The Role of School Nurses in Preventing and Responding to Child Abuse and Neglect

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Objectives

- To identify signs and manifestations of child abuse and neglect.
- To know characteristics of environmental stressors affecting children's disclosures of abuse/neglect.
- To gain knowledge of intervention methods to treat situations of child abuse/neglect.
- To increase awareness of types of support available to victims pre- and post-disclosures/reports.
Child Abuse

- "Abuse" includes the following acts or omissions by a person:
  - Mental or emotional injury to a child that results in an observable and material impairment in the child's growth, development, or psychological functioning.
  - Physical injury that results in substantial harm to the child, or the genuine threat of substantial harm from physical injury to the child.
  - Sexual conduct harmful to a child's mental, emotional, or physical welfare, including conduct that constitutes the offense of continuous sexual abuse of young child or children, indecency with a child, sexual assault or aggravated sexual assault.
  - The current use by a person of a controlled substance in a manner or to the extent that the use results in physical, mental, or emotional injury to a child.
Child Neglect

- "Neglect" includes the following acts or omissions by a person:
  - The leaving of a child in a situation where the child would be exposed to a substantial risk of physical or mental harm, without arranging for necessary care for the child, and the demonstration of an intent not to return by a parent, guardian, or managing or possessory conservator of the child.
  
  - Failing to seek, obtain, or follow through with medical care for a child...
  
  - Failure to provide a child with food, clothing, or shelter necessary to sustain the life or health of the child....
  
  - Placing a child in or failing to remove the child from a situation in which the child would be exposed to acts or omissions that constitute abuse.

TEXAS FAMILY CODE, Title 5, Subtitle E, Chapter 261
Extent of the Problem

- The extent of child maltreatment is **NOT ACCURATELY** known due to:
  - Differences in research methodologies (e.g., different definitions of abuse, diverse assessments, self-report vs. informant report)
    - (Finkelhor et al., 2005; Stoltenborgh et al., 2014).
  - Global Estimates:
    - Prevalence rates (maltreatment ever experienced during childhood; self-report):
      - 3.63/10 for emotional abuse
      - 2.26/10 for physical abuse
      - 1.84/10 for emotional neglect
      - 1.63/10 for physical neglect
      - 1.27/10 for sexual abuse (.76/10 among boys and 1.80/10 among girls)
    - Most incidents of abuse occur by close family members and friends.
    - Stoltenborgh et al., (2014)
Contributing Factors

- “Ecological Systems Theory”
  - Child development is influenced by a child's individual (internal factors) and his/her environment (external factors).

- Children's individual characteristics (age, sex, etc.) affect their environment.

- Children’s environment (immediate family, neighborhood, school, etc.) affect the child.

- Internal and external factors combine to increase—or decrease—children’s vulnerability to experience abuse.

Bronfenbrenner’s Ecological Systems Theory (In Berk & Roberts, 2009, p. 28)
Risk Factors

- **Individual Child Factors:**
  - Age (high risk with young children)
  - Disability (physical, cognitive, emotional).
  - Serious physical or mental illness
  - Aggressive behavior
  - Attention deficits

- **Parental Factors:**
  - Substance Use
  - Criminal Behavior
  - Mental/Physical Health Problems
  - Family Conflict or Violence
  - Teenage/Single/Young Parents
  - Non-biological Parents in the Home

- **Social Environment Factors:**
  - Socio-economic Disadvantage
  - Parental Unemployment
  - Lack of Social Support/Social Isolation
  - Stressful Life Events

*Bronfenbrenner’s Ecological Systems Theory (In Berk & Roberts, 2009, p. 28)*

*Paavilainen et al., 2013*
Protective Factors

- **Individual Child Factors:**
  - Good Health
  - Positive Peer Relationships
  - Hobbies/Interests
  - High Self-Esteem

- **Parental Factors:**
  - Positive Parent-Child Relationship
  - Extended Family Networks
  - Sound Parental Coping Skills

- **Social Environment Factors:**
  - Stable housing
  - Employment
  - Family expectations of pro-social behaviors

*Bronfenbrenner’s Ecological Systems Theory (In Berk & Roberts, 2009, p. 28)*

(Paavilainen et al., 2013)
Physical Symptoms of Maltreatment

- **Bruises or markings:**
  - Head, ear, neck, abdomen, back, buttocks.
  - Defensive wounds: forearm, upper arm, back of the leg, hands, feet.

- **Burns or scalds:**
  - Hands, back, shoulders, buttocks, limbs.
  - Can be from hot liquids, hot objects (cigarette), flames.

- **Bite marks:**
  - Usually oval or circular in shape
  - Visible wounds, indentations, or bruising from individual teeth.

- **Fractures or broken bones:**
  - Ribs (children); leg bones (babies).
  - Multiple fractures at different stages of healing

- **Sexual Abuse:**
  - Complaints of pain in genital area
  - Trouble walking or sitting
  - Sexually transmitted infection

- **Other injuries and health problems:**
  - Scarring
  - Effects of poisoning (e.g., vomiting, drowsiness, seizures).
  - Respiratory problems (from drowning, suffocation).

