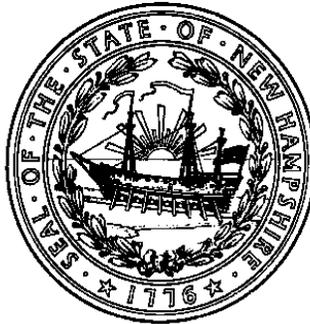


# THE STATE OF NEW HAMPSHIRE



**OFFICE OF THE ATTORNEY GENERAL**

**DEPARTMENT OF EDUCATION,**

**DIVISION FOR CHILDREN, YOUTH  
AND FAMILIES**

***CHILD ABUSE AND NEGLECT:***

***Guidelines for New Hampshire  
School Employees:  
Recognizing and Reporting  
Suspected Child Abuse and Neglect***

***A Publication of the Attorney General's Task Force  
on Child Abuse and Neglect  
Second Edition 2002***

Funding for this project and for the activities of the Attorney General's Task Force on Child Abuse and Neglect comes from the U.S. Department of Health and Human Services Administration on Children, Youth and Families - Office on Child Abuse and Neglect, through the Children's Justice Act Grant (G-0101NHCJA1) which is administered by the New Hampshire Department of Justice. Points of view in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Health and Human Services.

## PREFACE

School employees come into contact with troubled children and families at every social and economic level in the community. Given that they are concerned for the whole child, seeking help for a child victim of abuse or neglect is a natural, ethical, moral and legal response by the school. Child abuse and neglect inhibits the growth and learning potential of the child, thus making child advocacy a critical element in achieving educational objectives.

The complexity of these reports and the needs of our most vulnerable children and families require a cooperative effort by all professionals involved. This is important to not only assess reports, but also to insure that those referred who are in need, receive the services they require, whether a case is opened with the Division for Children Youth and Families (DCYF) or not. School employees can play an important role in helping that family move beyond the situation, which caused the report, and to help that family learn to keep their children safe at home.

School employees in all states are mandated to report suspected child abuse and neglect to the proper authority. In New Hampshire, that authority is the New Hampshire Division for Children, Youth, and Families (DCYF). Beyond reporting, a school employee may have the opportunity to continue communicating with a DCYF caseworker regarding a child's emotional and educational progress. A school employees can also play an important role in facilitating the abused child's growth by helping to improve his or her self-image and capacity to express emotions, get along with others, and properly communicate their needs.

The following guidelines are designed to help school employees recognize and respond to the needs of the abused and neglected children they serve and to assist in preventing future maltreatment.

This protocol was unanimously endorsed by the New Hampshire State Board of Education. The Task Force would like to thank the following members for their support of this protocol:

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## HISTORY OF THE CHILD ABUSE AND NEGLECT PROTOCOL PROJECT

The Attorney General's Task Force on Child Abuse and Neglect is comprised of professionals from throughout the state, representing the many disciplines involved in the field of child maltreatment. The Task Force was established in 1989 with statewide representation from the medical, mental health, legal, law enforcement, victim advocacy, forensic science, and child protection communities. The Task Force was created to focus specifically on the problem of child maltreatment in New Hampshire. The first three years were spent evaluating the systems response to child maltreatment and developing guidelines to assist professionals. Tireless efforts, on the part of many, produced a 600 page, precedent setting Protocol entitled: *Child Abuse and Neglect: Protocols for the Identification, Reporting, Investigation, Prosecution and Treatment.* In April of 1993, a two-day statewide training conference was presented to a multidisciplinary audience to introduce the Protocols.

In addition to the Protocol, the Task Force continues to sponsor annual conferences and extensive multidisciplinary and discipline-specific training programs for professionals statewide. Other projects funded by the Task Force include support for the New Hampshire Child Fatality Review Committee; court publications for children and teens; interviewing room set-up; and the Sexual Assault Nurse Examiner (SANE) Child Abuse Training.

In 1998, a Protocol Revision Committee was convened to revise the Education section of the Child Abuse Protocol. Under the direction and leadership Cheryl Molloy, Director of Prevent Child Abuse New Hampshire and Joyce Johnson, Education Consultant with the Department of Education, the Committee has updated and produced this comprehensive manual designed to help clarify the roles and responsibilities of education professionals in the handling of suspected cases of child abuse and neglect.

**The Task Force encourages duplication and distribution of this Protocol to broaden efforts to improve the multidisciplinary response to child abuse and neglect.**



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## **THE SCHOOL EMPLOYEE'S ROLE IN RECOGNIZING AND REPORTING CHILD ABUSE AND NEGLECT**

Schools recognize that education, health, and safety, are inextricably interwoven with the academic achievement of New Hampshire students. To ensure a safe learning environment for all children, school employees are encouraged to work collaboratively with appropriate agencies regarding suspected child abuse and neglect.

When child abuse and neglect is suspected, or a child discloses that they have been abused and neglected, it is a critical moment in that child's life. A combination of many factors determines how well a child copes with and survives childhood maltreatment. The support a child receives from significant adults around the time the abuse/neglect is discovered and disclosed is a critical factor. Adults who survive childhood maltreatment repeatedly report that the single most helpful person was the one who believed their story when they first disclosed.

School employees often become the people to whom a child initially discloses because they are a stable and continuous adult influence in that child's life. Because of these factors, the appropriate and timely response of school employees when child abuse and/or neglect is suspected cannot be underscored. This Protocol will assist with that process.

## **RECOGNIZING CHILD ABUSE AND NEGLECT**

The first step in helping abused and neglected children is learning to recognize the signs and symptoms of child abuse and neglect. According to **New Hampshire RSA 169-C:3**:

II. "Abused child" means any child who has been:

- a) Sexually abused; or
- b) Intentionally physically injured; or
- c) Psychologically injured so that said child exhibits symptoms of emotional problems generally recognized to result from consistent maltreatment or neglect;  
or
- d) Physically injured by other than accidental means.

XIX. "Neglected child" means a child:

- a) Who has been abandoned by his parents, guardian, or custodian; or

- b) Who is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for physical, mental or emotional health, when it is established that his health has suffered or is very likely to suffer serious impairment; and the deprivation is not due primarily to the lack of financial means of the parents, guardian or custodian; or
- c) Whose parents, guardian or custodian are unable to discharge their responsibilities to and for the child because of incarceration, hospitalization or other physical or mental incapacity.

Although child abuse is divided into four types – physical abuse, sexual abuse, neglect and emotional maltreatment – the types are more typically found in combination than alone. A physically abused child, for example, is often emotionally maltreated as well; and a sexually abused child may also be neglected. Any child at any age may experience any of the types of child abuse and neglect.

Experienced school employees likely have seen all forms of child abuse at one time or another. They should be alert to the numerous physical, behavioral, and emotional signs that could indicate that a child might be a victim of abuse and neglect. One factor that should trigger concern for a child is a **change** in the child’s functioning, whether it is physical (suddenly soiling oneself), behavioral (a once active child now withdraws) or emotional (unusual change in moods).

The list outlined in **Appendices H through K** was compiled from numerous studies, books, articles, and reports to help school employees identify potentially at-risk children. Anyone who comes in contact with children should have a basic knowledge of these indicators. Although the list is not exhaustive, it should provide a general awareness of the signs and symptoms of child abuse and neglect.

