Case Example

A fourth-grade student was constantly vandalizing school property (e.g., writing on desks, etching words in wooden surfaces, and breaking equipment). For each offense he was sent to the principal's office for a "paddling." When his regular teacher was out for a prolonged illness, the long-term substitute believed that this method was not working and wanted to try a "natural consequences" method. After the next offense (etching obscene words in a wooden table), the boy was required to stay in during recess and after school to sand down and completely refinish the small table. After one or two similar gestures with similar punishments, his vandalism ceased. The punishment was "a lot of work," but he also was getting the individual company of the teacher as they were forced to be together during off hours. The teacher felt that it was this attention that the student craved, and the teacher searched for and found more positive methods for the student to request it.

# CHAPTER 3
# Recognizing Child Abuse and Neglect

Every form of maltreatment (e.g., physical abuse, neglect, sexual abuse, and emotional maltreatment) is inflicted on school-age children. In addition, many children who live in homes where domestic violence occurs are not only in danger of a misdirected blow, but probably suffer emotional consequences from witnessing this disturbing behavior.[9] Knowledgeable educators can pick up indicators of possible maltreatment by observing children's behavior at school, recognizing physical signs, and noticing family dynamics during routine interactions with parents.

Physical signs of maltreatment are those that are readily observable. They may be mild or severe, such as numerous, deep bruises or broken bones, or more subtle, such as malnutrition or the wearing of inappropriate clothing (e.g., a lack of warm clothing in winter).

Behavioral indicators may exist independently or may accompany physical indicators. Children who have witnessed family violence also may demonstrate this through their behavior. There might be subtle clues, such as the educator's intuitive or "gut feeling" that something is wrong. There might be sexual behaviors in young children indicating sexual knowledge not ordinarily possessed by young children. Being victimized by abuse also may result in inappropriate behavior, such as sexual or physical aggression toward younger children.

Educators are in an excellent position to notice behavioral indicators. As trained observers, they are sensitive to the range of behaviors exhibited by children at various developmental stages, and they are quick to notice behaviors that fall outside this range. Teachers also can talk with a child's previous teacher to note any major changes in his or her behavior. Abused and neglected children sometimes get the reputation for being "bad kids" or extremely difficult to control or understand. Research suggests that challenging behavior is often a cry for help that concerned adults need to learn to decode.[10]

In the past, lists of physical and behavioral indicators have been provided as guidelines to help educators recognize maltreatment. The first manual in this series, *A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice,* provides a full range of indicators that may help someone recognize abuse or neglect. Exhibit 3-1 lists several of the key indicators, and Appendix D—Educators' Checklist for Recognizing Possible Child Maltreatment, provides a more extensive listing. Recognition of child maltreatment, however, is not based always upon the detection of one or two clues, but rather on the recognition of a cluster of indicators that make up a composite or pattern. It also is very important to remember that some indicators, both physical and behavioral, may be indications of something other than abuse. This chapter is dedicated to recognizing composites that might be seen specifically by educators and that warrant the consideration of maltreatment as a cause.

## Physical Abuse

Physical abuse of children includes any nonaccidental physical injury caused by the child's caretaker. It may include injuries sustained from burning, beating, kicking, punching, and so on. While the injury is not an accident, neither is it necessarily the intent of the child's caretaker to injure the child. Physical abuse may result from extreme discipline or from punishment that is inappropriate to the child's age or condition, or the parent may experience recurrent lapses in self-control brought on by immaturity, stress, or the use of alcohol or illicit drugs.

Some children are more susceptible to being maltreated than others. Some require a great deal of care (e.g., premature babies or disabled or developmentally delayed children), and others may be difficult to raise (e.g., hyperactive children, children with behavioral problems). These children would fare well in some families, but not in other families where the burden is too great for the parents to cope with the special needs of these children.

Regardless of whether the child has special needs or not, signs of physical abuse often are difficult to interpret with absolute certainty and may be confused with normal childhood injuries, such as bruises.

**Exhibit 3-1**
**Behavioral Clues That May Indicate Child Abuse**

Although there are many other potential indicators, the abused child may:

- Be aggressive, oppositional, or defiant;
- Cower or demonstrate fear of adults;
- Act out, displaying aggressive or disruptive behavior;
- Be destructive to self or others;
- Come to school too early or not want to leave school—indicating a possible fear of going home;
- Show fearlessness or extreme risk taking;
- Be described as "accident prone";
- Cheat, steal, or lie (may be related to too high expectations at home);
- Be a low achiever (to learn, children must convert aggressive energy into learning; children in conflict may not be able to do so);
- Be unable to form good peer relationships;
- Wear clothing that covers the body and that may be inappropriate in warmer months (be aware that this may be a cultural issue as well);
- Show regressive or less mature behavior;
- Dislike or shrink from physical contact—may not tolerate physical praise such as a pat on the back).[11]

Since children typically receive bruises during the course of play or while being active, the leading or bony edges of the body, such as knees, elbows, forearms, or brows, are most likely to be bruised. The soft tissue areas, such as cheeks, buttocks, and thighs, are not normally injured in such circumstances. Additionally, bruises received during the normal course of childhood activity are rarely in distinct shapes, such as a hand, belt buckle, or adult teeth marks. Bruises in soft tissue areas or in distinct shapes are much more indicative of physical abuse.[12]

Unlike bruises, abuse directed to the abdomen or the head, which are two particularly vulnerable spots, often are undetected because many of the injuries are internal. Injuries to the abdomen can cause swelling, tenderness, and vomiting. Injuries to the head may cause swelling in the brain, dizziness, blackouts, retinal detachment, or even death. Referred to more recently as the "shaken baby" syndrome, violent shaking can cause severe damage in children at any age.

Children who are being abused may demonstrate a change in behavior. Many become more aggressive, destructive, fearful, or withdrawn. Often, in an effort to avoid the abuse, they will stay away from home as much as possible. They may see school as a safe environment. Some children are abused because their parents have higher expectations of them than the children are able to achieve or because the expectations are developmentally inappropriate. The case example below illustrates this point.

Sandy's story of parents who expect too much is common. The child's withdrawn behavior was indicative of her poor self-concept and exacerbated by her experiences at home. Cigarettes are tools for abuse due to their ready accessibility, as are objects such as irons, electric cords, and other household items. Substance abuse also may be a factor in child maltreatment cases.

Despite their need for help, many children and adolescents do not initially admit to being abused. Rather they often may invent seemingly plausible explanations, but the explanations tend not to fit the injury. Despite the abuse, children often are understandably fearful of being taken from their families or getting their parents into trouble. Other children also may just assume that this behavior is normal.

Sometimes, it is assumed that physical abuse does not occur typically with adolescents or that, since they often are more difficult or provocative, they "invite" abuse. After all, adolescents are stronger, have more resources, and can run away. In fact, neither resistance nor flight is a good option for most adolescents. Resistance might further ignite their parents' anger, and unless they want to deal with the harsh realities of life on the street, flight is not an option for most adolescents. In addition, since adolescents often are perceived as more capable, adults are less likely to intervene or alert them to the resources available that can address personal or family issues.[13]

**Case Example**

Sandy was 10 years old when her teacher became concerned about possible abuse. She was extremely shy and withdrawn and often took a great deal of time to grasp ideas, despite the fact that testing showed no significant organic or perceptual difficulties. Her mother, a professional artist who had chosen to stay home with her four children, and her father, an accountant, found Sandy's slowness especially distressing.

As the homework required of Sandy increased, she became more withdrawn. The teacher suggested she ask for help at home, especially with her math. At first Sandy began coming to school with peculiar marks on her hands and arms. On another day she arrived with a burn mark covering a good part of her hand. It had not been treated and had become infected. In asking Sandy about her injuries, the teacher learned that Sandy was being abused by her father. After several drinks, he would "help her" with her homework, become angered by her slowness, and prod her with his lit cigarette. The latest burn was a result of Sandy's hand being pressed on an iron when her father had taken over her mother's efforts to teach Sandy how to "iron properly."

## Case Example

Dara, a ninth-grade student, began complaining to her gym teacher after a particularly intense argument with her parents. Despite her complaints, Dara insisted that her bruised face was the result of "bumping into a door." The teacher suspected otherwise because of the location of the bruise and Dara's frightened demeanor, but chose not to act. It was not until Dara began vomiting several months later and was doubled over in pain that the situation came to anyone's attention. It was discovered that Dara had internal injuries from a severe blow to the abdomen. The girl finally admitted to the teacher about months of physical abuse she received from her father.

Abuse situations similar to Dara's happen to adolescents for various reasons. In Dara's home, adolescence, with its emerging sexuality, created problems. Her father sought to control her with force, perhaps fearful that she would become pregnant before marriage, as her sister had done. The fear of losing a child can sometimes paradoxically drive parents to abuse. In other homes, physical punishment already present may increase and escalate into abuse as the child matures.

In all of the case examples, school personnel became aware of physical or behavioral symptoms and family patterns that, in a composite, pointed to either abuse or the exposure to abuse (such as observing, hearing, or intervening in domestic violence or dealing with the subsequent fears and behaviors, which some States define as child maltreatment).

It also is important for those working with children to be sensitive to comments about severe physical fights between the parents that might indicate the presence of domestic violence. A child who speaks of caretakers who sleep a great deal during normally wakeful hours may be living with substance abusers or individuals suffering from clinical depression. Extremely erratic behavior described by the child on the part of the parent might suggest other types of mental illness. Educators must learn to listen "between the lines" as children make comments about their homes. Sometimes this will give vital clues about the conflict with which they are dealing.

While symptoms do not necessarily indicate abuse, any suspected child abuse legally must be reported to child protective services (CPS) to be assessed or investigated. Directly communicating with CPS or using the school's protocol, in combination with the educator's common sense and concern for the students, will help identify what information will be needed to file a report. See Appendix F—Sample Report of Suspected Child Abuse and Neglect, for an example of a school reporting protocol.

## Neglect

Because neglect often leaves no visible scars, it is more likely to go undetected. Neglect is the most common type of maltreatment that children experience and has consequences that are just as serious as physical abuse.[14] It accounts for over one-half of reported child maltreatment cases and is the leading cause of fatalities due to child maltreatment.[15] Living in poverty, in and of itself, does not mean that a child is being neglected. Neglect involves the caregiver's inattention to the basic needs of a child, such as food, clothing, shelter, medical care, and supervision. While physical abuse tends to be episodic, neglect tends to be chronic. Neglectful families often appear to be multiproblem families, although families with numerous problems are not always neglectful. Because neglect often is chronic rather than episodic, these children may grow up believing that this is a normal way life and will not seek assistance or confide this information to anyone.

Neglect follows a continuum from mild to severe. The more severe the neglect, the more negative the impact on the children. Neglect often is very difficult to define. Parents might be accused of failing to provide a safe environment by not protecting them from unsanitary or hazardous living conditions. It also can be the result of extenuating circumstances, such as leaving young children alone when the babysitter fails to show up or when not going to work may result in losing a job that is the only means of income. In such a case, while the child is definitely being neglected, CPS would work with the family to provide other child care arrangements.

In a study of 87 educators in New York, researchers found that educators were less likely to report neglect than any other type of child maltreatment.[16] When educators are considering the possibility of neglect, it is important to look for consistencies. They should ask themselves the following questions:

- Does the child consistently demonstrate unattended material needs?
- Is the child stealing or hoarding food consistently or only occasionally?
- Would looking at the family in the context of the community or the culture provide any answers?
- Is this culturally acceptable child-rearing, a different lifestyle, or true neglect as defined by law?
- Does the child describe parental behavior that might indicate the presence of substance abuse?
- Does the child miss a lot of school?
- Is the child having difficulty staying awake in school?
- Is the child inappropriately dressed for the weather?
- Does the child exhibit poor hygiene consistently?

Neglect usually permeates a family, with all children subject to similar treatment, as the case example above illustrates. It also shows how neglect can have an intergenerational cycle. It often is difficult for parents to break this cycle if they have not witnessed appropriate caretaking skills and behaviors or if they have not received services that provide relevant treatment, instruction, or education. This lack of experience and knowledge of appropriate parenting skills sometimes leads to other difficulties. For instance, it is not uncommon to see a parent-child role reversal where children appear to be taking on

**Case Example**

The seven Reese children demonstrated poor hygiene and generally listless behavior. Although bright, the four, school-age children had difficulty in school, a fact seemingly more attributable to problems in organizing their thinking and perhaps a lack of stimulation at home, than to an absence of innate ability. Simon, a fifth-grade student, had been called to the attention of teachers numerous times in his school career for stealing food from other children and the cafeteria. Several times the children had been sent home with lice. The school nurse routinely attended to their neglected medical needs. Frequently Jena, a first-grade student, would report being left home with her younger siblings while her older brothers were away from home.

Mrs. Reese was a 26-year-old single mother. Jena's father had recently left the home. Although she loved her children, she seemed to have little energy to care for them. She fluctuated between working, collecting unemployment, and being on welfare. Mrs. Reese's own family had been involved with CPS for severe neglect.

**Case Example**

Oscar lived with his alcoholic parents and spent most of his free time caring for his four younger siblings. At 15, Oscar was out of school more than he attended it. Repeated calls to the parents did not seem to remedy the problem. Oscar began sleeping at friends' houses. Often, when the school called to find out why Oscar was not there, his mother had not seen him for several days. She seemed angrier that her 10-year-old child was complaining about taking care of the younger children than whether Oscar appeared to be missing. Finally, the boy disappeared and only rumors from some of the other students in his school gave any indication about his whereabouts.

parental roles and responsibilities. This can be a heavy burden and these adolescents often "drift" out of the home rather than formally leave, as the case below shows.

## Emotional Maltreatment

Emotional maltreatment includes blaming, belittling, or rejecting a child; constantly treating siblings unequally; and a persistent lack of concern by the caretaker for the child's welfare. While emotional maltreatment most often is observed through behavior, it is possible for children to internalize it so sufficiently as to cause developmental lags, psychosomatic symptoms, and other visible effects, such as speech disorders.

For Max and other children like him, the world has taken on a sinister quality. These children may seem overly compliant and undemanding or aggressive and overdemanding. Educators involved with such children may need to tailor or modify their interactions with and responses to these behaviors.

While the behavior of emotionally maltreated children may be similar to those who are emotionally disturbed, parental behavior can help to distinguish the two. The parents of an emotionally disturbed child generally accept the existence of a problem. They are usually concerned about the child's welfare and seek help. The parents of an emotionally maltreated child, however, may blame the child for the problem, may ignore the problem's existence, may refuse all offers of help, or may be unconcerned about the child's welfare.

**Case Example**

At age 11, Max spent much of his free time rocking back and forth. He did not seem to be aware of this behavior. He also had been observed sucking his thumb. When Max was 6 his father died, and his mother had remarried when he was 7. Soon after, Max developed a tendency to stutter when he felt a great deal of stress. His stepfather was a career military man who described Max as a "real wimp who has to be whipped into shape." The "whipping" was not physical, but rather an emotional battering that seriously damaged the child's already shaky self-concept. Now Max described amorphous fears that plagued him both day and night. He became obsessed with "aliens who were coming to destroy the world." His drawings depicted menacing creatures bent on destruction.

## Sexual Abuse

Sexual abuse is defined as inappropriate adolescent or adult sexual behavior with a child. It includes fondling a child's genitals, making the child fondle the adult's genitals, intercourse, incest, rape, sodomy, exhibitionism, sexual exploitation, or exposure to pornography. Sexual abuse also may be committed by a person under the age of 18 when that person is either significantly older than the victim or when the perpetrator is in a position of power or control over the child.

