Office of Families and Children

CHILD ABUSE AND NEGLECT

A Reference for the Community
Third Edition
FACTS ABOUT CHILD ABUSE AND NEGLECT

- Child abuse and neglect cuts across all class, cultural, and educational groups.
- Child abuse and neglect may be a cyclical or generational phenomenon.
- Child abuse and neglect is a symptom of family dysfunction or crisis.

AN OPEN LETTER TO THE COMMUNITY

As a member of the community, you may be the first person to come into contact with a family where abuse or neglect is occurring. You are encouraged to act on behalf of a child in need of protection, and to report any suspicion of abuse or neglect to a Children Services Agency or law enforcement agency. We all have a responsibility to report a child we suspect may be in danger. In order to begin the intervention necessary to protect the child and help the family, the community must be knowledgeable in recognizing indicators of child abuse and neglect and the proper methods to make a referral. This booklet has been developed to address the most frequent child abuse and neglect issues.

We, at the Ohio Department of Job and Family Services, ask for your help in protecting Ohio’s children. We urge you to contact others in your community to promote education on the topic of child abuse and neglect.

Additional copies of this book can be obtained from ODJFS Warehouse Services at:
Phone: (614) 728-7300
http://www.odjfs.state.oh.us/forms/order.asp?loc=INTER

An online copy can be downloaded from the Ohio Department of Job and Family Services Website at:
http://www.odjfs.state.oh.us/forms/inter.asp

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General Information about Child Abuse and Neglect
HOW MUCH DO YOU KNOW ABOUT CHILD ABUSE AND NEGLECT?

1. Child abuse and neglect occurs rarely.
   TRUE   FALSE
2. Child abuse and neglect occur at about the same frequency.
   TRUE   FALSE
3. Abused or neglected children may become abusive or neglectful parents.
   TRUE   FALSE
4. Spanking and other types of physical discipline are wrong and considered to be child abuse.
   TRUE   FALSE
5. The difference between abuse and neglect is that abuse represents an action against a child while neglect represents a lack of action for the child.
   TRUE   FALSE
6. Abuse may be directed toward only one child in the family.
   TRUE   FALSE
7. Neglect is most apt to involve children from infancy to six years of age.
   TRUE   FALSE
8. Most abusive and neglectful parents suffer from mental illness.
   TRUE   FALSE
9. Bruises on the elbows, knees, shins, or forehead are likely to be accidental in a preschooler.
   TRUE   FALSE
10. Abused children usually will discuss the abuse in an effort to stop it.
    TRUE   FALSE
11. Early reporting is encouraged so that the child may be removed from the home of the abusive parent.
    TRUE   FALSE
12. You must have evidence of abuse or neglect before you report it.
    TRUE   FALSE
13. If you report abuse or neglect, and your suspicions are unfounded, you are liable for civil or criminal suit.

TRUE    FALSE

14. An anonymous report of abuse and neglect will not be investigated.

TRUE    FALSE

15. The identity of the person who reports child abuse or neglect is protected under Ohio law.

TRUE    FALSE

16. Children frequently will fantasize that they have been sexually abused to “get even” with an adult.

TRUE    FALSE

17. Medical health-related mental health and legal professionals are not legally required to report child abuse and neglect because of their responsibility to keep client confidentiality.

TRUE    FALSE

18. Abused and neglected children are almost always from low-income families.

TRUE    FALSE

19. Sexual abuse usually occurs between a child and a stranger.

TRUE    FALSE

20. A child may be abused without anyone ever knowing.

TRUE    FALSE

21. A child never will enjoy sexual touch.

TRUE    FALSE

22. By teaching a child about sexual assault, you may frighten the child or cause the child to be sexually active.

TRUE    FALSE

23. If a family’s income is over a certain level, the family will have to pay for services from the public children service agency.

TRUE    FALSE

24. If parents are having trouble coping with their children, they can contact the public children services agency for help.

TRUE    FALSE

25. A child under 12 years of age should never be left home alone.

TRUE    FALSE
7. Neglect is most apt to involve children from infancy to six years of age.

TRUE

Children under six are at a higher risk of neglect than children of any other age group. This may be the result of the amount of continual care children in this age group require, developmental abilities to reason and understand, unrealistic behavioral and developmental expectations which frequently are placed upon children of this age, and a physical inability for self-protection. Both neglect and abuse, however, can and do occur at any age.

8. Most abusive and neglectful parents suffer from mental illness.

FALSE

It is estimated that only 10 percent of abusive or neglectful parents suffer from a serious mental disorder; 90 percent of these parents can be successfully treated if professional intervention occurs. The reasons parents abuse or neglect their children are as varied as the individuals themselves. Certain factors, however, such as lack of parenting knowledge, excessive stress within the home, and isolation from the support of family and friends, are known to contribute to the occurrence of abuse or neglect.

9. Bruises on the elbows, knees, shins, or forehead are likely to be accidental in preschooler.

TRUE

Many injuries such as these are the result of the normal bumps and falls commonly experienced by children of this age. The presence of bruises or cuts on a child does not necessarily mean that a child has been abused. Injuries should be noted in light of the child's ability to cause such injury. The older a child is, the greater the ability to perform tasks that might result in injury. Bruises, which occur on the back, thighs, buttocks, face, or back of the legs are less likely to be accidental. Any injury on an infant is suspect.

10. Abused children usually will discuss the abuse in an effort to stop it.

FALSE

To a child, the fear of the unknown may be much more frightening than the abuse itself. Children often will try to hide their injuries in an attempt to protect their parent or caretaker. The child may feel that the punishment received was deserved or that the parent will be punished and removed from the home if the abuse is discovered. In the same way, other family members may try to protect the abusive parent or pretend that the abuse is not occurring. The occurrence of abuse within the home does not mean that strong bonds do not exist between family members. Fear of severe punishment or breakup of the family unit may prevent the reporting of abuse. Sexual Abuse often is accompanied by threats of violence or retaliation.
if the abuse is reported. The child is made to feel responsible for the abuse and any action that may take place as a result of reporting the abuse. Many children simply do not believe that anyone will listen to them if they tell.

11. Early reporting is encouraged so that the child may be removed from the home of the abusive parent.

**FALSE**

Early reporting to the children services agency is encouraged to prevent injury or harm to a child. If abuse or neglect is occurring, the children services agency will work with the family to alleviate or correct those factors, which contribute to its occurrence. Ohio's child abuse and neglect laws are not intended to punish but, instead, to help the family. Primary emphasis is placed upon preserving the family unit whenever possible through the provision of supportive services. Children will be removed from the home only when sufficient protection cannot be provided to guarantee their continued safety within the home environment. When deciding whether to report suspected abuse or neglect, you should consider that, regardless of the circumstances, the abuse or neglect will not stop without professional intervention. Not to report is to allow the abuse or neglect to continue.

12. You must have evidence of abuse or neglect before you report it.

**FALSE**

Ohio law states that a report should be made if you have “reason to believe” that abuse or neglect is occurring – this means if you suspect abuse or neglect for any reason. Physical proof or other validation is not required. It is not your responsibility to determine if abuse or neglect is in fact occurring or any of the circumstances surrounding its occurrence. Making this determination is the legally mandated function of the public children services agency. To assist the children services worker in this task, you will be asked for information concerning the child, the perpetrator, and the abuse or neglect. Certain information, such as the age of the child or identity of the abuser, may be unknown to you. Although this information is helpful to the children services agency, it is not necessary for making a report.

13. If you report abuse or neglect, and your suspicions are unfounded, you are liable for civil or criminal suit.

**FALSE**

Although no statute can forbid the filing of civil or criminal charges, Ohio law protects the reporter of suspected child abuse or neglect from any decision or award, which might be sought through the filing of such a claim. Under Ohio statute, anyone participating in making a report of suspected child abuse or neglect is immune from civil or criminal liability that might otherwise be incurred as a result of such action.

14. An anonymous report of abuse and neglect will not be investigated.

**FALSE**

The public children services agency is required by law to investigate every report of suspected child abuse and neglect. Although anonymous reports are permitted, they are not encouraged. People who report are asked to give their names so that they may be contacted at a later date if additional information is needed. The reporter's name will not be used or divulged during the investigation.

15. The identity of the person who reports child abuse or neglect is protected under Ohio law.

**TRUE**

Every report of suspected abuse or neglect is confidential. Administrative rules, which govern the receipt of child abuse and neglect reports, specifically prohibit the children services worker from identifying the reporter in any way. It should be realized, however, that although steps will be taken to protect the identity of the person who reports, the nature of the complaint or the circumstances described may allow a family to attribute the report to a specific source. Still, when evaluating whether or not to make a report, the benefits to the family and child far outweigh this consideration. A report of suspected child abuse or neglect is not an attempt to harm or punish a family, but rather, an attempt to help. Your report may be the only chance the child has for protection and the family has to obtain outside support.

16. Children frequently will fantasize that they have been sexually abused to “get even” with an adult.

**FALSE**

A rule of thumb which always should be used is that when a child tells you that he has been sexually touched or used in any way, believe it. It is almost never a lie or a fantasy. A young child will not have a broad enough frame of reference to make up such a story. Even if, in an older child, the story is that rare result of anger or fantasy, the fact that the child is exhibiting such extreme behavior is a signal that professional intervention is needed.

17. Medical health-related mental health and legal professionals are not legally required to report child abuse and neglect because of their responsibility to keep client confidentiality.

**FALSE**

The responsibility to report is a moral duty inherent to the helping disciplines, such as law, medicine, mental health, education, religion, and social work. The ethical commitment, which these professionals have accepted through virtue of their positions, is recognized under Ohio law through the stipulation of mandated reporting. Ohio law does include
exemption under specific circumstances for attorneys and doctors to preserve the attorney-client and physician-patient relationship.

18. Abused and neglected children almost always are from low-income families.
FALSE

Maltreated children can be found in all income groups. According to the National Study of the Incidence and Severity of Child Abuse and Neglect, children from low-income families are, however, more likely to suffer maltreatment than are children from high-income families. This finding lends weight to the hypothesis that various environmental and family stresses associated with low income contribute to child abuse and neglect. However, the most persistent characteristic of child abuse and neglect is its universality. No geographic, ethnic, or economic setting is free of child abuse and neglect. In fact, the National Study of the Incidence and Severity of Child Abuse and Neglect found the incidence rates to be similar for urban, suburban, and rural communities.

19. Sexual abuse usually occurs between a child and a stranger.
FALSE

It is estimated that in 80 percent of the cases of sexual abuse, the perpetrator is an adult known to the child. Only 20 percent of the incidents involve a stranger. Sexual abuse usually does not occur as an isolated incident, but is a long-term situation, which develops gradually. Sexual abuse is not always accompanied by violence and physical force; it may be the result of subtle forms of coercion, such as the use of adult-child authority or parent-child bonds. Young children do not have the developmental or emotional capability to choose to engage in sexual activity with an adult. All sexual abuse, regardless of the form of coercion employed, is the result of force.

20. A child may be abused without anyone ever knowing.
TRUE

Although some forms of abuse and neglect are more difficult to detect than others, there are usually signs or indicators, which singularly or together suggest that a child may be in need of help. The key is learning to recognize and be alert to these indicators. In many instances, the indicators will be environmental or behavioral, not physical.

21. A child never will enjoy sexual touch.
FALSE

Many people find it difficult to comprehend a child feeling any good from such a bad situation and can, as a result, misdirect the blame for its occurrence to the child. Similarly,
MYTH
The child sexual abuser relies on physical violence.

FACT:
The child sexual abuser rarely uses physical violence and usually will avoid its use as injury may lead to discovery. The sexual abuser is more likely to use power and authority as an adult (or older child) to coerce the child victim through bribes, threats, and the child's fear of the unknown. Children are taught to obey without question or resistance, and the abuser's most powerful weapons are authority and secrecy.

MYTH
You usually can spot a child sexual abuser.