In addition to these indicators of abuse and neglect, there are several environmental factors worth noting that may place a child at increased risk:

- Social isolation
- Poverty
- Domestic violence
- Stress resulting from financial problems, unemployment, inadequate housing, illness, or lack of childcare
- Parent(s) with a childhood history of maltreatment
- Parent(s) who are emotionally immature, impulsive, or needy
- Poor parenting skills and lack of knowledge about child development
- Unrealistic parental expectations of a child
- Disruptions to the early bonding process between parent and child

- A child who is particularly difficult to care for - for example, learning disabled, physically disabled, emotionally disturbed, or a behavior problem

Anyone who suspects that a child is being abused/neglected must call the Division for Children, Youth and Families (DCYF) and ask for guidance on how to proceed in further assessing these concerns or how to make a report. In some cases, such as absenteeism or poor hygiene, the child or parent(s) should be spoken to before a formal report is filed. In other cases, it would be extremely important not to contact the parent(s) or siblings about the observation without first involving DCYF. In all cases, the key issue is “will the child be safe if I talk to the parent(s) about these concerns”. DCYF’s approach to each case depends on the nature of the observations and the potential risk of danger to the child. At any time there are any questions, DCYF may be called anonymously with concerns. The caseworker’s advice will help to clarify any misconceptions and assist in the decision-making process.

## **REPORTING SUSPECTED CHILD ABUSE AND NEGLECT**

### ***A. WHO IS REQUIRED TO REPORT SUSPECTED ABUSE AND NEGLECT?***

Pursuant to New Hampshire RSA 169-C:29, information by any citizen regarding the suspected abuse and neglect of a child is not confidential and must be reported to the Central Intake Unit of the child protection agency, DCYF. The law specifically states:

“**Any** physician, surgeon, county medical examiner, psychiatrist, resident, intern, dentist, osteopath, optometrist, chiropractor, psychologist, therapist, registered nurse, hospital personnel (engaged in admission, examination, care and treatment of persons), Christian Science practitioner, **teacher, school official, school nurse, school counselor, social worker**, day care worker, any other child or foster care worker, law enforcement official, priest, minister, or rabbi or any other person having reason to suspect that a child has been abused or neglected **shall report the same in accordance with this chapter.**”

**It is the school employee who suspects abuse and neglect who must make the report directly to DCYF Central Intake Unit, consistent with New Hampshire state law.** This ensures that the report is made firsthand, in a timely and accurate manner, and minimizes the trauma to the child by eliminating the need for the child to repeatedly tell his/her story.

It is the responsibility of the school administrators to ensure that the school’s reporting policy is in compliance with New Hampshire state law and that all school employees are familiar with the reporting policy.

Failure to report suspected abuse/neglect to DCYF is a misdemeanor offense under RSA 169-C:29.

## ***B. WHEN AND TO WHOM MUST A REPORT OF SUSPECTED ABUSE AND NEGLECT BE MADE?***

### **1. REPORT MADE TO DCYF CENTRAL INTAKE:**

Pursuant to RSA 169-C:30, the school employee who suspects child abuse and neglect must make an oral report immediately to the DCYF Central Intake Unit by telephone **(1-800-894-5533)**. Operating hours are Monday through Friday, (8:00 a.m. to 4:30 p.m.) or otherwise (by facsimile **(603)-271-6565**; in writing or in person to: **40 Terrill Park Drive, Suite 1, Concord, NH 03301**).

School employees making an oral report are strongly encouraged to make the report as early in the day as possible to give DCYF as much time as possible to respond before the close of school.

In most cases, it will be requested of a school employee to submit a written report to the DCYF Central Intake Unit within 48 hours of making an oral report. A copy of the written report must be kept in a confidential file in the principal's office, apart from the student's academic or counseling files.

As the primary agency responsible for child protection, the DCYF encourages school employees to raise any concerns directly and promptly with the intake worker or caseworker assigned to the child's case, and to that person's supervisor, if necessary. School employees should continue to advocate for the child by talking with other administrative staff, until the concern is addressed.

### **2. REPORT MADE TO DCYF CENTRAL INTAKE AND THE SCHOOL PRINCIPAL**

A school employee who suspects another school employee of abusing a student must report that suspicion directly to DCYF Central Intake Unit and the school principal. Once the report is made, the school principal must be informed. The principal will then inform the superintendent of schools. If the principal is the suspected abuser, the school employee who made the report to DCYF should inform only the superintendent of schools. In the case of a school employee suspected of abusing a student, a copy of the written report must be sent to the superintendent of schools.

### **3. REPORT MADE TO LAW ENFORCEMENT AND DCYF CENTRAL INTAKE**

In the event that DCYF Central Intake is closed, and a school employee suspects child abuse and neglect and has reason to believe the child is in immediate danger, the employee should call the law enforcement agency in the jurisdiction where the abuse and neglect has occurred. In addition, the employee must make a report to DCYF Central Intake at the earliest opportunity even if a report has already been made to law enforcement.

### ***C. LIABILITY***

New Hampshire requires the reporting of **ALL suspected** child abuse and neglect. Absolute proof of abuse or neglect is not required before reporting. Those who are uncertain about reporting because of concern regarding the legal consequences of their action should make a “good faith” decision. New Hampshire law provides protection against civil or criminal liability if a citizen makes a “good faith” report.

In accordance with New Hampshire law RSA 169-C:31 provides as follows:

“Anyone participating in good faith in the making of a report pursuant to this chapter is immune from any liability, civil or criminal, that might otherwise be incurred or imposed. Any such participant has the same immunity with respect to participation in any investigation by the department or judicial proceeding resulting from such report.”

### ***D. HOW MUCH INFORMATION IS NEEDED BEFORE MAKING A REPORT OF SUSPECTED ABUSE AND NEGLECT?***

It is not the school employee’s responsibility to actively gather information by “interviewing” students, parents, or others. These actions can severely hamper the ability of the DCYF caseworker and/or law enforcement officer to do a thorough assessment/investigation. More importantly, these actions can place children at risk of further abuse and neglect as well as pressures to deny that abuse and neglect has occurred.

If a school employee has a conversation with a child and suspects the child is a victim of abuse and neglect, the employee should limit the inquiry to such questions as how the injuries happened or whether medical needs have been attended to by a parent. The child’s reply, as well as the questions asked, should be documented. At this time the school employee must notify DCYF of any suspicions. The employee should proceed from there under the direction of DCYF.

In instances where the child independently discloses the presence of abuse and neglect, the school employee who directly received the disclosure needs to document exact statements made by the child using quotes whenever possible. The school employee should also document under what circumstances the child disclosed, and the demeanor of the child at the time of disclosure.

There may be no way for a school employee to know what a child’s circumstances are at home, and it is not primarily the school’s role to find out. If the child exhibits fear or expresses fear of going home because of the possibility of additional abuse and neglect, DCYF should be clearly told of that fear. If a child reports extremely dangerous household conditions, abandonment, or the presence of the abuser in the home when serious physical abuse or sexual abuse is suspected, this, too, should be reported to DCYF as an indication of imminent danger to the child. If the child has told the school employee about violence between adults in the household, that violence can increase the potential danger to children

and should be noted. Any injuries observed by the school employee should be accurately documented and described to DCYF.

