



Review the statistics from the handout entitled “Child Maltreatment in America”. You want them to feel an urgency towards this problem.

Review the impact of child abuse and neglect: brain development is negatively impacted, their social development would certainly take a turn and a complete reversal of these negative effects (if they occur in the first 18 months of their life) is not always possible.

Risk Factors for Child Abuse:

- Psychological Factors
- Stress Factors
- Child Factors
- Parenting Factors
- Social Factors

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Solicit from the class what each of these risk factors might be and how it would contribute to child abuse and neglect. You may want to write their responses on a flip-chart.

Psychological factors: depression, anxiety, and other psychological conditions that affect the ability to care for a child.

Stress Factors: unemployment, drug or alcohol use, financial or family crisis.

Child Factors: premature delivery, delayed, difficult, special needs.

Parenting Factors: history of abuse, stressful relationships, unrealistic expectations, lack of knowledge or parenting ability, single parenting, maternal depression, family conflict, history of abuse, low IQ, low education.

Social factors: lack of support, isolated, crowded living situation or homelessness, pregnancy, loss of something (person, place or thing), poor finances.

Types of Child Abuse and Neglect

- Physical Abuse
- Physical Neglect
- Emotional Abuse
- Emotional Neglect
- Sexual Abuse

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Using handout entitled “A Quick Guide to Understanding Abuse” review the definitions of the different types of abuse.

Physical Indicators of Physical Abuse

- Unexplained bruises and welts
- Unexplained burns
- Unexplained fractures
- Unexplained lacerations or abrasions

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Any injury that the child might have that is accompanied by a not-very-likely story or no accounting of it at all.

Suspicious Injuries: What to Consider

- Developmental level
- Injury shape
- Force needed
- Type of injury
- Number of old and new injuries
- Location

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When you are looking at an injury on a child, you need to assess: read slide and discuss each one and how it contributes to your decision about whether or not this is child abuse.

CONSULTATION: INJURY SHEET
 Confidential: For Professional Use Only

Name: _____
 Hospital #: _____

Examiner (print name) _____

Signature _____ Date: _____

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Child Care T

Show participants where the location of typical accidental injuries would be on a normally developing child (forehead, forearms and elbows, shins and thighs).

Show participants where the location of typical abuse-related injuries would be (eye/nose area, genitals, low thigh at just-above-the-knee level, back between the shoulder blades, low back and buttocks, upper thighs by buttocks, calf area).

Bruises: What To Look For

- Different colors
- Location
- In groups or patterns
- Not developmentally appropriate
- Defense wounds



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If the child has bruises, it can be difficult to ascertain whether these are the result of hard play, or abuse. Look at the color of the bruises. Are they in different stages of healing? Are the bruises on the back, the buttocks or the back of the legs? Remember, those are not spots that commonly get bruised in normal play. Are the bruises in a group or a specific pattern, like an electrical cord or fingers? That would not be common to normal and ordinary active play. Are the bruises defense wounds on the back of the arms or the legs?

If you look at this picture, you can see that the bruises are in a specific pattern, that there are some old bruises underlying the new ones, and that they are in a spot not commonly injured by normal play.

Lacerations: What To Look For



- Loop type
- On back of the body
- Series or groups
- Overlapping

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If you are looking at lacerations, it's the same thing. Where is the cut? If it's one of the spots identified as not commonly getting injured with normal play, then be suspicious. Is it loopy, like from a belt, a strap or an extension cord? Was the child's ankles or wrists tied together to keep them out of trouble? Are the cuts in a series or a group? And do they overlap previous, older, injuries?

Burns: What To Look For

- Straight lines
- Location
- Perfectly round and small



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With an accidental burn, the edges would be uneven. With a non-accidental burn, the lines are perfectly even. You see this with immersion burns, (this child's feet were immersed in hot water) where a part of the body is dipped into the hot water (usually the feet or hands). Again, location is a prime indicator of abuse. Any burn to the buttocks or genitals or hands are suspect. It is unlikely that ordinary, accidental trauma could occur there.

Head Injuries: What To Look For

- Black Eyes
- Split Lips
- Any series of lumps or bruises on head or face
- Unexplained loose or missing teeth
- Broken jaw or nose

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These are the things you would see if a child was hit about the head. Unfortunately, with Shaken Baby Syndrome, there is little sign on the outside of the trauma. But on the inside, the brain is becoming severely damaged as the brain is tossed back and forth inside the head.

Bone Injuries: What To Look For

- Spiral breaks caused by twisting or pulling
- Rib fractures

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If a child is going to break a bone in a fall, the impact of the fall will break the bone across. In non-accidental trauma, the arms or legs are often twisted or pulled, leaving a break in a spiral pattern. Also, kids don't break their ribs with normal play. So any broken rib should be suspect.