FACT:
Unless you are clinically trained and given the opportunity for diagnostic assessment, it is unlikely that you could identify a child sexual abuser. He or she usually does not suffer from pathological mental illness. He or she is likely to engage in ordinary work or social activities and appear normal. It is difficult to "avoid" a child sexual abuser. Even the most cautious and vigilant of parents cannot, nor would they want to, keep a 24-hour watch on their child. Besides, the adult who is prone to sexually abusing children often chooses work or activities which bring him or her into contact with children. The best defense against sexual abuse is education and communication. Parents are primary teachers of children and are responsible for showing them how to survive and cope with life situations. The first thing parents can do to protect their children is to teach them to protect themselves, to communicate their fears, and to talk about their daily activities.

MYTH
The sexual abuser can be the victim of the seductive or sexually promiscuous child.

FACT:
The child is always the victim. A seductive or promiscuous child often is the result, but never the cause, of sexual abuse. One characteristic common to sexual abusers is a capacity for rationalizing their actions, mentally justifying an illegal, unacceptable, and inappropriate behavior as necessary and “right”. Perpetrating the myth of the seductive or sexually promiscuous child is one way of doing this. Through this type of reasoning, the abuser shifts the blame for his/her actions onto someone else. In the same manner, incestuous parents often justify their own sexual behavior as a way of teaching the child. These justifications ignore the abuser’s responsibility as an adult, the child’s vulnerability and dependency on the adult, and the long-term harm to the child.
FACT:
Family denial is usually very strong. Generally, family members will assert that nothing has happened or, if confronted with undeniable circumstances, claim “it will never happen again.” In these situations, treatment is very difficult. If the victim returns home without intensive intervention in the family system, the prior patterns of sexual abuse will continue.

MYTH
The sexual abuser will abuse a child once, and then find another victim.

FACT:
This usually is true, if the sexual abuser is a stranger. This type of perpetrator will abuse many children a single time, generally stopping only if caught. The “stranger abuser” usually is a pedophile, and limits victims to distinct target groups. Their victims are determined by age, sex, and physical attributes of the preference range. When the sexual abuser is known to the child, however, the methods of seduction usually are very different. The abuse frequently will be of long duration, escalating in frequency and intimacy over time. The “known abuser” builds upon the relationship with the child, using the child’s innocence and trust as the main weapons.

GENERAL INFORMATION ABOUT CHILD ABUSE AND NEGLECT

MYTH
Sexual contact with children is the only kind of sexual gratification abusers find satisfying.

FACT:
There are varying theories on the reasons why adults sexually molest children. These differences probably reflect the wide spectrum of personality types, the complexity of the problem, and the difference in types of sexual abuse which occur – from the sadistic “stranger” rape to the long-term relationship of incest. Sexual abuse of children, regardless of the form it takes, is a sexual act, which results in sexual gratification for the perpetrator. The perpetrator may confine his sexual contact to children or have co-existing sexual relationships with adults of the same age group. An examination of the wide difference in opinion regarding the causes of child sexual abuse is important for two reasons. First, the inability to identify the right or wrong approach brings attention to the human factor involved in child sexual abuse. Each case and each incident is unique, characterized by the individuals involved. There is no one cause or reason for child sexual abuse. Second, there are no easy solutions to difficult problems. We don’t have all the answers, and there still is much work to do for children, their families, and people who sexually abuse.

MYTH
The lower the family income and social status, the higher the likelihood of sexual abuse.

FACT:
Socioeconomic status is not a factor in identifying sexual abuse. Sexual abuse occurs at all levels of income and education. Most of the families present an appearance of respectability, function well in the community, and are respected by their peers.

MYTH
In the majority of cases, sexually abused children want to permanently leave their homes.

FACT:
On the contrary, most children do not want their families disrupted; they simply want the abuse to stop.

MYTH
Once incest is brought to the attention of the authorities, the family admits the problem and seeks help.
**Emotional Abuse**

- Exhibits evidence of any mental injury or death, inflicted other than accidental means, or an injury or death, inflicted other than by accidental means, or an injury or death which is at variance with the history given of it. Except as provided in the following paragraph, a child exhibiting evidence of corporal punishment or other physical disciplinary measure by a parent, guardian, custodian, person having custody or control, or person in loco parentis of a child is not an abused child under this division if the measure is not prohibited under section 2919.22 of the Revised Code.

- Because of the acts of his parents, guardian, or custodian, suffers mental injury that harms or threatens to harm the child's health or welfare; or

- Is subjected to out-of-home care child abuse.

When an incident of abuse occurs, an acute crisis is often the trigger. A crisis generally will be the precipitating factor that sets the abuser in motion. The crisis may come in any form or level of apparent severity; for example, the crisis may be the loss of a job, divorce, illness, death in the family; a child's wet pants, consistent crying, or a broken dish. What is significant is not what the crisis is, but that it creates a situation beyond the abuser's ability to cope in a non-abusive manner.

**General Information About Child Abuse and Neglect**

Some cases of child abuse and neglect are easily recognized: an infant left alone in a hot car, a one-year old with multiple unexplained fractures, a child who repeatedly is locked out of the house for long periods of time. However, these cases represent only a fraction of the many children who are in need of help.

What about the more subtle forms of abuse or neglect – verbal abuse, poor supervision, overly strict discipline? The key to recognizing the various forms of child maltreatment is a basic understanding of the meaning of the term child abuse and neglect. There are numerous factors involved in defining child abuse and neglect: cultural and ethnic backgrounds, attitudes concerning parenting, professional training and affiliation. In seeking commonly acceptable meanings, it is helpful to begin by distinguishing between abuse and neglect.

**Abuse**

Abuse represents an action against a child. It is an act of commission. Per the Ohio Revised Code, an abused child includes any child who:

- Is the victim of “sexual activity” as defined under Chapter 2907 of the Revised Code, where such activity would constitute an offense under that chapter, except that the court need not find that any person has been convicted of the offense in order to find that the child is an abused child.

- Exhibits evidence of any physical injury or death, inflicted other than by accidental means, or an injury or death which is at variance with the history given of it. Except as provided in the following paragraph, a child exhibiting evidence of corporal punishment or other physical disciplinary measure by a parent, guardian, custodian, person having custody or control, or person in loco parentis of a child is not an abused child under this division if the measure is not prohibited under section 2919.22 of the Revised Code.

- Because of the acts of his/her parents, guardian, or custodian, suffers physical injury that harms or threatens to harm the child's health or welfare; or

- Is subjected to out-of-home care child abuse.

**Sexual Abuse**

- Is the victim of “sexual activity” as defined under Chapter 2907 of the Revised Code, where such activity would constitute an offense under that chapter, except that the court need not find that any person has been convicted of the offense in order to find that the child is an abused child.

- Exhibits evidence of any physical injury or death, inflicted other than by accidental means, or an injury or death which is at variance with the history given of it. Except as provided in the following paragraph, a child exhibiting evidence of corporal punishment or other physical disciplinary measure by a parent, guardian, custodian, person having custody or control, or person in loco parentis of a child is not an abused child under this division if the measure is not prohibited under section 2919.22 of the Revised Code.

- Because of the acts of his/her parents, guardian, or custodian, suffers physical injury that harms or threatens to harm the child's health or welfare; or

- Is subjected to out-of-home care child abuse.

**Physical Abuse**

- Is endangered as defined in section 2919.22 of the Revised Code, except that the court need not find that any person has been convicted under that section in order to find that the child is an abused child.

- Exhibits evidence of any physical injury or death, inflicted other than by accidental means, or an injury or death which is at variance with the history given of it. Except as provided in the following paragraph, a child exhibiting evidence of corporal punishment or other physical disciplinary measure by a parent, guardian, custodian, person having custody or control, or person in loco parentis of a child is not an abused child under this division if the measure is not prohibited under section 2919.22 of the Revised Code.

- Because of the acts of his/her parents, guardian, or custodian, suffers physical injury that harms or threatens to harm the child's health or welfare; or

- Is subjected to out-of-home care child abuse.

**Neglect**

Neglect is failure to act on behalf of a child. It is an act of omission. Neglect may be thought of as child-rearing practices, which are essentially inadequate or dangerous. It may not produce visible signs, and it usually occurs over a period of time. Per the Ohio Revised Code, a neglected child includes any child:

- Who is abandoned by the child's parents, guardian, or custodian;

- Who lacks adequate parental care because of the faults or habits of the child's parents, guardian, or custodian;

- Whose parents, guardian, or custodian neglects the child or refuses to provide proper or necessary subsistence, education, medical or surgical care or treatment, or other care necessary for the child's health, morals, or well-being;

- Whose parents, legal guardian, or custodian have placed or attempted to place the child in violation of sections 5103.16 and 5103.17 of the Ohio Revised Code;

- Who, because of the omission of the child's parents, guardian, or custodian, suffers physical or mental injury that harms or threatens to harm the child's health or welfare;
GENERAL INFORMATION ABOUT CHILD ABUSE AND NEGLECT

- Who is subjected to out-of-home care child neglect.

DESERTED CHILD A deserted child is a child less than 72 hours old and has no apparent signs of abuse or neglect whose parent has voluntarily delivered the child to an emergency medical service worker, peace officer, or hospital employee without expressing an intent to return for the child. Under Ohio’s Safe Havens law, the parent has the right to remain anonymous and shall not be subject to criminal prosecution. However, the parent who delivers or attempts to deliver a child who has suffered physical or mental injury or condition of a nature that reasonably indicates abuse or neglect of the child does not have the right to remain anonymous and may be subject to arrest.

The statutory definitions used in child protection are found in the following sections of the Ohio Revised Code.

- 2151.03 Neglected Child
- 2151.031 Abused Child
- 2151.04 Dependent Child
- 2151.05 Child Without Proper Parental Care
- 2151.35.15 Deserted Child
- 2919.22 Child Endangering

The Ohio Revised Code can be found at: http://codes.ohio.gov/orc/
CHILD DEVELOPMENT

CHILD ABUSE AND NEGLECT IS A COMMUNITY PROBLEM

Child abuse and neglect is a serious and widespread problem that cannot be stopped without all of us working together. Here are some ways you can help:

- Learn to recognize the warning signs and indicators of child abuse and neglect. If you suspect abuse or neglect, contact the public children services agency or law enforcement agency. Encourage your friends to do the same. Most people do not want to hurt or neglect their children, but are faced with problems they cannot solve alone. Help them get help.

- Talk to your child every day and take time to really listen and observe. Learn as many details as you can about your child’s activities and feelings. Encourage them to share concerns and problems with you.

- Work toward eliminating the causes of child abuse and neglect. Encourage your schools to provide classes in parenting education. Support the social service programs in your community.

- Work with members of your city council and your mayor to establish child abuse and neglect as a community priority.

- Help institute child care or latchkey, block parent, or home-based service programs in your community.

- Volunteer to be a mentor, Big Brother or Sister or Mother’s Friend. Offer to teach your skills to parents and children who need your help. Abuse or neglect may occur because a family is isolated and without the support of friends or family.

- Your attic or basement may hold dozens of items that would be of value to a family in need. Donate household goods, pots and pans, towels and linens, and canned goods to a social service agency.

- Encourage members of your community to support children protective services programs. Call your radio and television stations and ask them to run public service announcements and editorials about child abuse and neglect. Contact opinion leaders in your community. Ask your clergyman to deliver a sermon about child abuse and neglect.

- Apply to be a foster parent. Your home may be certified to provide foster care for children who are victims of abuse or neglect. If you are interested in being a foster parent, contact your children services agency.

- Encourage your friends and neighbors to learn about child abuse and neglect. Invite representatives from your children services agency to talk to your clubs and school groups about child abuse and neglect.
CHILD DEVELOPMENT

NEWBORNS

A Look at Your Child's Development

Each individual has his/her own biological clock, regular times when they get tired, hungry, or restless. It is during this time of baby's growth that he/she finds a schedule and develops a rhythm for feeding, eliminating and sleeping.