### ***E. HOW SHOULD SUSPICIONS OF ABUSE AND NEGLECT BE DOCUMENTED?***

Notes about the exact date and time of the observations, the nature of what was observed, and the exact words, if any, that a child used to describe what happened should be recorded and kept in a file apart from the child's academic records. The purpose of these notes is primarily to assist school employees in accurately recalling what led them to suspect abuse or neglect, should law enforcement, DCYF social workers or the court need that information.

### ***F. WHAT IS THE NATURE AND CONTENT OF THE REPORT MADE TO DCYF?***

Pursuant to New Hampshire RSA 169:30, a report shall, if known, contain the following:

1. Name and address of the child suspected of being abused and neglected;
2. Name and address of the person responsible for the child's welfare;
3. Specific information indicating neglect or the nature and extent of the child's injuries (including any evidence of previous injuries);
4. Identity of the person or persons suspected of being responsible for such abuse and neglect;
5. Identity of other children and adults in the household, and
6. Any other information that might be helpful in establishing abuse and neglect that might be helpful to the Division (DCYF).

Additionally, if a school employee who reports suspected abuse and/or neglect, knows that **the family is from another country or state** and believes that the **family may flee or the child may disappear**, the school employee should report this immediately to Central Intake. An example involves a case in which a school employee has reason to believe that a child fears being returned to his/her country or state. The circumstances, if known, that led to the family and child residing in New Hampshire may also be important information to include in the report. New Hampshire law requires DCYF to, pursuant to RSA 169-C:34, I, **“commence an investigation immediately after receipt of a report”** when it appears the immediate safety or well being of a child is endangered or that the family may flee or the child disappear.

### ***G. WHAT HAPPENS WHEN A CALL IS MADE TO DCYF TO REPORT SUSPECTED ABUSE AND NEGLECT?***

When a call is made to DCYF Central Intake Unit, the school employee will be asked many questions by the intake worker. This process usually takes between 15 and 20 minutes. The intake worker is following a set of standard questions in order to collect as much information as possible about the child and the family's situation. The information then will

be used to determine whether abuse and neglect, as defined in the law and in DCYF policy, is likely to have occurred and also to make an initial assessment of the immediate risk to the child posed by his or her home or family life. The risk assessment will be used by the DCYF Central Intake Unit and by the DCYF district office assessment supervisor to determine how rapidly an investigation must begin.

DCYF Central Intake Unit will attempt to gather as much information as possible from the school employee in order to determine the presence of risk, what has occurred, or what may occur to affect a child or family, the presence of injuries, who may have caused those injuries and the family dynamics. An employee will be asked some of the following questions but is not expected to have answers to all of the following:

### ***1. SUMMARY OF SUSPECTED ABUSE AND NEGLECT***

- Who was involved?
- What happened?
- Where did it occur?
- When? How often?
- Number of incidents?
- Degree of current risk?
- Child's need for medical attention?
- Is domestic violence a factor in the home?
- How do you know?

### ***2. THE CHILD***

- What is the child's full name, date of birth, gender?
- Where is the child now?
- With whom does the child live?
- How long will the child be at that location?
- Is the child in school or other daytime program?
- School, grade, name and address of the program or school?
- What is the child's home address and phone number?
- What is the child's relationship to offender?
- Any disabilities (physical, mental, etc.) or special needs?
- What is the child's level of maturity?
- Are there family/friends/religious institutions available as supports?

### ***3. THE ALLEGED ABUSER/PERSON WHO HAS ALLEGEDLY NEGLECTED CHILD***

- Full name, date of birth, gender?
- Where can he/she be reached now?
- Place of employment and phone number?
- Home address and phone number?
- Current relationship to child/subject of the report?

- When and how does he/she have access to the child?
- Access to other children?
- Personal history and personality?
- Is there a history of mental or emotional disabilities or drug or alcohol abuse?
- Any history of violent or criminal behavior?
- Is he/she aware of the referral?
- Who else can provide information on this person?

**4. *THE NON OFFENDING PARENT/CAREGIVER***

- Full name, date of birth, gender?
- Place of employment/phone number?
- Where can he/she be contacted now?
- Current relationship to the offender?
- Any knowledge of abusive occurrences?
- Actions or lack of actions (if aware of abusive incidents)?
- Does parent demonstrate the ability to protect child from offender (reporter's opinion)?
- Are there extended family/friends/religious institutions available as support?

**5. *SIBLINGS, OTHER CHILDREN IN THE HOME***

- Names, dates of birth, genders?
- School (grade) or day programs being attended?
- Current whereabouts?
- Have siblings been involved also?
- Are siblings aware of abuse and neglect?
- Is there anything else about this child that concerns the reporter (e.g., unusual behavior observed)?

**6. *OTHER HOUSEHOLD MEMBERS***

- Names, ages, genders, relationships, involvement in or knowledge of alleged abuse and/or neglect?

**7. *REFERRAL SOURCE (REPORTS MAY BE MADE ANONYMOUSLY)***

- Name, address, and telephone number?
- Relationship to family?
- How does source know of the abuse and neglect?
- Was it observed directly?
- How does source think family will react to the assessment?
- Does referrer have any recommendations on how to proceed with the assessment?
- Why was referral made now?
- Any other individuals who know of the situation? How to contact?
- Can referrer add additional insights concerning family relationships and interactions?

## ***H. DOES DCYF HAVE TO KNOW WHO MADE THE REPORT?***

The school employee who initially raised concern about a child should be identified. The school itself can be named as the reporter, however, and the identity of the individual school employee who raised suspicions can be kept confidential under most circumstances.

## ***I. HOW WILL A REPORT BE HANDLED ONCE IT HAS BEEN MADE TO DCYF?***

Once suspicion has been reported, the Central Intake worker will make a decision with respect to whether a report will be further investigated. The Central Intake worker should follow-up with the school employee in three business days regarding DCYF's decision to open an investigation or not, and the reasons for that decision.

- If the decision is made to further investigate the report and is "accepted for assessment" it gets transferred from the Central Intake Unit to the local DCYF district office for an assessment and determination of services.
- If the report is not going to be further investigated or is not an appropriate case for DCYF, the Central Intake worker and/or supervisor may offer the school employee some assistance in dealing with the family.
- If the school employee disagrees with the intake decision, he/she may contact the Intake Supervisor by phone (1-800- 894-5533) or in writing to further discuss the concerns. Written concerns should be sent to DCYF Central Intake, 40 Terril Park Rd., Unit 1, Concord, NH 03301.

## ***J. WHAT IF THE PARENT AND/OR ABUSER FINDS OUT THAT A REPORT HAS BEEN MADE TO DCYF?***

It is possible that a child's parent or caretaker will find out or suspect who made a report even if DCYF does not reveal that information. Sometimes a child may tell, or parents may simply deduce that the school was the source of the report because school is the only place the child has gone outside the home. Although being confronted by an angry parent can be challenging and at times frightening, the obligation to report is legally mandated and plays an important role in the protection of children. Any time a school employee is confronted by an obviously angry parent, and fear for their own safety, law enforcement should be called.