Sexual abuse may take place within the family (referred to as incest), by a parent's boyfriend or girlfriend, or at the hands of adult caretakers outside the family, for example, a family friend or babysitter. Contrary to the myth of abuse by strangers, these adults are usually known to the child and have a relationship with him or her.

The impact of sexual abuse on the child depends upon many factors. The identity of the perpetrator, the amount of force or betrayal involved, the duration of the abuse, and the child's age and individual personality can affect the way in which the child responds to the abuse. When children know the perpetrator and are not significantly physically harmed, the feelings of betrayal when they recognize that they have experienced abuse may be more disturbing than the abuse itself. Boys are as vulnerable to sexual abuse as girls, though they are not as likely to report the abuse.[17] One problem in detecting sexual abuse is that the warning signals to its existence also may be indicative of other disturbances.

Freddy's fears, nightmares, bedwetting, and obsessive cleanliness are typical reactions of sexually abused children. Some victims withdraw while others express their conflicts with aggression. Educators should be aware of other indicators of possible sexual abuse, such as children drawing unusual pictures involving children with no mouths or hands or explicit drawings of genitalia or sexual acts. Many are so consumed with the efforts to deal with their conflicts over the abuse that they lack the energy to keep up their studies. Like Freddy, sexually abused children keep the secret not only because the perpetrator may have threatened them, their families, or their pets, but also because they feel they are to blame for their involvement and fear that no one will believe them if they report the abuse. The abuse also may create fear in boys about their sexuality or masculinity.

When sexually abused children begin to tell of their abuse by sexually acting out, the clues may seem clearer to some adults. Children who are being or have been sexually abused will sometimes abuse their peers or younger children. This seems to be their way of trying to make sense of the abuse they have received. They have learned sexual stimulation and, therefore, may stimulate themselves or peers. Learning that they often receive attention through

### Case Example

Freddy began complaining of headaches and loss of appetite. His parents reported that he had frequent nightmares and bedwetting and was suddenly obsessed with keeping clean. He seemed alienated from his friends and withdrew into himself. His schoolwork appeared to suffer.

His concerned but busy parents began to explore the cause of his changed behavior. A friend of Freddy told his parents that a male staff member at an after-school program that both he and Freddy attended had molested him. The story revealed that Freddy also was abused. Freddy continued to deny this until the staff member admitted his involvement with both boys and described the threats he used to attempt to silence them. Freddy was afraid to reveal the abuse due to the threats made toward him.

sexualized behavior, they may approach adults seductively assuming that this is what all adults want from them.

It may be more difficult to detect the symptoms of sexual abuse in adolescents because of their increased knowledge about sexuality. Yet, teens that exhibit intense promiscuity and self-injurious behavior (e.g., eating disorders or self-mutilation) may be revealing conflicts they feel they cannot handle.

In some cases these internal conflicts are so severe that a victim of sexual abuse contemplates or attempts suicide. If an adolescent or teen confides personal thoughts or behaviors to an educator that suggests such a possibility, the following questions that focus on the strongest risk factors have demonstrated usefulness in screening high school students for risk of suicide:

- Have you been feeling unhappy or sad?
- Have you thought about suicide?
- If yes, do you have a plan? If yes, what is it?

If an individual has suicidal thoughts and a plan for how to kill him- or herself, the more developed and lethal the plan, the greater the risk of suicide.[18] The educator should be judicious in making such inquiries and questions should always be developmentally appropriate. Upon learning an adolescent or teen is suicidal, the educator must immediately identify and contact a professional trained to work in this area.

It is important to realize that most sexual abuse victims do not demonstrate suicidal tendencies. Many other indicators and behaviors are more commonly exhibited. See the case example below.

For Beverly, caught up in a web of secrecy and sexual abuse, the idea of starving herself seemed preferable to telling her mother what was happening. It is important to remember that while anorexia is usually a cry for help, it is not always indicative of physical or sexual abuse.

**Case Example**

Beverly was a ninth-grade student who suddenly began to grow extremely thin. Her teachers observed that she never ate lunch, and when they mentioned it to her, she passed it off by saying there was never anything she liked. When she fainted in biology lab one day, the biology teacher called in the guidance counselor and asked him to see Beverly. Beverly, however, denied that there was a problem. When the guidance counselor suggested that he talk with her mother, however, Beverly became hysterical. Several months later when Beverly was hospitalized with an eating disorder, a friend, who was petrified that Beverly would die, came to the guidance counselor with the information that Beverly was being sexually abused by her uncle.

Another more recent phenomenon is the growing sexual abuse of children via the Internet. Children of all ages now have access to computers in schools and libraries. While no one is disputing the use of computers as valuable tools for learning, there is a growing problem of children's exposure (accidentally or intentionally) to pornography as well as solicitations online from sexual offenders. Researchers found in a study that 49 percent of youths being solicited and 44 percent of those unintentionally exposed to pornography did not report the incidents.[19]

The following are some clues that a child may be involved with a sexual predator or is accessing sexually graphic material. Be aware if a child:

- Prevents others from viewing the computer screen;
- Has disks that he or she will not allow others to see;
- Uses files that end with .gif and .jpg; these may be files that are quite innocent or could contain pornography;
- Takes significant time away from schoolwork to use the computer;
- Begins to exhibit furtive or secret behavior when using the Internet.

Concerns related to this should be reported to CPS, who will then refer them to the appropriate agency. The National Center for Missing and Exploited Children, in conjunction with the Federal Bureau of Investigation, the U.S. Postal Service, and the U.S. Customs Service, also has a Cyber-tipline (**http://www.missingkids.com**) and toll-free telephone number (1-800-843-5678) where anyone can file a report regarding online pornography.[20]

## Nonfamilial Sexual Assault

Typically in the child welfare field, the term "sexual abuse" refers to situations where a child is abused by a parent or another family member (e.g., an uncle, a stepparent) responsible for his or her care and well-being. Although the terms are not mutually exclusive, "sexual assault" typically implies a forced or coerced sexual act by someone from outside the family. Sexual assault is a broad term that encompasses several, more specific legal charges that can be levied depending on the circumstances of a case, including rape, statutory rape, sexual battery, forcible sodomy, and exhibitionism. The charges appropriate for a given case and the scope and meaning of these legal terms varies from State to State and or sometimes even within a State. For instance, statutory rape typically is considered a consensual act between an older person or adult and a minor, with the pertinent ages and age disparity ranging by jurisdiction.[21]

There are several legal categories of sexual assault perpetrators, including:

- **The known adult.** This abuser targets children outside the home and often does so within the context of a trusted relationship. All too frequently, there are cases of coaches, neighbors, youth group leaders, religious leaders, and others who exploit their contact with a child or with several children as an opportunity to sexually assault them.
- **The peer.** The sexual assault of a teen or adolescent by a date or another peer is believed to be significantly under-reported to law enforcement, in part because the victims often feel some level of responsibility for the abuse. Although the pressure to engage in sexual activity while dating is not new, acquaintance rape goes beyond repeated sexual requests or "guilt trips" in an effort to gain sexual compliance.[22]

## Nonfamilial Sexual Assault (continued)

- **The stranger.** Whether from inside or outside of the family, most victims know the individual who perpetrates sexual violence against them. There are cases, however, of sexual assault being perpetrated by a stranger. These situations are so shocking or frightening that they often gain a higher level of notoriety or press coverage, which may make them seem more common than they really are.[23]

Commonly in each of these situations, there is a power differential (e.g., age, physical size, or position in society) between the abuser and the victim that is a dynamic in the assault. The range of the child's possible subsequent behavior, which educators may note in school, is likely to be consistent with that of a child who was abused by a family member, making it difficult or impossible for the educator to ascertain the perpetrator's identity. Sometimes a student may not exhibit any physical or behavioral clue regarding a sexual assault, but may choose to confide in an educator because he or she is ashamed or afraid to reveal it to his or her parents or to law enforcement and is unsure of where else to turn. While educators are mandated reporters for cases of suspected physical or sexual abuse, they often are not specifically required to report sexual offenses perpetrated by individuals outside of the victim's family. Educators should be familiar with reporting requirements and guidelines in their school system.

Regardless of whether the perpetrator is a member of the victim's family, the majority of sexual violence cases occur when the victim is a child or adolescent. One national survey of women and girls who had been raped found that 29 percent of the cases occurred when the victim was less than 11 years old. Another 32 percent of the cases occurred when the victim was between the ages of 11 and 17.[24]

There are numerous valuable resources to learn more about this issue, including the National Child Welfare Resource Center on Legal and Judicial Issues housed at the American Bar Association. For more information, visit their Web site at **http://www.abanet.org/child/rclji/home.html**.

## General Indicators of Abuse and Neglect

There are some indicators that serve as general signs that a child may be experiencing abuse or neglect rather than signaling the presence of one particular type of maltreatment. These general indicators include academic as well as emotional or psychological clues. It is important to remember that these also can be signs of other problems such as substance abuse, a reaction to divorce, or the witnessing of domestic violence, so it is crucial to follow each school's protocol in reporting suspected abuse.

### Academic Clues

Academic performance may be a clue to the presence of child abuse and neglect. This is particularly true when there are sudden or extreme changes in performance. Previously good students who suddenly seem disinterested in school or who are no longer prepared for class may be maltreated. Students who suddenly refuse to change for gym class may be concealing evidence of beatings. There can be numerous clues suggesting neglect. Some of these factors may affect academic performance, such as children whose broken glasses have not been replaced.

Studies have revealed a relationship between child maltreatment and certain learning problems. For example, Cornell University's Family Life

Development Center matched maltreated children with 530 children who had not suffered abuse or neglect and evaluated the school performance of each child based upon grades, grade repetition, achievement test scores, and other school adjustment issues (e.g., truancies, suspensions, and infractions of disciplinary codes). Results indicated that maltreatment has a significant negative influence on children's performance in school. The maltreated children scored lower in test scores, especially in reading, and earned fewer A's and B's and more F's than children who were not mistreated.[25] In addition, children who have been maltreated show discipline problems at school, poor achievement, increased absences and dropout rates, and greater likelihood of repeating grades.[26]

A similar study in Georgia using a smaller population (21 physically abused children, 47 neglected children) and a nonmatched control group compared test scores, grades, and teacher and parent interviews to examine the academic, social, and adaptive behavior of school-age children. Significant differences between the maltreated children and those in the control groups were found. Abused and neglected children were more likely to demonstrate disturbed behaviors (e.g., aggression, hyperactivity, anxiety, depression). Maltreated children had lower self-concepts and felt unpopular in school. In addition, maltreated children scored significantly lower in language, math, and reading scores in the Iowa and Georgia Criterion Reference Test. Teachers felt these children were learning at below-average levels and were more likely to repeat a grade.[27]

Research also indicates that a child who is physically disabled or developmentally delayed is at a statistically greater risk of child abuse and neglect. In some instances, the disabled child may be viewed as a disappointment, a burden, or proof of the parents' "failure." Educators should be sensitive to the particular stresses that having a disabled child can produce in some families. Children whose physical needs and problems are ignored also may experience learning difficulties. Children who are always hungry, who cannot see the blackboard because they need glasses, or who cannot hear the teacher because they need hearing aids, cannot learn well, and this inability to learn will be reflected in academic achievement.

Academic difficulties may have a variety of causes, and the presence of an academic problem does not prove that child abuse or neglect exists. The possibility of child abuse or neglect, however, must be considered along with other possible causes when the problem is assessed.

### Emotional and Psychological Clues

Educators typically are sensitive to children who are "different" (e.g., physically or mentally challenged). That sensitivity should be extended to abused and neglected children, who also may appear to be different.

Educators should be alert to children who are hostile and angry, those that effectively alienate all who come in contact with them, or children who may be passive, withdrawn, and uncommunicative. These represent extreme ranges in the expected behaviors and attitudes of abused and neglected children. Additionally, sudden changes in a child's emotional or psychological well-being may serve as clues to child abuse and neglect. The previously gregarious child who becomes uncommunicative and withdrawn might be concealing maltreatment.

### Familial Clues

The educator often has several opportunities to observe family dynamics. Normal interactions with the parents may indicate how they feel about the child. There may be an increased risk of child abuse and neglect if the parents consistently:

- Blame or belittle the child;
- See the child as very different from his or her siblings (in a negative way);
- See the child as "bad," "evil," or a "monster";
- Find nothing good or attractive in the child;

- Seem unconcerned about the child;
- Fail to keep appointments or refuse to discuss problems the child may be having in school;
- Behave in a bizarre or an irrational manner.

There are instances when the educator knows a child's family is in marital crisis, experiencing economic or emotional turmoil, or has other significant stressors. Such information may be relevant and helpful to CPS when maltreatment is suspected and a report made. See Appendix D—Educators' Checklist for Recognizing Possible Child Maltreatment for other possible symptoms of abuse and neglect.

## Conversations with Families and Children

In all States, educators are mandated reporters for child maltreatment cases. It is important to understand that, legally speaking, educators only need reasonable suspicion rather than hard evidence or proof to report alleged child abuse. It may be tempting to call the parents and see what they have to say, but such action can pose several serious problems, such as increasing the risk of further abuse to the child or interfering with the initial CPS investigation. Many schools have protocols detailing how suspected maltreatment is to be reported to CPS. These protocols delineate what information the educator will need to provide when reporting, or whether teachers, administrators, and other school personnel should refer all suspicions to the school's social worker or Child Protection Team who will then make the report to CPS.

### Talking with the Child

It is the educator's role to report any suspicions of child maltreatment. There are times when CPS may request more information in order to meet statutory guidelines for accepting a report. In these instances or when a child discloses maltreatment to an educator, it is important to remember:

- CPS or law enforcement has the responsibility to assess and investigate.
- It is critical that the educator not lead the child.
- The child may be afraid to tell the whole truth because of:
  - Fear of being further hurt by the abuser if he or she tells;
  - A belief that the abuser may go to jail;
  - Fear that the child may be removed from the home;
  - Feelings of loyalty and attachment to the parent, no matter how bad the situation might be.
- The child may feel that the abuse or neglect is normal.

Unfortunately, it can be very easy to fall into the role of confidant to an abused child who has begged that no one be told. The case example below describes such a situation.

**Case Example**

When Frank approached his school coach he said only that he had a problem. He asked that he be able to talk to the coach in strictest confidence. The coach must promise to tell no one. The coach agreed and Frank disclosed that he was being sexually abused by his older brother. Unsure of what to do, the coach confided in the school principal, a good friend. The principal insisted that the case be reported immediately and told the coach he must tell Frank. Unfortunately, the report was made before the coach was able to locate Frank. In consequence, Frank became extremely angry and hurt, feeling that now he could trust no one. He vehemently denied that he had ever reported the abuse and retreated into a protective shell of mistrust. Since there was no proof, the case was not pursued.

