



SIGNS AND SYMPTOMS OF CHILD ABUSE AND NEGLECT

The warning signs and symptoms of child abuse and neglect vary from child to child and within families. Children have different ways of coping with abuse and the signs often depend on each child's characteristics and environment. Teachers and other school personnel are well placed to observe the behaviors and interactions of children and their families, so it is important to understand certain risk factors of abuse and pay attention to warning signs and possible indicators of abuse. When trying to recognize the signs of abuse, it is important to keep in mind that abuse and neglect is not strictly limited to one type, but often occurs in combination. These signs often appear to teachers or other school personnel over time. It is important to document such observations with a corresponding date. Often it is a number of observations pieced together, rather than one particular observation that leads to a report of child abuse and neglect.

THE CHILD

PHYSICAL ABUSE

Physical indicators

- Has unexplained bruises or injuries
- Has linear bruising, especially when seen on the buttocks, legs, arms and back
- Has injuries where children don't normally - on the face, legs, bottom or torso
- Has bruising in various stages of healing especially when on different body parts
- Has bruises in the shape of an object, a hand, shoe, iron, stick, belt, etc.
- Has fading bruises or other marks noticeable after an absence from school

Behavioral indicators

- Reports injury by a parent or another adult caregiver
- Provides difficult to believe explanations for injuries
- Has difficulty sitting, complains of soreness or moves uncomfortably
- Wears clothing to cover body especially when inappropriate to weather
- Reports mistreatment of animals in the home
- Becomes withdrawn, aggressive or self-destructive
- Is bullied or is a bully
- Routinely arrives at school early or stays late
- Is overly compliant, an overachiever, or overly responsible
- Seems frightened of the parents; appears afraid of being at home
- Is always watchful and alert - as though preparing for something bad to happen
- Has learning problems
- Has behavior changes just prior to going home from school or when picked up
- Is wary of adult contact; cringes or flinches when others get close

Additional indicators for adolescents

- Chronic runaway
- Engages in violent or dangerous behavior

NEGLECT

Physical indicators

- Has not received attention for physical or medical problems
- Medical needs are only cared for when urgent, has untreated dental needs
- Has consistently bad hygiene, has unwashed, matted hair and noticeable body odor
- Clothing is too large or too small, or inappropriate for the weather
- Receives little or no support from family with homework and school activities
- Reports no caretaker, or inconsistent caretakers at home
- Has attended numerous schools with delays in enrollment
- Has no pets or many pets; describes pets as hungry or dying
- Routinely loses, or does not return school papers, permission slips, etc.
- Does not have money for lunch, arrives to school in time for free meals
- Is accidentally hurt or abused by someone other than parent while unsupervised

Behavioral indicators

- Is frequently absent from or late to school
- Is allowed to play in unsafe environments or with unsafe people
- Is responsible for household, cooking, cleaning, laundry, and care of siblings, not typically seen in children of the same age and family size
- Feels responsible for meeting the needs of parent
- Is tired; falls asleep in class
- Displays excessive need for affection or attention
- Exhibits self-soothing behaviors, thumb sucking, rocking
- Has learning problems, speech delays and delayed physical development
- Is self-destructive, engages in delinquent behavior at a young age
- Has difficulty making and keeping friends
- Begs or steals food or money from classmates

Additional indicators for adolescents

- Drops out of school
- Uses drugs or alcohol
- Increasingly engages in dangerous or delinquent behavior

SEXUAL ABUSE

Physical indicators

- Reports sexual abuse by a parent or another adult caregiver
- Has difficulty walking or sitting
- Has a sudden weight change
- Has frequent somatic complaints, stomach or head ache, sore throat
- Suddenly refuses to change for gym or to participate in physical activities
- Has sudden negative change in appearance
- Has frequent urinary tract or yeast infections not explained by medical condition or treatment
- Becomes pregnant or contracts a venereal disease, particularly if under age fourteen
- Runs away

Behavioral indicators

- Shows sudden changes in behavior or school performance
- Is inappropriately seductive
- Has sophisticated knowledge or interest in sexual activity and behaviors beyond same age peers
- Perpetrates sexual activity with another child, particularly a younger or more vulnerable child
- Is overly protective of siblings
- Avoids a specific person without an obvious reason
- Talks a lot about an adult
- Is threatened by physical contact, closeness
- Is always watchful, as though preparing for something bad to happen
- Comes to school early, stays late, and does not want to go home

Additional indicators for adolescents

- Is self-destructive
- Is considered promiscuous
- Abuses drugs or alcohol
- Self mutilates or attempts suicide
- Develops an eating disorder
- Runs away

CHILD ON CHILD SEXUAL ABUSE

Behavioral indicators

- Low self-esteem
- Shows unusual signs of anxiety
- Shows signs of guilt
- Exhibits signs of depression
- Becomes more angry and hostile