The only situation in which DCYF should reveal the identity of the reporter, who requests not to be identified, is when the reporter must be involved as a witness in court to uphold the petition so that the child receives the services needed to stay safe. The reporter will be notified when this is the case and will likely be served a subpoena to testify in court. There are many reasons why the reporter's presence may not be needed, so court appearances are not always a given.

To ensure that parents, custodians and other witnesses are present during the protective custody and preliminary hearings, special efforts may be required. New Hampshire RSA 169-C:11 “provides that a subpoena may be issued requiring the production of papers and attendance of any person whose presence is required by the child, the parents or guardian, or any other person whose presence, in the opinion of the court, is necessary. A subpoena may be issued pursuant to RSA 516 upon application of a party or upon the motion of the court.”

If the reporter is required to testify in court, it will be important that s/he meet with the DCYF attorney before testifying so that you are aware of what information you will be asked. It is important to present the information calmly, clearly and objectively to the court.

## ***K. DOES A REPORT MEAN A CHILD WILL BE REMOVED FROM HIS/HER HOME?***

### **1. DCYF'S ABILITY TO REMOVE A CHILD - COURT ORDER REQUIRED**

If DCYF believes a child to be in imminent danger in such circumstances or surroundings and where immediate removal appears necessary to protect the child, pursuant to RSA 169-C:6, V, DCYF must contact a district court or family division court immediately for an *ex parte* order to remove the child. *Ex parte* means that due to the emergency circumstances that a child is in, DCYF makes a request of the court to remove a child without the involvement of and/or notification to the child's parents.

If the court finds reasonable cause to believe that the child is in such circumstances or surroundings as would present an imminent danger to the child's health or life and issues *ex parte* orders, DCYF will be required to file a petition with the court within 72 hours of the *ex parte* order, Sundays and holidays excluded. A preliminary hearing will be scheduled by the court within five calendar days from the date of the *ex parte* order, excluding Saturdays, Sundays and holidays. Parents will be served with a copy of the petition and will receive notice of the preliminary hearing. Parents will also receive a copy of the *ex parte* order.

If DCYF does not believe a child to be in imminent danger, and thus does not request an *ex parte* order, DCYF's first contact with a district court or family division may occur when it files an abuse or neglect petition and a preliminary hearing is scheduled. A child's parents will receive notice of this hearing and will have an opportunity to attend it. If the court finds reasonable cause to believe that the child is abused and neglected at this hearing, the court, pursuant to RSA 169-C:15 and 169-C:16, may issue orders which, among other things, may permit the child to remain with the parent or may include an order of protection requiring a parent to stay away from the home and/or child. The court may also grant temporary legal custody to DCYF for placement in a foster home or other substitute care setting. A trial, or adjudicatory hearing, will be held subsequently to determine if there is sufficient evidence of abuse or neglect.

**2. LAW ENFORCEMENT'S ABILITY TO REMOVE A CHILD - COURT ORDER NOT REQUIRED**

Unlike DCYF, law enforcement may, pursuant to RSA 169-C:6, I, take a child into protective custody without the consent of the parents and without a court order. Law enforcement is permitted to do this when a child is in such circumstances or surroundings as would present imminent danger to the child's health or life unless immediate action is taken and there is not enough time to petition the court for an *ex parte* order.

Whenever a child is taken into protective custody by law enforcement, the district court or family division must be notified immediately, and a court hearing must be scheduled within 24 hours of taking the child into protective custody, Sundays and holidays excluded.

***L. WHAT SHOULD BE DONE IF THERE ARE FURTHER CONCERNS ABOUT A CHILD AFTER A REPORT IS MADE TO DCYF?***

If after a report is made a school employee has additional or new concerns about the child, those additional concerns should be reported. This is true even if DCYF did not further investigate or “accept” the report for assessment the first time. Sometimes the added information or observations will elevate the status of the initial report and more clearly indicate child abuse and neglect by the nature, extent and severity of the complaints.

**THE SCHOOL'S ROLE AFTER THE REPORT HAS BEEN MADE AND DURING DCYF AND LAW ENFORCEMENT ASSESSMENTS/INVESTIGATIONS**

Based on the school staff member's report, the DCYF Intake Unit will make an assessment of risk to the child and a recommendation to the DCYF district office assessment supervisor about how rapidly an assessment should begin. If the risk is high, abuse is likely to recur within 24 hours or if there is imminent danger to the child at home, DCYF will make every effort to send a worker out to see the child the same day a report is made. That visit is often done while the child is still at school. Because of the time needed to properly interview a child at risk and carry out an intervention, it is extremely important that reports be made as early in the day as possible.

If the child does not appear to be in imminent danger, the referral will be sent to the district office for a response within 72 hours.

If the intake worker has indicated an immediate response will be made and the reporter does not hear within an hour or so from someone in the district office, they should phone the district office and ask to speak with the assessment supervisor. The reporter should express his/her concerns to the assessment supervisor and state what time the child will be released

from school. The assessment supervisor should be able to tell the reporter when they can expect an assessment social worker to arrive at the school and can offer guidance about how to deal with any expected delays.

If the assessment supervisor states that DCYF is going to respond that same day and within an hour of the close of the school day the social worker has not yet arrived, the reporter should call the assessment supervisor to discuss their concerns and say that they are calling law enforcement to look into the child's situation before sending the child home.

DCYF workers must identify themselves when they arrive at a school. Law requires that DCYF notify law enforcement officials in cases of serious physical injury or sexual abuse of children. In some cases of abuse, when the alleged perpetrators does not live in the same household as the child and does not have ready access to the child, law enforcement officials may be the primary investigators. As a result, DCYF may be accompanied by a police officer, or a police officer may come to the school alone to interview the child.

Both have the right to enter school grounds and interview children. The reason both may arrive at once is that the law also requires professionals who intervene in the cases of suspected child abuse and/or neglect to minimize the number of interviews with the child whenever possible. **DCYF workers are required by law to videotape all interviews in their entirety of children in a public setting including schools (See RSA 169-C:38 below).**

The school must cooperate with DCYF by providing such information and assistance as suggested in the assessment process. In most cases the school will also do the following:

1. Arrange access to the child.
2. Arrange for a private location for interviews.
3. Take every precaution to protect the child's privacy and confidentiality allowing an absolute minimum of people to know what is transpiring.
4. Make school staff available to quietly sit in on interviews **only if** the child requests them to be present.
5. Make sure the child is emotionally prepared to return to the classroom before having him or her do so.

Law enforcement and DCYF officials should tell school personnel involved in the case what information they can and cannot share with parents about the interviews. Schools should also receive guidance about how best to support the child after the interview, including how to handle the child's concerns about going home, parents finding out or any other concerns regarding the assessment. If school personnel are uncertain about how best to handle any such concerns, they should ask the assessment social worker at the school or the assessment supervisor at the local district office for the guidance they need.

**A. NEW HAMPSHIRE RSA 169-C:38. REPORT TO LAW ENFORCEMENT AUTHORITY:**

I. The department (DCYF) shall immediately by telephone or in person refer all cases in which there is reason to believe that any person under the age of 18 years has been: (a) sexually molested; (b) sexually exploited; (c) intentionally physically injured so as to cause serious bodily injury; (d) physically injured by other than accidental means so as to cause serious bodily injury; or (e) a victim of a crime, to the local law enforcement agency in the community in which the acts of abuse are believed to have occurred. The department shall also make a written report to the law enforcement agency within 48 hours, Saturdays, Sundays and holidays excluded. A copy of this report shall be sent to the office of the county attorney.

