

Participant Handbook

Preventing Child Abuse and Neglect in Disaster Emergency Shelters

Workshop for Staff and Volunteers

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*Preventing Child Abuse and Neglect
in
Disaster Emergency Shelters*



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Training Objectives

- Provide information to help understand how abuse and neglect occur.
- Present ideas about how you can help keep children safe.
- Let you know how to report suspected abuse or neglect if necessary.
- Emphasize some key principles.

Impact of Family Displacement

- A shelter is a response to a temporary need for refuge.
- Family displacement and change create stress, and everyone responds individually.
- Past experiences will impact how individuals respond.
- Children will react in their own ways.
- Some children are more vulnerable and at risk in crisis.

Changes for Families and Children in Shelters

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“Children’s Responses to Disaster”

Children react to stress in different ways, however, there are some common behaviors that you might see in the classroom as a result of a disaster or disaster-related disruptions. Children of different ages respond to stressful circumstances in different ways. For example, regressive behavior is more likely among younger children (under 7 years) while acting out and withdrawal is more common among older children. The main thing to remember, however, is that the best indicator of distress is **unusual changes in behavior or appearance**. Some common responses to disasters include:

Signs of Distress

- regressive behavior (acting like a younger child): thumb sucking; loss of toilet training skills; separation difficulties (crying, fussing, or clinging when parents leave); difficulty in making transitions; increased whining, dependency, or “neediness”
- disaster-related fears (rain, thunder, wind, etc.)
- difficulty sleeping, nightmares
- lack of emotional expression
- looking sad or depressed, crying
- being unusually quiet or withdrawn
- apathy, being uninterested in things that were usually enjoyed
- complaints of headaches, stomachaches, or other symptoms of illness
- acting out, aggression, disobedience, talking back, destructiveness, stealing
- outburst of anger, irritability, sudden changes in mood
- distractibility, poor concentration, attention problems, restlessness, daydreaming
- lethargy, fatigue, sleeping in class
- increased absences or tardiness
- declining school performance
- changes in relationships with peers (suddenly spending a lot more or a lot less time with friends)

Although symptoms may result from trauma caused by direct exposure to disaster events, they may be due to disruptions in relationships, roles, and routines caused by the disaster. It is important to note that while symptoms displayed by children may be a response to a disaster or disaster-related disruptions, they may also reflect conditions that were present *before* the disaster. The stresses and strains caused by a disaster may have revealed or exacerbated pre-existing difficulties.

Who is at risk?

In general, children who most likely to be affected by disasters are those who:

- directly experienced or had the greatest exposure to the disaster (suffered an injury, had a family member die or get injured, felt they were in physical danger, or witnessed a frightening event)

- experienced major disruptions in relationships (especially within the family), roles and routines that result in long-term changes and strains
- had psychological or academic difficulties prior to the disaster

*Source: Information Resources: University of Illinois Extension Disaster Resources, *Children, Stress, and Natural Disasters, A Guide for Teachers*. <http://web.extension.uiuc.edu/disaster/teacher2/guide.html>. Click on "Children's Responses to Disasters."

What Is Child Abuse & Neglect?

- Recent acts or failures to act which result in death, serious physical or emotional harm, sexual abuse or exploitation.
- Act or failure to act which presents an imminent risk of serious harm.
- Child abuse happens with “regular” people.
- There is no easy way to identify someone who will abuse or neglect children.
- Some children are at higher risk by having special needs.
- Abuse can happen to any child, any age, including teenagers.

How Is Child Abuse and Neglect Defined in Federal Law?

Federal legislation provides a foundation for States by identifying a minimum set of acts or behaviors that define child abuse and neglect. The Federal Child Abuse Prevention and Treatment Act (CAPTA), (42 U.S.C.A. §5106g), as amended by the Keeping Children and Families Safe Act of 2003, defines child abuse and neglect as, at 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.

What Are the Major Types of Child Abuse and Neglect?

Within the minimum standards set by CAPTA, each State is responsible for providing its own definitions of child abuse and neglect.¹ Most States recognize four major types of maltreatment: neglect, physical abuse, sexual abuse, and emotional abuse. Although any of the forms of child maltreatment may be found separately, they often occur in combination.

The examples provided below are for general informational purposes only. Not all States' definitions will include all of the examples listed below, and individual States' definitions may cover additional situations not mentioned here.

Neglect is failure to provide for a child's basic needs. Neglect may be:

Physical (e.g., failure to provide necessary food or shelter, or lack of appropriate supervision)
Medical (e.g., failure to provide necessary medical or mental health treatment)²
Educational (e.g., failure to educate a child or attend to special education needs)
Emotional (e.g., inattention to a child's emotional needs, failure to provide psychological care, or permitting the child to use alcohol or other drugs)

These situations do not always mean a child is neglected. Sometimes cultural values, the standards of care in the community, and poverty may be contributing factors, indicating the family is in need of information or assistance. When a family fails to use information and resources, and the child's health or safety is at risk, then child welfare intervention may be required.

Physical abuse is physical injury (ranging from minor bruises to severe fractures or death) as a result of punching, beating, kicking, biting, shaking, throwing, stabbing, choking, hitting (with a hand, stick, strap, or other object), burning, or otherwise harming a child. Such injury is considered abuse regardless of whether the caretaker intended to hurt the child.

Sexual abuse includes activities by a parent or caretaker such as fondling a child's genitals, penetration, incest, rape, sodomy, indecent exposure, and exploitation through prostitution or the production of pornographic materials.

Sexual abuse is defined by CAPTA as "the employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct or simulation of such conduct for the purpose of producing a visual depiction of such conduct; or the rape, and in cases of caretaker or inter-familial relationships, statutory rape, molestation, prostitution, or other form of sexual exploitation of children, or incest with children."