During the first six months, a baby undergoes rapid development, changing from the unresponsive bundle who only cried, ate, and slept into a real person! A baby has used this time to gain control over his/her body, and now seems much less floppy and vulnerable. At around two months, babies will begin to lift their heads when lying on their stomachs; soon the neck will firmly support the baby's head, and, at around three months, babies will begin to turn over. Baby has learned to reach for things, and discovered his own hands and feet.

During this time, baby also has become a social creature. At first, baby only is capable of visual tracking and grasping, but by six months he/she will begin to initiate babbling and other vocal play. A baby will reward one's presence with a smile, fuss to make one come to him/her, and show excitement by waving his/her arms, kicking, and wiggling. The baby loves to play and enjoys being tickled. Many babies of this age become anxious around strangers.

At around four months, many babies will begin to eat solid foods such as cereal and strained fruit.

What does a baby change most about the parent's life? Everything! No one should expect a household to run exactly the way it did before the baby's arrival. There will need to be a great number of changes and compromises made to meet baby's needs, particularly during the time before baby develops a pattern and rhythm. It is important to remember that actions are a way of developing the individualistic spirit.

A baby is not crying because the parent is doing something wrong; the baby is trying to talk. Gentle touching, holding, talking, and rocking will quiet the baby. Don't worry about spoiling them; babies who are responded to in this manner actually cry less because they learn that the parent is reliable and available.

Shaking a baby may cause brain damage or even death.

To prevent SIDS, newborns should always be placed on their backs to sleep.

Implications for Parents

Don't be disappointed that a child does not look like the babies portrayed in the media. It's normal.

Hold the baby and let them look into your eyes.

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CHILD DEVELOPMENT

BIRTH TO SIX MONTHS

A Look at Your Child's Development

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During the first six months, a baby undergoes rapid development, changing from the unresponsive bundle who only cried, ate, and slept into a real person! A baby has used this time to gain control over his/her body, and now seems much less floppy and vulnerable. At around two months, babies will begin to lift their heads when lying on their stomachs; soon the neck will firmly support the baby's head, and, at around three months, babies will begin to turn over. Baby has learned to reach for things, and discovered his own hands and feet.

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What does a baby change most about the parent's life? Everything! No one should expect a household to run exactly the way it did before the baby's arrival. There will need to be a great number of changes and compromises made to meet baby's needs, particularly during the time before baby develops a pattern and rhythm. It is important to remember that actions are a way of developing the individualistic spirit.

A baby is not crying because the parent is doing something wrong; the baby is trying to talk. Gentle touching, holding, talking, and rocking will quiet the baby. Don't worry about spoiling them; babies who are responded to in this manner actually cry less because they learn that the parent is reliable and available.

Shaking a baby may cause brain damage or even death.

To prevent SIDS, newborns should always be placed on their backs to sleep.

Implications for Parents

Don't be disappointed that a child does not look like the babies portrayed in the media. It's normal.

Hold the baby and let them look into your eyes.

A baby is not crying because the parent is doing something wrong; the baby is trying to talk. Gentle touching, holding, talking, and rocking will quiet the baby. Don't worry about spoiling them; babies who are responded to in this manner actually cry less because they learn that the parent is reliable and available.

To prevent SIDS, newborns should always be placed on their backs to sleep.
**SIX MONTHS TO ONE YEAR**

**A Look at Child Development**

- Baby's second six months of life is a time marked by a new level of development and increased interest in exploration. Just when a parent thought the schedule was down pat, and were beginning to understand behaviors, it changes. Baby's world is broadening, and the actions will be driven by a desire to learn everything possible. One of the ways baby explores is with the hands, and the hands are always busy pushing, pulling, dropping, banging, grabbing, squishing and mooshing. Baby is learning how things work and are put together, and is assimilating the texture of life. Another method of exploration is oral, baby will put everything in the mouth.

- At around five or six months, baby will begin to be able to pull him/herself up by grasping an adult's hands. Around six months, the muscles in many babies' backs have developed enough that they can begin to sit without support for short periods of time. Around six to seven months, many babies can pull themselves to a sitting position.

- Crawling, standing, and walking are highly individualized sequences. Many babies begin to crawl by dragging themselves forward at around seven months. Babies generally begin to walk anywhere from 10 to 16 months of age.

- One of baby's more difficult stages is separation anxiety. It may seem that the parent is not able to leave the baby for even a second without the baby crying. This is the result of maturation of the baby's central nervous system, much as you saw happen with motor development. For the first six months, baby was not aware of a parent's absence. As the nervous system matured, the baby became aware of the extent of their body. This could be seen as the baby discovered their hands and feet. The baby then realized they were separate from the parent and that the baby needs the parents. Soon after, the baby realized parents were different from strangers. The baby must now learn that things exist even when they cannot be seen, and that things which are gone will return, both very sophisticated concepts.

- At around six to seven months, baby will begin to feed him/herself finger food. By the end of the first year, the baby will enjoy eating whole meals this way. He/she can now use a cup, and likes to play by putting the food or spoon inside it. If food is a favorite toy, and, by the end of the meal, it may seem that baby has more food on their face, hands, hair, and everywhere than what was eaten. The baby also has developed very definite eating likes and dislikes and ways of making the preference known.

- In this last six months, baby has become a real person. It often is difficult to believe that the baby does not know what they are doing, particularly when they are doing the same thing they were told not to do. To fully realize baby's inability to distinguish right from wrong, it is important to understand that the process for learning limitations goes through stages just as learning to walk goes through stages. At around six months, babies are just beginning to recognize the difference between approval and disapproval. At around eight to nine months, they will begin to respond to those differences. Still, it will be one to three years before the central nervous system has developed enough for the child to initiate self-control and substitute an acceptable activity for an unacceptable one. Learning self-control and accepting limitations is a developmental process, which continues all through childhood. It is important that parents begin to identify the concept of setting limitations, although this is best confined to safety issues at this point. Do not let a baby do things, which are dangerous, destructive or hurtful. Remember, a baby may learn that playing with a particular object is “no,” but cannot, at this time, understand why.

**Implications for Parents**

- It is important to remember that baby's primary drive is to learn. At times, a parent will think that the real motivation is to annoy or irritate. It may seem that the incessant spoon banging is just to irritate, however, the baby is learning the concept of cause and effect, to move the spoon in this way makes noise. That endless cycle of baby throwing toys down, crying, and the parent retrieving it is not just a test of patience, it is another experiment from which baby is learning basic concepts.

- Help the baby explore the world by propping in an infant seat or with cushions. The baby will enjoy watching the activities of the household.

- When baby's leg muscles begin to develop, more room to exercise will be needed. Be sure to give the baby plenty of time out of the crib. Do not be afraid to place the baby on a blanket on the floor to explore new space. A portable gate to barricade a safe corner in the room might be necessary.

- It is very important to recognize separation anxiety as a developmental stage rather than a naughty behavior. Understanding this also can help alleviate feelings of being trapped by a child. There are several things to help the baby through this stage. First, accept that responding to the crying child will not spoil him, but reassure them of one's reliability and help him to learn concepts of separation. There are many fun and simple games which reinforce these concepts, such as “Peekaboo” and “Where's the toy?” Most importantly, this is not a battle for control.

- One of the more common household battlegrounds is the meal table. Baby's willful messiness and unappetizing habits can make meals the site of ongoing struggles. It helps to keep a couple of concepts in mind. First, babies are too young to learn manners; they just do not have the mental capability to understand what is being taught. Second, it looks messy, but it really is just another one of baby's experiments. When baby squishes a banana between the fingers, textures and material properties are being learned. Food or spoons in the cup are teaching the concepts of “in” and “out” and “big” and “little.” It is a child's only way of learning. If it is impossible to enjoy meals when this is going on, look for a compromise such as feeding the baby before regular mealtime. The most important thing about mealtime is that it is a pleasurable time when everyone can enjoy each other. The same holds true for forcing baby to eat. Babies eat what they need. Don't worry about trying to make baby eat.

- Babies at this age are active, exploratory creatures. Without some preventive measures...
CHILD DEVELOPMENT

activities, it will seem that most time is spent saying “no” to baby. It is best if as many of the “no situations” as possible are eliminated. This is referred to as “babyproofing” the house. For example, rather than trying to teach a child not to touch the crystal vase on the end table, it is wiser to remove the vase to a place that cannot be reached. This avoids countless battles and the inevitable loss of the vase.

ONE TO THREE YEARS

A Look at a Child's Development

• As the child passes from baby to toddler, they are busy developing individuality and separateness. The child is becoming a person: a no-nonsense, independent person who is beginning to realize an identity, a will, and wants which can be very different. Because their judgement is immature, toddlers are often demanding, negative, and defiant. Toddlers do not yet understand that their wants may be unreasonable, and they can react quite violently when denied. These years, however, are characterized by contrast and extremes of emotion: the same child who moments earlier was kicking and screaming in anger may now be affectionately hugging and kissing you. Toddlers will laugh, squeal with excitement, throw temper tantrums, kick, pinch, slap, cry violently, and smother you with love.

• Much physical development occurs during this period and the toddler will take great pride in new achievements. The child can now run, jump, kick a ball, climb, feed with a spoon, stack blocks, and even work with clay, and engage in rough-and-tumble play. They will enjoy imitating the parent’s actions and helping out.

• Toddlers are very insistent on doing things themselves regardless of their capability, and can become very angry or frustrated if unable to complete the task.

• During the second year, the toddler develops a greater attention span and begins to enjoy “reading” books, coloring, and listening to songs. They have begun to develop memory and can now recall what they are looking for and where they put something.

• Generally, it is between two to three years that the toddler gains sufficient muscle control to begin toilet training. This is the second area of the toddler’s life over which they, not the parent, has total control (the first was eating). These also are the two most common situations over which child abuse occurs. No matter how hard one tries, no one can make a toddler conform to toilet training if not ready. Remember, a toddler not only has to be physically capable of this complicated process, they have to want to learn. It is important not to turn this process into a power struggle. Readiness may be signaled by a toddler’s verbalness, ability to respond to commands, awareness of the need to empty bladder or bowels, and growing discomfort with dirty diapers.

• Setting limits on a toddler’s actions becomes more and more of a daily struggle as they become more mobile and capable of engaging in potentially dangerous situations. Part of the toddler’s personality is also centered on testing limits, defining the boundaries of what is acceptable and what is not. It is important to clearly have in mind what is taught by punishment. When spanking a child, the strongest message conveyed is not regarding the child’s behavior, it is about the parent’s. What has been shown is that since you are bigger and more powerful one can hit and get away with it. What is also being said is that hitting is an acceptable way to deal with anger or problems. Children who are taught through the means tend to use physical aggression to settle their differences. Children who have been taught through other forms of discipline are more likely to use verbal or other methods. Everyone has been punished at some time, and everyone shows the signs - impatience, inability to control anger, and a tendency to lash out in frustration. No one is perfect, and chances are that sometimes you will hit your child in anger. An occasional mistake is not going to make your child aggressive or violent. It is important, however, to recognize the danger, which your anger holds, and learn to control it.

• The period between ages two and three is most significantly marked by dramatic language development. Toddler’s vocabulary will increase to about 900 words and will begin to string these words together in three and four word sentences. The toddler now uses words not just to point out objects, but also to tell their wants.

Implications for Parents

• The “terrible two’s” really begin not at two, but with the child’s realization that they are a separate individual. The behaviors that mark this period, the “no’s,” “me’s,” and “mine’s,” the temper tantrums, inflexibility, and rigid insistence on everything being just so, right now; all are signs of a toddler’s struggle to find their emerging self. The toddler is finding out who they are and what is their place in the world. They are also trying to break away from their dependence on their parent. None of this explanation makes toddler any more pleasant a companion, but it does help to know that this behavior is an important developmental stage through which a child is reaffirming their uniqueness and becoming their own person. The parent has given the child the ability to grow in this manner. The parent has allowed the toddler to become independent by teaching security - to know that one is loved and that the parent is there when needed.