II. All law enforcement personnel and department employees shall cooperate in limiting the number of interviews of a child victim and, when appropriate, shall conduct joint interviews of the child. Employees of the department shall share with the investigating police officers all information in their possession, which it is lawful for them to disclose to a law enforcement agency. Investigating police officers shall not use or reveal any confidential information shared with them by the department except to the extent necessary for the investigation and prosecution of the case.

III. No staff member of the department shall be held civilly or criminally liable for a telephone referral or a written report made under paragraph I.

IV. Law enforcement personnel or department employees who are trained caseworkers shall have the right to enter any public place, including but not limited to schools and child care agencies, for the purpose of conducting an interview with a child, with or without the consent or notification of the parent or parents of such child, if there is reason to believe that the child has been:

- (a) Sexually molested.
- (b) Sexually exploited.
- (c) Intentionally physically injured so as to cause serious bodily injury.
- (d) Physically injured by other than accidental means so as to cause serious bodily injury.
- (e) A victim of a crime.
- (f) Abandoned.
- (g) Neglected.

V. For any interview conducted pursuant to paragraph IV, the interview with the child shall be videotaped if possible. If the interview is videotaped, **it shall be videotaped in its entirety**. If the interview cannot be videotaped in its entirety, an audio recording of the entire interview shall be made.

## **CHILDREN WITH DISABILITIES**

Child abuse and neglect has gained increasing public attention, but what has not been fully acknowledged is the disability connection. According to the National Council on Abuse and Neglect, children with disabilities experience abuse and neglect 1.7 times more frequently than children without disabilities do.

A report, produced by the National Center on Child Abuse and Neglect, showed that the most frequent disabilities suffered among children whose maltreatment was substantiated by Child Protective agencies were serious emotional disturbance, learning disability, and speech or language delay or impairment.

### ***A. WHY ARE YOUNG CHILDREN WITH DISABILITIES MORE LIKELY TO BE ABUSED AND NEGLECTED?***

Young children under five years of age are most at risk for abuse or neglect. Parents and other caregivers may experience more stress` in caring for children with disabilities for a number of factors specific to children with disabilities.

- As infants, they may cry more, be harder to soothe than other babies, or may need almost constant care.
- Infants with disabilities may not smile, give eye contact, or enjoy cuddling. It may be harder for parents to become “attached” and to feel protective toward their children.
- Long hospital stays, especially soon after birth, take away important time parents usually have with their new child. This is when parents normally develop loving and protective feelings.
- Young children may not reach developmental “milestones” as early as other children may. Some of these milestones are walking, talking, toilet training or getting dressed without help. If the child does not do these things when a parent or other caregivers expect, the adult may feel frustrated, helpless or angry, or may feel that he or she has failed in some way.
- Young children with disabilities may have behaviors that are difficult to handle.
- Children with disabilities may be more likely to “go along with” activities that are not appropriate. They may be less likely to complain if someone hurts them.
- Children with disabilities may have less understanding of what is “right” or “wrong” behavior.

- Many young children with disabilities are less able to communicate that something “bad” has happened to them. Sometimes a child who can communicate is not believed. Many children are unable to communicate and be believed even if they are not disabled.

### ***B. HAVING A YOUNG CHILD WITH A DISABILITY MAY ADD TO A FAMILY’S STRESS IN MANY WAYS***

When a child is diagnosed with a disability, significant changes may occur for the parent and family. Changes may be seen in relationships, employment, housing, medical care needs or childcare demands. Some reasons why the family may be overwhelmed include:

- One child may need more daily care than other children.
- Increased financial stress, if extra money is needed to care for the child.
- There may not be enough support from extended family, friends and the community to assist the family in performing even the most routine tasks.

### ***C. PARENTS OF CHILDREN WITH DISABILITIES NEED “RESPIRE” AND SUPPORT FROM OTHERS***

“Respite” means getting a temporary break from the care giving responsibilities of parenting a child with special needs. Getting help from other people is also important. Support can come from relatives, neighbors, friends, co-workers, professionals who work with the child, or from other parents of children with disabilities, either informally or in a support group. For parents, keeping in contact with others who understand their family’s needs provides an avenue of support during periods of loneliness, sadness or frustration and also provides someone to share the joy of their child’s accomplishments. Using respite services means that the parent is using good sense; **asking** for help is a sign of strength.

### ***D. RESOURCE AWARENESS***

To ward off abuse and neglect before it happens, families need to know what support is available. The Individuals With Disabilities Education Act, for example, provides for early intervention for infants and toddlers and special education for school-age children. Supplemental Security Income may be available to provide financial assessment to families with severely disabled children.

### ***E. RESOURCE AVAILABILITY***

Services that support families include disability-related training, early intervention, early childhood special education, counseling, respite care, informal supports, child evaluations, case management and help in securing benefits. In New Hampshire, respite and other family support services are available through the New Hampshire Family Support Services.

## **CONCLUSION**

Child maltreatment, unfortunately, is an all-too common problem in New Hampshire. In 2001, DCYF received 7,472 reports of abuse and neglect, which rose to the level of assessment by caseworkers. School employees who work so closely with children will be faced with situations involving abuse and neglect. The successful handling of these difficult and emotional cases can only occur when the many people and agencies who deal with children are willing to work together and keep the welfare of those children their first priority. The creation of this Protocol is one part of a comprehensive plan to combat child maltreatment and to ensure consistent reporting and sensitive and compassionate treatment for victims of abuse and neglect.

## **APPENDICES**



## APPENDIX A

### MODEL SCHOOL POLICY FOR REPORTING SUSPECTED CHILD ABUSE

It is the policy of SAU \_\_\_\_\_, \_\_\_\_\_ School District to comply with the requirements of RSA169-C in reporting suspected child abuse and neglect. Further, it is our policy to cooperate with the New Hampshire Division for Children, Youth and Families (DCYF) and law enforcement agencies in the course of investigations into alleged child abuse or neglect as outlined in RSA 169-C.

If a school employee suspects that a child has been abused or neglected, he/she will make a report immediately to DCYF and the school principal will be notified that a report has been filed.

An oral report shall be made immediately to DCYF by telephone and followed within 48 hours by a report in writing, if so requested by DCYF. Each report shall, if known, contain the name and address of the child(ren) suspected of being neglected and abused; the name of the parent or caregiver responsible for the child's welfare; the specific information and/or observations indicating neglect or the nature and extent of the child's injuries; the identity of the person(s) suspected of being responsible for such abuse and neglect; and any other information that might be helpful in the investigation or that may be require by DCYF. For a complete list of information to report, please refer to the *Child Abuse and Neglect: Guidelines for New Hampshire Educators: Identifying and Reporting Suspected Child Abuse and Neglect* (Attorney General's Task Force on Child Abuse and Neglect – Second Edition, 2002.)

Annual staff training regarding the reporting of child abuse and neglect is recommended for each school.