Emotional abuse is a pattern of behavior that impairs a child's emotional development or sense of self-worth. This may include constant criticism, threats, or rejection, as well as withholding love, support, or guidance. Emotional abuse is often difficult to prove and, therefore, CPS may not be able to intervene without evidence of harm to the child. Emotional abuse is almost always present when other forms are identified.

Resources

Child Abuse and Neglect

www.childwelfare.gov/can

Resources and information from the Child Welfare Information Gateway website about child maltreatment, including definitions, signs and symptoms, statistics, types, risk and protective factors, impact, and child fatalities.

Defining Child Abuse and Neglect

www.childwelfare.gov/defining

Resources and information from the Child Welfare Information Gateway website.

Child Maltreatment 2004: *Summary of Key Findings*

www.childwelfare.gov/pubs/factsheets/canstats.cfm

Summarizes national child abuse statistics regarding investigations of child abuse and neglect, victims of maltreatment, perpetrators, fatalities, and services.

Reporting Child Abuse and Neglect

www.childwelfare.gov/responding/reporting.cfm

Resources and information from the Child Welfare Information Gateway website.

Laws and Policies

www.childwelfare.gov/systemwide/laws_policies/index.cfm

Resources and information about State and Federal laws on child abuse and neglect, child welfare, and adoption.

Recognizing Child Abuse and Neglect: Signs and Symptoms

www.childwelfare.gov/pubs/factsheets/signs.cfm

Lists general signs that may signal the presence of child abuse or neglect, as well as signs associated with specific types of abuse.

Preventing Child Abuse and Neglect

www.childwelfare.gov/preventing

Resources and information from the Child Welfare Information Gateway website.

¹ See *Definitions of Child Abuse and Neglect*, from the Child Welfare Information Gateway State Statutes Series (www.childwelfare.gov/systemwide/laws_policies/statutes/define.cfm). [back](#)

² *Withholding of medically indicated treatment* is defined by CAPTA as "the failure to respond to the infant's life threatening conditions by providing treatment (including appropriate nutrition, hydration, and medication) that in the treating physician's or physicians' reasonable medical judgment, will be most likely to be effective in ameliorating or correcting all such conditions." CAPTA does note a few exceptions, including infants who are "chronically and irreversibly comatose"; situations when providing treatment would not save the infant's life but merely prolong dying; or when "the provision of such treatment would be virtually futile in terms of the survival of the infant and the treatment itself under such circumstances would be inhumane."

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What Is Physical Abuse?

- **Non-accidental injuries:**
 - Bruises, cuts, burns, broken bones.
- **Discipline is not physical abuse unless it leaves injuries.**
- **The offender is normally a parent or caretaker but can also be a stranger or older child.**
- **Often the injury is not intentional.**

Recognizing Child Abuse and Neglect: Signs and Symptoms

Author(s): Child Welfare Information Gateway

Year Published: 2006

The first step in helping abused or neglected children is learning to recognize the signs of child abuse and neglect. The presence of a single sign does not prove child abuse is occurring in a family; however, when these signs appear repeatedly or in combination you should take a closer look at the situation and consider the possibility of child abuse.

If you do suspect a child is being harmed, reporting your suspicions may protect the child and get help for the family. Contact your local child protective services agency or police department. **For more information about where and how to file a report, call the Childhelp USA® National Child Abuse Hotline (1.800.4.A.CHILD).**

Recognizing Child Abuse

The following signs may signal the presence of child abuse or neglect.

The Child:

- Shows sudden changes in behavior or school performance.
- Has not received help for physical or medical problems brought to the parents' attention.
- Has learning problems (or difficulty concentrating) that cannot be attributed to specific physical or psychological causes.
- Is always watchful, as though preparing for something bad to happen.
- Lacks adult supervision.
- Is overly compliant, passive, or withdrawn.
- Comes to school or other activities early, stays late, and does not want to go home.

The Parent:

- Shows little concern for the child.
- Denies the existence of—or blames the child for—the child's problems in school or at home.
- Asks teachers or other caretakers to use harsh physical discipline if the child misbehaves.
- Sees the child as entirely bad, worthless, or burdensome.
- Demands a level of physical or academic performance the child cannot achieve.
- Looks primarily to the child for care, attention, and satisfaction of emotional needs.

The Parent and Child:

Rarely touch or look at each other.
Consider their relationship entirely negative.
State that they do not like each other.

Types of Abuse

The following are some signs often associated with particular types of child abuse and neglect: physical abuse, neglect, sexual abuse, and emotional abuse. It is important to note, however, these types of abuse are more typically found in combination than alone. A physically abused child, for example, is often emotionally abused as well, and a sexually abused child also may be neglected.

Signs of Physical Abuse

Consider the possibility of physical abuse when the **child**:

Has unexplained burns, bites, bruises, broken bones, or black eyes.
Has fading bruises or other marks noticeable after an absence from school.
Seems frightened of the parents and protests or cries when it is time to go home.
Shrinks at the approach of adults.
Reports injury by a parent or another adult caregiver.

Consider the possibility of physical abuse when the **parent or other adult caregiver**:

Offers conflicting, unconvincing, or no explanation for the child's injury.
Describes the child as "evil," or in some other very negative way.
Uses harsh physical discipline with the child.
Has a history of abuse as a child.

Signs of Neglect

Consider the possibility of neglect when the **child**:

Is frequently absent from school.
Begs or steals food or money.
Lacks needed medical or dental care, immunizations, or glasses.
Is consistently dirty and has severe body odor.
Lacks sufficient clothing for the weather.
Abuses alcohol or other drugs.
States that there is no one at home to provide care.

Consider the possibility of neglect when the **parent or other adult caregiver**:

Appears to be indifferent to the child.
Seems apathetic or depressed.
Behaves irrationally or in a bizarre manner.
Is abusing alcohol or other drugs.