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• Setting limits on a toddler’s actions becomes more and more of a daily struggle as they become more mobile and capable of engaging in potentially dangerous situations. Part of the toddler’s personality is also centered on testing limits, defining the boundaries of what is acceptable and what is not. It is important to clearly have in mind what the limit-setting actions intend to accomplish. Most hope to help a child learn what is permissible and what is unacceptable. To do so, one must understand the difference between punishment and discipline. Punishment teaches by inflicting pain which should not be the purpose. The aim is to help a child understand what is right and what is wrong. It is helpful to look at what is taught by punishment. When spanking a child, the strongest message conveyed is not regarding the child’s behavior, it is about the parent’s. What has been shown is that since you are bigger and more powerful one can hit and get away with it. What is also being said is that hitting is an acceptable way to deal with anger or problems. Children who are taught through the means tend to use physical aggression to settle their differences. Children who have been taught through other forms of discipline are more likely to use verbal or other methods. Everyone has been punished at some time, and everyone shows the signs - impatience, inability to control anger, and a tendency to lash out in frustration. No one is perfect, and chances are that sometimes you will hit your child in anger. An occasional mistake is not going to make your child aggressive or violent. It is important, however, to recognize the danger, which your anger holds, and learn to control it.
A Look at A Child’s Development

- While toddler’s previous years were most dramatically characterized by physical and language development, these years are marked by extensive cognitive growth. The child is beginning to reason and use logic. Between the ages of three and four, the pre-schooler begins to understand cause and effect relationships - how rain makes flowers grow, how hitting makes people hurt, and the ways things in the world relate to each other. Curiosity seems limitless; every other word seems to be “why?” Use of imagination grows, and the pre-schooler will love to fantasize and use dramatic role-playing. They are anxious for approval and are very concerned about how others perceive them.

- Between the ages of four and five, the child will begin to organize thinking and relate to the world in acceptable ways. The pre-schooler is beginning to develop a conscience. The child is developing “intrinsic motivation” - actions stem not primarily from desire to please and gain approval, but more from a need to increase feelings of self-competency and worth. The child is becoming aware of right and wrong, and usually wants to do right.

- Up to now, the child has not been an overtly social creature. They have enjoyed being in the company of other children, but until the age of approximately three, has engaged mostly in parallel play, playing next to, but not really with other children. Now they begin to be more interested in peers and to form attachments with children of their own age. The pre-schooler is developing the social skills that create the foundation for human relationships. One is learning to share, take turns, compromise, accept rules, and be sensitive to the feelings of others. The increased mental capabilities have given the child methods of expressing oneself and the frustrations other than through physical aggressiveness. The child initiates the beginnings of self-control and limitation.

- In the same way the child is categorizing the material things about oneself, the child seeks to establish and understand one’s place and relation in the general scheme of things. The pre-schooler is testing the parameters of one’s being and will vacillate between extremes - one moment being bossy, belligerent, and boastful, the next being shy, whining, and insecure.

- These years also mark development of the child’s sexual inquisitiveness. The insatiable curiosity and heightened powers of observation make pre-schooler’s increasingly aware of the physical and behavioral differences between boys and girls. The child will begin to exhibit interest in one’s own and the genitals of others, and will comment on sexual differences. Pre-schoolers will be interested in the differences between their sexual organs and those of adults. They may form a temporary attachment to a playmate of the opposite sex.

- For parents, these years are exciting to watch the child mentally grow and mature into a rational being with whom one can, sometimes, reason. The parent will watch the child’s social personality form and all the quirks and traits emerge. It is important to recognize the importance of this time because much assistance is demanded of the parent to help a child find one’s place and recognize one’s own worth. Parents will be besieged with questions ranging from the profound to the trivial. In fact, parents will be asked to respond to more questions than one knows the answers to. While this can be trying and frustrating, remember that this teaches children the world through the parent’s eyes. The parent’s perceptions will form the child’s perceptions. While fantasy and role-playing are the fun results of pre-schooler’s growing imagination, lying and telling made-up stories may accompany this type of play. Pre-schooler still is very dependent upon approval, and frequently will place blame for wrongdoing on others. Do not overreact. Concentrate on assuring toddler of your unconditional love, while teaching him the importance of making right choices and being responsible for his own actions and behaviors.

- It is important a child is given the opportunity to play and learn with other children and to participate in a good preschool or play group. Help the child during this time by expecting the child to take simple responsibilities and follow simple rules.

- During this period of personal exploration, a child may strike out emotionally at persons or situations when there are troublesome feelings. Offer love, understanding, and patience, and help the child learn to work with and understand one’s emotions. One of the major things a child will test is a parent, so recognize that many of the actions, such as swearing or bathroom humor, are designed to shock or draw a reaction.

- The pre-schooler’s interest in anatomical differences between the sexes is a result of natural curiosity and growth. This is the age most frequently known for playing “doctor.” React calmly and non-judgmentally to a child’s questions, providing simple and honest answers about the names and functions of body parts. The child is beginning sex-role development, and will look to the parents and other family members as role models.
NEWBORN TO FOUR MONTHS

Developmental Changes

The newborn baby is helpless and requires absolute protection. The greatest dangers to the baby are drowning, suffocation, and falls. Safety, for the first year, means constant supervision. As the newborn grows, the baby begins to thrash about and wiggle from side to side. At around two months, the baby will begin grasp objects and put them into the mouth. The baby will not, for many months, be able to understand the danger of hazardous situations.

Implications to Parents

Never leave a pet or a child under school-age alone in a room with a baby. Children of this age are too young to understand a baby’s vulnerability.

Never leave a baby alone in water for any reason. Set the water heater below 130 degrees Fahrenheit, and always test the bathwater before putting the baby in it.

Always stay with the baby while on any raised surface. This includes a changing table, couch, or bed. If you must leave or turn away for a moment, put the baby in the crib, on the floor or hold the baby.

Sides of the crib should be kept up at all times. Be sure crib slats are no more that 2-3/8 inches apart and the mattress fits snugly against the side rails, and that the crib is designed in conformance with current safety standards. Many injuries are caused by babies falling from cribs or getting their head, arms, or legs caught between crib slats or an ill-fitting mattress.

Adults should not sleep in the same bed with an infant due to risk of suffocation as a result of rolling over on the child.

Always keep the baby in an approved child car seat appropriate for the height and weight of the baby when riding in a car.

FOUR TO NINE MONTHS

Developmental Changes

The baby is rapidly increasing in mobility, and now reaches for objects and pulls at them. Baby needs more space outside the crib in which to move, and this quicker pace requires more constant attention. Between six and nine months, many babies begin to sit up, crawl, and pull themselves to a standing position. In addition to the larger world to which baby’s new accomplishments give access, his improved hand-eye coordination allows him to experience many new objects and tasks.

Implications for Parents

Never let baby chew or play with electric cords.

Prepare the house for baby’s increased mobility: cover electrical outlets with plug guards; lock up or remove poisons, cleaning materials, or medicines; keep sharp, breakable, or ingestible objects off low tables and floors; avoid using low-hanging tablecloths or other objects which baby could pull down; put gates at the top of stairs; make sure that the handles of pots and pans are turned inward on the stove; use nonslip rug pads on floors and rubber mats in tubs; make sure that matches, plastic bags, tools, appliances, and all other hazardous objects are kept locked up or out of baby’s reach.

Remember that many child injuries occur in baby walkers. Never leave a child unattended in a walker.

Follow instructions on the car seat for proper installation into the car as well as restraining the child in the car seat.

To avoid the dangers of suffocating, do not put pillows, large floppy toys, or plastic sheeting in the crib or playpen.

Keep objects or toys that are sharp, breakable, ingestible, or have cords away from baby.

Never tie a pacifier around a baby’s neck.

Never leave your child alone in the house, even for short periods of time.
ONE TO THREE YEARS

Developmental Changes

Toddlers are quick and adventurous. The biggest safety trick is to keep up with them. They can open doors, climb, and work many types of latches. As their skills improve, toddlers experience an increasing desire for independence. Two-year-olds sometimes seem so mature that parents may forget that they still require a watchful eye.

Toddlers will take things apart, fit them together again, and experiment with their use. Water is a fascinating subject for study. They will poke and probe with their index fingers to find out about things. Their mouths still are a major source of information, and they want to chew everything. They are eager to examine the world around them and they find everything exciting and interesting, especially those things above eye level. Windows, chairs, and other objects offer a wonderful view to the world up high.

Toddlers enjoy being lifted to satisfy their curiosity.

Toddlers still cannot understand danger, but they are great imitators, and will learn quickly from your example.

Implications for Parents

Doors that open to danger, such as the outside, the car, or the basement, should be kept locked.

Pools, ponds, and cisterns should be fenced in or covered over. Toddler never should be allowed to swim, wade, or play in water, even in the bathtub without adult supervision.

The kitchen is a favorite place for toddler experimentation. Pots and pans, spoons, and empty boxes make creative and satisfying toys. Knives, appliances, cleansers, sprays, matches, etc., should be locked out of reach. Containers of hot food should be kept in the middle of the table, out of reach. Pots and pans heating on the stove should have handles turned inward.

THREE YEARS TO FIVE YEARS

Developmental Changes

The preschooler is finding one’s own place in the world. The child has gained greater control over the body, and is sure and nimble on the feet. The pre-schooler is refining hand-eye coordination, and is beginning to be able to throw and catch a ball. As abilities are mastered, the child moves from playing in his own backyard into the neighborhood. The preschooler covers a lot of ground— in all directions. The child climbs trees, playground equipment, and fences, rides bicycles and plays rough games. The preschooler is entering into the age of sociability and begins to enjoy cooperative play.

Implications for Parents

Stairs should have strong rails for support and should not be kept waxed.

Preschoolers need clothes that give freedom of actions and shoes that are good for climbing.

The preschooler needs to be taught the basic safety rules about traffic and bicycle use, such as traffic signals, riding on the sidewalk, watching for cars in driveways, and not running or chasing toys into the street. Toys and wagons should be sturdy enough to bear the weight of both child and playmates.

While encouraging the child to help out about the house, remember limitations, and do not ask to perform tasks that are potentially dangerous, such as crossing the street, carrying a knife, or lifting a baby.
HELPING CHILDREN BEHAVE: DISCIPLINE

Understanding one’s own tolerance level is important in helping decide how to discipline children. It is important to adopt rules and a style of discipline with which one feels comfortable.

There are three factors involved in helping children behave: 1.) setting reasonable, clear rules; 2.) dealing reasonably with broken rules; and 3.) being a good model for the children (acting in ways that you want your children to act).

1. Setting Reasonable, Clear Rules

Have only a few rules. Too many rules can confuse children, and they will forget them. Many parents have found that three short and simple rules cover a lot of ground and are easy for children to remember:

- You may not hurt yourself.
- You may not hurt others. (Hurt can be emotional, too, not just physical)
- You may not hurt things. (Furniture, toys, etc.)

When rules are set, make sure they are appropriate for the child’s abilities and needs. For example, do not force a three year old to sit at a table for 30 minutes when a rule is broken. This time limit is far too long; five minutes of being away would better fit this age group.

Explain the real reason for following a rule. Avoid saying, “Keep your feet off the couch or I’ll be after you.” Instead, explain that putting feet on the couch makes the couch dirty. Avoid telling a child, “Don’t leave your cup there or you can’t have any more drinks.” Explain that it is necessary to put the cup away so that it won’t get broken.

2. Dealing Reasonably with Broken Rules

When rules are broken, the first thought is often of punishment, but it is important to remember the difference between punishment and discipline.

Punishment uses fear to make children change their behaviors. Punishment tells children not to do something, but doesn’t always tell them why. Punishment can make children resentful, fearful, and may lower their self-concept.

Discipline, on the other hand, can teach children self-control. Discipline focuses on why rules are made. It helps make children more responsible for their behaviors, and shows them appropriate ways to behave and the consequences of misbehaving.
**Method 5: Natural Consequences**

When children break some rules, they are immediately affected. For example, a toddler tries to pull a toy off a high shelf. The toy falls off and hits the toddler. The toddler realizes that the shelf is too high. The child has already been disciplined by the event and does not need additional consequences.