Additional indicators for adolescents

- Shows signs of Post-Traumatic Stress Disorder (PTSD)
- Suicidal thoughts or ideation
- Misses or skips a lot of school
- Runs away from home
- Abuses drugs or alcohol
- Is sexually promiscuous

EMOTIONAL ABUSE

Physical indicators

- Has speech delays
- Reports a lack of attachment to the parent
- Exhibits frequent somatic complaints typical with anxiety, ulcers, frequent stomach or headaches

Behavioral indicators

- Is fearful or anxious about doing something wrong or making a mistake
- Is excessively withdrawn
- Does not play as other children do
- Speaks negatively about themselves
- Does not appear to be attached to the parent or caregiver

- Displays extremes in behavior, being overly compliant one minute and demanding the next
- Is extremely passive or aggressive
- Has delayed emotional development, exhibited by crying, whining, temper tantrums, hitting, biting, etc
- Engages in self-soothing behaviors, thumb sucking, rocking, etc., outgrown by peers
- Has inappropriate adult behaviors; ex. parenting other children
- Comes to school early, stays late, and does not want to go home
- Has learning problems
- Appears anti-social and or destructive
- Is bullied or is a bully
- Attempts suicide

Additional indicators for adolescents

- Over eats
- Abuses alcohol or other drugs
- Attempts suicide

CHILDHOOD BULLYING

Physical indicators

- Child has frequent cuts and/or bruises with excuses to explain them
- Physical complaints
- Changes in sleeping or eating patterns
- Has ripped or torn clothing at the end of the school day

Behavioral indicators

- Child has a sudden reluctance to go to school
- Lost lunch money or personal possessions and has excuses they seem untrue
- Spends much more time alone
- Looking and acting sad

THE PARENT OR OTHER ADULT CAREGIVERS

PHYSICAL ABUSE

- Offers an eager explanation for child's injury that does not make sense
- Adapts explanation for injuries when clarification is sought
- Provides no explanation for the child's injury
- Delays or inappropriately treats an injury
- Keeps a child from school for days or weeks with minimal explanation
- Demands perfection or physical or academic performance the child cannot achieve
- Denies the existence of the child's problems or blames the child for the problems
- Appears to be a victim of domestic violence
- Family is isolated in the community with few family or social supports
- Describes the child as having behavioral problems, not seen at school
- Is overly negative about the child
- Expresses belief child should fear adults
- Uses harsh discipline with the child
- Has a history of abuse as a child
- Has a history of violence and or is involved in criminal activities

NEGLECT

- Appears to be indifferent to the child
- Rarely responds to requests for information, for conferences, or for home visits
- Does not follow through on services for child's special needs (e.g., IEP, speech therapy)
- Is unavailable to school staff when child needs to be picked up when ill or does not respond to phone calls when there are problems or issues at school
- Denies the existence of, or blames the child for, the child's problems
- Seems apathetic or depressed
- Looks to the child to meet the parents' emotional or physical needs
- Has overwhelming needs
- Appears to always be in a crisis
- Behaves irrationally or in a bizarre manner
- Is abused by their intimate partner
- Has a history of abuse or neglect as a child
- Is suspected of abusing substances

SEXUAL ABUSE

- Is unduly protective of the child, severely limits the child's contact with other children, especially of the opposite sex
- Is secretive and isolated
- Describes marital difficulties involving family power struggles or sexual relations
- There is domestic violence in the home
- Reports sexual abuse as a child
- Is suspected of abusing substances

EMOTIONAL MALTREATMENT

- Constantly blames, belittles, or berates the child
- Rarely touches or looks at the child
- Demands perfection, or physical or academic performance the child cannot achieve
- Denies the existence of, or blames the child for, the child's problems
- Views the child as bad, worthless or burdensome
- Is unconcerned about the child
- Refuses to consider offers of help for the child's school problems
- Overtly rejects the child

IF YOU KNOW OF OR SUSPECT CHILD ABUSE, FOLLOW YOUR SCHOOL'S PROTOCOL TO REPORT IT. REMEMBER, YOU DO NOT HAVE TO SUBSTANTIATE THE REPORT OF ABUSE BUT IT IS YOUR RESPONSIBILITY TO REPORT SO SOMEONE ELSE MAY!

References

Child Welfare Information Gateway. (2007). Recognizing child abuse and neglect: signs and symptoms. Retrieved from <http://www.childwelfare.gov/pubs/factsheets/signs.cfm>

Gilbert, R., Kemp, A., Thoburn, J., Sidebotham, P., Radford, L., Glaser, D., & MacMillan, H. L. (2009). Recognizing and responding to child maltreatment. *The Lancet*, *373*(9658), 167-180.
doi:DOI: 10.1016/S0140-6736(08)61707-9

Walsh, K., & Farrell, A. (2008). Identifying and evaluating teachers' knowledge in relation to child abuse and neglect: A qualitative study with Australian early childhood teachers. *Teaching and Teacher Education*, 24(3), 585-600. doi:DOI: 10.1016/j.tate.2007.07.003