Signs of Sexual Abuse

Consider the possibility of sexual abuse when the **child**:

- Has difficulty walking or sitting.
- Suddenly refuses to change for gym or to participate in physical activities.
- Reports nightmares or bed wetting.
- Experiences a sudden change in appetite.
- Demonstrates bizarre, sophisticated, or unusual sexual knowledge or behavior.
- Becomes pregnant or contracts a venereal disease, particularly if under age 14.
- Runs away.
- Reports sexual abuse by a parent or another adult caregiver.

Consider the possibility of sexual abuse when the **parent or other adult caregiver**:

- Is unduly protective of the child or severely limits the child's contact with other children, especially of the opposite sex.
- Is secretive and isolated.
- Is jealous or controlling with family members.

Signs of Emotional Maltreatment

Consider the possibility of emotional maltreatment when the **child**:

- Shows extremes in behavior, such as overly compliant or demanding behavior, extreme passivity, or aggression.
- Is either inappropriately adult (parenting other children, for example) or inappropriately infantile (frequently rocking or head-banging, for example).
- Is delayed in physical or emotional development.
- Has attempted suicide.
- Reports a lack of attachment to the parent.

Consider the possibility of emotional maltreatment when the **parent or other adult caregiver**:

- Constantly blames, belittles, or berates the child.
- Is unconcerned about the child and refuses to consider offers of help for the child's problems.
- Overtly rejects the child.

Resources

Identifying Child Abuse and Neglect

www.childwelfare.gov/can/identifying

Resources and information from the Child Welfare Information Gateway website about signs and symptoms of child maltreatment, including training resources.

Preventing Child Abuse and Neglect

www.childwelfare.gov/preventing

Resources and information from the Child Welfare Information Gateway website.

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Updated on July 24, 2006

Discipline vs. Abuse

Most adults can agree that physical abuse occurs all too often with damaging and sometimes deadly results. However, there is less agreement about the dividing line between positive discipline and abuse. Many parents fear that "sparing the rod will spoil the child" while others feel that any form of physical punishment is cruel and ineffective in controlling a child's behavior.

In attempting to legislate child abuse laws and clarify the problem, state governments are beginning to define abuse in terms of outcome rather than intent. Washington State, for example, defines physical abuse as actions which have lasting physical effects, such as broken bones, burns, cuts, internal organ damage or substantial bruises.

While it is important not to base protective child abuse legislation on something as elusive as "intent," a closer look at intent can help many parents to evaluate discipline measures and guide them towards safe and effective parenting.

DISCIPLINE is designed to help children control and change their behavior. Its purpose is to encourage moral, physical and intellectual development and a sense of responsibility in children. Ultimately, older children will do the right thing, not because they fear external reprisal, but because they have internalized a standard initially presented by parents and other caretakers. In learning to rely on their own resources rather than their parents, children gain self-confidence and a positive self-image.

ABUSE, on the other hand, is characterized by its orientation toward satisfying needs or expressing the negative feelings of parents or other caregivers. While it may result in positively changing the child's behavior, often the improvement is temporary and followed by a later acting out of the hatred, revenge and hostility they have learned from their parents. To avoid further abuse, children may lie, run away or exhibit other forms of avoiding responsibility. Abuse tends to damage the self-esteem of both the parents and the children.

SAFE, EFFECTIVE DISCIPLINE is a correction given in **love**. In evaluating methods of guiding their children's behavior, parents or guardians need to ask themselves:

Is the discipline:

- carefully related to the offense?
- administered in the calmness of conviction rather than in the heat of anger?
- fair, weighting heavily in consideration of the child?
- occasional, and of brief duration?
- free from physical violence? (Examples are a look of reproach, scolding or the taking away of a valued privilege.)

A "yes" answer turns all of the above questions into guidelines for safe and effective discipline.

Parents can adhere to these safe, disciplinary guidelines regardless of whether they believe that physical discipline is right or wrong. This is a safety issue.

For more information on safe, effective discipline and abuse prevention, the following resources may be helpful:

Books

- *Between Parent and Child* by Hiam Ginott. Avon Books. New York. 1965.
- *I Still Love You* by Jennifer James and Sue Jett. Seattle Institute for Child Advocacy, Seattle. 1985.
- *What Every Parent Should Know* by Thomas Gorden. National Committee for Prevention of Child Abuse. Washington, CC. 1984.
- *Without Spanking or Spoiling* by Elizabeth Crary. Parenting Press, Seattle. 1979.

Help for Parents Under Stress

Parents Anonymous

7120 Franklin Avenue

Los Angeles, CA 90046

Crisis Line: (800) 421-0353

Discipline vs. Abuse, from the **Committee For Children**



What Is Emotional Abuse?

- There is an assault on child's self-esteem, mental health or social development.
- The offender most often is a parent or caretaker--someone whose approval is important to the child.
- It is sometimes coupled with physical abuse or neglect, but not always.

Examples of Emotional Abuse

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“What Is Emotional Child Abuse?”

Taken from
Help Guide Mental Health Issues
www.helpguide.org/mental/child_abuse_physical_emotional_sexual_neglect.htm

Emotional abuse is another person’s **attitude, behavior, or failure to act that interferes with a child’s mental health or social development**. Surprisingly, emotional abuse can have more long-lasting negative psychiatric effects than either physical abuse or sexual abuse (Reuters Health Information Medline Plus).

Other names for emotional abuse are:

- verbal abuse
- mental abuse
- psychological maltreatment or psychological abuse

Emotional abuse can range from a simple verbal insult to an extreme form of punishment. The following are examples of emotional child abuse:

- **ignoring, withdrawal of attention, or rejection**
- **lack of physical affection** such as hugs
- **lack of positive reinforcement**, such as praise or saying “I love you”
- **yelling** or screaming
- **threatening** or frightening
- **negative comparisons to others**
- **belittling**; telling the child he or she is “no good,” “worthless,” “bad,” or “a mistake”
- **shaming**, humiliating, or name-calling
- **habitual blaming**
- **using extreme forms of punishment**, such as confinement to a closet or dark room, tying to a chair for long periods of time, or terrorizing a child
- **child exploitation**, such as child labor
- **witnessing the physical abuse of others**
- **child kidnapping**
- **parental child abduction, or child stealing**

Emotional abuse is almost always present when another form of abuse is found. (Some overlap exists between the definitions of emotional abuse and emotional neglect.)