**An example:** A seven-year-old runs with a glass, falls, and cuts the hand. The cut is enough discipline. It teaches the child not to run with a glass. To say, “I told you so” does not teach the child any additional lesson.

**Avoid Threats and Physical Punishment**

Physical punishment is not helpful in teaching positive discipline. Physical punishment can be dangerous when an adult becomes angry, loses control and hits a child. Adults who spank children are modeling aggressive behavior. They are teaching children to hit, while they tell children not to hit. Adults who spank are really teaching children “when people get angry, they hit.” This is not the message children should learn.

Discipline must be followed through. If a child must take a “time out,” stay close by so the situation can be discussed.

**3. Being a Good Model**

Effective discipline requires one to act in ways that one wants children to act. Children learn their behaviors from what they see adults do. When children see adults hitting one another or children, they learn it is all right for them to hit. When children hear adults yelling and cursing at one another or at children, they learn it is all right for them to yell and curse.

Parents who respond calmly to crises, speak firmly, but pleasantly when they’re angry, are setting appropriate models of behavior for children to follow.
AN INTRODUCTION TO CHILD ABUSE/NEGLECT PREVENTION

**Is it possible to prevent child abuse and neglect?**

YES!! ... It IS possible to prevent child abuse and neglect!

**Why does prevention matter?**

Research has demonstrated that effective child abuse/neglect prevention programs have many positive outcomes, such as:

- enabling parents to nurture and appropriately discipline their children,
- preventing child suffering,
- decreasing juvenile delinquency and crime,
- reducing substance abuse,
- promoting safer communities,
- preventing child deaths, and
- saving money.

The consequences of child abuse and neglect are extremely expensive. In a 2003 bulletin, the Public Children Services Association of Ohio estimated that child maltreatment costs our state $3.7 billion a year. Until a significant “up front” investment in services to prevent child abuse and neglect is made, we will continue spending staggering amounts of money to intervene after the damage has been done.

**How can child abuse and neglect be prevented?**

The goals of prevention are two-faceted: to stop actions or situations that are harmful to children, and to promote actions or situations that contribute to child well-being. Decreasing risk factors and increasing protective factors are the foundation for all prevention efforts.

**RISK FACTORS are characteristics which may increase the likelihood of child abuse/neglect.** A parent/caregiver may possess certain characteristics which increase the risk of abusing or neglecting their children. On the other hand, a child may have characteristics which make them more vulnerable to being abused or neglected. Even the family’s social environment can present factors which make it more likely that child abuse or neglect may occur. It is generally not one risk factor by itself, but the presence of multiple risk factors that increase the likelihood of child abuse and neglect.

**Characteristics of parents/caregivers which may increase risk**

- being a single parent
- low frustration tolerance
- less than 12th grade education
Characteristics of children which may decrease risk
- good health
- flexible temperament
- adequate social skills
- bonded with primary caregiver
- relationship with a supportive adult
- positive school experience
- personal resiliency*

*Resiliency is the ability of an individual to successfully function in spite of unfavorable life circumstances. Some degree of resiliency is believed to be due in part to the individual’s inborn personality, however, there are also certain types of life experiences which can contribute to individual resilience.

Characteristics in the social environment which may decrease risk
- general cultural standards which reject violence
- adults view children as individuals with rights
- schools support families beyond the classroom
- community resources are adequate to meet the needs of families
- community values encourage alternatives to corporal punishment

Prevention of child abuse/neglect is accomplished from two approaches:
- by reducing or eliminating risk factors which includes providing life skills training to improve anger management and problem-solving skills, educating parents about realistic expectations for child behavior, helping parents develop support systems, providing respite care services to reduce caregiver stress; and
- by developing or strengthening protective factors such as teaching children personal safety skills, promoting parent-child bonding, providing life skills training for youngsters, assigning a youth mentor.

The Prevention Triangle

How does prevention work?

Prevention of child abuse/neglect is accomplished from two approaches:
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- by developing or strengthening protective factors such as teaching children personal safety skills, promoting parent-child bonding, providing life skills training for youngsters, assigning a youth mentor.
Are there different types of prevention?

Child abuse/neglect prevention can be visualized as a three level triangle, where each level focuses on services to a different population. **Primary prevention** is the foundation and broadest level of the prevention triangle. Primary prevention services are voluntary, targeted to the general public, and include such activities as public awareness materials and events to inform and educate people about child abuse, neglect and the importance of prevention, parenting classes and support groups, child development screening, information and referral services, child safety training and family strengthening activities. Primary prevention services reach the broadest audience and generally have the lowest per person cost.

**Secondary prevention** is the middle level of the triangle and involves services directed to parents, children and families who have risk factors, but abuse/neglect has not yet been identified. Some types of services (such as parenting classes, parent-child family life education, or parent support groups) can be classified as both primary prevention or secondary prevention. However, because of an increased risk for maltreatment, services at the secondary level are typically more comprehensive or intensive than at the primary level. Typical secondary prevention services which include home visitation, case management/service coordination, respite care, crisis stabilization and mentoring programs target fewer people than primary prevention and are more costly.

The top level of the prevention triangle represents **tertiary prevention** which is usually referred to as intervention, protective services or treatment. This level of service occurs after child abuse/neglect has been detected and focuses on preventing the re-occurrence of maltreatment. This level includes some of the same type of services provided under secondary prevention, but often involves provision of multiple services, services over a longer period of time or more frequent and/or intensive services. For these reasons, services at this level tend to be the most expensive.

Who is responsible for preventing child abuse and neglect in Ohio?

EVERYONE HAS THE RESPONSIBILITY AND THE POWER TO PREVENT CHILD MALTREATMENT. This includes government agencies, private organizations, schools, businesses, faith communities, and the media, as well as individual citizens.

Government Agencies

The Ohio Children’s Trust Fund is a division of state government which has responsibility for developing a comprehensive statewide plan to prevent child abuse and neglect. All fifty states, the District of Columbia and Puerto Rico have passed legislation authorizing a children’s trust fund.

In Ohio, the Children’s Trust Fund receives income from fees on birth and death certificates and surcharges on divorce and dissolution filings. Each year, most Trust Fund income is distributed to all 88 counties to support prevention-focused services at the local level; the balance of income funds prevention projects with statewide significance.

Private Organizations

Some of the public children services agencies in Ohio conduct prevention activities at the county level, and some even have special service units that work with at-risk families and children before abuse or neglect has occurred.

Prevent Child Abuse Ohio is a private organization that provides awareness and educational services throughout the state.

Schools

School districts employ home-school staff who provide secondary prevention services to students and families at risk of abuse or neglect. Schools may also incorporate child safety training, life skills or education about positive parenting into the curriculum.

Businesses

There are a number of different ways that businesses contribute to preventing child abuse and neglect. For example, an employer may offer flexible work schedules which are more family-friendly and reduce parent stress, they may sponsor life skills training such as stress or anger management during lunch periods, or a business may even provide its services without charge to local prevention agencies or offer paid leave so employees can volunteer for prevention-related service projects in the community.

Faith Communities

Faith communities make a substantial contribution to preventing child abuse and neglect. Many provide material goods such as food and clothing to families in need, and some offer free or inexpensive child care, emergency babysitting, or mentors for young parents. Congregations may also sponsor family life education classes and parent-child activities which strengthen family relationships.

The Media

Public awareness campaigns help citizens become knowledgeable about the importance of preventing child abuse and neglect, about local agencies that provide prevention services, and about what the average citizen can do to help prevent child maltreatment. Outdoor advertising companies have donated free billboard space in support of prevention. Newspapers have run feature articles about community activities and events being conducted to recognize Child Abuse/Neglect Prevention Month each April, and local cable stations and newscasts can let the public know about local programs which support parents and strengthen families.

Individuals

There are a multitude of things that anyone can do in the course of their everyday life that will help prevent child abuse and neglect and make a difference. The following section outlines 40 things that you (and everyone you know) can do to make a difference:

PREVENTING CHILD ABUSE AND NEGLECT
PREVENTING CHILD ABUSE AND NEGLECT

In Your Neighborhood or Community

- Wear a blue ribbon pin or sticker as a symbol of your commitment to child abuse/neglect prevention; when someone asks about the blue ribbon, explain what it means, give them yours and ask them to do the same.
- Find out what agencies in your community offer services that support families to prevent abuse/neglect.
- Develop friendships with your neighbors and their children.
- Talk to friends, relatives and neighbors about things they can do to prevent child abuse/neglect.
- Offer to baby-sit, run errands or car pool for relatives, friends and neighbors under stress and let them know about local resources which can help.
- Call local law enforcement if you suspect family violence or child abuse/neglect in your neighborhood.
- In public places, when you see a child being or about to be physically maltreated:
  - Express an understanding comment to provide support, such as “shopping with kids can be a real test of patience.”
  - Offer friendly assistance: “You sure have your hands full, what can I do to help?”
  - Ask a neutral/distracting question such as “How is that kind of pizza?”
- Contact public officials to tell them about child abuse/neglect and the importance of prevention.
- Write letters to local newspapers about what each individual and the community as a whole can do to prevent child abuse and neglect.
- Contact reporters and ask that they follow stories on child abuse/neglect tragedies with articles about how such tragedies can be prevented in the future.
- Encourage school officials to include personal safety training for children and parenting education for teens as required subjects.
- Urge your school district to provide programs to prevent substance abuse for students at all levels.
- Get schools or community centers to sponsor after school programs which provide adequate supervision and constructive activities for children.
- Volunteer with a child/family service agency (office work, direct services, become a parent mentor or Big Brother/Big Sister).
- Work with your public library to have a display and distribute brochures about child development, parenting and prevention of abuse and neglect.

In Your Family

- Talk to your child(ren) about child abuse and what they can do to stay safe.
- Use non-physical discipline and set a good example of how to be a positive parent.
- Sign a copy of “A Parent’s Pledge”, post it at home as a reminder and follow it on a daily basis.
- Coach your child(ren) on how to resolve conflict in non-violent ways and set a good example in resolving your own conflicts.
- Talk to your teen(s) about how to be a good parent.
- Thoroughly evaluate the safety of your child’s day care setting; tell babysitters and day care providers never to shake or physically punish your child(ren).

In Your Workplace

- Be friendly with co-workers and encourage them to talk about their family and children.
- Provide emotional support, for co-workers under stress; let them know about local resources which are available to help.
- Talk to co-workers about ways to prevent child abuse and neglect.
- Ask your employer to publish articles in the company newsletter about family well-being and what can be done to prevent child abuse/neglect.
- Have your Personnel Department or EAP distribute information promoting family well-being.

In Your Spiritual Community

- Ask spiritual leaders to talk about child abuse, neglect and prevention during services.
- Pass out blue ribbon pins and encourage people to wear them.
- Request that a copy of these suggestions be printed in your local weekly newspaper.
- Host a community information fair for child and family service agencies during Child Abuse/Neglect Prevention Month (April).
- Invite a prevention professional to speak at adult education classes.
- Include personal safety training in children’s education classes.
- Organize an emergency babysitting service for members of your congregation.
- Recruit a group to volunteer on a regular basis at a social service agency.
- Establish a fellowship group which focuses on parent education and support, especially for new parents.
- Ask that a copy of these suggestions be printed in your church newsletter.