## APPENDIX B

### CHILD ABUSE AND NEGLECT MANDATORY REPORTING LAW

#### 1. Reporting is Mandatory

New Hampshire Law (RSA 169-C:29-30) requires that any person who has reason to suspect that a child under the age of 18 has been abused or neglected must report the case to: **New Hampshire Division of Children, Youth and Families - Central Intake 1-800-894-5533.**

#### 2. An Abused Child is one who has:

- a. Been sexually molested; or
- b. Been sexually exploited; or
- c. Been intentionally physically injured or;
- d. Been psychologically injured so that said child exhibits symptoms of emotional problems generally recognized to result from consistent mistreatment or neglect; or
- e. Been physically injured by other than accidental means.

#### 3. A Neglected Child means a child:

- a. Who has been abandoned by his parents, guardian, or custodian; or
- b. Who is without proper parental care or control, subsistence, education as required by law, or other care or control necessary for his physical, mental or emotional health, when it is established that his health has suffered or is very likely to suffer serious impairment; and the deprivation is not due primarily to the lack of financial means of the parents, guardian or custodian; or

**Note:** A child who is under treatment solely by spiritual means through prayer, in accordance with the tenets of a recognized religion by a duly accredited practitioner thereof, shall not for that reason alone be considered to be neglected.

#### 4. Nature and content of Report

- a. Oral - immediately by telephone or otherwise.
- b. Written - within 48 hours if requested.
- c. Content - if known.
  1. Name and address of the child suspected of being neglected or abused.
  2. Name of parents or persons caring for child.
  3. Specific information indicating neglect or the nature of the abuse (including any evidence of previous injuries.)
  4. Identity of parents or persons suspected of being responsible for such neglect or abuse.
  5. Any other information which might be helpful or is required by the bureau.

#### 5. Immunity from Liability

Anyone who makes a report in good faith is immune from any liability, civil or criminal. The same immunity applies to participation in any investigation by the bureau or judicial proceedings resulting from such a report.

#### 6. Privileged Communication

"The privileged quality of communication between a professional person and his patient or client, except that between attorney and client, shall not apply to a proceedings instituted pursuant to this chapter and shall not constitute grounds of failure to report as required by this chapter."

#### 7. Penalty

Violation of any part of the New Hampshire Child Protection Act, including failure to report is punishable by law. "Anyone who knowingly violates any provision of this subdivision shall be guilty of a misdemeanor." (RSA 169-C:39.) In New Hampshire, a misdemeanor is punishable by up to one year's imprisonment, a one thousand-dollar fine, or both.



## APPENDIX C

### DEPARTMENT OF HEALTH & HUMAN SERVICES DISTRICT OFFICES

<u>DISTRICT OFFICE</u>	<u>STREET/MAILING ADDRESS</u>	<u>TELEPHONE/FAX</u>
<b>BERLIN</b>	213 Main Street, Suite 2 Berlin, New Hampshire, 03470-2463	752-7800 1-800-972-6111 FAX: 752-2230
<b>CLAREMONT</b>	17 Water Street Claremont, New Hampshire 03743	542-9544 1-800-982-1001 FAX: 542-1707
<b>CONCORD</b>	40 Terrill Park Drive Concord, New Hampshire 03301	271-6202 1-800-322-9191 FAX: 271-4085
<b>CONWAY</b>	73 Hobbs Street Conway, New Hampshire 03818	447-3841 1-800-552-4628 FAX: 447-1988
<b>KEENE</b>	809 Court Street Keene, New Hampshire 03431	357-3510 1-800-624-9700 FAX: 352-2598
<b>LACONIA</b>	65 Beacon Street West Laconia, New Hampshire 03247-0634	542-4485 1-800-322-2121 FAX: 528-4105
<b>LITTLETON</b>	80 North Littleton Rd. Littleton, New Hampshire 03561-3814	444-6786 1-800-552-8989 FAX: 444-0782
<b>MANCHESTER</b>	361 Lincoln Street Manchester, New Hampshire 03103	668-2330 1-800-852-7493 FAX: 624-4014
<b>NASHUA</b>	19 Chestnut Street Nashua, New Hampshire 03060	883-7726 1-800-852-0632 FAX: 889-9639
<b>PORTSMOUTH</b>	30 Maplewood Avenue Portsmouth, New Hampshire 03801-3737	433-8326 1-800-821-0326 FAX: 433-8393
<b>ROCHESTER</b>	150 Wakefield Street, Unit 22 Rochester, New Hampshire 03867-1309	332-9120 1-800-862-5300 FAX: 332-8984
<b>SALEM</b>	154 Main Street Salem, New Hampshire 03079-3191	893-9763 1-800-852-7492 FAX: 890-3909



## APPENDIX D

# DOMESTIC VIOLENCE AND SEXUAL ASSAULT SUPPORT SERVICES STATE OF NEW HAMPSHIRE

These centers provide the following free, confidential services to victims of sexual assaults:

- \* 24 Hour Crisis Line
- \* Court Advocacy
- \* Emotional Support
- \* Medical and Legal Options and Referrals
- \* Peer Counseling and Support Groups

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RESPONSE to Sexual & Domestic  
Violence  
C/o Coos County Family Health Service  
54 Willow Street  
**Berlin, NH 03570**  
1-800-852-3388 (crisis line)  
752-5679 (Berlin Office)  
237-8746 (Colebrook Office)  
788-2562 (Lancaster Office)

Women's Supportive Services  
11 School Street  
**Claremont, NH 03743**  
1-800-639-3130 (crisis line)  
543-0155 (Claremont Office)  
863-4053 (Newport Office)

Rape and Domestic Violence  
Crisis Center  
PO Box 1344  
**Concord, NH 03302-1344**  
1-800-852-3388 (crisis line)  
225-7376 (Office)

Starting Point: Services for Victims  
of Domestic & Sexual Violence  
PO Box 1972  
**Conway, NH 03818**  
1-800-336-3795 (crisis line)  
356-7993 (Conway Office)  
539-5506 (Ossipee Office)

Women's Crisis Service of the  
Monadnock Region  
12 Court Street  
**Keene, NH 03431-3402**  
352-3782 (crisis line)  
352-3844 (Keene Office)  
532-6800 (Jaffrey Office)

New Beginnings  
A Women's Crisis Center  
PO Box 622  
**Laconia, NH 03246**  
1-800-852-3388 (crisis line)  
528-6511 (Office)

Women's Information Serv. (WISE)  
79 Hanover Street, Suite 1  
**Lebanon, NH 03766**  
448-5525 (crisis line)  
448-5922 (Office)

The Support Center At Burch House  
PO Box 965  
**Littleton, NH 03561**  
1-800--0544 (crisis line)  
444-0624 (Littleton Office)  
747-2441 (Woodsville Office)

YWCA Crisis Service  
72 Concord Street  
**Manchester, NH 03101**  
668-2299 (crisis line)  
625-5785 (Manchester Office)  
432-2687 (Derry Office)

Rape and Assault Support Services  
PO Box 217  
**Nashua, NH 03061-0217**  
883-3044 (crisis line)  
889-0858 (Nashua Office)  
672-9833 (Milford Office)

Voices Against Violence  
PO Box 53  
**Plymouth, NH 03264**  
536-1659 (crisis line)  
536-3423 (Office)

Sexual Harassment and Rape Prevention  
Program  
(SHARPP)  
UNH, 202 Huddleston Hall  
**Durham, NH 03824**  
862-3494 (Office and crisis line)