Emotional child abuse can come from adults or from other children:

- parents or caregivers
- teachers or athletic coaches
- siblings
- bullies at school or elsewhere
- middle- and high-school girls in social cliques

What Is Neglect?

- Failure to provide for child's basic needs
- Can be:
 - Physical
 - Medical
 - Educational
 - Emotional
- Physical and emotional neglect are most relevant in the shelter.
- Poverty and neglect are not synonymous – make use of available resources.

What Is Physical Neglect?

- Deprived of basic essentials
- Lack of adequate food, clothing, shelter, hygiene, medical/dental care
- Lack of supervision – many variables – use judgment re: risk of harm

Physical Neglect

The Department of Health and Human Services' *Third National Incidence Study of Child Abuse and Neglect (NIS-3)* defines physical neglect as any of the following:

- **Refusal of health care**—failure to provide or allow needed care in accordance with recommendations of a competent health-care professional for a physical injury, illness, medical condition, or impairment.
- **Delay in health care**—failure to seek timely and appropriate medical care for a serious health problem that any reasonable layperson would have recognized as needing professional medical attention.
- **Abandonment**—desertion of a child without arranging for reasonable care and supervision.
- **Expulsion**—other blatant refusals of custody, such as permanent or indefinite expulsion of a child from the home without adequate arrangement for care by others or refusal to accept custody of a returned runaway.
- **Inadequate supervision**—leaving a child unsupervised or inadequately supervised for extended periods of time, or allowing the child to remain away from home overnight without knowing or attempting to determine the child's whereabouts.
- **Other physical neglect**—may include inadequate nutrition, clothing, or hygiene; conspicuous inattention to avoidable hazards in the home; and other forms of reckless disregard for the child's safety and welfare (e.g., driving with the child while intoxicated, leaving a young child unattended in a car).

Adapted from J. Goldman, M. K. Salus, D. Wolcott, and K. Y. Kennedy. (2003). *A coordinated response to child abuse and neglect: The foundation for practice*. Washington, DC: U.S. Department of Health and Human Services. Retrieved June 2006 from <http://www.childwelfare.gov/pubs/usermanuals/foundation/foundationc.cfm>

Selected Resources

[Boarder Babies, Abandoned Infants, and Discarded Infants](#)

National Abandoned Infants Assistance Resource Center (2005)
Discusses definitions, prevalence, characteristics, and implications for boarder babies, abandoned infants, and discarded infants. ([PDF](#) - 156 KB)

Neglect of Children's Health Care

Dubowitz (1999)
In *Neglected Children: Research, Practice and Policy*
[View Abstract](#)

Discusses the definition of neglected health care, its frequency, etiology, major manifestations, and management.

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A graphic of a spiral-bound notebook with a brown cover and a light beige page. The spiral binding is on the left side. The page contains the title and a list of bullet points.

What Is Emotional Neglect?

- Lack of positive attention
- Ignored, rejected
- No comforting when upset
- No positive reinforcement
- No physical affection
- Often coupled with emotional abuse and/or physical neglect

Emotional Neglect

The Department of Health and Human Services' *Third National Incidence Study of Child Abuse and Neglect (NIS-3)* defines emotional neglect as any of the following:

- **Inadequate nurturing or affection**—marked inattention to the child's needs for affection, emotional support, or attention.
- **Chronic or extreme spouse abuse**—exposure of the child to chronic or extreme spouse abuse or other domestic violence.
- **Permitted drug or alcohol abuse**—encouragement or permission of drug or alcohol use by the child.
- **Permitted other maladaptive behavior**—encouragement or permission of other maladaptive behavior (e.g., chronic delinquency, severe assault) under circumstances where the parent or caregiver has reason to be aware of the existence and seriousness of the problem but does not intervene.
- **Refusal of psychological care**—refusal to allow needed and available treatment for a child's emotional or behavioral impairment or problem in accordance with a competent professional recommendation.
- **Delay in psychological care**—failure to seek or provide needed treatment for a child's emotional or behavioral impairment or problem that any reasonable layperson would have recognized as needing professional psychological attention (e.g., suicide attempt).

Adapted from J. Goldman, M. K. Salus, D. Wolcott, and K. Y. Kennedy. (2003). *A coordinated response to child abuse and neglect: The foundation for practice*. Washington, DC: U.S. Department of Health and Human Services. Retrieved June 2006 from <http://www.childwelfare.gov/pubs/usermanuals/foundation/foundationc.cfm>

Updated on July 20, 2006

What Is Sexual Abuse?

- Inappropriate interaction, sexual in nature
- No easy ways to tell who will sexually abuse children
- Offender deliberately seeks victim
- *Any child can become a victim:
 - One in three girls
 - One in seven boys
- May be from dysfunctional home
- Also may be victim of physical or emotional abuse
- Increased vulnerability:
 - Family under severe stress or trauma
 - Young children with less developed cognitive skills
 - Adolescents – sexually curious and inexperienced

*(Tobin & Kessner, 2002)

Sexual Abuse

Child sexual abuse generally refers to sexual acts, sexually motivated behaviors, or sexual exploitation involving children. Child sexual abuse includes a wide range of behaviors, such as:

- Oral, anal, or genital penile penetration
- Anal or genital digital or other penetration
- Genital contact with no intrusion
- Fondling of a child's breasts or buttocks
- Indecent exposure
- Inadequate or inappropriate supervision of a child's voluntary sexual activities
- Use of a child in prostitution, pornography, Internet crimes, or other sexually exploitative activities

Sexual abuse includes both touching offenses (fondling or sexual intercourse) and nontouching offenses (exposing a child to pornographic materials) and can involve varying degrees of violence and emotional trauma. The most commonly reported cases involve incest, or sexual abuse occurring among family members, including those in biological families, adoptive families, and stepfamilies. Incest most often occurs within a father-daughter relationship; however, mother-son, father-son, and sibling-sibling incest also occurs. Sexual abuse is also sometimes committed by other relatives or caretakers.¹

Of the estimated 872,000 children who were found to be victims of maltreatment in 2004, 9.7 percent were sexually abused.