A lot has been learned about how child abuse and neglect can be prevented.
We know that each one of us CAN make a difference ...
Please do YOUR PART!
IDENTIFYING ABUSE

- Each case of child abuse and neglect is individual.
- The child is always the victim.
- Although Ohio law permits corporal punishment in the home, school, and institutions, excessive physical discipline is abuse. It is difficult to define “excessive,” but there are guidelines you can use. Physical discipline probably is excessive if:
  - It results in physical injury, including bruises
  - The injuries are in particularly sensitive locations (eyes, genitals)
  - It is inconsistent, arbitrary punishment designed not to educate, but to instill fear
  - The caretaker loses control during discipline
  - It is inappropriate to the age of the child
  - It is the result of unreasonable expectations or demands on the child by the caretaker

- A perpetrator of child abuse or neglect can be any person who has care, custody, or control of the child at the relevant time. This could include parent, stepparent, teacher, babysitter or child care staff person, relative, institution staff person, bus driver, playground attendant, caretaker, parent’s boy/girlfriend, or anyone with whom the child has contact. There also are instances when the parent or regular caretaker can be held responsible for abuse or neglect perpetrated by another. For example, when a parent allows the spouse to physically abuse their child, or when a child is left in inappropriate care and subsequently suffers abuse or neglect.

- There are no simple answers. Abuse or neglect rarely occurs in clear, simple, and specific terms. Abuse or neglect usually results from complex combinations of a range of human and situational factors.
### ISOLATION
Adults who abuse or neglect children often do not have the support they need. They are isolated physically and emotionally from family, friends, neighbors, and organized groups. They may discourage social contact, and rarely will participate in school or community activities.

### POOR SELF-CONCEPT
Many of these adults perceive themselves as bad, worthless, or unlovable. Children of parents with a poor self-concept often are regarded by their parents as deserving of abuse or neglect because they see their children as reflections of themselves. They view abuse and neglect as behavior that is expected of them.

### IMMATURE
This characteristic may be reflected in many ways: impulsive behavior; using the child to meet the adult’s own emotional or physical needs; a constant craving for change and excitement.

### LACK OF PARENTING KNOWLEDGE
Many times, abuse or neglect results because the adult does not understand the child’s developmental needs. Abusive parents often are strict disciplinarians who are frustrated from unmet expectations. These parents tend to place unrealistic demands upon their children, and view their child’s inability to perform as willful, deliberate disobedience.

### SUBSTANCE ABUSE
Studies consistently have shown a correlation between the misuse of drugs or alcohol and the occurrence of abuse and neglect.

### LACK OF INTERPERSONAL SKILLS
The abusive or neglectful adult often has not learned to interact with people, socialize, or work with others.

### UNMET EMOTIONAL NEEDS
Often, the abusive or neglectful adult has unmet basic emotional needs—warmth, support, love. Unable to provide the child with these feelings, they will instead seek fulfillment from the child.

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**IDENTIFYING CHILD ABUSE AND NEGLECT**

**WHAT WE KNOW ABOUT IDENTIFYING THE ABUSER**

Many individuals have felt at times that life is more than they can handle. What stops them from giving up or lashing out are skills and mechanisms they have learned to control or divert their anger, accept and assume adult responsibility, recognize, realistic boundaries of acceptable behavior and expectation, and seek and accept help and support. When adults are faced with a situation which requires the use of coping skills that have not been developed, child abuse or neglect often results.

Although this explanation is oversimplified, it does help one understand how abuse and neglect can occur. It also explains the phrase “cycle of child abuse and neglect.” Children learn from their parents. A child who has been raised in a home where violence is an accepted response to frustration will, as an adult, tend to react violently. The skills necessary for controlling anger or frustration are never learned. What is learned is violence.

In the same way, a parent who lacks self-esteem or maturity cannot instill these characteristics within the child. Without significant outside influences, the child is likely to become an adult who perceives oneself and life in the same manner as the parent does. This is the cycle of child abuse and neglect—adults tend to repeat the actions and attitudes which were learned as children.

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**IDENTIFYING CHILD ABUSE AND NEGLECT**

**Adults who abuse or neglect children usually will share several of the following general characteristics.**

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In the family where physical abuse occurs, the abusive adult may ...

- have unrealistically high standards and expectations for oneself/one's children
- be rigid or compulsive
- be hostile and aggressive
- be impulsive with poor emotional control
- be authoritative and demanding
- fear or resent authority
- lack control or fear losing control
- be cruel or sadistic
- be irrational
- be incapable of child rearing
- trust no one
- believe in the necessity of harsh physical discipline
- accept violence as a viable means of problem resolution
- have an undue fear of spoiling the child
- consistently react to the child with impatience or annoyance
- be overly critical of the child and seldom discuss the child in positive terms
- lack understanding of the child's physical and emotional needs
- lack understanding of the child's developmental capabilities
- perceive oneself as alone, without friends or support
- view seeking or accepting help as a weakness
- be under pressure
- have an emotionally dependent spouse
- be engaged in a dominant-passive marital relationship
- have marital problems
- have been physically abused him/herself

In the family where sexual abuse occurs, the abusive adult may ...

- be overly protective of the child
- refuse to allow the child to participate in social activities
- be jealous of the child's friends or activities
- accuse the child of promiscuity
- distrust the child
- have marital problems
- need to be in control or fear losing control
- be domineering, rigid, or authoritative
- favor a "special" child in the family
- have been sexually abused him/herself

In the family where emotional maltreatment occurs, the maltreating adult may ...

- act irrationally or appear to be out of touch with reality
- be deeply depressed
- exhibit extreme mood swings
- constantly belittle the child or describe the child in terms such as "bad," "different," or "stupid"
- be cruel or sadistic
- be ambivalent towards the child
- expect behavior that is inappropriate for the child's age or developmental capabilities
- constantly shame the child
- threaten the child with the withdrawal of love, food, shelter, or clothing
- threaten the child's health or safety
- reject the child or discriminate among children in the family
- be involved in criminal activities
- use bizarre or extreme methods of punishment
- avoid contact with the child, seldom touching, holding, or caressing him
- avoid looking or smiling at the child
- be overly strict or rigid
- torture the child
- physically abuse or neglect the child
- have been abused or neglected him/herself

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WHAT WE KNOW ABOUT IDENTIFYING VICTIMS OF ABUSE

Abuse and neglect can be difficult to detect. There may be signs and indications, which, singularly or together, suggest that a child might be in need of help.

Physical Indicators
- These signs are often the easiest to detect and diagnose. Aspects of the child's appearance and the presence of bodily injury maybe physical indicators.

Behavioral Indicators
- Often, children will send messages through their behavior, which suggest the occurrence of abuse or neglect. These clues may be in the form of "acting out" behaviors or behaviors which reflect the child's attempt to cope with or hide the abuse or neglect. Behavioral indicators are more difficult to detect and interpret than physical indicators.

There is no blueprint for identifying an abused or neglected child. While some of these behavioral or physical indicators may occur in a child who has not been abused, be especially alert to repetition or the presence of multiple indicators.

Immediately report any suspicion of child abuse or neglect to your local public children services agency. The child's safety and the serious ramifications of alleged child abuse and neglect make it critical that the determination of abuse be made by a collaboration of experienced and trained professionals.

CHILD MALTREATMENT FALLS IN ONE OR MORE OF FOUR GENERAL CATEGORIES:
- Physical Abuse
- Sexual Abuse
- Emotional Abuse
- Neglect

ADOLESCENT OFFENDERS

Adolescent offenders account for an estimated one-third of the sexual offenses against young children. The majority of these offenses occur either in their own home involving a younger sibling or in the role as babysitter for other young children. These offenders reflect many of the same characteristics as an adult offender and are often “loners” with minimal peer relationships.
OTHER UNEXPLAINED OR REPEATED INJURIES

Injuries resulting from physical abuse often include:

- lacerations, abrasions, welts, scars, human bites or pinch marks
- missing, chipped, or loosened teeth, tearing of the gum tissue, lips, tongue, and skin surrounding the mouth
- loss of hair/bald patches
- broken eardrum
- retinal hemorrhage
- abdominal injuries

IDENTIFYING CHILD ABUSE AND NEGLECT

• behavioral extremes (withdrawal, aggression, regression)
• inappropriate or excessive fear of parent or caretaker
• unusual shyness, wariness of physical contact
• antisocial behavior, such as substance abuse, truancy, running away
• reluctance to return home
• belief that punishment is deserved
• suggestion that other children should be punished in a harsh manner
• victim's disclosure of abuse
• depression, excessive crying
• unbelievable or inconsistent explanation for injuries
• attempt to hide injuries

CLUES TO RECOGNIZING PHYSICAL ABUSE

Physical Indicators

UNEXPLAINED, CHRONIC, OR REPEATED BRUISING

Be especially alert to bruises:

- on the face, throat, upper arms, buttocks, thighs, or lower back
- in unusual patterns or shapes which suggest the use of an instrument (loop, lash, linear, circular or rectangular marks)
- on an infant (especially if not cruising or walking)
- in the shape of bite or pinch marks
- in clusters

UNEXPLAINED BURNS

Be especially alert to:

- Cigarette burns. This type of burn is circular, and often found on the child’s palms, soles of feet, genitalia, or abdomen.
- Immersion burns. These burns characteristically will produce sharp lines of demarcation and appear on the buttocks, genital area, or extremities. On the hands and feet, burns can produce a “glove” or “stocking” pattern, on the buttocks, immersion burns often will be “doughnut shaped.”
- rope burns
- burns in the shape of common household utensils or appliances

UNEXPLAINED SKELETAL INJURIES

Skeletal injuries resulting from physical abuse often include:

- injury to the bones around the joints (“metaphyseal fractures”)
- rib fractures, vertebral fractures
- any skeletal injury in an infant or child without a plausible explanation

UNEXPLAINED CRABY OR REPEATED INJURIES

IDENTIFYING CHILD ABUSE AND NEGLECT

Behavioral Indicators

Somatic complaints, including pain and irritation of the genitals
- sexually transmitted disease
- pregnancy
- bruises or bleeding from external genitalia, vagina, or anal region
- genital discharge

CLUES TO RECOGNIZING SEXUAL ABUSE

Physical Indicators
Emotional abuse is maltreatment, which can involve words, actions and/or indifference. Abusers ignore, belittle, dominate and criticize the victim. There may be overlap with physical abuse. The exposure of children to repeated episodes of domestic violence may constitute emotional abuse.

### CLUES TO RECOGNIZING NEGLECT

**Physical Indicators**

- poor hygiene
- unsuitable clothing; missing key articles of clothing such as underwear, socks, shoes, or coat; or overdressed in hot weather
- untreated illness or injury
- excessive sunburn, colds, insect bites, or other conditions which would indicate prolonged exposure to the elements
- height and weight significantly below age level
- lack of immunizations which results in the prevention of attending school

### CLUES TO RECOGNIZING SEXUAL ABUSE

**Behavioral Indicators**

- the victim’s disclosure of the sexual abuse
- poor peer relationships, inability to relate to children of same age
- regressive behaviors, such as thumb sucking, bed-wetting, fear of the dark, or reattachment to a favorite toy
- sudden changes in behavior
- promiscuity or seductive behavior
- aggression or delinquency
- truancy or chronic running away
- prostitution
- substance abuse
- difficulty in walking or sitting
- reluctance to participate in recreational activity

**Physical Indicators**

- frequent, unexplained sore throats, yeast or urinary infections
- frequent, unexplained sore throats, yeast or urinary infections
- bed-wetting or loss of bowel control (after child has been trained)

### CLUES TO RECOGNIZING EMOTIONAL MALTREATMENT

**Behavioral Indicators**

- eating disorders, including obesity or anorexia
- speech disorders, such as stuttering or stammering
- developmental delays in the acquisition of speech or motor skills
- weight or height level substantially below the norm
- flat or bald spots on an infant’s head
- frequent vomiting

**Physical Indicators**

- torn, stained, or bloody underclothes
- frequent, unexplained sore throats, yeast or urinary infections
- nervous disorders, such as hives, rashes, facial tics, or stomach aches

### IDENTIFYING CHILD ABUSE AND NEGLECT

**Behavioral Indicators**

- nervous disorders, such as hives, rashes, facial tics, or stomach aches
- bed wetting

**Physical Indicators**

- poor relations with peers
- withdrawal or self-isolation
- cruel behavior, seeming to get pleasure from hurting children, adults, or animals; seeming to get pleasure from being mistreated
- age-inappropriate behavior
- lack of self-confidence
- unusual fears for child’s age
- being constantly withdrawn and sad
DISTINGUISHING ABUSIVE INJURIES FROM ACCIDENTS

The very nature of childhood invites accidents. Children are curious and fearless. They run, climb, jump, and explore. A child’s motor skills usually outpace the cognitive skills, allowing the child to approach danger without recognizing it. It can be difficult to distinguish accidental injuries from abusive non-accidental injuries.