Sexual Assault Support Services  
7 Junkins Avenue  
**Portsmouth, NH 03801**  
1-888-747-7070 (crisis-toll free)  
436-4107 (Portsmouth Office)  
332-0775 (Rochester Office)

A Safe Place  
P.O. Box 674  
**Portsmouth, NH 03802**  
1-800-852-3388 (crisis line)  
436-7924 (Portsmouth Office)  
330-0214 (Rochester Office)  
890-6392 (Salem Office)



## APPENDIX E

### NEW HAMPSHIRE VICTIM/WITNESS ASSISTANCE PROGRAMS

Office of Victim/Witness Assistance  
Attorney General's Office  
33 Capitol Street  
Concord, NH 03301-6397  
(603) 271-3671

Belknap County Victim/Witness Program  
Belknap County Superior Courthouse  
64 Court Street  
Laconia, NH 03246  
(603) 527-5440

Carroll County Victim/Witness Program  
PO Box 218  
Ossipee, NH 03864  
(603) 539-7769

Cheshire County Victim/Witness Program  
PO Box 612  
Keene, NH 03431  
(603) 352-0056

Coos County Victim/Witness Program  
55 School St., Suite 102  
Lancaster, NH 03584  
(603) 788-3812

Grafton County Victim/Witness Program  
3801 Dartmouth College Highway  
North Haverhill, NH 03774  
(603) 787-2193

Hillsborough County Victim/Witness Program  
300 Chestnut Street  
Manchester, NH 03101  
(603) 627-5605

Hillsborough County Attorney's Office  
Southern District  
Victim/Witness Program  
19 Temple Street  
Nashua, NH 03060  
(603) 594-3256

Merrimack County Victim/Witness Program  
4 Court Street  
Concord, NH 03301  
(603) 228-0529

Rockingham County Victim/Witness Program  
PO Box 1209  
Kingston, NH 03848  
(603) 642-4249

Strafford County Victim/Witness Program  
PO Box 799  
Dover, NH 03821-0799  
(603) 749-4215

Sullivan County Victim/Witness Program  
14 Main Street  
Newport, NH 03773  
(603) 863-8345

Victim's Compensation Board  
NH Attorney General's Office  
33 Capitol Street  
Concord, NH 03301  
(603) 271-1284  
1-800-300-4500

NH State Police-Investigative Services  
Dept. of Safety  
10 Hazen Drive  
Concord, NH 03305  
(603) 271-2663

NH Department of Corrections  
Victim Services Unit  
P.O. Box 1806  
Concord, NH 03301  
(603) 271-1937

United States Attorney's Office  
District of New Hampshire  
James C. Cleveland Federal Bldg.  
55 Pleasant St., Suite 312  
Concord, NH 03301  
(603) 225-1552



## APPENDIX F

### NEW HAMPSHIRE COUNTY ATTORNEY OFFICES

Belknap County Attorney  
64 Court Street  
Laconia, New Hampshire 03246  
(603) 527-5440

Carroll County Attorney  
PO Box 218  
Ossipee, New Hampshire 03864  
(603) 539-7769

Cheshire County Attorney  
PO Box 612  
Keene, New Hampshire 03431  
(603) 352-0056

Coos County Attorney  
55 School Street  
Lancaster, New Hampshire 03584  
(603) 788-3812

Grafton County Attorney  
RR 1, Box 65E  
North Haverhill, New Hampshire 03774  
(603) 787-6968

Hillsborough County Attorney  
Northern District  
300 Chestnut Street  
Manchester, New Hampshire 03101  
(603) 627-5605

Hillsborough County Attorney  
Southern District  
19 Temple Street  
Nashua, New Hampshire 03060  
(603) 594-3250

Merrimack County Attorney  
4 Court Street  
Concord, New Hampshire 03301  
(603) 228-0529

Rockingham County Attorney  
PO Box 1209  
Kingston, New Hampshire 03848  
(603) 642-4249

Strafford County Attorney  
PO Box 799  
Dover, New Hampshire 03821-0799  
(603) 749-4215

Sullivan County Attorney  
14 Main Street  
Newport, New Hampshire 03773  
(603) 863-8345



## APPENDIX G

### NEW HAMPSHIRE FAMILY SUPPORT REGIONAL COORDINATORS

**Region I: Berlin Area**

Community Services Center  
123 Main Street  
Gorham, New Hampshire 03581  
(603) 466-9010

**Colebrook/Groveton Area**

Northern NH Mental Health and  
Developmental Services  
PO Box 7, 31 Brooklyn Street  
Groveton, New Hampshire 03582  
(603) 636-1090 or (603) 636-2555

**Littleton Area**

White Mountain Mental Health and  
Developmental Services  
PO Box 599, 16 Maple Street  
Littleton, New Hampshire 03561  
(603) 444-5358

**Region II: Sullivan County**

Developmental Service of Sullivan County  
FD 3 Box 305  
Newport, New Hampshire 03773  
(603) 542-8706

**Region III: Lakes Region**

Greater Laconia Community Services  
635 Main Street, 3rd Floor  
Laconia, New Hampshire 03246-3415  
(603) 524-7755

**Region IV: Capital District**

Community Bridges  
525 Clinton Street  
Bow, New Hampshire 03304  
(603) 225-4153 or 1-800-499-4153

**Region V: Monadnock**

Monadnock Developmental Services  
121 Railroad Street  
Keene, New Hampshire 03431  
(603) 352-1304 or 1-800-469-6082

**Region VI: Nashua**

The Area Agency for Developmental  
Services of Greater Nashua  
144 Canal Street, First Floor  
Nashua, New Hampshire 03064  
(603) 882-6333

**Region VII: Manchester**

Moore Center Services, Inc.

132 Titus Avenue  
Manchester, New Hampshire 03103  
(603) 666-6501

**Region VIII: Seacoast**

Community Developmental Services Agency  
Parade Office Mall, Suite 40  
195 Hanover Street  
Portsmouth, New Hampshire 03802-3058  
(603) 436-6111

**Region IX: Strafford County**

Developmental Services of Strafford County  
1 Forum Court  
113 Crosby Road  
Dover, New Hampshire 03820  
(603) 749-4015

**Region X: Atkinson/Salem**

Community Support Services  
8 Commerce Drive  
Atkinson, New Hampshire 03811  
(603) 893-1299

**Region XI: Carroll County**

Center of Hope for Developmental Services  
626 Eastman Road  
Conway, New Hampshire 03813-4219  
(603) 356-6921 or 1-800-290-0905

**Region XII: Lebanon**

United Developmental Services  
85 Mechanics Street, Suite 300  
Lebanon, New Hampshire 03766  
(603) 443-4109

**State Family Support Coordinator**

Division of Developmental Services  
105 Pleasant Street  
Concord, New Hampshire 03301  
(603) 271-5057 or 1-800-852-3345

***In addition to these services:*****Prevent Child Abuse New Hampshire**

(603) 225-5441  
Provides education to professionals, builds  
prevention awareness and offers support to families  
in an effort to prevent child abuse and neglect.

**Parents Anonymous**

1-800-750-4499  
Provides a 24-hour, confidential hot line for parents  
who are in need of help.