- [Signs of sexual abuse](#)
- [Related resources](#)

¹Adapted from J. Goldman, M. K. Salus, D. Wolcott, and K. Y. Kennedy. (2003). *A coordinated response to child abuse and neglect: The foundation for practice*. Washington, DC: U.S. Department of Health and Human Services. Retrieved June 2006 from <http://www.childwelfare.gov/pubs/usermanuals/foundation/foundationc.cfm>

Selected Resources

[Victims by Maltreatment Type, 2004](#)

Children's Bureau, U.S. Department of Health and Human Services (2006)
In *Child Maltreatment 2004*
Provides State-by-State data related to the major types of child abuse and neglect.

[What Is Child Maltreatment?](#)

Office on Child Abuse and Neglect (HHS) User Manual Series (2003)
In *A Coordinated Response to Child Abuse and Neglect: The Foundation for Practice*
Presents general definitions by type of maltreatment.

Related Information Gateway Topics

[Child abuse & neglect: Defining child abuse & neglect](#)

[Child abuse & neglect: Identifying child abuse & neglect](#)

[Child abuse & neglect: Prevalence by type of abuse](#)

[Child abuse & neglect: Perpetrators of certain types of abuse](#)

[Child abuse & neglect: Risk factors for sexual abuse](#)

[Child abuse & neglect: Impact of sexual abuse](#)

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Signs of Sexual Abuse

The presence of a single sign does not prove child abuse is occurring in a family; however, when these signs appear repeatedly or in combination you should take a closer look at the situation and consider the possibility of child abuse.

Consider the possibility of sexual abuse when the **child**:

- Has difficulty walking or sitting
- Suddenly refuses to change for gym or to participate in physical activities
- Reports nightmares or bedwetting
- Experiences a sudden change in appetite
- Demonstrates bizarre, sophisticated, or unusual sexual knowledge or behavior
- Becomes pregnant or contracts a venereal disease, particularly if under age 14
- Runs away
- Reports sexual abuse by a parent or another adult caregiver

Consider the possibility of sexual abuse when the **parent or other adult caregiver**:

- Is unduly protective of the child or severely limits the child's contact with other children, especially of the opposite sex
- Is secretive and isolated
- Is jealous or controlling with family members

This information was adapted, with permission, from *Recognizing Child Abuse: What Parents Should Know*. Prevent Child Abuse America. ©2003.

Selected Resources

[Recognizing Child Abuse and Neglect: Signs and Symptoms](#)

Child Welfare Information Gateway (2003)

Lists general signs that may signal the presence of child abuse and also includes signs associated with specific types of abuse. ([PDF](#) - 288 KB)

Related Information Gateway Topics

[Child abuse & neglect: Identifying child abuse & neglect](#)

Updated on August 30, 2006

Sexual Abuse by Strangers

- Stranger danger
- Unknown to child/family
- Hangs around places children congregate (playground – video arcade, etc.)
- Looking for opportunity – child alone
- May target a certain age/sex, but not always
- Controls child through force
- May “trick” the child into coming close or going to an isolated location

Sexual Abuse by Family Members

- Parent, step-parent, grandparent, uncle, older sibling, cousin etc.
- Control child through private access and family authority.
- Grooming process helps child think abuse is “normal.”
- Threats may imply the child will be “in trouble,” not necessarily physical violence.

Sexual Abuse by Acquaintances

(1)

- Builds trust with child.
- Very involved with children's activities.
- Pays attention, demonstrates affection, brings gifts, listens to the child.
- Lowers child's sexual inhibitions.
- For younger child, may turn attention to parents first, win their trust.

Sexual Abuse by Acquaintances

(2)

- Difficult to detect:
 - Society encourages healthy involvement with children.
 - Offender looks like “us”; harder to believe it's happening.
 - No hard evidence.
- If it seems too good to be true, it probably is.

What to Watch for When Adults Are Around Children

- Have you ever seen someone playing with a child and felt uncomfortable?
- Maybe you thought, “I’m just overreacting,” or, “He/She doesn’t really mean that.”
- Don’t ignore comments or behaviors, learn to talk about them or ask more questions about what you have seen.
- The checklist below offers some warning signs.
- Do you know an adult or older child who:
 - Refuses to let a child or teenager set any of his or her own limits?
 - Insists on hugging, touching, kissing, tickling, wrestling with, or holding a child even when the child does not want this affection?
 - Is overly interested in the sexuality of a particular child or teen?
 - Manages to get time alone or insists on uninterrupted time alone with a child?
 - Regularly offers to baby sit many different children for free, or takes children on overnight outings alone?
 - Buys children expensive gifts or gives them money for no apparent reason?
 - Offers alcohol or drugs to teenagers or children when other adults are not around?
 - Frequently walks in on children/teens in the bathroom?
 - Allows children or teens to consistently get away with inappropriate behaviors?
- Any one of these behaviors does not mean that a child is in danger.
- But if you answered “yes” to more than one of these questions, begin to ask your own questions and get help.
- Trust your gut. For information and advice on how to talk to someone, or for resources, please call the Stop It Now! Toll-Free Helpline at 1-888-PREVENT.

Prevent Child Sexual Abuse: Facts About Those Who Might Commit It.