HOW TO DISTINGUISH ABUSIVE INJURIES FROM ACCIDENTAL INJURIES

Certain locations on the body are more likely to sustain accidental injury: knees, elbows, shins, and the forehead; all are parts of the body which can be injured during an accidental fall or bump. Protected or non-protuberant parts of the body, such as the back, thighs, genital area, buttocks, back of the legs, or face, are less likely to accidentally come into contact with objects which could cause injury. For example, bruised knees and shins on a toddler are likely to be the result of normal age-related activity; bruises on the lower back are more likely to have been inflicted non-accidentally.

The greater the number of injuries, the greater the cause for concern. Unless involved in a serious accident, a child is not likely to sustain a number of different injuries accidentally. Injuries in different stages of healing can suggest a pattern of recurrent abusive episodes.

IDENTIFYING CHILD ABUSE AND NEGLECT

CLUES TO RECOGNIZING NEGLECT
Behavioral Indicators

- unusual school attendance, such as frequent or chronic absence, lateness, coming to school early or leaving late
- chronic hunger, tiredness, or lethargy
- begging or collecting leftovers
- assuming adult responsibilities
- reporting no caretaker in home

Child neglect is difficult to define. Indicators of neglect must be considered in light of the parent’s cultural background and financial ability to provide. Poverty is not neglect. Because many situations of neglect require judgment calls, one must be careful not to use personal values as the decision-making standard. Instead, ask oneself if the child is:

- adequately supervised?
- receiving necessary medical and dental care?
- having nutritional needs met?
- receiving necessary developmental and educational stimulation?

In addition there should be no obvious health or safety risks in the home.

IDENTIFYING CHILD ABUSE AND NEGLECT

DISTINGUISHING ABUSIVE INJURIES FROM ACCIDENTS

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How many injuries does the child have? Are there several injuries occurring at one time or over a period of time?

- Many non-accidental injuries are inflicted with familiar objects: a stick, a board, a belt, a hairbrush. The marks which result usually bear strong resemblance to the object which was used. For example, welts caused by beating a child with an electrical cord might be loop shaped; a belt might cause bruises in the shape of the buckle. Accidental marks resulting from bumps and falls usually have no defined shape.
If an injury is accidental, there should be a reasonable explanation of how it happened which is consistent with its severity, type, and location. When the description of how the injury occurred and the appearance of the injury do not seem related, there is cause for concern. For example, a fall off a chair onto a rug should not produce bruises all over the body. As a child grows and gains new skills, the child increases one's ability to engage in activities which can cause injury. A toddler trying to run is likely to suffer bruised knees and a bump on the head before the skill is perfected. The child is less likely to suffer a broken arm than is an eight-year-old who has discovered the joy of climbing trees. A two-week-old infant does not have the movement capability to self-inflict a bruise. Parents are not perfect. Injuries occur which may have been avoided. Accidents do happen. Does the description of how the injury happened seem likely? Is the injury consistent with the child's developmental capabilities?
WHO IS RESPONSIBLE TO REPORT ABUSE OR NEGLECT?

Anyone who has reason to believe a child is being abused or neglected should make the report!

We all have a responsibility to report a child we suspect may be in danger. Ohio law encourages you to act on behalf of a child in need of protection, and to report your suspicions to the appropriate authorities.

Certain professionals, identified in Section 2151.421 of the Ohio Revised Code, are mandated to report a child they suspect may be abused or neglected. The code can be read online at http://codes.ohio.gov/. Reporting is required if, while acting in a professional or official capacity, a mandated reporter suspects that a child under 18 years of age, or a mentally retarded, developmentally disabled or physically impaired child under 21 years of age, has suffered or faces a threat of physical or mental abuse or neglect. If they fail to report, they could be found guilty of a misdemeanor of the fourth degree and liable for civil damages. Those required to report suspected child abuse and neglect include:

- Attorney
- Physician, including a hospital intern or resident
- Podiatrist
- Registered, Licensed and Visiting Nurse
- Other Health Care Professional
- Licensed Psychologist
- Licensed School Psychologist
- Independent Marriage and Family Therapist
- Speech Pathologist
- Audiologist
- Coroner
- Administrator or employee of a child day-care center
- Administrator or employee of a certified child care agency
- Administrator or employee of a public or private children services agency
- School teacher
- School employee
- School authority
- Social worker
- Professional counselor
- Agent of a county humane society
- Clergy
- Superintendent, board member or employee of a county board of mental retardation
- Employee of the Department of Mental Retardation and Developmental Disabilities
- Dentist
- Administrator or employee of a residential camp or child day camp
- Respite care facility or home
- Homemaker Services Employee
- Superintendent, board member or employee of a county board of mental retardation
- Employee of the Department of Mental Retardation and Developmental Disabilities
- Dentist
- Administrator or employee of a residential camp or child day camp
- Respite care facility or home
- Homemaker Services Employee

Ohio law provides certain exemption for the attorney and physician to protect the confidentiality of the relationship with the client or patient. An attorney or physician is not mandated to report suspected child abuse or neglect if the suspicions are the result of a communication made in the attorney-client or physician-patient relationship unless: 1) the client/patient is a child under 18 years of age or a physically or mentally handicapped child under 21 years of age; 2) the attorney or physician knows or suspects as a result of the communication or observation made during the communication that the client/patient has been abused or neglected; and 3) the relationship does not arise out of the client/patient's attempt to have an abortion without notification of her parents.
WILL MY REPORT BE CONFIDENTIAL?

A report of suspected child abuse and neglect is confidential. The PCSA will not release or affirm your identity to anyone without your written consent, except under direct order of the court. You also are protected from civil or criminal liability. Although no statute can forbid the filing of civil or criminal charges, Section 2151.421 of the Ohio Revised Code protects the reporter from decision or award, which might be sought through the filing of such claims.

HOW WILL MY REPORT BENEFIT THE CHILD?

First and foremost, you should report to protect the child. The intent of the law is not to hurt or to punish; it is to get help to children and families in need. We all have a stake in the protection of Ohio's children. Studies have linked child abuse and neglect to a wide range of criminal and social misbehaviors. Why? Violence breeds violence. The only method of response the victim of child abuse may know is physical force or aggression. The lessons necessary for development of interpersonal skills may have never been taught in the abusive or neglectful environment. The emotional damage, which may result from child abuse or neglect often is vented through self-destructive expressions, such as rape, murder, and continuation of child abuse and neglect.

WHAT SPECIFIC INFORMATION SHOULD I REPORT?

- The name and address of the child you suspect is being abused or neglected.
- The age of the child.
- The name and address of the parent or caretaker of the child.
- The name of the person you suspect is abusing or neglecting the child.
- The reason you suspect the child is being abused or neglected.
- Any other information which may be helpful to the investigation.
- Your name, if you want to give it. You may report anonymously if you choose, but you are encouraged to give your name. This makes it possible for the child protective services worker to get in touch with you later if additional or clarifying information is needed.

If you are a mandated reporter, you may be required by the children services agency to follow up your verbal report in writing. This request generally is made if your report is based on specific diagnostic information or if an agreement exists between your agency of employment and the children services agency.

It is helpful if you provide as much of this information as you can. You should not hesitate to report if you do not have all the information. Any uncertainty you have regarding whether to report should be resolved in favor of the child's protection. In addition to the information regarding the suspected abuse or neglect, the PSCA may also ask questions related to a PSCA caseworker safety concerns. These questions may include whether there are dogs and/or weapons in the home, if any residents have criminal histories, and if anyone in the household has any mental health concerns.

HOW DO I DETERMINE IF A REPORT IS NECESSARY?

You should report any child under 18 years of age or any physically or mentally handicapped child under 21 years of age, who you have reason to believe has suffered any wound, injury, disability, or condition of such a nature as to indicate abuse or neglect. It is important to note that you need only suspect – have reason to believe – that abuse or neglect is occurring physical proof or other forms of validation are not required. It is the responsibility of the children services agency, through its investigation, to determine if abuse or neglect is in fact occurring.

WHAT SPECIFIC INFORMATION SHOULD I REPORT?

- The name and address of the child you suspect is being abused or neglected.
- The age of the child.
- The name and address of the parent or caretaker of the child.
- The name of the person you suspect is abusing or neglecting the child.
- The reason you suspect the child is being abused or neglected.
- Any other information which may be helpful to the investigation.
- Your name, if you want to give it. You may report anonymously if you choose, but you are encouraged to give your name. This makes it possible for the child protective services worker to get in touch with you later if additional or clarifying information is needed.

If you are a mandated reporter, you may be required by the children services agency to follow up your verbal report in writing. This request generally is made if your report is based on specific diagnostic information or if an agreement exists between your agency of employment and the children services agency.
HOW SHOULD I RESPOND TO THE CHILD WHO DISCLOSES ABUSE OR NEGLECT?

Many child victims have difficulty disclosing the abuse. They may have been told not to tell or they might be afraid of what will happen if they disclose. Abuse victims may be ashamed of what people will think if the truth is discovered or think that they will not be believed. If a child discloses abuse to you, the child is confiding and placing their trust in your hands.

There may be a time when a child or adolescent tells you, openly or indirectly, about abuse or neglect in the family. Recognize the strength which this child has demonstrated by sharing the secret and honor the trust shown by choosing you as the confidant. Although it may be a difficult subject for you to discuss, it is important that you handle the disclosure with sensitivity. In part, this can be accomplished by following some general guidelines:

Listen to what is being told to you
Do not project or assume anything. Do not push the child to share more than the child is willing. The child needs warmth and acceptance, not curiosity or interrogation. It is not necessary at this time that the child reveal specific or intimate details.

Reassure the child that the child has done the right thing by telling you
Acknowledging the difficulty of this decision and the personal strength shown in making this choice. Make it clear that the abuse or neglect is not the child’s fault, that the child is not bad or to blame.

Keep your own feelings under control
Be calm and nonjudgmental. Do not express emotions such as shock, embarrassment, anger, or disgust. Do not criticize or belittle the child’s family.

Do not promise not to tell
Know your limits. This is not a situation you can handle by yourself.

Tell the truth
Don’t make promises you can’t keep, particularly relating to secrecy, court involvement, placement, and caseworker decisions. After abuse or neglect has been disclosed, there may be actions taken over which neither you nor the child has control.

Assess the child’s immediate safety
Is it safe for the child to return home? Is the child in immediate physical danger? Is it a crisis? Is there in-home protection?

Be supportive
Remember why the child came to you. The child needs your help, support, and guidance. Be there for the child; let the child know that telling about the abuse or neglect was the right thing to do. It is the only way to make it stop.

Try to help the child regain control
The child is about to be involved in a process in which the primary intent will be to determine the child’s best interest. At times, this may seem to sweep the child up in a series of events that are beyond one’s control. Although alternatives may be limited, it can help to let the child make decisions whenever possible. For example, let the child choose whether to accompany you when the report is made. Although many of the decisions may seem trivial, they will allow the child some sense of self-determination.
WHAT DOES THE CHILDREN SERVICES AGENCY DO WHEN SUSPECTED CHILD ABUSE OR NEGLECT IS REPORTED?