**Exhibit 3-2**
**When Talking with the Child**

If CPS needs more information before accepting a report and requests that the educator talk with the child or if the child self-discloses, it is important to remember:

- The educator should not appear shocked as a strong reaction may affect the child's comfort level.
- If self-disclosing, praise the child for revealing what has happened to him or her. It is not up to the educator to determine if the child is telling the truth.
- When talking with a child concerning a possible inflicted injury or condition of neglect, the educator should refrain from asking leading questions.
- Let the child tell his or her story without probing for information that the child is unwilling to give.
- The child should be made as comfortable as possible under the circumstances.
- The child should be put at ease, and the educator should sit near the child, not behind a desk or table.
- The educator who talks with the child should be the designated person to handle such matters (e.g., the school social worker).
- Children often feel or are told that they are to blame for their own maltreatment and for bringing "trouble" to the family; therefore, it is important to reassure children that they are not at fault.
- If maltreatment is suspected, the educator must always remember that he or she is a mandated reporter, and this should be explained to the child in an age-appropriate way.
- The child may be afraid that either he or she will be taken from the home or the parent may be arrested. If such a fear is expressed, the educator should acknowledge not knowing what will occur.
- Children may be fearful of others learning about their maltreatment issues. The educator should assure the child that the information would not be shared with classmates or others who have no need to know. It is vital, however, that the educator also acknowledge that in order to provide help to the child, it may be necessary to discuss these issues with other school personnel, law enforcement, or CPS. It is important that the educator abides by the promise to protect the child's right to confidentiality.[28]

While the school had a legal mandate to make a report to CPS, this case illustrates the importance of educators not making promises they cannot keep and understanding school protocols for reporting. Had the coach been aware of these responsibilities, he could have informed Frank at the time and, hopefully, helped the student through the process. It also is important to realize how difficult it is for most children to discuss abuse, because of emotional elements or a limited ability to express themselves. When talking with the child, use language that a child will understand. When describing an incident of abuse, if the child uses a term with which the educator is not familiar (e.g., a word for a part of the body), the educator should ask for clarification or have the child point to the body part. The educator

should not disparage the child's choice of language or supply terms; rather, the educator should use the child's terms to put the child at ease and to avoid confusion. Educators can actually do more harm by probing for answers or supplying children with terms or information. Several major child sexual abuse cases have been dismissed in court because it was felt that the initial interviewers had biased the children. Additionally, it is important for the educator to not display feelings of anger, disgust, or disapproval toward the parents or the child for any action disclosed.

If the child wishes to show his or her injuries to the educator, he or she should be allowed to do so. The educator should never insist on seeing the child's injuries. At no time should the child be asked or forced to remove clothing. It may be important to have the school nurse present should a child decide to remove his or her clothes.

If further action is to be taken, the child should be told what will happen and when. The educator should assure the child of support and assistance throughout the process and should follow through on the assurances. It is important that the onus or responsibility not be placed on the child, nor should the child be asked to conceal from the parents that the conversation has taken place or that further action is contemplated.

The educator should be especially sensitive to the safety of the child following the disclosure. Ask the child if he or she feels safe returning home and observe how this question is answered. While CPS must be involved in any situation of suspected maltreatment, it is particularly important to involve CPS or law enforcement immediately in situations where the child's imminent safety is a concern. If a CPS caseworker needs to interview the child at school, the school should provide a private place for the interview. In addition, ensure that the interview location does not alert peers and other classmates to the presence of a CPS caseworker. The child's right to confidentiality must be respected.

If it is necessary for the CPS caseworker to remove the child from school for a medical examination, the school may request a written release from the caseworker, or this may be an established element of a memorandum of understanding (MOU) between the school and CPS. This varies by locale and it is important to know the practice and requirements of a particular school.

### Talking with the Parents

Some educators may feel that it is important to contact parents to inform them that the school has made a report of suspected child abuse and neglect, because they feel that contact will help maintain the parents' relationship with the school and keep the door open for further communication. It is very rarely appropriate, however, for educators to communicate directly with parents regarding alleged child maltreatment. CPS caseworkers and law enforcement are trained and primarily responsible for contacting and discussing these concerns with parents. The following issues may arise if educators seek to talk with parents before reporting:

- The danger to the child may increase, particularly if the child disclosed the maltreatment.
- The parent may try to have the child recant upon learning that the child has told someone about the abuse.
- The parent may flee or withdraw the child from school.
- The risk for suicide increases for both the victim and the perpetrator immediately after a report is made in sexual abuse cases, especially in cases of incest. It is crucial that such cases be handled swiftly by experts.

There may be instances when a parent contacts a school regarding a report made to CPS. Many school systems have one point of contact to handle CPS reports, such as the school social worker, nurse, or

principal. The educator should listen to parents and refer them to that point of contact. In talking with the parents, the educator should respond in a professional, direct, and honest manner without displaying anger, shock, or an insinuation of guilt. It is critical to remember that the educator should not reveal any information pertinent to the report made to CPS or law enforcement. Parents also should be informed about the limitations to confidentiality of the present discussion. Further threats or revelations of abuse typically require the educator to reveal what was discussed to a third party (e.g., CPS).

Occasionally, an angry parent will come to school demanding to know why someone is "telling me how to raise my children." The parent may feel betrayed or that someone has "gone behind their back" because the school did not communicate with him or her directly. Even though CPS caseworkers are legally mandated not to reveal the name of the referral source, the parent often suspects the source of the report. If an angry parent appears at school, the educator should attempt to diffuse the situation by remaining calm and maintaining a professional demeanor. The educator should be mindful of his or her own safety, as well as the safety of others, if the parent is threatening or violent. School protocol should delineate who needs to be contacted in such situations. An angry parent usually will calm down to a reasonable degree if he or she feels listened to and is treated with respect.

## Child Abuse within the School

It is extremely disturbing for most educators to consider that a fellow colleague might be abusing children. In the event that this does occur, however, children need special protection. A common response when a fellow educator is suspected of abuse, especially if that person is popular or a long-time employee, is to deny or ignore it. Sometimes the abuser is transferred to another school. Even with a suspension or reprimand, the violation is likely to recur in the absence of intervention and monitoring.

If a child reports that he or she is being sexually, physically, or even emotionally abused by school personnel, the educator should remember that it takes courage for an abused child to talk to someone. The educator must consider facts and consistencies. Older children may invent stories, but they usually contain obvious inconsistencies. The educator should follow school policy and procedures, which usually involve contacting CPS. CPS personnel then interview the child or refer the allegations to law enforcement (depending on the State's laws) to determine if the child knows anyone else to whom this has happened. If so, the CPS investigator should talk with any other victims. Protocols usually require immediate notification of the school administrator. The situation should not be discussed among other school staff. The accused has a reputation and the right to know of the accusation, but it is the investigator (who may be a CPS caseworker or law enforcement) who should talk with the accused colleague. Not doing so often leads to a witch-hunt atmosphere and is not beneficial to students or faculty. It also is inappropriate to ask the children to tell their stories initially in front of the accused. There is a significant difference in power and resources between teachers and students.

It is important to remember that schools are mandated reporters whether the abuser is an outsider or a school employee. Under State child abuse and neglect reporting statutes, educators have the same liabilities for failing to report suspected incidents perpetrated by colleagues as for incidents resulting from interfamilial abuse or neglect. If allegations are made and there is suspicion of abuse, CPS or law enforcement must become involved.

# CHAPTER 4
# Reporting Child Abuse and Neglect

In addition to trying to help families in which maltreatment is suspected, the involvement of educators in reporting child abuse and neglect is guided by Federal standards and regulations and mandated by State and local laws, which identify what is required of the educator and how that obligation is to be fulfilled. Schools are frequently concerned with creating protocols to enable them to address maltreatment issues more efficiently. Established protocols help address concerns over quality control, fear of lawsuits, and the protection of staff in reporting cases, as well as ensure that there are effective steps for helping children.[29]

## Federal Legislation

The Keeping Children and Families Safe Act of 2003 (P.L. 108-36) included the reauthorization of the Child Abuse Prevention and Treatment Act (CAPTA) in its Title I, Sec. 111. CAPTA provides minimum standards for defining child physical abuse and neglect and sexual abuse that States must incorporate into their statutory definitions in order to receive Federal funds. Under this Act, child maltreatment is defined as:

- Any recent act or failure to act on the part of a parent or caretaker that results in death, serious physical or emotional harm, sexual abuse, or exploitation;
- An act or failure to act that presents an imminent risk of serious harm.

A "child" under this definition generally means a person who is under the age of 18 or who is not an emancipated minor. In cases of child sexual abuse, a "child" is one who has not attained the age of 18 or the age specified by the child protection law of the State in which the child resides, whichever is younger. While CAPTA provides specific definitions for sexual abuse and for special cases related to withholding or failing to provide medically indicated treatment, it does not provide such definitions for other types of maltreatment—physical abuse, neglect, or psychological maltreatment. Each State has statutes providing that information.

Also at the Federal level, the Federal Family Educational Rights and Privacy Act (FERPA) of 1974 (P.L. 93-380), provides standards and regulations that are relevant to educators for reporting child abuse and neglect. While amended numerous times since it was first authorized, FERPA still governs the release of information from school records.

In a small number of cases, it may be necessary to consult school records to determine if a report of suspected child abuse and neglect should be made. Usually, parental consent is required before releasing information contained in school records. However, there are exceptions that can apply in

cases of suspected child abuse and neglect. At the time of publication, a proposed amendment to FERPA would extend these same provisions to home-schooled children.

## State Law

All States, the District of Columbia, and U.S. territories have reporting statutes for child abuse and neglect. These statutes outline who must report, to whom the abuse or neglect must be reported, and the form and content of the report. Given the diversity of statutes, educators should be familiar with or obtain a copy of the law in their State.

### Who Reports

Most States specifically require educators to report suspected child maltreatment unless educators are grouped under the category of "anyone." Some States specifically define what is meant by an "educator" (e.g., teachers, principals, administrators, school nurses, school social workers, and guidance counselors) in any school, whether public or private, day or residential. Those professionals mandated to report vary from State to State. Educators should check their State reporting statute to determine who has been designated as a mandated reporter. They also should be familiar with their school system's policy and procedures regarding child abuse and neglect reporting. Additionally, it should be noted that when schools have a Child Protection Team, an educator's report to the team may or may not free him or her from further obligation, and a child protective services (CPS) caseworker may still contact him or her. The Child Protection Team representative would make the actual report to CPS. This regulation also should be researched within the educator's own State.

### What to Report

States specify what can be defined as child maltreatment in their particular jurisdiction, often specifically defining nonaccidental physical abuse and neglect, sexual abuse, and emotional (or psychological) maltreatment. Many of the definitions for sexual abuse include the production of child pornography or compelling children to view sexually explicit materials or acts. Some States require that domestic violence within a child's family be reported to CPS, as it may adversely affect the child. Every school should have or know how to access the definitions for abuse and neglect in their jurisdiction.

While States require the reporting of suspected abuse, no State requires that the reporter have conclusive proof that the abuse or neglect occurred before reporting. The law clearly specifies that reports must be made when the educator "suspects" or "has reasonable cause to believe" that there is abuse. In any case, the intent is clear—incidents are to be reported as soon as they are noticed. Waiting for conclusive proof may involve further risk to the child.

### When to Report

Again, State statutes differ as to when a report must be made. While early reporting is vital, educators may find it useful to keep notes on behaviors, bruises, or other potentially relevant information regarding the child. These informal, personally kept notes may be invaluable not only in filing a report, but in providing information to CPS. Notes should be taken even after the report is made in order to provide updates for CPS investigators. It is important to realize, however, that personal notes also can be subpoenaed if the case goes to court.

State and local statutes, as well as school system policies, vary regarding whether oral or written reports are necessary. Some require only an oral report, while others ask the reporter to follow up with a written report within a specific period of time. Secured Internet reporting to CPS also is allowed in some States. Some States and school districts identify special reporting requirements.

## Where to Report

Every school should have identified, current, and accessible contact information for the appropriate agency for reporting suspected child maltreatment. State law specifies the agency that will receive reports of suspected child abuse and neglect. Usually this agency is a State's department of social services, human resources, family and children's services, CPS, or department of children and youth services. Other agencies mandated to receive reports may include law enforcement, the health department, the county or district attorney's office, and the juvenile or district court.

The local department of social services or other receiving agency may maintain a special child abuse and neglect unit, usually CPS. If there is no special unit, the local department itself will have CPS responsibility. The CPS unit receives and investigates all reports of suspected child maltreatment (that meet the State's statutory definitions) and may be involved in treatment and rehabilitation of affected families, by either performing such services or referring families to other agencies.

It is important to understand who receives reports of suspected child abuse and neglect in a particular jurisdiction. Requirements of confidentiality should be observed so that reports are made only to authorized persons. The State reporting statute will provide this information. An attorney should be consulted if questions arise.

## How to Report

Educators should follow local school system policies and procedures for reporting suspected abuse. These build upon State statutes, which vary regarding the form and content of reports of suspected maltreatment. All States require that an oral or written report (or both) be made to the agency or agencies responsible for child abuse and neglect. When two reports are required, the oral report is usually required immediately, with the written report often following within 24 to 48 hours.

Some State statutes will specify the type of information to submit in a report of suspected child maltreatment. Usually this includes:

- Child's name, age, gender, and address;
- Parent's name and address;
- Nature and extent of the injury or condition observed;
- Prior injuries and when observed;
- Actions taken by the reporter (e.g., talking with the child);
- Where the act occurred;
- Reporter's name, location, and contact information (sometimes not required, but extremely valuable to CPS staff).

In some States, additional information is required. This may include any previous injury observed by the reporter to the child or to a sibling; any information that would aid in establishing the cause of the injury; information that would aid in identifying the person responsible for the injury; if a previous report has been made to CPS; and other information about the child and family that will help CPS in their assessment of the risk of maltreatment to the child.

### State Statutes

To review a summary of reporting laws for each State, visit the State statutes section of the National Clearinghouse on Child Abuse and Neglect's Web site at **http://nccanch.acf.hhs.gov/general/legal/statutes.**

To assist citizens making oral reports of suspected child abuse and neglect, some States maintain a toll-free, 24-hour telephone hotline just for receiving reports of suspected maltreatment. (See Appendix C—State Toll-free Telephone Numbers for Reporting Child Abuse.) Anyone may use hotlines to report an incident of suspected child abuse and neglect anywhere in their State.

To facilitate written reports, most States and some local school districts provide a reporting form. Schools should keep a supply of these forms for more efficient reporting. An educator would not be excused for failing to report a suspected case of maltreatment because a reporting form was unavailable. The reporter may submit a report using any form, so long as the required information is provided.

## Local Policies and Procedures Regarding Reporting

Since the early 1980s, school systems and local boards of education across the country have enacted school policies and procedures on child abuse and neglect. The policies and procedures support State reporting laws and often provide internal mechanisms to follow when a case is reported.

### Developing Local Policies and Procedures

Enacting local policies is a good first step for a school system beginning a child abuse and neglect prevention program. As an example of one effort, several years ago the Children's Trust Fund of Massachusetts offered to review reporting protocols for any Massachusetts school that wished to improve them. The Children's Trust Fund published a guide, *Designing and Implementing a School Reporting Protocol: A How-to Manual for Massachusetts Educators*, to help schools develop effective protocols and consider the development of a Child Protection Team.[30] A protocol clearly delineates duties and responsibilities for all staff. Equally important, it provides administrative backup for educators who do most of the reporting.

Educators are encouraged to learn whether their school system has a board policy or an administrative procedure for reporting suspected cases of child abuse and neglect. If no such policy or procedure exists, one should be developed.

There are several important questions to consider when designing a school protocol, such as:

1. Does the protocol reference the State law that requires educators who have "reasonable cause to believe" that a child is being abused or neglected to report such suspicion to the local CPS?

2. Who within the school does the educator notify if they have suspicions? Who does the classroom teacher notify? A nurse? The principal? A school social worker?