STOP IT NOW! 2005, <http://www.stopitnow.com/mn/pdf/Facts%20about%20abuse.pdf>;
www.stopitnow.org

Potential for Abuse or Neglect: Vulnerable Children

- Children need adult assistance to remain safe.
- Elements that make children more vulnerable include:
 - Age,
 - Physical or mental disability,
 - Illness,
 - Provocative behavior,
 - Non-assertive behavior,
 - Powerless, defenseless, and
 - Trauma, stress.
- Even older children (pre-adolescents, teenagers) can be vulnerable.

How to Prevent Child Abuse or Neglect (1)

- Plan ahead.
 - Consider sleeping arrangements appropriate for families and individuals.
 - Arrange for special dietary and hygiene needs of infants and toddlers.
 - Develop activities for children of different ages.
 - Provide trained professionals to assist with trauma and family needs.
 - Ensure adequate and safe child care is available in the shelter.
 - Choose staff/volunteers wisely.

Prevention Planning

1.

2.

3.

4.

5.

6.

7.

8.

2006 Child Abuse Prevention Community Resource Packet and Poster

The 2006 Community Resource Packet: Safe Children and Healthy Families Are a Shared Responsibility, which contains one prevention poster, is available at no cost. Additional posters are also available at no cost. You are welcome to order, download, duplicate, and redistribute any of the materials in the packet and the poster.

Safe Children and Healthy Families are a Shared Responsibility: 2006 Community Resource Packet [includes poster] = Los Niños Fuera de Peligro y las Familias Saludables son una Responsabilidad Compartida: Sea un HÉROE en su Comunidad (2006).

Author(s): Children's Bureau. Office on Child Abuse and Neglect., Child Welfare Information Gateway

Availability: [View Publication](#)
[Printable Version](#)
[Order Publication \(Free - Add to Cart\)](#)

Year Published: 2006 - 116 pages

Written in both English and Spanish, this information packet contains resources designed to help communities, organizations, and individuals raise public awareness about supporting families and preventing child abuse and neglect. The packet includes the following: an overview of family support and how it can help prevent abuse and neglect; what organizations can do to promote safe children and healthy families, including building on family strengths; tips for building successful collaborations; ways organizations can develop and deliver effective messages to promote family support; examples of community awareness activities including a sample article written for the Opinion/Editorial (OpEd) section of a local ...

Also available in Spanish: [Download Publication](#) (PDF 3487 KB)

Safe Children and Healthy Families Are a Shared Responsibility: Become One of the STARS in Your Community (2006) [poster] = Los Niños Fuera de Peligro y las Familias Saludables son una Responsabilidad Compartida: Sea un HÉROE en su Comunidad (2006) [póster].

Author(s): Child Welfare Information Gateway

Availability: [Printable Version](#)
[Order Publication \(Free - Add to Cart\)](#)

Year Published: 2006 - 1 pages

This poster for Child Abuse Prevention Month 2006 lists ways that people can support children and parents in the community. It is presented in English and Spanish.

[Updated on June 27, 2006](#)

How to Prevent Child Abuse or Neglect (2)

- **While shelter is open**
 - Notice where children are and who is with them.
 - Be aware of activities involving children and adults.
 - Look for patterns of behavior.
 - Offer assistance to parents who are struggling.
 - Smile and give words of encouragement.
 - Arrange for a break in child care responsibilities.
 - Routinely check isolated places in the building.
 - Be suspicious if non-related person asks for information about a child.
 - Respond quickly if a child or parent asks for help.

Prevention Tips

1.

2.

3.

4.

5.

6.

7.

8.

How to Report Child Abuse or Neglect

- Don't have to know for sure--can report suspicions--but must be specific.
 - Be specific about behaviors.
 - Be able to give time, date and location where behavior occurred and identify participants.
- Do not attempt to interview any parties.
- If child comes to you, stay calm, non-judgmental and help child report.

How to Report Suspected Child Maltreatment

Anyone can report suspected child abuse or neglect. Reporting abuse or neglect can protect a child and get help for a family—it may even save a child's life.

Child Welfare Information Gateway is not a hotline for reporting suspected child abuse or neglect and it is not equipped to accept reports of this nature. Information Gateway is not equipped to offer crisis counseling. As a service of the Children's Bureau in the U.S. Department of Health and Human Services, Information Gateway does not have the authority to intervene or advise in personal situations.

Childhelp® is a national organization that provides crisis assistance and other counseling and referral services. The [Childhelp® National Child Abuse Hotline](#) is staffed 24 hours a day, 7 days a week, with professional crisis counselors who have access to a database of 55,000 emergency, social service, and support resources. All calls are anonymous. Contact them at 1.800.4.A.CHILD. (1.800.422.4453)

If you need help with personal or family situations, you may wish to visit our resources on [Where to Find Help](#).

If you suspect a child is being abused or neglected or if you are a child who is being maltreated, contact your local child protective services office or law enforcement agency, so professionals can assess the situation. Many States have a toll-free number to call to report suspected child abuse or neglect. To find out where to call, consult the Information Gateway publication, [Child Abuse Reporting Numbers](#).

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Updated on June 5, 2006

Child Abuse Reporting Numbers

Contact Information for Related Organizations

Author(s): Child Welfare Information Gateway

These results are current as of: November 2, 2006

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 may also receive reports of child abuse or neglect. For more information or assistance with reporting, please call **Childhelp®**, **800-4-A-CHILD** (800-422-4453), or your local CPS agency.

In most cases, the toll-free numbers listed below are only accessible from within the State listed. If calling from out-of-State, use the local (toll) number listed or call Childhelp® for assistance. Also listed below are links to State websites, which can provide additional information.