Physical Indicators of Physical Neglect

- Consistent hunger
- Poor hygiene
- Inappropriate dress
- Consistent lack of supervision
- Constant fatigue or listlessness
- Unattended physical problems or illnesses
- Abandonment

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Review the slide.

Behavioral Indicators of Physical Neglect

- Begging and stealing food
- Always early to school and late to leave
- Constantly falling asleep in class
- Alcohol or drug abuse
- Petty crime
- States that there is no caretaker

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Review the slide.

Physical Indicators of Emotional Abuse

- Lags in physical development or sudden digression in development
- Failure to thrive
- Enuresis and/or encopresis

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Review what emotional abuse is and what it looks like.

Behavioral Indicators of Emotional Abuse

- Habit disorders
- Conduct disorders
- Sleeping problems
- Unwillingness to participate in play
- Behavior extremes
- Inappropriately acts like adult or infant
- Developmental lags
- Fearfulness
- Hysteria, obsession, compulsion, phobias
- Revelations of inappropriate adult behavior

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Some of the signs of emotional abuse are very subtle. Some are not. Sometimes you will see a series of small, subtle signs. And certainly, any change from a child having no indicators to having one or several subtle signs, is suspect.

Habit disorders: These are the kids that suck their fingers or hands, that bite, that rock back and forth. The kids that have some habit that they are unable or unwilling to work on. And it appears that the habit is comforting to them, that they feel safe doing it.

Conduct disorders: These are the kids who are antisocial or destructive. The child who has been fine in class and now has rage behavior. Episodes of rage and out-of-control behavior should always be looked at suspiciously.

These children often have trouble sleeping because they don't feel they are cared for. They can't play because they can't be the child. They have to be alert. They often feel that they are the adult.

Their behavior can be all over the board. Or, they will choose one extreme. They can be overly compliant and passive, or overly aggressive and demanding, or overly hyperactive. Any marked change in a child's behavior should be suspect.

Mentally and emotionally, they lag behind.

They may have a fearfulness of adults or authority figures.

They may inappropriately become hysterical, they may obsess, and they may have many phobias or tiny little fears to hide their one overwhelming fear.

And they may, in a quiet little way, reveal that they were put in a closet, or that their mom's new boyfriend keeps them up very late at night with parties and friends with guns.

Sexual Abuse

- Not a dangerous, weird stranger but a person they know.
- Not an isolated incident but over and over.
- Not out of the blue but gradual over time.
- Not rare or extreme but frequent and many times.
- Not a violent attack but subtle.

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85% of the time sexual abuse is committed by someone they know, a relative or a friend. There are always those cases where it is a violent attack that comes out of the blue. But most of the time it is insidious, and ongoing and very subtle.

Physical Indicators of Sexual Abuse

- Pain or itching around the genital/anal area.
- Anal bleeding, discomfort during bowel movement.
- Bleeding and/or tears around genital area.
- Bruises on inside of thighs, legs or buttocks.
- Sexually transmitted disease.
- Constant complaints about physical self.

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Review the slide points.

Behavioral Indicators of Sexual Abuse

- Fear of going home
- Unusual interest in adult or animal genitals
- Play acting explicit sexual behavior
- Explicit knowledge about sex
- Talking about unusual circumstance
- Passive

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These children may fear going home if the abuse is occurring there, or have a reluctance to go to a particular place.

They have more than the usual curiosity about genitals. And they are curious about adult genitals or animal genitals.

Play acting explicit sexual behavior is not age-appropriate. Children are curious and with their friends they will explore their bodies, but acting out sex, or oral-genital contact is not developmentally appropriate and is a red flag.

Knowing explicitly about sex, like ejaculation is sticky, is not developmentally appropriate.

Talking about unusual circumstances, like someone wearing funny underwear, or someone saying this is our secret place. Big red flags.

And these kids are very passive.

Indicators of Risk for Sexual Abuse

- Extreme paternal dominance or restrictive behavior.
- Extreme paternal over-protectiveness
- Role reversal
- History of abuse
- Severe overcrowding
- Complaints about a seductive child

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If you have a father who is an abuser, you will see them as being very dominant in the home and very restrictive as to what any members of the family may do. They are so restrictive and overprotective that the family becomes isolated.

The child and the mother will have a role reversal. The child will care for the mom.

If there is any history of abuse, or if there is any other type of violence in the home—these are indicators.

In homes where there are many, many people living it can be difficult for the parents to know if the child is safe. And one of those “friends” could comfortably attack a child repeatedly.

If a parent complains that their child is seductive—this is a sign that they are perceiving this child in a sexual light and that abuse could be occurring or could occur.

And if you have a parent that objects vehemently to the use of a child sexual abuse curriculum in your classroom, like Talking About Touching, this is a red flag also.