Public children services agency (PCSA) begins investigation. When a report of suspected child abuse or neglect is received either directly by a PCSA or by referral from a law enforcement agency, the PCSA determines if the circumstances as described pose an immediate threat of harm to the child’s health and well-being (such as alleged abandonment or severe physical abuse of the child, or alleged mental instability of the child’s parents or custodians). In these instances, the PCSA provides immediate emergency intervention. If a report is determined not to be an emergency, a PCSA begins an investigation within 24 hours to determine the validity of the allegation. The investigation includes a visit to the child’s home to interview the parents/custodians and the child. Contact may also be made with community professionals who may be able to provide additional information or services: school personnel, hospital and family physicians, public health nurses, mental health counselors. A comprehensive assessment of the family’s risk and strengths and needs is completed to assist in determining appropriate agency and services intervention.

Through interview, assessment, observation, and collateral contacts, the PCSA makes one of three determinations regarding the report:

- Report indicated: Assessment/Investigation determined circumstantial, or other isolated indicators of child abuse or neglect lacking confirmation or a determination by the caseworker that the child has been abused or neglected.
- Report substantiated: There is an admission of child abuse or neglect by the person responsible; an adjudication of child abuse or neglect; or other forms of confirmation deemed valid by the PCSA.
- The PCSA also makes decisions regarding how to serve the family if agency services are needed:

  - No court involvement required: In-home services provided. Child remains in home. Most cases of abuse or neglect do not require court involvement. Most families do not neglect or injure a child with willful intent, and will accept help in correcting the circumstances which caused the occurrence. While the primary goal of the PCSA is the safety, well-being and permanency of the child, it is important to remember that the trauma caused by removing a child from their home may often be as damaging as the act of neglect or abuse itself. For this reason, the child will not be removed from the home if there is no serious threat to his health and well-being. Services will be provided to the family and child as a unit.

  - Court involvement required: If the family refuses services or it is potentially harmful for the child to remain in the home, court involvement will be initiated. PCSA and the law enforcement agency consult with and make recommendations to the county prosecutor. In cases of severe abuse or neglect, the county prosecutor will determine if filing charges against the alleged perpetrator is appropriate.

  - Court orders placement of child. The court may determine it is potentially harmful to the child’s safety, health and well-being to remain in the home. The court will order removal of the child from the parent’s home to ensure the child’s safety.

  - Court orders services for family: Child remains in home. The court may place the family under protective services supervision. The court permits the child to remain in the home with the stipulation that the family participate in appropriate community services, such as parenting education classes, mental health counseling, homemaker services.

PCSA matches community resources to needs of family. PCSA helps the family recognize and overcome the factors which contributed to or caused the abuse or neglect. Together they identify and set goals aimed to create a home environment suitable for the child. In cases where the risk of future harm is assessed to be moderate or high, the PCSA provides support and guidance to the family in order to reduce or eliminate those dynamics that are impacting the safe care of the child. Many communities have multi-disciplinary teams to assist in the selection of comprehensive and effective services. PCSA workers, physicians, nurses, educators, mental health workers, and law enforcement personnel combine their expertise to provide a broad-based range of skills for treatment planning.

Case Plan evaluation: Every child has the basic human right to a permanent and stable home. Early in the case planning, the family and the PCSA worker set time-limited guidelines for the achievement of agreed-upon goals. To avoid having the child in limbo for an indefinite time, the PCSA worker and the family periodically evaluate the family’s progress. Relative searches for family support and for potential caregivers are also conducted with the family. Concurrent case planning may also be done.

PCSA/court determines services successful. Family unit intact: Through the provision of appropriate supportive services, most families are able to prevent the recurrence of abuse or neglect. An estimated 90 percent of people involved in abuse or neglect can be treated successfully.

PCSA/court determines services need modified. Case plan is reevaluated and changes made. A family may suffer a setback during the time services are provided. An unexpected crisis, unrealistic goals, or inappropriate service selection may prevent the family from achieving set objectives within the agreed-upon time frame. When this occurs, the family and the PCSA worker reevaluate the case plan to determine appropriate changes to be made.

PCSA/court determines services unsuccessful. Court orders termination of parental rights. If it becomes apparent during the case planning process that the parents/custodians are unwilling or unable to accomplish the goals necessary to meet minimum standards of care for the child, PCSA requests the court to terminate parental rights and free the child for a permanent adoptive placement. Parental rights are terminated only when it is clearly demonstrated that the parents/custodians are unable or unwilling to meet or adapt to minimum standards of care.

REPORTING CHILD ABUSE AND NEGLECT

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WHO DO I CONTACT TO REPORT SUSPECTED ABUSE OR NEGLECT?

A report may be made by telephone, in person, or in writing to the children services agency in the county in which the child lives or was abused, or to the law enforcement agency. The addresses and phone numbers of Ohio Public Children Service Agencies (PCSA) are listed below. The listing is also available online at

http://jfs.ohio.gov/County/County_Directory.pdf

**OHIO COUNTY PUBLIC CHILDREN SERVICE AGENCIES**

- **Adams County CSB**
  300 North Wilson Drive
  West Union, Ohio 45693-1157
  Phone: (937) 544-2511
  Fax: (937) 544-9724
  After-hours Emergency Phone: (937) 544-2511

- **Allen County CSB**
  123 W. Spring Street
  Lima, Ohio 45801-4305
  Phone: (419) 227-8590
  Fax: (419) 227-8590
  After-hours Emergency Phone: (419) 221-5680

- **Ashland County DJFS**
  15 West Fourth Street
  Ashland, Ohio 44805-2137
  Phone: (419) 282-5000
  Fax: (419) 282-5001
  After-hours Emergency Phone: (419) 282-5001

- **Ashtabula County CSB**
  3914 C Court
  P.O. Box 1175
  Ashtabula, Ohio 44005-1175
  Phone: (440) 998-1811
  Fax: (440) 992-6828
  After-hours Emergency Phone: 1-888-998-1811

- **Athens County CSB**
  18 Stonybrook Drive
  P.O. Box 1046
  Athens, Ohio 45701-1046
  Phone: (740) 592-3061
  Fax: (740) 593-3880
  After-hours Emergency Phone: (877) 477-0772

- **Auglaize County DJFS**
  12 North Wood Street
  Wapakoneta, Ohio 45895-0368
  Phone: (419) 739-6505
  Fax: (419) 739-6506
  After-hours Emergency Phone: (419) 739-6506

- **Belmont County DJFS**
  1800 North Union Street
  St. Clairsville, Ohio 43950-9765
  Phone: (740) 695-5251
  After-hours Emergency Phone: (740) 695-1074

- **Brown County DJFS**
  775 North Union Street
  P.O. Box 1175
  Ashtabula, Ohio 44005-1175
  Phone: (440) 998-1811
  Fax: (440) 992-6828
  After-hours Emergency Phone: 1-888-998-1811

- **Brown County DJFS**
  775 Mt. Orab Pike
  Georgetown, Ohio 45121
  Phone: (937) 378-6104
  Fax: (937) 378-4735
  After-hours Emergency Phone: (937) 378-4435
REPORTING CHILD ABUSE AND NEGLECT

Butler County CSB
300 North Fair Avenue
Hamilton, Ohio 45011-4249
Phone: (513) 887-4055
Fax: (513) 887-4260
After-hours Emergency Phone: (513) 868-0888

Carroll County DJFS
95 East Main Street
P.O. Box 219
Carrollton, Ohio 44615
Phone: (330) 627-7313
Fax: (330) 627-4969
After-hours Emergency Phone: (330) 627-2141

Columbiana County DJFS
110 Nelson Avenue
Lisbon, Ohio 44432
Phone: (330) 424-1471
Fax: (330) 424-0931
After-hours Emergency Phone: (330) 424-7767

Coshocton County DJFS
725 Pine St.
Coshocton, OH 43812
Phone: (740) 622-1020
Fax: (740) 622-5591
After-hours Emergency Phone: (740) 622-2411

Crawford County DJFS
863 Harding Way West
Galion, Ohio 44833-1685
Phone: (419) 468-3525
Fax: (419) 468-6771
After-hours Emergency Phone: 1-800-899-6855
(pager #877-997-4344)

Cuyahoga County DCFS
3055 Euclid Avenue
Cleveland, Ohio 44115-2583
Phone: (216) 432-3390
Fax: (216) 432-3379
After-hours Emergency Phone: (216) 696-KIDS
(5437)

Darke County DJFS
631 Wagner Ave.
Greenville, Ohio 45331
Phone: (937) 548-4132
Fax: (937) 548-4928
After-hours Emergency Phone: (937) 548-2020

Defiance County DJFS
5879 Eycamp Road, Suite A
P.O. Box 639
Defiance, Ohio 43512-0639
Phone: (419) 782-3881
Fax: (419) 784-3249
After-hours Emergency Phone: (419) 784-1155

Delaware County DJFS
140 North Sandusky Street
Delaware, Ohio 43015-1789
Phone: (740) 833-2300
Fax: (740) 833-2299
After-hours Emergency Phone: (740) 833-2300

Erie County DJFS
221 West Parish Street
Sandusky, Ohio 44870-4886
Phone: (419) 624-6401
Fax: (419) 626-5854
After-hours Emergency Phone: (419) 625-7951

Fairfield County DJFS
239 West Main Street
Lancaster, Ohio 43130
Phone: (740) 653-4060
Fax: (740) 687-7070
After-hours Emergency Phone: (740) 653-5223
(Sheriff)

Fayette County DJFS
135 S. Main Street
P.O. Box 220
Washington Court House, Ohio 43160
Phone: (740) 335-0350
Fax: (740) 333-3881
After-hrs Emergency Ph: (740) 335-6171

Franklin County CSB
855 W. Mound Street
Columbus, Ohio 43223
Phone: (614) 275-2571
Fax: (614) 275-2575
After-hours Emergency Phone: (614) 229-7000

Fulton County DJFS
604 South Shoop Avenue Suite 200
Wauseon, Ohio 43567
Phone: (419) 337-0010
Fax: (419) 335-0357
After-hours Emergency Phone: (419) 335-4010

Gallia County CSB
53 Strawberry Lane
Galipolis, Ohio 45631-8595
Phone: (740) 446-2993
Fax: (740) 446-2063
After-hours Emergency Phone: (740) 446-1221

Geauga County DJFS
P.O. Box 309
Chardon, Ohio 44024-9009
Phone: (440) 285-9141
Fax: (440) 286-6654
After-hours Emergency Phone: (440) 285-5665

Greene County CSB
601 Ledbetter Road
 Xenia, Ohio 45383-5336
Phone: (937) 562-6600
Fax: (937) 562-6650
After-hours Emergency Phone: (937) 572-0337
(HELP)

Guernsey County CSB
274 Highland Avenue
Cambridge, Ohio 43725-2528
Phone: (740) 439-5555
Fax: (740) 439-5521
After-hours Emergency Phone: (740) 439-5555

Hamilton County DJFS
222 East Central Parkway
Cincinnati, Ohio 45202-1225
Phone: (513) 946-2265
Fax: (513) 946-2265
After-hours Emergency Phone: (513) 241-KIDS
(5437)

Hancock County DJFS
7814 Country Road 140
P.O. Box 270
Findlay, Ohio 45840
Phone: (419) 424-7022
Fax: (419) 422-1081
After-hours Emergency Phone: (419) 424-7022

Hardin County DJFS
175 West Franklin Street, Suite 150
Kenton, Ohio 43326-1972
Phone: (419) 675-1130
Fax: (419) 674-2340
After-hours Emergency Phone: 1-800-442-7346

Harrison County DJFS
520 North Main Street
P.O. Box 239
Cadiz, Ohio 43907-0239
Phone: (740) 942-3015
Fax: (740) 942-2370
After-hours Emergency Phone: (740) 942-2197

Henry County DJFS
104 East Washington Street
P.O. Box 527
Napoleon, Ohio 43545-0527
Phone: (419) 592-4210
Fax: (419) 592-4894
After-hours Emergency Phone: (419) 592-0946

Highland County CSB
117 East Main Street
Hillsboro, Ohio 45133-1468
Phone: (937) 393-3111
Fax: (937) 393-3299
After-hours Emergency Phone: (937) 393-8010
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<td>1600 Marion-Waldo Road</td>
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