Alabama

Local (toll): (334) 242-9500

Website: <http://www.dhr.state.al.us/page.asp?pageid=304>

Alaska

Toll-Free: (800) 478-4444

Website: <http://www.hss.state.ak.us/ocs/default.htm>

Arizona

Toll-Free: (888) SOS-CHILD (888-767-2445)

Website: <http://www.de.state.az.us/dcyf/cmdps/cps/default.asp>

Arkansas

Toll-Free: (800) 482-5964

Website: http://www.state.ar.us/dhs/chilnfam/child_protective_services.htm

California

Website: http://www.dss.cahwnet.gov/cdssweb/ChildProte_186.htm

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Colorado

Local (toll): (303) 866-5932

Website: <http://www.cdhs.state.co.us/childwelfare/FAQ.htm>

Connecticut

TDD: (800) 624-5518

Toll-Free: (800) 842-2288

Website: <http://www.state.ct.us/dcf/HOTLINE.htm>

Delaware

Toll-Free: (800) 292-9582

Website: <http://www.state.de.us/kids/>

District of Columbia

Local (toll): (202) 671-SAFE (202-671-7233)

Website: <http://cfsa.dc.gov/cfsa/cwp/view.asp?a=3&q=520663&cfsaNav=|31319|>

Florida

Toll-Free: (800) 96-ABUSE (800-962-2873)

Website: <http://www.dcf.state.fl.us/abuse/>

Georgia

Website: <http://dfcs.dhr.georgia.gov/portal/site>

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Hawaii

Local (toll): (808) 832-5300

Website: http://www.hawaii.gov/dhs/protection/social_services/child_welfare/

Idaho

Toll-Free: (800) 926-2588

Website: <http://www.healthandwelfare.idaho.gov/site/3333/default.aspx>

Illinois

Toll-Free: (800) 252-2873

Local (toll): (217) 524-2606

Website: <http://www.state.il.us/dcfs/child/index.shtml>

Indiana

Toll-Free: (800) 800-5556

Website: <http://www.in.gov/dcs/protection/dfcchi.html>

Iowa

Toll-Free: (800) 362-2178

Website: http://www.dhs.state.ia.us/dhs2005/dhs_homepage/children_family/abuse_reporting/child_abuse.html

Kansas

Toll-Free: (800) 922-5330

Website: http://www.srskansas.org/services/child_protective_services.htm

Kentucky

Toll-Free: (800) 752-6200

Website: http://chfs.ky.gov/dcbs/dpp/Child_Safety.htm

Louisiana

Website: http://www.dss.state.la.us/departments/ocs/Reporting_Child_Abuse-Neglect.html

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Maine

TTY: (800) 963-9490

Toll-Free: (800) 452-1999

Website: <http://www.maine.gov/dhhs/bcfs/abuserreporting.htm>

Maryland

Website: <http://www.dhr.state.md.us/cps/report.htm>

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Massachusetts

Toll-Free: (800) 792-5200

Website: <http://www.mass.gov/portal/index.jsp?pageID=eohhs2subtopic&L=5&L0=Home&L1=Consumer&L2=Family+Services&L3=Violence%2c+Abuse+or+Neglect&L4=Child+Abuse+and+Neglect&sid=Eohhs2>

Michigan

Website: http://www.michigan.gov/dhs/0,1607,7-124-5452_7119_7193-15252--,00.html

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Minnesota

Website: http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION-&RevisionSelectionMethod=LatestReleased&dDocName=id_000152

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Mississippi

Toll-Free: (800) 222-8000

Local (toll): (601) 359-4991

Website: http://www.mdhs.state.ms.us/fcs_prot.html

Missouri

Toll-Free: (800) 392-3738

Local (toll): (573) 751-3448

Website: <http://www.dss.mo.gov/cd/rptcan.htm>

Montana

Toll-Free: (866) 820-5437

Website: <http://www.dphhs.mt.gov/aboutus/divisions/childfamilyservices/index.shtml>

Nebraska

Toll-Free: (800) 652-1999

Website: <http://www.hhs.state.ne.us/cha/chaindex.htm>

Nevada

Toll-Free: (800) 992-5757

Local (toll): (775) 684-4400

Website: http://dcfs.state.nv.us/DCFS_PhDirectory.htm

New Hampshire

Toll-Free: (800) 894-5533

Local (toll): (603) 271-6556

Website: <http://www.dhhs.state.nh.us/DHHS/BCP/default.htm>

New Jersey

TDD: (800) 835-5510

TTY: (800) 835-5510

Toll-Free: (877) 652-2873

Website: <http://www.state.nj.us/humanservices/dyfs/hotlines.html>

New Mexico

Toll-Free: (800) 797-3260

Local (toll): (505) 841-6100

Website: <http://www.cyfd.org/index.htm>

New York

TDD: (800) 369-2437

Toll-Free: (800) 342-3720

Local (toll): (518) 474-8740

Website: <http://www.ocfs.state.ny.us/main/cps/>

North Carolina

Website: <http://www.dhhs.state.nc.us/dss/cps/index.htm>

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

North Dakota

Website: <http://www.nd.gov/humanservices/services/childfamily/cps/#reporting>

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Ohio

Website: <http://jfs.ohio.gov/county/cntydir.stm>

Contact the county Public Children Services Agency using the list above or call Childhelp USA® (800-422-4453) for assistance.

