PEM GUIDE - CHILD ABUSE AND NEGLECT

INTRODUCTION

Currently, there are more than 650,000 confirmed cases of child abuse per year. Many cases are never reported so actual figures are likely much higher. Child abuse consists of physical abuse, sexual abuse, emotional abuse and neglect. Most cases are neglect and physical abuse, with fewer cases of sexual & emotional abuse.

<u>Child abuse</u> – occurs when a child has suffered intentional physical or emotional injury caused by a caregiver, such as a parent, legal guardian, or teacher, which results in mental distress, disability, disfigurement, or the risk of death.

<u>Child neglect</u> – occurs when a child's physical, mental, or emotional condition has been endangered because the parents or legal guardians have failed to provide for basic needs (physical, mental, or emotional) including food, shelter, clothing, medical, dental, eye care and education or failure to provide proper supervision, including abandonment, parental substance abuse (excessive use of drugs or alcohol which interferes with the ability of the parent to supervise the child.)

<u>Physical abuse</u> – occurs when an inflicted physical injury results in distress, disfigurement, or death of a child (e.g. punching, beating, kicking, biting, burning, shaking).

<u>Sexual abuse</u> – consists of using, persuading, or coercing a child to engage in any sexually explicit conduct (e.g. fondling, intercourse, rape, molestation, sodomy, exhibitionism).

<u>Emotional abuse</u> – occurs when the parent or caregiver exhibits persistent behavior that assaults, demeans, diminishes, or debases the child, and interferes with the child's normal development. Emotional abuse is present in all other forms of child abuse, but it can also occur by itself.

Risk factors

Family – stress, poverty, homelessness, unemployment.

Parent – abused as child, expectations mismatch child's development, single parent, psychiatric problems, impulsive behavior, substance abuse.

Social – No supports (friends, family), violence learned/acceptable socially.

Child – stepchild, child with special health or other needs (e.g. prematurity, chronic medical or psychiatric problems).

IDENTIFICATION OF SUSPECTED CHILD ABUSE

<u>History</u> – may clearly detail abuse/neglect. Often the history is vague and doesn't match physical findings. The history may change from one telling to the next, or differ between caregivers. For child neglect, sexual abuse and emotional abuse, physical exam may be normal and it is most important to identify abuse or neglect in the history.

<u>Physical</u> – look for cuts, scrapes, bruises (ecchymosis), burns, bites, redness, and swelling; typical abusive injuries include unusual locations (inner thighs, cheeks, buttocks, lower back), patterned bruises/burns, multiple injuries, different stages of healing, unusual fractures (e.g. spiral fractures, multiple fractures in different stages of healing, metaphyseal chip/bucket handle). CNS injuries, shaken baby syndrome (subdural hematoma) occur especially in infants. In sexual abuse 80% of physical exams are normal. Importantly, most case of physical abuse occur without physical findings.

<u>Interactions</u> – increased suspicion with arguments, lack of parent holding or making eye contact with child; parent has impaired speech/motor consistent with intoxication, overt striking of child in front of health care providers.

Actions for suspicion of child abuse or neglect

MANAGEMENT

<u>Medical Care</u> - the physician must care for life or limb threatening medical/psychiatric problems.

Reporting - All physicians are mandated reporters and must report (based on state law) suspicion of child abuse/neglect. In order to make a report to the appropriate agency, a physician should: 1) involve other resources — nursing, physician, social work, child protection, security; 2) explain need to report to parent/caregiver; 3) make the report; 4) document clearly and objectively the history, physical, and tests that created suspicion for the report; 5) plan further care and placement of child with child protective services.