3. What specific information does the reporter need to know in order to report?

4. What other school personnel should be involved?

5. Who makes the report to CPS? How? Who is responsible for monitoring or receiving feedback from CPS once the report is filed?

6. What information should be included in the report? (This is dictated by State law and CPS policy.)

7. Does the protocol indicate that all reports must be kept confidential and in a separate file from the students' regular school file?

8. What follow-up is expected on reported cases?

9. Does the protocol state that all school staff will receive notification of the protocol?

10. What role will the school play in possible community or Child Protection Teams?

11. What commitment does the school have to inservice training or community programs?[31]

Policies should be reviewed periodically with school staff (possibly during inservice training) so that everyone is reminded of the local school protocol, system procedures and policies, and State statutes.

**Making the Report**

Once an educator suspects that a child is being maltreated, he or she must waste no time in reporting. Making such a report sometimes feels risky and confusing to educators. The following checklist can be used to prepare information for a report:

1. Does the educator know the procedure outlined in the reporting policy of the school? Does he or she have the necessary information required for a report? Does the school have the necessary report forms?

2. Has the information been documented? Has it been written down to help organize it in the educator's mind?

3. Has the information been analyzed? The educator should consider what causes him or her to suspect abuse or neglect in this particular case. The educator should list the symptoms—physical and behavioral.

4. Has the reporter witnessed any parent-child interaction that may suggest possible abuse, such as belittling or threatening comments? Does the parent see the child as worthwhile, different from "normal" children, or hard to handle?

5. Has the educator spoken with other professionals within the school? Do they have reason to suspect abuse or neglect? Why?

6. Does the educator (or school) have the exact and current contact information of the agency where the reports should be made?

If the educator cannot answer all these questions affirmatively, he or she still needs to report immediately. However, organizing one's thoughts will help in simplifying the process. Additionally, there are some other questions the reporter may want to ask himself or herself in preparation for this process:

1. Has the educator talked with his or her administrator about the support available once the report is made? Has the educator considered what will happen if the parents try to remove the child from the class?

2. Has the educator set up a support system for him- or herself with other educators, professionals, or friends?[32]

Teamwork within a school cannot be overemphasized. For example, a classroom teacher concerned about bruises on a student might consult the school nurse. If a staff member notices unexplained behavior, a referral to the school social worker or psychologist might be in order. While it is important to respect a child's right to confidentiality, such a referral may be made in a confidential manner. The effectiveness of teamwork is another reason why many schools are adopting the Child Protection Team approach. Child protection team members play a variety of roles within the school, and they may shed light on the child's situation from a perspective that was not known or obvious to the reporter.

## Difficulties That May Be Encountered When Reporting

A report of child maltreatment is not an accusation; rather, it is a request to determine if abuse or neglect has taken place and, if so, to begin the helping process. The reporting process, however, does not always proceed smoothly. Difficulties may be encountered that serve as barriers to reporting and discourage the educator from making future reports.

### Personal Feelings

One of the biggest obstacles to reporting may be the feelings of the potential reporter. Some individuals would prefer not to get involved. As one educator put it:

"Although I realize that a child abuse report is not an accusation, I really hated to be the one to do it. What if the parents become angry with me? What if they pull their child out of my classroom? What if they see me as a troublemaker? I also wonder if I would be in any personal danger. Some of the abuse seems awfully violent. Will the parents come after me?"

These are typical concerns of educators and should be addressed. Parents who are subjects of a child abuse report typically feel angry. Anger is a natural response when threatened. If the parents angrily confront the reporter, however, a sensitive presentation with the desire to help may actually turn the parents into allies. These parents certainly have the right to pull their child out of a particular classroom, but only a small percentage actually do so, especially when the school makes clear its intention to help rather than punish.

When cultural values conflict with the laws of the State, this is problematic, but the laws remain the same. Where culturally based behaviors could be seen as abusive, it is usually the practice of CPS to try to educate the parents about the laws and to work with them. Some educators question their right to intervene in such instances. One educator described a family who had recently come to this country.

"In their country hitting the children severely is accepted practice," she said. "What right do I have to tell them to change their cultural values?"

One of the most difficult situations for educators is discovering that abuse or neglect is being perpetrated by someone they know well. It may be extremely difficult for an educator to face the fact that the child of a colleague or a neighbor is being maltreated, or that a respected member of the community is sexually abusing a child. This is a natural feeling, but it must be overcome. Even if an educator knows the abusive family well, making a report is still necessary. All children are protected by law and, no matter what the circumstances, the educator remains a mandated reporter.

While the report may help protect the child, the process of reporting suspected child maltreatment is often a stressful experience. Confidentiality issues limit those with whom the educator can discuss the situation. Many educators may benefit from identifying support mechanisms and coping strategies while going through the process. Some schools have Child Protection Teams that aid the process of reporting and provide support to the reporter. Other schools may have developed their own support strategies.

### Problems Internal to the School

On occasion, school personnel indicate that school administrators create obstacles to reporting. They may fail to make an official report of suspected maltreatment once a situation has been brought to their attention or make it difficult for other school personnel to report. This may be done for the same

For additional information regarding cultural issues as they relate to child maltreatment, see the following publications in the *User Manual Series—A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice* and *Child Protective Services: A Guide for Caseworkers.*

reasons discussed above or because the administrator does not want to "make waves." Such actions may be more than obstructive; they may be illegal.

Administrators who refuse to report or who make it difficult to report cause several problems for other adults on their staff. Not only does the educator feel unsupported and even undermined, but educators whose administrators do not report may be held liable for the unreported maltreatment. Thus, the educator is put in a position of being vulnerable to legal sanction or having to bypass the administrator. In some instances, central administrative staff may provide no backup to educators, thus undercutting the reporter who has acted in the best interests of the child and complied with the law. Suddenly reporters find their motives questioned. Superintendents or principals who fail to provide inservice training to staff to inform them of their legal obligations also may be an obstacle to reporting. Educators who do not know the signs and implications of child maltreatment or who are unaware of their legal responsibilities will be at a disadvantage and possibly, unwittingly, a disservice to children in need of assistance.

While some States allow anonymous reporting, the educator would not be protected, as there would be no proof that he or she had ever reported. It is difficult for the educator to know what to do or how to react to an unresponsive or obstructive administrator. The best answer is that it depends on the individual circumstances and available options. For instance, educators in certain locales may be able to develop a relationship with a CPS caseworker or with mental health, law enforcement, or other child welfare professionals who can help facilitate making a report. In other situations, there may be other school personnel, such as the school social worker or someone else in the school's administration, who may be willing to seek alternative avenues for reporting the situation.

### Previous Experiences Reporting

Educators who have had a negative or difficult experience when reporting suspected maltreatment might be reluctant to become involved again. Such educators may feel that a previous case was not handled appropriately or to their satisfaction. These concerns are real and sometimes valid, but a previous bad experience does not mean that the next case will not be handled well. CPS agencies throughout the country are continually working to upgrade their services. In many communities, they are becoming steadily more responsive and highly skilled. After experiencing an unsatisfactory response with the CPS agency, however, the reporter should not hesitate to request that an agency supervisor intervene in the handling of the case. Exemptions are not granted to mandated reporters who have previously had a negative experience. In addition, while reporting does not guarantee that the situation will improve, not reporting virtually guarantees that the child will continue to be at risk if the abuse or neglect exists.

### Belief That Nothing Will Be Done

Sometimes potential reporters believe that nothing will be done if they report, so they choose not to. Such reasoning often is faulty. If an incident of suspected child maltreatment is reported, some action will occur. At the very least, a record of the report will be made, the educator's legal obligation will be fulfilled, and the investigative process will begin. If the incident is not reported, however, it is likely that nothing will be done. Maltreated children cannot be protected unless they are first identified, and the key to identification is reporting. While not all calls result in an investigation, educators may not know what information was previously or subsequently reported about the child or the family. The cumulative effect of all the reports may allow CPS to substantiate a case and to provide help and intervention.

Some educators find it frustrating that CPS will not let them know whether the case is being investigated. Confidentiality laws and policies often make follow-

up impossible. Educators may offer to keep in touch with CPS during the treatment phase, however, to help the children as much as possible. Some State laws will allow release of information from CPS to other professionals when the individual is a member of a multidisciplinary team.

## Once the Report Is Made

When a report of child maltreatment is filed, CPS makes several decisions. First, they must decide if the report meets the statutory criteria for child abuse or neglect. Then, they must investigate to ascertain if the abuse or neglect can be substantiated. CPS determines if the child is safe at home and, if not, what are the least intrusive interventions to assure the child's protection. Finally, CPS determines if there is a risk that the maltreatment will occur in the future. If the risk for future maltreatment exists, then CPS must offer or provide services to reduce the risk of abuse or neglect.

In some States, the court may become involved, particularly if the child is removed from the home. If a court is involved, usually a juvenile or family court is responsible for family well-being rather than a criminal court. However, increasingly in the case of sexual abuse, death, or extreme physical abuse, complaints are filed in criminal court.

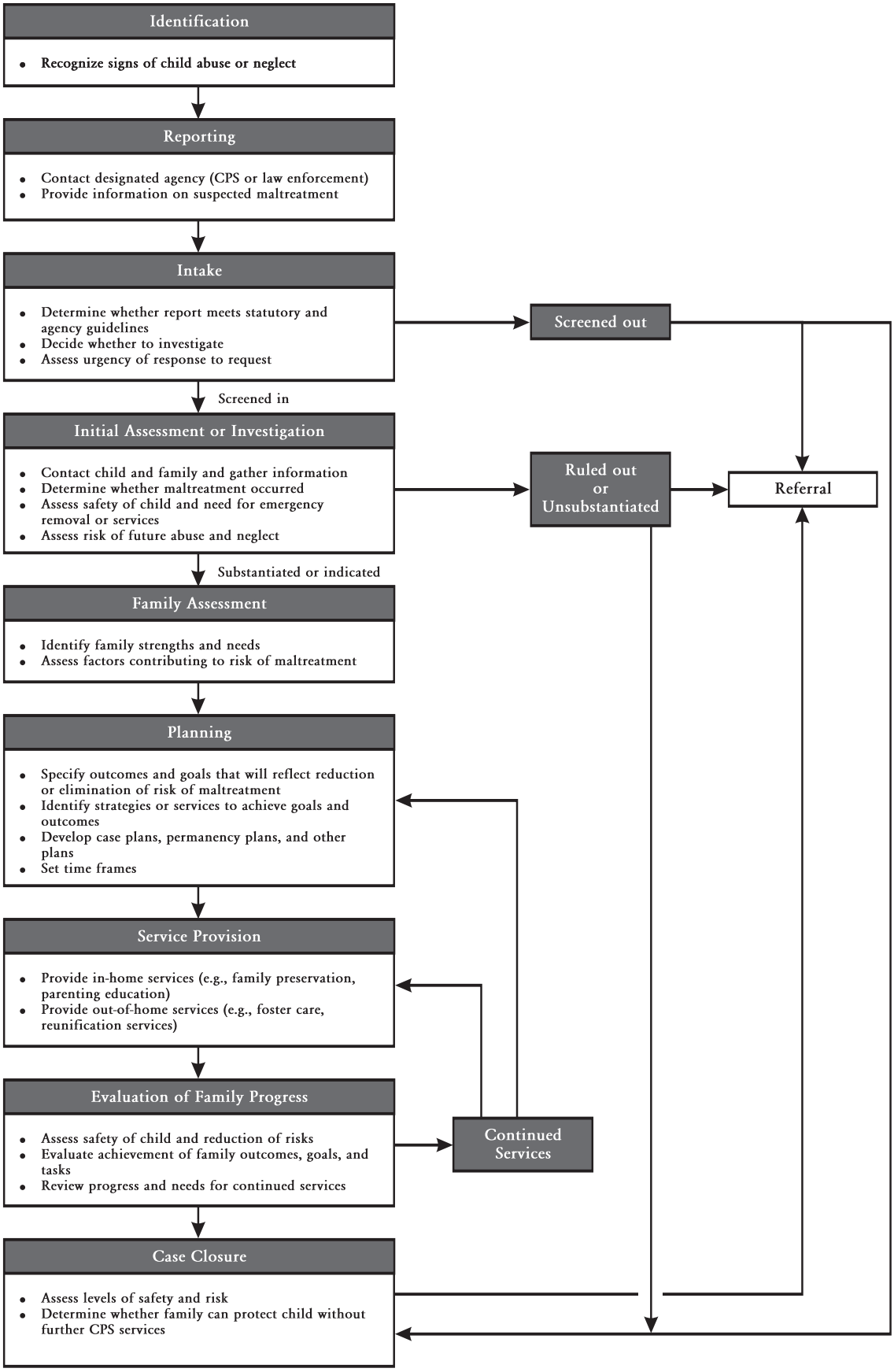
In some instances, educators may be asked to appear in court as witnesses. It is important for them to remember that witnesses are not on trial. Usually, school staff will be called to help the child or present a more complete picture of the family situation. Exhibit 4-1 provides a list of guidelines for educators should they be required to appear in court.

Once the educator has followed the school system's protocol and the situation has been referred to CPS, in general, the process for each case is similar. Exhibit 4-2 provides an overview of the CPS process.

**Exhibit 4-1**
**Tips for Educators Going to Court**

- Check with the CPS caseworker or attorney to see if there will be a briefing before the court appearance.
- Write down dates, facts, and other information vital to testimony. Usually, it is permitted to take a paper or note card to the stand.
- Dress appropriately.
- Go slowly and think through each question.
- Speak slowly, concisely, and loudly enough to be heard so the recorder can record your testimony.
- Speak only when spoken to, and remember that the court is only interested in facts, not opinions, unless asked otherwise.
- If you do not know the answer, say so; do not guess.
- Try not to be flustered by the cross-examination.
- Remember that you are not on trial.
- Do not be afraid to call the CPS caseworker after the hearing to learn of the outcome.[33]

## Exhibit 4-2
## Overview of Child Protective Services Process



# CHAPTER 5
# Providing Support After the Report: What Schools Can Offer

Reporting suspected cases of maltreatment is just the beginning of the child protection process. Treatment, rehabilitation, strengthening the family, and preventing future abuse still lie ahead. Traditionally, the roles of the school and the educator in dealing with child maltreatment have ended with reporting, but this is changing. Increasingly, educators are providing assistance and support to child protective services (CPS) staff by sharing relevant information about families and children after they have been reported; providing services to the child, parents, and the family; and participating on multidisciplinary teams. Schools also are actively involved in community efforts to reduce the incidence of child maltreatment.

## Sharing Relevant Information

Although CPS is responsible for case management and follow up after the report has been made, CPS caseworkers will frequently find it necessary to consult with school personnel when assessing the family and planning treatment. School personnel often have information (either in records or through personal knowledge) concerning the child's or family's strengths and weaknesses. This information is invaluable to CPS staff as they seek to make an accurate assessment and formulate realistic treatment goals and objectives for the family.

In providing this information, schools must be conscious of the rights of children and parents. Schools can be an excellent resource for aiding CPS, but great care must be taken to ensure the confidentiality of information and to share it only with those persons and in circumstances designated by law.

## Support for the Child, the Parents, and the Family

Educators are in a unique position to provide valuable support to maltreated children and their families. The expertise needed to assess special needs and design programs to fit those needs already exists within the schools. Highly trained educators, already in the schools and skilled in working with children and parents, can be of great help to maltreated children and their families.