Oklahoma

Toll-Free: (800) 522-3511

Website: <http://www1.okdhs.org/en/programsandservices/cps/>

Oregon

Website: <http://www.oregon.gov/DHS/children/abuse/cps/report.shtml>

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Pennsylvania

Toll-Free: (800) 932-0313

Website: <http://www.dpw.state.pa.us/Child/ChildAbuseNeglect/>

Puerto Rico

Toll-Free: (800) 981-8333

Local (toll): (787) 749-1333

Spanish

Information

on

Website:

<http://www.gobierno.pr/GPRPortal/StandAlone/AgencyInformation.aspx?Filter=177>

Rhode Island

Toll-Free: (800) RI-CHILD (800-742-4453)

Website: <http://www.dcyf.ri.gov/chldwelfare/reporting.htm>

South Carolina

Local (toll): (803) 898-7318

Website: <http://www.state.sc.us/dss/cps/index.html>

South Dakota

Local (toll): (605) 773-3227

Website: <http://www.state.sd.us/social/CPS/Services/offices.htm>

Tennessee

Toll-Free: (877) 237-0004

Website: <http://www.state.tn.us/youth/cps/index.htm>

Texas

Toll-Free: (800) 252-5400

Website: https://www.dfps.state.tx.us/Child_Protection/About_Child_Protective_Services/report-ChildAbuse.asp

Utah

Toll-Free: (800) 678-9399

Website: <http://www.hsdcsf.utah.gov>

Vermont

After hours: (800) 649-5285

Website: <http://www.dcf.state.vt.us/fsd/reporting/index.html>

Virginia

Toll-Free: (800) 552-7096

Local (toll): (804) 786-8536

Website: <http://www.dss.virginia.gov/family/cps/index.html>

Washington

TTY: (800) 624-6186

Toll-Free: (866) END-HARM (866-363-4276)

After hours: (800) 562-5624

Website: <http://www1.dshs.wa.gov/ca/safety/abuseReport.asp?2>

West Virginia

Toll-Free: (800) 352-6513

Website: http://www.wvdhhr.org/bcf/children_adult/cps/report.asp

Wisconsin

Website: <http://www.dhfs.state.wi.us/Children/CPS/cpswimap.HTM>

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

Wyoming

Website: <http://dfsweb.state.wy.us/menu.htm>

Click on the website above for information on reporting or call Childhelp® (800-422-4453) for assistance.

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Updated on July 26, 2006

What Happens After Child Abuse Is Reported?

- **What happens next?**
 - The shelter will contact law enforcement and/or social services and information will be assessed.
 - Interviews may be conducted, usually quietly and unobtrusively.
 - You may or may not be interviewed.
 - The outcome will depend on the evidence gathered.
 - Due to confidentiality, you may not know the outcome.



Conclusion

- **Try to set up community relations and establish response protocols before disaster strikes.**
- **Remember that we all share the responsibility to prevent child abuse and neglect.**
- **Each and every one of us can make a difference.**
- **Thank you for your time and interest and for the work you do to assist families and keep children safe!**

Other Resources

- Child Welfare Information Gateway (www.childwelfare.gov)
- National Resource Center for Child Protective Services (www.nrccps.org)
- American Humane Association (www.americanhumane.org)
- National Center for Missing and Exploited Children (www.missingkids.com)
- 2006 Child Abuse Prevention Community Resource Packet (order from Child Welfare Information Gateway 1-800-394-3366)
- Stop It Now! Toll-Free Helpline at 1-888-PREVENT

My 8 Rules for Safety

1. Before I go anywhere, I always check first with my parents or the person in charge. I tell them where I am going, how I will get there, who will be going with me, and when I'll be back.
2. I check first for permission from my parents before getting into a car or leaving with anyone – even someone I know. I check first before changing plans or accepting money, gifts, or drugs without my parents' knowledge.
3. It is safer for me to be with other people when going places or playing outside. I always use the buddy system. 
4. I say NO if someone tries to touch me in ways that make me feel frightened, uncomfortable, or confused. Then I go tell a grown-up I trust what happened.
5. I know it is not my fault if someone touches me in a way that is not O.K. I don't have to keep secrets about those touches.
6. I trust my feelings and talk to grown-ups about problems that are too big for me to handle on my own. A lot of people care about me and will listen and believe me. I am not alone. 
7. It is never too late to ask for help. I can keep asking until I get the help I need.
8. I am a special person, and I deserve to feel safe.

My rules are:

- CHECK FIRST
- USE THE BUDDY SYSTEM
- SAY NO, THEN GO AND TELL
- LISTEN TO MY FEELINGS AND TALK WITH GROWN-UPS I TRUST ABOUT MY PROBLEMS AND CONCERNS



Safety Tips for Adults

1. Make sure you know where the children in your care are at all times, and make certain to provide close supervision at all times either yourself or by trusted adults.
2. Help children acclimate to new environments by taking time to show them around and explain any rules or guidelines to children who are old enough to understand.
3. Since the environment is new for the children in your care, ask how you may make the stay more comfortable.
4. Establish a routine with the children that includes scheduled nutritious meals and bedtimes.
5. Give children time to acclimate, and be patient with those who appear to be withdrawn, shy, or angry.
6. When talking to the children in your care, do so in a calm, nonthreatening, and reassuring manner.
7. Be sensitive to children's individual needs, and seek professional help for any children in your care who demonstrate acting out behaviors, appear to be extremely withdrawn, or have difficulties adjusting to the new environment.
8. Be as involved as possible in activities in which the children in your care participate so you may better observe the adults in charge and how they interact with program participants.
9. Encourage open communication, listen compassionately, and take every opportunity to reassure.
10. Get the support you need from other adults so you may be in the best shape to help those in your care. Reach out for helpful resources.

Safety Tips is adapted from [Know the Rules ... Safety Tips for Children Displaced in Natural Disasters and Their Caregivers](#), Copyright © 2005 National Center for Missing and Exploited Children (NCMEC). All adapted material is used with the permission of NCMEC which reserves all rights thereto. There is no sponsorship, partnership or affiliated relationship between the Children's Bureau National Resource Center for Child Protective Services and NCMEC.

Child Welfare Matters: Coping with Disasters

(Spring 2006 from NRCOI)

Click below to access this handout.

<http://muskie.usm.maine.edu/helpkids/rcpdfs/cwmatters3.pdf>

Coping with Disaster: A Guide for Child Welfare Agencies

(January 1995)

Click below to access this handout.

This is currently being updated. Please check the website for the updates.

<http://www.childwelfare.gov/pubs/copingdisasters.pdf>

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