## APPENDIX H

### INDICATORS OF PHYSICAL ABUSE ACCORDING TO DEVELOPMENTAL LEVELS

Physical abuse refers to non-accidental physical injury to a child.

Indicators	Developmental Level		
	Preschool (0-5 yrs)	School Age (6-12 yrs)	Adolescence (13-16 yrs)
<b>PHYSICAL</b>			
Developmental delays			
Extensive bruises, especially bruises of different colors indicating various stages of healing			
Burns of all types, but especially cigarette burns and glove-like or immersion bruises			
Bruises on multiple body parts or in the shape of an object			
Frequent complaints of soreness or awkward movement as if caused by pain; frequent injury			
Asthma, ulcers, severe allergies, somatic complaints (stomach aches, headaches)			
Sleep problems; appetite disturbance; stomachaches; headaches			
Enuresis, encopresis			
Eating disorders; substance abuse			
<b>BEHAVIORAL</b>			
Rocking, thumb sucking			
Regression, difficulty separating, thematic play			
Compulsive and repetitive acts for self-soothing and control; fixation on security item			
Social withdrawal; avoids physical contact with others			
Aggressive acting out; bizarre or self-destructive acts; destructive behavior; cruelty to animals			
Arrives at school early or leaves late as if afraid to be at home; gives inconsistent explanation of injuries			
Poor peer relations; refusal to undress for gym; lack of respect; overcompliance			
Delinquency; stealing; running away			
School problems; trouble learning, poor concentration/ attention, dropping grades			
Truancy, dropping out of school			
<b>EMOTIONAL</b>			
Anxiety			
Clinging			
Fears of adults and/or parents			
Nightmares; exaggerated startle; hypervigilance			
Phobias, obsessions			
Depression			
Guilt; impaired capacity to enjoy life			
Suicidality; low self-esteem/confidence			
Hostility/Anger			
Tantrums			
Aggression			
<b>With physical abuse, look for a pattern or series of events. Be aware of frequent occurrences that alone may seem to have a reasonable explanation, but when taken as a whole, cause concern.</b>			



## APPENDIX I

### INDICATORS OF SEXUAL ABUSE ACCORDING TO DEVELOPMENTAL LEVELS

**Sexual abuse refers to any sexual contact with a child or the use of a child for the sexual pleasure of someone else.**

Indicators	Developmental Level		
	Preschool (0-5 yrs)	School Age (6-12 yrs)	Adolescence (13-16 yrs)
<b>PHYSICAL</b>			
Bruises around mouth, genital bleeding; torn, stained, or bloody underclothing			
Enuresis, encopresis			
Genital pain/itching/odors; problems sitting/walking; venereal disease; frequent urinary or yeast infections			
Sleep problems; appetite disturbance			
Stomachaches, headaches			
Pregnancy			
<b>BEHAVIORAL</b>			
Regressive behaviors (bedwetting, thumb sucking); difficulty separating			
Excessive masturbation, sex play with others, genital exposure			
Preoccupation with sex, knowledge of sexual acts, seductive behavior, sexual language			
Sexually aggressive or coercive; attempts to force other children to be sexual			
Social withdrawal; victimizing others			
Delinquency, stealing, running away, substance abuse			
Learning difficulties, poor concentration/attention, declining grades			
Poor peer relations			
Early marriage, dropping out of school, truancy			
<b>EMOTIONAL</b>			
Anxiety			
Nightmares			
Clinging			
Fear of Adults			
Tics			
Phobias, obsessions			
Depression			
Guilt			
Suicide attempts			
Suicidal ideation; low self-esteem/confidence			
Hostility/Anger			
Tantrums			
Aggression; family/peer conflicts			



## APPENDIX J

### INDICATORS OF NEGLECT ACCORDING TO DEVELOPMENTAL LEVELS

**Neglect refers to a failure to provide a minimum degree of care in supplying a child with adequate food, clothing, shelter, education, or medical care resulting in physical, cognitive or emotional impairment or danger of impairment.**

Indicators	Developmental Level		
	Preschool (0-5 yrs)	School Age (6-12 yrs)	Adolescence (13-16 yrs)
<b>PHYSICAL</b>			
Back of infant's head lacks hair or appears flattened; untreated rashes			
Failure to thrive: underweight, developmental lags, regresses upon return to home			
Poor hygiene: dirty, offensive body odor, unwashed/ Uncombed hair, tattered or inappropriate clothing, lice			
Poor health: drowsy, easily fatigued, puffy eyes, untreated illnesses/infections, itching/scratching, frequent diarrhea, physical complaints not responded to by parent; needs dental care/glasses			
Malnutrition: frequently hungry, obesity, overeating junk foods			
<b>BEHAVIORAL</b>			
Listless, poor responsiveness (does not often smile, cry, laugh, play, relate to others) lacks interest and curiosity			
Rocks, bangs head, sucks hair/thumb/finger, tears at body			
Is overly self-stimulating/self-comforting; does not turn to parent for help or comfort; hyper/hypoactive			
Frequently left unsupervised or alone for long periods of time			
Begs for/steals food, rummages through garbage pails for food; gorging/hoarding; comes to school without breakfast, has no lunch or lunch money			
Cries easily when hurt even slightly; comes to school early, does not want to go home			
Immature or parentified (acts in "adult" ways), sees self as failure			
Impaired socialization, language development; poor communication			
Falls asleep in class, troublesome at school, refuses to do homework, destroys completed homework, frequently absent or late for school, school dropout			
Delinquent behavior: lies, steals, destructive to school property, substance abuse			
Leaving home at an early age, early pregnancy, running away			
<b>EMOTIONAL</b>			
Anxiety			
Depression			
Withdrawal; flat affect, extreme passivity			
Hostility/Anger			
Aggression: cruel to others			



## APPENDIX K

### INDICATORS OF EMOTIONAL ABUSE ACCORDING TO DEVELOPMENTAL LEVELS

**Emotional abuse is a pattern of behavior that attacks a child's emotional development and sense of self-worth.**

Indicators	Developmental Level		
	Preschool (0-5 yrs)	School Age (6-12 yrs)	Adolescence (13-16 yrs)
<b>PHYSICAL</b>			
Delayed physical, cognitive, emotional development; speech disorders			
Ulcers, asthma, severe allergies, somatic complaints (stomachaches, headaches)			
Wetting of bed or pants			
Poor physical appearance, skin disorders, obesity, extreme weight loss			
Sleep disturbance			
Substance abuse, eating disorders			
<b>BEHAVIORAL</b>			
Habit disorders (sucking, rocking, biting self); inhibited play and experiences			
Overly adaptive behavior (inappropriately adult or infantile)			
Inappropriately aggressive, destructive, cruel to others			
Bullying behaviors			
Extreme withdrawal from others and from activities			
Poor peer relations			
Bizarre or self-destructive acts			
Extreme need for perfection in school performance			
<b>EMOTIONAL</b>			
Emotional extremes			
Inappropriate emotion, such as laughter in the face of pain or cruelty			
Anxiety			
Nightmares			
Clinging			
Fear of adults			
Tics			
Phobias, obsessions			
Depression			
Guilt			
Suicidal ideation; low self-esteem/confidence			
Hostility/Anger			
Aggression; family/peer conflicts			