### General Considerations for Helping in Cases of Maltreatment

The lives of maltreated children, even after the report of abuse or neglect, may be filled with stress. Schools, however, can provide a constant, stable environment. Sensitivity to a child's need for consistency is vital. Something as basic as having their own desks for which they are responsible can be very beneficial. Classroom teachers, school social workers, and school counselors should be mindful of a child's need for consistency and try to find ways to meet that need.

Court involvement is another issue in the lives of maltreated children. Courts often present a scary image for the child. Typically, the child who knows his or her case is going to court may feel agitated, anxious, and insecure. The child may exhibit behavior while at school, such as acting out or being withdrawn, that attests to these fears. If the educator is aware of the court involvement, special care and consideration for what the child is experiencing is appropriate. Demystifying the court system and process can be an educational experience and benefit all children. Schools may want to take students to visit a courtroom or meet with an interested judge or lawyer to help facilitate this.

Some maltreated children are placed in foster homes if CPS feels that they will be unsafe at home. Separation from parents, no matter how abusive or neglectful, can have a profoundly traumatic impact on a child. CPS often will attempt to place children in the same school system to provide some consistency. When a child has been placed in foster care, the school will be contacted by CPS. The person responsible for enrolling the child differs from agency to agency and depends on State and local statutes regarding confidentiality, so the foster parent might not have this opportunity to meet with school staff. Since some foster families may be overwhelmed with caring for an upset or depressed child, they may find little time to make contact with the school early in placement.

In addition to working with the foster parents, educators need to be sensitive to the needs of those children in substitute care. Often, they are still working through feelings of separation and loss. No matter what the parents may have done, the child still wonders about being sent away, often leading to feelings of guilt, anger, helplessness, or depression. The best way for educators to deal with a child in this situation is to contact his or her caseworker and, if appropriate, ask for more information about the child's background to understand his or her needs better. There may be several things the educator can do to support these children. For example, children may need to understand that people do not perceive them differently because of being involved in substitute care, and that their possessions at school are still their own.

## School Activities and Programs Supporting the Maltreated Child

The regular school program, if properly structured, can offer opportunities to support the maltreated child. Negative self-concepts common among these children can be offset by positive school experiences and a sense of achievement and accomplishment. The feeling of isolation that maltreated children frequently experience can be counteracted by providing increased contact with classmates and the chance to make new friends. Warm and sympathetic teachers can allow children to see adults in a positive, supportive, and caring role. Creative classroom experiences can further enhance the healing process. Additionally, educators should be mindful of instances when classmates may have heard about the abuse or subsequent actions. These classmates also may ask questions or need support and reassurance. Realize that addressing their concerns or comments can present some difficulties due to issues of confidentiality.

Schools can and frequently do serve as a focal point for special services to children and families. The expertise needed to assess and design programs to address these special needs already exists within the schools.

Schools have found that structuring learning projects for maximum cooperation, reducing reliance on competitive activities, peer mediation and conflict resolution, and an emphasis on effective problem solving helps reduce threatening behavior and benefits abused and neglected children.[34] By interjecting specific types of information into classroom activities that are designed to help all children, teachers also may help abused and neglected children. For example, two issues that often create problems for victims of abuse and neglect are recognizing and expressing feelings and making decisions. Many teachers have successfully designed and used activities

to recognize feelings. A popular tool for younger students is a "feelings barometer" that encourages children to move an indicator to different facial expressions to show how they are feeling and to discuss why. Many teachers also make creative problem solving an integral part of the curriculum. In this way, all children learn how to make more effective decisions, and maltreated children may feel particularly empowered by enhancing this skill.

Sometimes additional measures are needed since children with physical, cognitive, and emotional disabilities appear to experience higher rates of maltreatment than do other children.[35] A national study, completed in 1993, found that children with disabilities were 1.7 times more likely to be maltreated than children without disabilities.[36] Schools already provide a number of special services to children who require them. These services, each backed by qualified professionals who administer them, may include:

- Diagnosis and assessment of a variety of issues or conditions, including academic, learning, behavior, health, and social adjustment problems;
- Development of individualized educational plans;
- Support services including counseling; speech, hearing, and language therapy; behavioral management; special education; and health care.

Many schools have formed professional review teams to develop individual educational plans for physically and mentally challenged children, in accordance with Education for All Handicapped Children Act/IDEA (P.L. 94-142). Team members are skilled in diagnosing and assessing special problems and tailoring individual programs to address those problems. Teams routinely work with parents and other educators; call upon support services, as indicated; and annually review each child's individual plan.

**Ways to Address the Needs of Maltreated Children in the Classroom**

| Issue | Approach |
|---|---|
| Inability to express feelings. | Use feelings as a barometer. Begin class or morning with discussion of how students feel. |
| Difficulty making decisions. | Teach the use of a formula for solving problems and provide sample problems so the students can try it. |
| Lack of cooperation with others. | Structure learning projects to maximize use of cooperative activities and solutions. Reduce competitive activities. |
| Heightened interpersonal conflict. | Teach conflict resolution and peer mediation skills. |

## Case Example

When the school made a report about Harvey's apparent neglect to CPS, it began a chain of events that were exceedingly helpful to Harvey and his family. Harvey was born with a condition that necessitated him having a catheter that had to be drained during school hours. The school was not informed of this, nor did they realize that 7-year-old Harvey was trying to do this hygienic duty himself, often with difficulty. Because of this and of poor hygiene in general, the odor coming from Harvey's desk was overwhelming. He also seemed quite slow and withdrawn and the teacher wondered if there was some developmental delay. Since he was a new student in his first-grade class, not much was known about him. Calls to the home went unanswered. A letter requesting that the mother call was unheeded. The school social worker, who made a visit to the home, found two younger children who appeared to be alone. Believing that this was a clear case of neglect, she immediately filed a report. When CPS investigated, they discovered that Harvey's single mother was newly immigrated to the United States. She spoke very little English and could not read or write. She had secured a job as a restroom attendant, leaving her other children unattended when she went to work. She had little idea of how to care for Harvey's disability.

In the end, the school was of significant help to Harvey and his family. CPS was able to get Harvey's younger siblings into the daycare program located in the local high school. Harvey was referred for testing by the school psychologist who discovered that he was quite bright. His withdrawn manner had been due to his embarrassment about feeling different. The school social worker met with Harvey's mom to help her understand what her children were learning and to support her in getting them to school and daycare. The mother met with one of the teachers for tutoring in English, since the town did not have an English as a Second Language program. A visiting nurse helped to educate both Harvey and his mother about how to care for Harvey's medical condition. In addition, Harvey was referred to a local pediatrician for care, and through this referral, he received services to correct his problem.

### School Programs for Parents

Schools typically offer both direct and indirect support to families of maltreated children. None of these services is new, and schools have provided them for years. It is merely their application for abused and neglected children that may be new.

Educators that serve children with disabilities are already working with parents to develop individual educational plans. These skills can be transferred to planning programs for maltreated children that focus on their needs and involve their parents. When a problem is identified, parents can be brought in to help deal with it. Concrete, targeted suggestions can be made and cooperative agreements can be worked out between school and the parents. The plan is more likely to be successful if the presentation is positive, outlines what the school is prepared to do to help the parents, and includes recommendations for the parents.

When families with maltreated children experience financial difficulties, schools may be able to provide free or reduced-price breakfasts, lunches, field trips, and extracurricular activities. For children who need them, the school may be able to arrange for glasses, hearing aids, or prosthetic devices. Many schools also maintain an emergency supply of clothing and shoes so that children without them can receive them quickly and quietly. Helping the family address financial difficulties can lessen the level of stress and frustration, which helps lower the risk of maltreatment.

In many school districts, school social workers, guidance counselors, or school nurses make home visits to assess family needs and to arrange for needed support services. Others arrange for daycare, after-school care, or special programs such as home tutoring for chronically ill children.

Parents involved in child abuse and neglect are frequently lonely, isolated, and experiencing periods of great personal or family stress. Many schools already provide programs and services that can directly benefit these parents, such as:

- Education programs that emphasize the unique skills required of parents and help them understand that these skills are learned, not instinctive.

- Early childhood education programs that delineate the process of child development, outline typical capabilities relative to the developmental stage, and suggest ways to enhance the child's development.

- Counseling programs that range from job skill training to substance abuse counseling.

- Adult education programs that include high school completion and equivalency programs, occupational training, leisure time activities, and recreational programs.

Such programs offer direct help to parents, but they also provide parents of maltreated children with opportunities to socialize, to enhance self-confidence, and to pursue new interests. These benefits are important in breaking the pattern of isolation common among abusive and neglectful parents.

Perhaps the most forgotten victims are the parents whose child was sexually abused by someone within the community. These parents are expected to support and advocate for their abused child. Often, little recognition is given to the fact that these parents may be having problems too. Parents often feel guilty over being unable to protect their children. Educators can be instrumental in recognizing that these parents have these kinds of feelings and may need support so they may help their own children. Sensitive educators might acknowledge this in their dealings with such parents. A distressed parent also might welcome a referral for professional support.

Schools can offer indirect support to families by providing education and assistance to the community at large and by making their extensive facilities available for support groups and crisis nurseries. All that is needed is acceptance of the school's critical role in child abuse and neglect and a willingness to be involved in its elimination. (See *A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice* for philosophical tenets regarding maltreating parents.)

## Child Abuse and Neglect Multidisciplinary Teams

Multidisciplinary teams are a concept that refers to teams inside and outside the school. Within the school, Child Protection Teams or crisis teams are good examples of this approach. These teams are composed of various professionals within the school and are dedicated to reviewing and responding to child abuse reports or a variety of school-based crises, such as substance abuse, death, and other emergencies. By bringing together professionals from different perspectives, children can be served more effectively because team members have specific roles and expertise.

There are also community multidisciplinary teams. A community approach to child maltreatment makes optimal use of the special skills and knowledge of various professionals so that family and community needs are met. Many communities are turning to multidisciplinary, child maltreatment-case consultation teams as a means of ensuring integrated investigation, planning, and service delivery. These community teams usually include representatives from health or mental health, CPS and social services, law enforcement, and education agencies. Members

bring with them a wide range of backgrounds and a diversity of diagnostic, assessment, and treatment skills. They meet together regularly to assess cases of child maltreatment and to recommend treatment programs. Team members are able to commit services from the agencies they represent and can call upon a broad range of services, resources, skills, and programs to help families.

Child maltreatment-case consultation teams also frequently serve as a forum for resolving the issues and conflicts that inevitably arise whenever difficult social problems must be addressed by multiple public and private agencies. As they work together, team members come to know, understand, and appreciate each other's functions. Within the team framework, problems can be addressed quickly when they arise. If a particular recommendation has not been proven effective, another can be considered. As team members, educators can make additional contributions to the team. They can lend their expertise in the areas of child development, developmental disabilities, and the educational needs of children.

## Community Coordination

To foster coordination, some communities are establishing child protection coordinating committees or task forces, which provide an organizational structure so community agencies and resources involved in meeting the needs of maltreated children and their families can work together. This community effort can define roles and responsibilities, increase communication, identify gaps in services, and avoid duplication of services, which enhances the efficient use of existing services and resources. Typically, CPS has the primary responsibility for organizing the committee. Educators are one of the many groups called upon to work together along with multiple agencies and professional disciplines to maximize the services available to the community. If there is no child protection coordinating committee in a community, educators may be able to help institute one. Participation in such a body also should be addressed in a school's policy.

There are a variety of community-based programs designed to meet the needs of families and children at risk. For example, New York City Public Schools, in collaboration with the Children's Aid Society, the New York City Board of Education, and community members, designed and implemented a project initially intended to curb criminal activity among youth. The program arranged for the schools to be open for extended hours and to serve nutritional breakfasts to students, as well as to help students with homework and medical services.[37] The program ended up also supporting at-risk families, however, and the local child protection agency felt its clients' needs were successfully served by the program.[38]

For more information on school-based support services and programs, obtain a copy of *School-based Child Maltreatment Programs: Synthesis of Lessons Learned* available at: **http://nccanch.acf.hhs.gov/pubs/focus/schoolbased.cfm.**

# CHAPTER 6
# Preventing Child Abuse and Neglect

Recognizing and reporting child maltreatment are important to prevent abuse and neglect from continuing or recurring. Schools also must be involved in working to prevent maltreatment from ever occurring at all. Schools are in a unique position to address this problem by virtue of the staff's training and expertise, the school's position in the community, and the availability of physical facilities. A school's involvement in prevention can be divided into school-based programs, school-community programs, and individual action on the part of educators.

## School-based programs for Children and Adolescents

Some prevention efforts are provided through specifically designed programs, other efforts are integrated into existing school curricula. Some of the more common areas that prevention activities address or strengthen are:

- Life skills training;
- Socialization skills;
- Problem-solving and coping skills;
- Preparation for parenthood;
- Self-protection training.

### Life Skills Training

Adults require specific skills to navigate today's complex society successfully, but many daily living skills are never taught to them as they are growing up. Parents or other involved adults may teach these skills directly or by example; if they do not, young adults usually learn them by trial and error. Therefore, schools are increasingly integrating lessons teaching these skills into the curriculum. Learning skills that ease the transition into adulthood can prevent frustrated or overwhelmed future parents from becoming abusive to their children.

It is important to promote tangible and intangible life skills that are tailored to students' developmental needs. Tangible life skills are those needed for daily living, self-maintenance, and obtaining and sustaining employment, such as:

- Food preparation
- Personal hygiene
- Obtaining appropriate medical care
- Educational planning
- Money management and budgeting
- Time management
- Finding housing

Intangible life skills are those needed for developing and maintaining positive personal and professional relationships, such as:

- Conflict management skills
- Peer mediation skills
- Communication skills
- Problem-solving skills
- Parenting skills

Instruction in these tangible and intangible life skills is intended to have a positive impact on a youth's self-sufficiency and self-esteem, in addition to the practical advantages he or she will incur in adulthood.[39] Although only few of these programs have been fully evaluated related to child abuse prevention, many are working towards that goal in order to demonstrate their effectiveness. There are, however, studies demonstrating the effectiveness of life skills training related to other concerns, such as substance abuse prevention. One of the Substance Abuse and Mental Health Services Administration's (SAMHSA) rigorously researched and reviewed "model programs" is LifeSkills Training. Compared to children not receiving the training, participants cut their alcohol, tobacco, and marijuana use by 50 to 75 percent and decreased multiple drug use by up to 66 percent. These effects were observed up to 6 years post-intervention.[40]

Another study, funded by the U. S. Department of Education, focused on reducing the level of chronic disruptive and aggressive behavior in middle school populations by teaching conflict management and peer mediation skills. Such acting out behaviors are frequently observed in youth who have been abused or are members of high-risk families. This 3-year study found that disciplinary problems in the school decreased somewhat and that the skills taught were found to be generalized to the home environment and minor conflict situations.[41]

**Socialization Skills**

Socialization—learning appropriate ways to interact with peers—is learned by children as they participate in activities during the school day. Less emphasis on competition and more attention paid to cooperative learning, in addition to teaching conflict resolution and problem solving, will enable children to better relate to peers.

Research suggests that it is important for children to learn these four basic skills to become adequately socialized, productive adults. Children need to:

1. Learn how to get their needs met appropriately. Often maltreated children are not able to express their needs and ask for help.
2. Learn how to express feelings, which enables children to separate these feelings from actions. For example, children must learn that it is acceptable to feel anger toward someone, but it is not appropriate to hit another person.
3. Learn to take responsibility for their actions.
4. Learn how to make decisions and solve problems.[42]

Some educators use other techniques to strengthen socialization skills. For example, a tool used with increased frequency is the journal. Children and teens are asked to write in journals as a way of composing their thoughts, expressing feelings, and gaining self-awareness.

## Bullying

A lack of socialization skills in children can be manifest in a variety of ways. Some may act withdrawn or introverted, while others are aggressive. Sometimes aggressive, threatening behavior becomes entrenched, creating a threat to siblings, neighborhood children, and classmates. Bullying can be defined as repeated or systematic harassment and attacks on others. It can be perpetrated by individuals or groups. Bullying can take many forms, including:

- Physical attacks and violence
- Verbal taunts, name calling, teasing, and put-downs
- Threats and intimidation
- Extortion of money or possessions.

A power imbalance is a key to the dynamic. Students who bully are nearly always stronger, bigger, more aggressive, and bolder than those students who are victimized. Bullying behavior may be an indicator of difficulties in the home. Abuse, exposure to domestic violence, as well as other high-conflict dynamics can play a role in the acceptance of inappropriate power dictating the actions of others. Supervision of children has been found to be of significant importance. Just as low levels of supervision in the home may be associated with the development of bullying behavior, so too can low levels of supervision at schools be problematic, particularly on the playground or in the hallways. Other measures schools can take to reduce bullying behavior include:

- Specific and identified rules against bullying;
- Consistent and immediate consequences for the perpetrator;
- Peer and conflict mediation;
- Awareness and involvement on the part of parents and concerned adults in anti-bullying efforts;
- Reduced emphasis on competitive activities;
- A safe space in the school for victims of bullying.[43]

### Problem-solving and Coping Skills

In a stress-filled society, basic lessons on how to solve problems are essential. The four steps of problem solving are:

1. Define the problem;

2. Generate alternative solutions;

3. Choose the best solution, make a plan, and execute it;

4. Evaluate the outcome.[44]

Children also must learn how to cope with a crisis. Many sexual abuse prevention programs include segments on who the children should call in a crisis situation, such as a possible case of abuse. Officers from local agencies (e.g., police and fire department) often are helpful in educating children on how to respond to an emergency. By knowing their resources, children take control of their lives and are less likely to feel vulnerable. Building a positive self-image is vital for children to become healthy adults. Additionally, there are numerous publications and videos that educators may find useful in activities and exercises that help children develop positive self-concepts.

### Preparation for Parenthood

To help stop the intergenerational cycle of violence or prevent new cycles of child abuse, many schools have curricula on learning how to parent adequately. To do so, children must be armed with knowledge in three areas: reproductive processes, child development, and parenting skills.

Not all schools teach how to prevent sexual abuse or sexual reproduction. When children are presented with age-appropriate material, however, they are better equipped to enter into healthy sexual relationships as adults, a fact that can strengthen healthy marriages and enhance effective parenting.[46]

### Class Activity to Help Build Problem-solving Skills

Here is an easy and fun activity to enhance problem-solving abilities and it is appropriate for students in grades 6 through 12.

- Pass out 4” x 6” index cards and describe a literary or historical event with which the students are not likely to be familiar.
- Present information about a decision that had to be made by a character or person involved in the event.
- Ask the students, working alone or in small groups, to make a decision and to identify key points of their reasoning for that decision.
- Take up the index cards and discuss some or all of the solutions that the students developed, including strengths, weaknesses, and possible ramifications of each solution.
- After the discussion, reveal to the students the real situation and the real decision that was made. Discuss how the outcome would have been different if the students had solved the problem.

For example, using Romeo and Juliet, present to the students: *There are two teenagers who are desperately in love with each other, but they cannot date because their families have been rivals and disliked each other for generations. What should the teens do?*[45]

Basic concepts of child development also should be taught to children. Some cases of maltreatment have been associated with the parents' lack of knowledge about their children's developmental needs. Thus, students who are trained to understand what children do at specific ages may be better able to cope as parents. As parents, they are far less likely to become angry with a 2-year-old who says "NO!" to every command or suggestion when they understand that every 2-year-old does this. Courses on child development can provide information for teens who wish to try their skills with children through babysitting. Some schools actually provide a babysitting certificate for both boys and girls who learn appropriate skills.

Parenting skills are a necessary complement for understanding child development. Numerous lessons and exercises exist that teach what is expected of new parents, as well as the social, financial, physical, and psychological implications of sexual activity and potential parenthood. One frequently used exercise is the "egg baby" in which students pair up and assume responsibility for the complete care of an egg. The egg, representing their baby, must be cared for, protected, nurtured, kept warm and safe, and not left alone. At the completion of the exercise, participants discuss their frustrations and satisfactions with the experience. The exercise is intended to help the students recognize and understand the energy and responsibility required in caring for something or someone totally dependent on them. The youth hopefully learn the gravity and consequences of parenthood so they better understand the serious implications of sexual behavior. Schools develop and establish various programs and activities to achieve the same realizations. For instance, some schools have programs that promote abstinence as the surest way to prevent pregnancy and sexually transmitted diseases. Additionally, abstinence ensures the avoidance of other consequences associated with premature sexual activity, such as the increased likelihood of emotional difficulties, substance abuse, or dropping out of school.[47]

It is important that parenting skills training be a component of any high school program for boys and girls. Traditionally, such courses have been aimed primarily at high school girls. Limiting these courses to half of the population means that the other half of future parents receive no training or education for possibly the biggest challenge they will face as adults.

## Self-protection

Numerous self-protection programs are available now to help children defend themselves, especially against sexual abuse. The components of such programs usually include: educating children about what sexual abuse is (i.e., distinguishing among "good," "bad," and "confusing" touches); making children aware of potential abusers; and teaching children what to do when they are abused or feel that they are vulnerable to abuse.[48] Some programs bring in experts to educate the children, while others train teachers to conduct the training seminar or to integrate the information into their curriculum. It is essential that teachers train in the course content and become comfortable with their involvement in this type of training. Opinions on such programs vary, however, with some maintaining that they make the child feel responsible for their own protection and cause them to feel guilty if they are molested.

### Program Effectiveness

The effectiveness of child abuse prevention programs has been researched in several studies. Researchers concluded that not only did children grasp the basic concepts, but they also communicated more openly about abuse, both in the classroom and with their parents.[49] One study evaluated 542 school-based prevention programs at the elementary school level and found that children did benefit from these programs, but those who benefited the most had already been acquainted with some of the concepts by their parents.[50] Finally, a meta-analysis of 27 evaluation studies pointed to the conclusion that programs with a minimum of four sessions were the most effective, and that active, long-term programs had the most impact on children.[51]

In addition to in-school prevention programs, there are attitudinal additions to the curriculum that help both maltreated children and their nonabused peers. In the past, society and many helping professions have been geared toward looking at people's deficits or "what is wrong with a person." More recently, mental health professionals began to look more at "what is right with a person" and focus on the individual's strengths. Indeed, the studies of resiliency in the face of trauma have emphasized the fact that many individuals are able to build on their inherent strengths. This concept of strength-based learning has been filtering into schools. All children can benefit from educators who look for the positive in them. Such a seemingly simple change in focus can have a profound impact.

## School-based Programs for Families

A number of school-based programs exist for families. These programs are described below.

### Help for Families at Risk

The strength-based philosophy can benefit parents as well as their children. As discussed earlier, parents have the ability to learn more effectively if they are given the time and necessary training. Schools are a natural focal point for such efforts and can aid community efforts to prevent child maltreatment by recognizing and aiding families at risk. One way is by offering after-school care for children of working parents or parents who need relief from child care responsibilities.

Adolescents at risk also present special problems for identification and help. These young people often have more problems with their parents than younger children. Schools should make an effort to identify and serve adolescents and their families to alleviate some of this stress. Setting up recreation programs for adolescents during after-school hours is an effective way of helping them and their parents.

### Support for Adolescent Parents and Their Children

Schools are becoming increasingly aware of the needs of adolescents, who often become parents (whether married or single) without some essential knowledge or experience. These youths are faced with adult responsibilities while their emotional immaturity and the need to continue their studies present additional

Community groups develop and implement different types of programs with the goal of preventing and responding to sexual abuse. One such program is Stop It Now!, which seeks to educate adults about the ways to stop sexual abuse and to increase public awareness of the trauma of child sexual abuse, and calls on all abusers and potential abusers to stop and seek help. For more information, visit **http://www.stopitnow.com.**

problems. Some schools have begun to address adolescent parents specifically because they are at a higher risk for economic difficulties, health problems, job instability, and troubles with child rearing. Programs designed for adolescent parents, especially those aimed at adolescent fathers, focus on specific activities and skills to help them stay in school and strengthen their family life.

In some school districts, married students and adolescent parents are excluded from regular academic programs and extracurricular activities. This exclusion only heightens the loneliness and isolation that many of these adolescents already feel. These schools should develop alternative programs for these students, such as programs that allow contact with their friends, as well as specific help with the demands of schoolwork and caring for a family of their own.

Some schools provide special programs for the children of adolescent students. Both parents and the child attend school, with the child cared for in a special child-care center. The parents attend regular classes, but they also spend time in the child-care center observing and caring for all the children there. Such an arrangement offers a unique training ground for parents and an enhanced learning experience for the children. Other schools are meeting the needs of this population in different ways. Some provide support groups and others assign special teachers and counselors to monitor and support the students. Some schools also offer these teens training in parenting, birth control, budgeting, child development, and time management.

## School-Community Programs

School-community partnerships for the welfare of children have existed for years, and these partnerships now include efforts to work with maltreated children. Although implementing new programs and making changes requires effort, the school and community together can serve as powerful advocates for children. Two exciting new programs that have taken shape in the last decade are the Families and Schools Together (FAST) Program, which joins parents and schools to help reduce delinquency, and Community Schools, which provides a forum for collaboration between educators, social service agencies, parents, and the wider community.[52] Although many of these programs are originally directed toward the reduction of violence, in a broader sense their impact on child abuse, as one form of violence, can be significant.

Traditionally, advocates for special needs programs have been the parents of children in need. For maltreated children, however, someone other than their parents often needs to assume this function. A school-community partnership is a logical option.

### Training and Staff Development Programs

Cooperative efforts between schools and the community can be an effective means of preventing child maltreatment. Training and staff development programs for those who work with children are an excellent starting point. These programs should stress identifying, reporting, treating, and preventing child maltreatment; furnish information on professional roles and responsibilities; and offer opportunities for free and frank discussion of mutual interests and problems among professionals in various disciplines. Some States even require educators to receive training on being a mandated reporter.

One school-based program that works with high-risk families is Circle of Security in Spokane, Washington. It is a 20-week parent education and therapeutic group working to create secure and emotional attachments while decreasing risk factors. For more information on this and other prevention programs that suggest positive outcomes, refer to *Emerging Practices in the Prevention of Child Abuse and Neglect* at **http://nccanch.acf.hhs.gov/topics/prevention/emerging/report.pdf**.

### Public Awareness Programs

Schools can participate in public awareness programs through parent-teacher groups and other school-community organizations. By increasing public sensitivity to child maltreatment, schools can help develop a cadre of concerned individuals who will press for resources and programs for child abuse and neglect prevention. This is a familiar process for educators. Many programs for physically disabled, learning disabled, and other children with special needs began this way.

### Use of School Facilities and Resources

Schools can offer facilities such as auditoriums or conference rooms to self-help groups, such as Parents Anonymous or Circle of Parents, or for school-sponsored public forums and workshops on child abuse and neglect prevention. Joint school-community adult education programs also can be offered on such topics as alternative disciplinary methods and early childhood growth and development. School buildings can be made available for daycare, crisis care, and after-school care programs operated by social service agencies. School staff can serve as consultants, leaders, and facilitators of these programs. School newsletters can be used to announce them. In addition, school-owned films and books can be lent to other agencies and organizations for training programs and meetings.

In short, the school offers a wealth of resources for efforts that seek to prevent child maltreatment. All that is needed is the school's willingness to offer them and the community's willingness to accept them.

## Individual Action

While the school as a whole is important in preventing child maltreatment, it is the individual who is often in a position of carrying out these efforts. As mentioned previously, reporting suspected child maltreatment is necessary to prevent it from continuing. The attitude of the reporter can affect the progress the family is able to make once the report is filed. The educator, who recognizes the strengths of both children and their parents and is supportive and available to the family throughout the investigation, treatment, and rehabilitation process, helps the family maintain its dignity and protects the child.

Educators must consider how their actions affect family functioning. For example, if behavior management is a point of contention between parents and their child, a terse note from the school about the child misbehaving in class may increase the risk of maltreatment to the child. Instead, it may be better to meet with the parents to decide together which techniques of behavior management should be used.

If grades are an issue, a parent-teacher conference to discuss academic performance may be a better choice than sending home a report card with a failing grade. Whenever possible, the educator should stress the child's positive performance while suggesting ways to improve any negative aspects. Reiterating the child's faults may reinforce the child's negative self-image and further the parent's view of the child as a disappointment. In contrast, emphasizing the child's

The National Clearinghouse on Child Abuse and Neglect Information continually develops and obtains information on prevention and intervention services for children and families. Visit the Clearinghouse Web site at **http://nccanch.acf.hhs.gov** to locate relevant publications and information.

assets will increase the child's self-confidence and indicate to the parent that the child is worthwhile, capable, and someone of whom to be proud.

The positive influence of an educator on the life of a child can be significant. As one survivor of an abusive home commented:

"I don't think my fourth grade teacher, Mr. Evans, had any idea what an impact he had on my life. He was my father's opposite and taught me much about how men could be. He was consistent and concerned while my father was drunk or ignored me. He praised me while my father criticized. He prized my mind and my accomplishments; my father cared only about abusing my body. I learned a great deal from that teacher about who I was and that I was an important person. I think I became a teacher myself to be like him, so that I could make a difference for some other child."

Many survivors will name an educator who made a real difference in their lives by showing they cared. The actions of these vital educators helped prevent survivors of abusive homes from repeating the negative behaviors from their childhoods. Every educator has the opportunity to make a difference for an abused or neglected child. It is a challenge worth meeting.

## Conclusion

As is illustrated throughout this manual, educators are important partners in preventing, identifying, and responding to child abuse and neglect. Because of their close and consistent contact with students and their families, educators are in a unique and critical position to help deal with these issues. Schools and educators have developed creative approaches in the programs they have established and supported, as well as in the messages and lessons incorporated into curricula. This creativity is instrumental in allowing educators to play an ever-evolving role in addressing the needs of maltreated children and their families.

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## APPENDIX A

# Glossary of Terms

**Adjudicatory Hearings** – held by the juvenile and family court to determine whether a child has been maltreated or whether another legal basis exists for the State to intervene to protect the child.

**Adoption and Safe Families Act (ASFA)** – signed into law November 1997 and designed to improve the safety of children, promote adoption and other permanent homes for children who need them, and support families. The law requires CPS agencies to provide more timely and focused assessment and intervention services to the children and families that are served within the CPS system.

**Bad Touch** – a term used by primary prevention programs for children to describe hitting, punching, biting, sexually stimulating touch, and other harmful acts.

**CASA** – court-appointed special advocates (usually volunteers) who serve to ensure that the needs and interests of a child in child protection judicial proceedings are fully protected.

**Case Closure** – the process of ending the relationship between the CPS worker and the family that often involves a mutual assessment of progress. Optimally, cases are closed when families have achieved their goals and the risk of maltreatment has been reduced or eliminated.

**Case Plan** – the casework document that outlines the outcomes, goals, and tasks necessary to be achieved in order to reduce the risk of maltreatment.

**Case Planning** – the stage of the CPS case process where the CPS caseworker develops a case plan with the family members.

**Caseworker Competency** – demonstrated professional behaviors based on the knowledge, skills, personal qualities, and values a person holds.

**Central Registry** – a centralized database containing information on all substantiated and founded reports of child maltreatment in a selected area (typically a State).

**Child Abuse Prevention and Treatment Act (CAPTA)** – see Keeping Children and Families Safe Act.

**Child Protective Services (CPS)** – the designated social services agency (in most States) to receive reports, investigate, and provide intervention and treatment services to children and families in which child maltreatment has occurred. Frequently, this agency is located within larger public social service agencies, such as Departments of Social Services.

**Concurrent Planning –** identifies alternative forms of permanency by addressing both reunification and legal permanency with a new parent or caregiver if reunification efforts fail.

**Confusing Touch –** a term used by primary prevention programs for children to describe any type of contact that "does not feel right."

**Cultural Competence –** a set of attitudes, behaviors, and policies that integrates knowledge about groups of people into practices and standards to enhance the quality of services to all cultural groups being served.

**Differential Response –** an area of CPS reform that offers greater flexibility in responding to allegations of abuse and neglect. Also referred to as "dual track" or "multi-track" response, it permits CPS agencies to respond differentially to children's needs for safety, the degree of risk present, and the family's needs for services and support. See "dual track."

**Dispositional Hearings –** held by the juvenile and family court to determine the legal resolution of cases after adjudication, such as whether placement of the child in out-of-home care is necessary and what services the children and family will need to reduce the risk of maltreatment and to address the effects of maltreatment.

**Dual Track –** term reflecting new CPS response systems that typically combine a nonadversarial, service-based assessment track for cases where children are not at immediate risk with a traditional CPS investigative track for cases where children are unsafe or at greater risk for maltreatment. See "differential response."

**Evaluation of Family Progress –** the stage of the CPS case process where the CPS caseworker measures changes in family behaviors and conditions (risk factors), monitors risk elimination or reduction, assesses strengths, and determines case closure.

**Family Assessment –** the stage of the child protection process when the CPS caseworker, community treatment provider, and the family reach a mutual understanding regarding the behaviors and conditions that must change to reduce or eliminate the risk of maltreatment, the most critical treatment needs that must be addressed, and the strengths on which to build.

**Family Group Conferencing –** a family meeting model used by CPS agencies to optimize family strengths in the planning process. This model brings the family, extended family, and others important in the family's life (e.g., friends, clergy, neighbors) together to make decisions regarding how best to ensure safety of the family members.

**Family Unity Model –** a family meeting model used by CPS agencies to optimize family strengths in the planning process. This model is similar to the Family Group Conferencing model.

**Full Disclosure –** CPS information to the family regarding the steps in the intervention process, the requirements of CPS, the expectations of the family, the consequences if the family does not fulfill the expectations, and the rights of the parents to ensure that the family completely understands the process.

**Good Touch –** a term used by primary prevention programs for children to describe hugs, encouraging pats, and other gestures that are not sexually stimulating.

**Guardian ad Litem –** a lawyer or layperson who represents a child in juvenile or family court. Usually this person considers the "best interest" of the child and may perform a variety of roles, including those of independent investigator, advocate, advisor, and guardian for the child. A layperson who serves in this role is sometimes known as a court-appointed special advocate or CASA.

**Home Visitation Programs** – prevention programs that offer a variety of family-focused services to pregnant mothers and families with new babies. Activities frequently encompass structured visits to the family's home and may address positive parenting practices, nonviolent discipline techniques, child development, maternal and child health, available services, and advocacy.

**Immunity** – established in all child abuse laws to protect reporters from civil law suits and criminal prosecution resulting from filing a report of child abuse and neglect.

**Initial Assessment or Investigation** – the stage of the CPS case process where the CPS caseworker determines the validity of the child maltreatment report, assesses the risk of maltreatment, determines if the child is safe, develops a safety plan, if needed, to assure the child's protection, and determines services needed.

**Intake** – the stage of the CPS case process where the CPS caseworker screens and accepts reports of child maltreatment.

**Interview Protocol** – a structured format to ensure that all family members are seen in a planned strategy, that community providers collaborate, and that information gathering is thorough.

**Juvenile and Family Courts** – established in most States to resolve conflict and to otherwise intervene in the lives of families in a manner that promotes the best interest of children. These courts specialize in areas such as child maltreatment, domestic violence, juvenile delinquency, divorce, child custody, and child support.

**Keeping Children and Families Safe Act** – The Keeping Children and Families Safe Act of 2003 (P.L. 108-36) included the reauthorization of the Child Abuse Prevention and Treatment Act (CAPTA) in its Title I, Sec. 111. CAPTA provides minimum standards for defining child physical abuse and neglect and sexual abuse that States must incorporate into their statutory definitions in order to receive Federal funds. CAPTA defines child abuse and neglect as "at a minimum, any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation, or an act or failure to act which presents an imminent risk of serious harm."

**Kinship Care** – formal child placement by the juvenile court and child welfare agency in the home of a child's relative.

**Liaison** – the designation of a person within an organization who has responsibility for facilitating communication, collaboration, and coordination between agencies involved in the child protection system.

**Mandated Reporter** – individuals required by State statutes to report suspected child abuse and neglect to the proper authorities (usually CPS or law enforcement agencies). Mandated reporters typically include professionals, such as educators and other school personnel, health care and mental health professionals, social workers, childcare providers, and law enforcement officers. Some States identify all citizens as mandated reporters.

**Memorandum of Understanding** (MOU) – a written agreement that serves to clarify relationships and responsibilities between two or more organizations that share services, clients, and resources.

**Multidisciplinary Team** – established between agencies and professionals within the child protection system to discuss cases of child abuse and neglect and to aid in decisions at various stages of the CPS case process. These terms also may be designated by different names, including child protection teams, interdisciplinary teams, or case consultation teams.

**Neglect** – the failure to provide for the child's basic needs. Neglect can be physical, educational, or emotional. *Physical neglect* can include not providing adequate food or clothing, appropriate medical care, supervision, or proper weather protection (heat or coats). *Educational neglect* includes failure to provide appropriate schooling, special educational needs, or allowing excessive truancies. *Psychological neglect* includes the lack of any emotional support and love, chronic inattention to the child, exposure to spouse abuse, or parental or caregiver drug and alcohol abuse.

**Out-of-Home Care** – child care, foster care, or residential care provided by persons, organizations, and institutions to children who are placed outside their families, usually under the jurisdiction of juvenile or family court.

**Parent or caretaker** – person responsible for the care of the child.

***Parens Patriae* Doctrine** – originating in feudal England, a doctrine that vests in the State a right of guardianship of minors. This concept has gradually evolved into the principle that the community, in addition to the parent, has a strong interest in the care and nurturing of children. Schools, juvenile courts, and social service agencies all derive their authority from the State's power to ensure the protection and rights of children as a unique class.

**Penalty for Failure to Report** – all State child abuse reporting laws delineate penalties for mandated reporters who fail to report suspected child abuse or neglect to the designated State agency.

**Physical Abuse** – the inflicting of a nonaccidental physical injury upon a child. This may include burning, hitting, punching, shaking, kicking, beating, or otherwise harming a child. It may, however, have been the result of over-discipline or physical punishment that is inappropriate to the child's age.

**Primary Prevention** – activities geared to a sample of the general population to prevent child abuse and neglect from occurring. Also referred to as "universal prevention."

**Protocol** – an interagency agreement that delineates joint roles and responsibilities by establishing criteria and procedures for working together on cases of child abuse and neglect.

**Protective Factors** – strengths and resources that appear to mediate or serve as a "buffer" against risk factors that contribute to vulnerability to maltreatment or against the negative effects of maltreatment experiences.

**Psychological Maltreatment** – a pattern of caregiver behavior or extreme incidents that convey to children that they are worthless, flawed, unloved, unwanted, endangered, or only of value to meeting another's needs. This can include parents or caretakers using extreme or bizarre forms of punishment or threatening or terrorizing a child. The term "psychological maltreatment" is also known as emotional abuse or neglect, verbal abuse, or mental abuse.

**Reporting Laws** – all States have child abuse and neglect reporting laws that mandate who must report "suspected" child abuse and neglect cases, designate which agencies are charged with investigating alleged cases of abuse and neglect, and delineate the responsibilities of State and local agencies in responding to these children and families.

**Response Time** – a determination made by CPS and law enforcement regarding the immediacy of the response needed to a report of child abuse or neglect.

**Review Hearings** – held by the juvenile and family court to review dispositions (usually every 6 months) and to determine the need to maintain placement in out-of-home care or court jurisdiction of a child.

**Risk** – the likelihood that a child will be maltreated in the future.

**Risk Assessment** – to assess and measure the likelihood that a child will be maltreated in the future, frequently through the use of checklists, matrices, scales, and other methods of measurement.

**Risk Factors** – behaviors and conditions present in the child, parent, or family that will likely contribute to child maltreatment occurring in the future.

**Safety** – absence of an imminent or immediate threat of moderate-to-serious harm to the child.

**Safety Assessment** – a part of the CPS and domestic violence case process in which available information is analyzed to determine whether the adult victim or the child is in immediate danger of moderate or serious harm.

**Safety Plan** – a casework document developed when it is determined that the adult victim or child is in imminent or potential risk of serious harm. In the safety plan, the caseworker targets the factors that are causing or contributing to the risk of serious harm and identifies, along with the adult victim, the interventions that will control the safety factors and assure the victim and child's protection.

**School Reporting Protocol** – a set of suggested procedures to be used by a specific school in the reporting of suspected child maltreatment.

**Secondary Prevention** – activities targeted to prevent breakdowns and dysfunctions among families who have been identified as at risk for abuse and neglect.

**Service Agreement** – the casework document developed between the CPS caseworker and the family that outlines the tasks necessary to achieve goals and outcomes necessary for risk reduction.

**Service Provision** – the stage of the CPS casework process when CPS and other service providers provide specific services geared toward reducing the risk of maltreatment.

**Sexual Abuse** – inappropriate adolescent or adult sexual behavior with a child. It includes fondling a child's genitals, making the child fondle the adult's genitals, intercourse, incest, rape, sodomy, exhibitionism, sexual exploitation, or exposure to pornography. To be considered child abuse, these acts have to be committed by a person responsible for the care of a child (for example a baby-sitter, a parent, or a daycare provider) or related to the child. If a stranger commits these acts, it would be considered sexual assault and handled solely by the police and criminal courts.

**Substantiated** – an investigation disposition concluding that the allegation of maltreatment or risk of maltreatment was supported or founded by State law or State policy. A CPS determination means that credible evidence exists that child abuse or neglect has occurred.

**Tertiary Prevention** – treatment efforts geared to address situations where child maltreatment has already occurred with the goals of preventing child maltreatment from occurring in the future and of avoiding the harmful effects of child maltreatment.

**Treatment** – the stage of the child protection case process when specific services are provided by CPS and other providers to reduce the risk of maltreatment, support families in meeting case goals, and address the effects of maltreatment.

**Universal Prevention** – activities and services directed at the general public with the goal of stopping the occurrence of maltreatment before it starts. Also referred to as "primary prevention."

**Unsubstantiated (not substantiated)** – an investigation disposition that determines that there is not sufficient evidence under State law or policy to conclude that the child has been maltreated or is at risk of maltreatment. A CPS determination means that credible evidence does not exist that child abuse or neglect has occurred.

# APPENDIX B
# Resource Listings of Selected National Organizations Concerned with Child Maltreatment

Listed below are several representatives of the many national organizations and groups that deal with various aspects of child maltreatment. Please visit **http://nccanch.acf.hhs.gov** to view a more comprehensive list of resources and visit **http://nccanch.acf.hhs.gov/general/organizations/index.cfm** to view an organization database. Inclusion on this list is for information purposes and does not constitute an endorsement by the Office on Child Abuse and Neglect or the Children's Bureau.

## For Educators

### Committee for Children

address: 568 First Avenue South, Suite 600
Seattle, WA 98104-2804

phone: (800) 634-4449 ext. 200

fax: (206) 438-6765

e-mail: info@cfchildren.org

Web site: www.cfchildren.org

Provides award-winning social skills curricula for the prevention of bullying, youth violence, and child abuse, as well as family education, training and technical assistance to educators throughout North America.

### Educational Resources Information Center (ERIC)

address: 2277 Research Blvd.
MS 6M
Rockville, MD 20850

phone: (800) LET-ERIC

e-mail: accesseric@accesseric.org

Web site: www.eric.ed.gov

Provides ready access to an extensive body of education-related literature with the largest education database in the world—containing more than 1 million records of journal articles, research reports, curriculum and teaching guides, conference papers, and books.

### National Association of School Psychologists

address: 4340 East West Hwy., Suite 402
Bethesda, MD 20814

phone: (301) 657-0270

(301) 657-4155 TDD

fax: (301) 657-0275

Web site: www.nasponline.org

Supports educationally and psychologically healthy environments for all children and youth by implementing research-based, effective programs that prevent problems, enhance independence, and promote optimal learning.

### National Education Association

address: 1201 16th Street, NW
Washington, DC 20036

phone: (202) 833-4000

fax: (202) 822-7974

Web site: www.nea.org

Promotes the cause of quality public education and advances the profession of education with affiliates in every State and over 13,000 communities.

### School Social Work Association of America

address: P.O. Box 2072
Northlake, IL 60164

phone: 847-289-4527

e-mail: SSWAA@aol.com

Web site: www.sswaa.org

Encourages the professional development of School Social Workers in order to enhance the educational experience of students and their families.

## For the General Public

### Childhelp USA

address: 15757 North 78th St.
Scottsdale, AZ 85260

phone: (800) 4-A-CHILD
(800) 2-A-CHILD (TDD line)
(480) 922-8212

fax: (480) 922-7061

e-mail: help@childhelpusa.org

Web site: www.childhelpusa.org

Provides crisis counseling to adult survivors and child victims of child abuse, offenders, and parents, and operates a national hotline.

### National Center for Missing and Exploited Children

address: Charles B. Wang International Children's Building
699 Prince St.
Alexandria, VA 22314-3175

phone: (800) 843-5678
(703) 274-3900

fax: (703) 274-2220

Web site: www.missingkids.com

Provides assistance to parents, children, law enforcement, schools, and the community in recovering missing children and raising public awareness about ways to help prevent child abduction, molestation, and sexual exploitation.

### Parents Anonymous

address: 675 West Foothill Blvd., Suite 220
Claremont, CA 91711

phone: (909) 621-6184

fax: (909) 625-6304

e-mail: parentsanon@msn.com

Web site: www.parentsanonymous.org

Leads mutual support groups to help parents provide nurturing environments for their families.

## Community Partners

### The Center for Faith-Based and Community Initiatives

e-mail: CFBCI@hhs.gov

Web site: www.hhs.gov/faith

Welcomes the participation of faith-based and community-based organizations as valued and essential partners with the U.S. Department of Health and Human Services. Funding goes to faith-based organizations through Head Start and to programs for refugee resettlement, runaway and homeless youth, independent living, child care, child support enforcement, and child welfare.

### Family Support America
(formerly Family Resource Coalition of America)

address: 20 N. Wacker Dr., Suite 1100
Chicago, IL 60606

phone: (312) 338-0900

fax: (312) 338-1522

e-mail: info@familysupportamerica.org

Web site: www.familysupportamerica.org

Works to strengthen and empower families and communities so that they can foster the optimal development of children, youth, and adult family members.

### National Fatherhood Initiative

address: 101 Lake Forest Blvd., Suite 360
Gaithersburg, MD 20877

phone: (301) 948-0599

fax: (301) 948-4325

Web site: www.fatherhood.org

Works to improve the well-being of children by increasing the proportion of children growing up with involved, responsible, and committed fathers.

## Prevention Organizations

### National Alliance of Children's Trust and Prevention Funds (ACT)

address: Michigan State University
Department of Psychology
East Lansing, MI 48824-1117

phone: (517) 432-5096

fax: (517) 432-2476

e-mail: millsda@msu.edu

Web site: www.ctfalliance.org

Assists State children's trust and prevention funds to strengthen families and protect children from harm.

### National Exchange Club Foundation for the Prevention of Child Abuse

address: 3050 Central Ave.
Toledo, OH 43606-1700

phone: (800) 924-2643
(419) 535-3232

fax: (419) 535-1989

e-mail: info@preventchildabuse.com

Web site: www.nationalexchangeclub.com

Conducts local campaigns in the fight against child abuse by providing education, intervention, and support to families affected by child maltreatment.

### Prevent Child Abuse America

address: 200 South Michigan Ave., 17th Floor
Chicago, IL 60604-2404

phone: (800) 835-2671 (orders)

(312) 663-3520

fax: (312) 939-8962

e-mail: mailbox@preventchildabuse.org

Web site: www.preventchildabuse.org

Conducts prevention activities such as public awareness campaigns, advocacy, networking, research, and publishing, and provides information and statistics on child abuse.

### Shaken Baby Syndrome Prevention Plus

address: 649 Main St., Suite B
Groveport, OH 43125

phone: (800) 858-5222

(614) 836-8360

fax: (614) 836-8359

e-mail: sbspp@aol.com

Web site: www.sbsplus.com

Develops, studies, and disseminates information and materials designed to prevent shaken baby syndrome and other forms of physical child abuse and to increase positive parenting and child care.

## Child Welfare Organizations

### American Humane Association Children's Division

address: 63 Inverness Dr., East
Englewood, CO 80112-5117

phone: (800) 227-4645

(303) 792-9900

fax: (303) 792-5333

e-mail: children@americanhumane.org

Web site: www.americanhumane.org

Conducts research, analysis, and training to help public and private agencies respond to child maltreatment.

### American Professional Society on the Abuse of Children

address: 940 N.E. 13th St.
CHO 3B-3406
Oklahoma City, OK 73104

phone: (405) 271-8202

fax: (405) 271-2931

e-mail: tricia-williams@ouhsc.edu

Web site: www.apsac.org

Provides professional education, promotes research to inform effective practice, and addresses public policy issues. Professional membership organization.

### American Public Human Services Association

address: 810 First St., NE, Suite 500
Washington, DC 20002-4267

phone: (202) 682-0100

fax: (202) 289-6555

Web site: www.aphsa.org

Addresses program and policy issues related to the administration and delivery of publicly funded human services. Professional membership organization.

### AVANCE Family Support and Education Program

address: 301 South Frio, Suite 380
San Antonio, TX 78207

phone: (210) 270-4630

fax: (210) 270-4612

Web site: www.avance.org

Operates a national training center to share and disseminate information, material, and curricula to service providers and policy-makers interested in supporting high-risk Hispanic families.

### Child Welfare League of America

address: 440 First St., NW, Third Floor
Washington, DC 20001-2085

phone: (202) 638-2952

fax: (202) 638-4004

Web site: www.cwla.org

Provides training, consultation, and technical assistance to child welfare professionals and agencies while also educating the public about emerging issues affecting children.

### National Black Child Development Institute

address: 1023 15th St., NW, Suite 600
Washington, DC 20005

phone: (202) 387-1281

fax: (202) 234-1738

e-mail: moreinfo@nbcdi.org

Web site: www.nbcdi.org

Operates programs and sponsors a national training conference through Howard University to improve and protect the well-being of African-American children.

### National Children's Advocacy Center

address: 200 Westside Sq., Suite 700
Huntsville AL 35801

phone: (256) 533-0531

fax: (256) 534-6883

e-mail: webmaster@ncac-hsv.org

Web site: www.ncac-hsv.org

Provides prevention, intervention, and treatment services to physically and sexually abused children and their families within a child-focused team approach.

### National Indian Child Welfare Association

address: 5100 SW Macadam Ave., Suite 300
Portland, OR 97201

phone: (503) 222-4044

fax: (503) 222-4007

e-mail: info@nicwa.org

Web site: www.nicwa.org

Disseminates information and provides technical assistance on Indian child welfare issues. Supports community development and advocacy efforts to facilitate tribal responses to the needs of families and children.

### National Resource Center on Child Maltreatment

address: Child Welfare Institute
3950 Shackleford Rd., Suite 175
Duluth, GA 30096

phone: (770) 935-8484

fax: (770) 935-0344

e-mail: tsmith@gocwi.org

Web site: www.gocwi.org/nrccm

Helps States, local agencies, and Tribes develop effective and efficient child protective services systems. Jointly operated by the Child Welfare Institute and ACTION for Child Protection, it responds to needs related to prevention, identification, intervention, and treatment of child abuse and neglect.

## For More Information

### National Clearinghouse on Child Abuse and Neglect Information

address: 330 C St., SW
Washington, DC 20447

phone: (800) 394-3366
(703) 385-7565

fax: (703) 385-3206

e-mail: nccanch@calib.com

Web site: www.calib.com/nccanch

Collects, stores, catalogs, and disseminates information on all aspects of child maltreatment and child welfare to help build the capacity of professionals in the field. A service of the Children's Bureau.

## APPENDIX C

# State Toll-free Telephone Numbers for Reporting Child Abuse

Each State designates specific agencies to receive and investigate reports of suspected child abuse and neglect. Typically, this responsibility is carried out by child protective services (CPS) within a Department of Social Services, Department of Human Resources, or Division of Family and Children Services. In some States, police departments also may receive reports of child abuse or neglect.

Many States have an in-State toll-free telephone number, listed below, for reporting suspected abuse. **The reporting party must be calling from the same State where the child is allegedly being abused for most of the following numbers to be valid.**

For States not listed, or when the reporting party resides in a different State from the child, please call **Childhelp, 800-4-A-Child (800-422-4453)**, or your local CPS agency.

**Alaska (AK)**
800-478-4444

**Arizona (AZ)**
888-SOS-CHILD
(888-767-2445)

**Arkansas (AR)**
800-482-5964

**Connecticut (CT)**
800-842-2288
800-624-5518 (TDD)

**Delaware (DE)**
800-292-9582

**District of Columbia (DC)**
202-671-SAFE (7233)

**Florida (FL)**
800-96-ABUSE
(800-962-2873)

**Illinois (IL)**
800-252-2873

**Indiana (IN)**
800-800-5556

**Iowa (IA)**
800-362-2178

**Kansas (KS)**
800-922-5330

**Kentucky (KY)**
800-752-6200

**Maine (ME)**
800-452-1999

**Maryland (MD)**
800-332-6347

**Massachusetts (MA)**
800-792-5200

**Michigan (MI)**
800-942-4357

**Mississippi (MS)**
800-222-8000

**Missouri (MO)**
800-392-3738

**Montana (MT)**
866-820-KIDS (5437)

**Nebraska (NE)**
800-652-1999

**Nevada (NV)**
800-992-5757

**New Hampshire (NH)**
800-894-5533
800-852-3388 (after hours)

**New Jersey (NJ)**
800-792-8610
800-835-5510 (TDD)

**New Mexico (NM)**
800-797-3260

**New York (NY)**
800-342-3720

**North Dakota (ND)**
800-245-3736

**Oklahoma (OK)**
800-522-3511

**Oregon (OR)**
800-854-3508, ext. 2402

**Pennsylvania (PA)**
800-932-0313

**Rhode Island (RI)**
800-RI-CHILD
(800-742-4453)

**Texas (TX)**
800-252-5400

**Utah (UT)**
800-678-9399

**Vermont (VT)**
800-649-5285

**Virginia (VA)**
800-552-7096

**Washington (WA)**
866-END-HARM
(866-363-4276)

**West Virginia (WV)**
800-352-6513

**Wyoming (WY)**
800-457-3659

# APPENDIX D
# Educators' Checklist for Recognizing Possible Child Maltreatment

## Neglect

**Does the child:**

- Come to school in soiled clothing or clothing that is significantly too small or large for them or often in need of repair?
- Seem inadequately dressed for the weather?
- Always seem to be hungry, hoarding, or stealing food, but coming to school with little of their own food?
- Appear listless and tired with little energy due to no routine or structure around bedtimes?
- Often report caring for younger siblings?
- Demonstrate poor hygiene, smell of urine or feces, or have very bad breath or dirty or decaying teeth?
- Seem emaciated or have a distended stomach indicative of malnutrition?
- Have unattended medical or dental problems such as infected sores or badly decayed or abscessed teeth?
- Exhibit stealing, vandalism, or other delinquent behaviors?
- Have frequent school absences or tardiness?
- Have poor peer relationships, possibly due to hygiene problems or a depressed or negative attitude?
- Appear withdrawn?
- Crave attention, even eliciting negative responses to gain it?

- Demonstrate destructive or pugnacious behavior and show no apparent guilt over his or her acts?
- Exhibit low self-esteem?
- Have a conduct disorder diagnosis or act oppositionally defiant?
- Have difficulty problem solving or coping?
- Have difficulty with language comprehension and expression?
- Have a variety of academic problems?

## Physical Abuse

**Does the child have:**

- Extensive bruises, especially in areas of the body that are not normally vulnerable? Are the bruises of different colors indicating various stages of healing?
- Frequent bruises around the head or face, the abdomen or midway between the wrist and elbow? Although bruises to the knees, legs, and elbows frequently occur in normal falls, the above areas are less likely to occur in falls and should be investigated.
- Bruises in specific shapes such as handprints, hangar marks, or belt buckles?
- Marks that indicate hard blows from an object such as an electrical cord or other whip-like object that make a burn around the body?
- Bruises on multiple parts of the body indicating blows from different directions?
- Unexplained abdominal bleeding (i.e., caused by internal bleeding) that might be observed as discoloration under the skin or blood-filled lumps?
- Extreme sensitivity to pain or complaints of soreness and stiffness or awkward movements as if caused by pain?
- Bald spots from severe hair pulling?
- Adult-sized, human bite marks?
- Burns, especially from objects such as cigarettes, irons, and other objects?
- Injuries for which the explanation given is inadequate?

## Emotional abuse

**Does the child sometimes exhibit:**

- Inappropriate affect such as turning negatives into jokes and laughing when in pain?
- Extremes in behavior – manically happy or very depressed?
- Withdrawal – no verbal or physical communication with others?
- Self-destructive behavior (e.g., cutting oneself)?
- General destructive behavior?
- Difficulties with concentrating or learning new material or compulsive attention to detail?
- Cruelty to others?
- Vandalism, stealing, cheating?
- Rocking, thumb sucking, head banging?
- Enuresis (wetting one's pants) or soiling after an age when such behavior is inappropriate?
- Substance abuse?
- Eating disorders?
- Physical manifestations such as frequent stomachaches or headaches or unexplained weight loss or gain?
- Delinquent behavior?

## Sexual Abuse

**Does the child:**

- Have difficulty in walking or sitting?
- Complain of genital or anal itching, pain, or bleeding?
- Have frequent psychosomatic illnesses?
- Frequently vomit without organic causes?
- Become pregnant at a young age?
- Have any sexually transmitted diseases?

**Does the child exhibit:**

- Exceptional secrecy?
- More sexual knowledge than is age appropriate (especially in younger children)?
- Indepth sexual play with peers (different form the normal "playing doctor" form of exploration)?
- Extreme compliance or withdrawal?
- Overt aggression?
- An inordinate fear of males (or females)?
- Extremely seductive behavior?
- A drop in school performance or sudden nonparticipation in school activities?
- Sleep problems or nightmares?
- Crying without provocation?
- A sudden onset of wetting or soiling of pants or bed?
- Sudden phobic behavior?
- Feelings of little self-worth or talk of being damaged?
- A much older and more worldly appearance than peers?
- Suicide attempts or ideas of wanting to kill self?
- Excessive attempts to run away from home?
- Cruelty to animals (especially those that would normally be pets)?
- Setting fires and enjoying watching them burn?
- An eating disorder?
- Self-mutilation (cutting or scratching to draw blood)?[1]

[1] Crosson-Tower, C. (2002). How can we recognize child abuse and neglect? In *When children are abused: An educator's guide to intervention* (pp. 8–34). Boston, MA: Allyn and Bacon.

## APPENDIX E

# Sample List of Contacts for Reporting Suspected Cases of Child Abuse or Neglect

_____

Name of Local Education Agency

_____

Name of Local School

_____

Local School Address and Telephone Number

_____

Date Form Completed

1. **Social Services Agency** _____

   Name: _____

   Address: _____

   _____

   Contact Person(s): _____

   Phone number for oral reports: _____

   Phone number for verification of shelter order: _____

2. **Local Law Enforcement Department** _____

   Name: _____

   Address: _____

   _____

   Contact Person(s): _____

   Phone number for oral reports: _____

## APPENDIX F

# Sample Report of Suspected Child Abuse and Neglect

**Call:** *Local Social Services Agency or Law Enforcement Agency* (*Phone Numbers*)

**Date of Call(s):**_____ **Name of Person(s) Talked To:** _____

**Notified:** Designee (*Principal or School Social Worker*)

**Date of Notification:**_____ **Date of this Report:** _____

**School:** (*School Name, Address, City, State, ZIP, Telephone Number*)

| Child's Last Name (legal) | First Name | M. Init. | M/F | Age | Birth date |
|---|---|---|---|---|---|
| | | | | | |

| Address | City | State | Zip Code | Telephone |
|---|---|---|---|---|
| | | | | |

**Name of Person(s) Responsible for Child's Care:** *(Parents/Stepparents/Guardians/Custodial Parents)*

| Address | City | State | Zip Code | Telephone |
|---|---|---|---|---|
| | | | | |

**With Whom Does the Child Live:**_____ **Relationship:** _____

| Address | City | State | Zip Code | Telephone |
|---|---|---|---|---|
| | | | | |

**Person(s) Suspected of Abuse or Neglect:** _____ **Relationship:** _____

| Address | City | State | Zip Code | Telephone |
|---|---|---|---|---|
| | | | | |

**Check ( appropriate space indicating type of suspected abuse being reported:**

( ) Physical Injury ( ) Sexual Abuse ( ) Emotional Neglect/Abuse
( ) Physical Neglect ( ) Other (specify): _____

**State the nature and extent of the current injury, neglect, or sexual abuse to the child in question and circumstances leading to the suspicion that the child is a victim of abuse or neglect:**

**Information concerning previous injury, sexual abuse or neglect experienced by this child or other children in this family situation, including previous action taken, if any:**

**State other information that may be helpful in establishing the cause of the child's status:**

_____

_____ _____

**Signature and Title of Person Making Report** **Date**

**Distribution:** **Local Social Services or Law Enforcement Agency/Designee/*Other***