Behavioral Symptoms of Maltreatment

- Emotional disturbance:
  - Depression, anxiety, adjustment problems, hyperactivity, aggressiveness, hostility.
  - Suicidal thoughts, self-mutilation, substance use, eating disorders.

- “Unusual” behavior:
  - Suddenly behaves differently, withdrawal from friends or usual activities.
  - School attendance problems, changes in school performance.
  - Reluctance to: ride the school bus, leave school activities.
  - Sexual behavior and knowledge that is inappropriate for the child’s age (sexually “acting out”; knowing “too much”).

- Other signs of maltreatment (neglect):
  - Poor growth or weight gain.
  - Poor hygiene
  - Eating a lot in one sitting or hiding food for later
  - Lack of appropriate attention for medical, dental, or psychological problems, or lack of necessary follow-up care.

- Other signs (parent’s behaviors):
  - Shows little concern for the child
  - Denies that any problems exist
  - Severely limits the child’s contact with others
  - Offers conflicting or unconvincing explanations for a child’s injuries or no explanation at all.

Verbal Disclosures of Maltreatment

**Disclosures:**
- The probability of children “lying” about abuse and neglect is statistically low.
- When children disclose abuse, we must act AS IF the situation was occurring.

**Lack of disclosures:**
- Children often do not disclose information—even after being queried—for several reasons:
  - They may not identify the situation as abusive.
  - They may regard the behavior of their family as “normal”.
  - They lack the means to solve the problem (rely on abuser for support).
  - There is secrecy, shame, and stigma associated with maltreatment.
  - Cultural and socioeconomic factors.

(Fontes & Plummer, 2010; Paavilainen & Flinck, 2013)
Verbal Disclosures of Maltreatment

- If a disclosure occurs, do:
  - Respect the child’s trust, privacy, and feelings.
  - Tell the child that you WILL NOT keep the abuse as a “secret” so that s/he can receive help.
  - Tell the child what you plan to do next (e.g., making a report), while reassuring him/her that “telling” was a good thing to do.
  - DOCUMENT!!!.

- If disclosure occurs, do not:
  - Communicate skepticism about what the child is saying.
  - Express shock or blame.
  - Minimize or try to excuse the abuser’s behavior

Paavilainen & Flinck, 2013
Child Maltreatment Assessment

If you suspect that child maltreatment is occurring, or there is verbalization of abuse, take the following steps:

1) Assess risk and protective factors in a child’s life.
   - Internal (child factors) and external factors (environment)

2) Assess for physical and behavioral signs of abuse.
   - Marks on child’s body; emotional difficulties.

3) Talk to the child:
   - Use “open-ended” questions.
   - Avoid “leading” questions.
   - Use “age appropriate” questions in vocabulary and meaning.
   - Avoid “prompting” for answers.
4) If safe, talk to the parents (question them about):
   - Child-rearing/disciplinary methods
   - Intimate partner/domestic violence
   - Problem-solving/decision-making patterns
   - Marital/parent-child relationship
   - Daily life stressors
   - Substance use in the home

5) Make a CPS report/inform the authorities
   - If child abuse is occurring (or there is “potential” for abuse) ➔ REPORT to the authorities!
Reporting to the Authorities

“If a professional has cause to believe that a child has been abused or neglected, or may be abused or neglected, the professional shall make a report not later than the 48th hour after the professional first suspects that the child has been or may be abused or neglected…”

A professional MAY NOT DELEGATE to, or rely on, another person to make the report.

“Professional" means an individual who is licensed or certified by the state…the term includes teachers, nurses, doctors,…etc."

(TEXAS FAMILY CODE, Title 5, Subtitle E, Chapter 261)
Failure to Report to the Authorities

“A professional commits an offense if the person is required to make a report and knowingly fails to make a report…”

“It is a Class A misdemeanor, except that the offense is a State jail felony, if it is shown that the child was a person with an intellectual disability who resided in a State-supported living center and the actor knew that the child had suffered serious bodily injury as a result of the abuse or neglect”

“It is a Class A misdemeanor, except that the offense is a State jail felony if it is shown that the actor intended to conceal the abuse or neglect”.

A NURSE who reports to the school principal, school counselor, or superintendent DOES NOT SATISFY his/her legal obligations under the TFC.

TEXAS FAMILY CODE, Title 5, Subtitle E, Chapter 261
Reporting to the Authorities (Cont’d)

- A report must be made to:
  - Child Protective Services (24-hour abuse hotline).
  - The state agency that operates, licenses, or certifies the facility in where the alleged abuse or neglect occurred.
  - The “nearest police department” or 911, when the child is in immediate danger.

- Who investigates?
  - CPS in TDFPS performs the **civil investigation** into whether abuse has occurred and assesses the risk of further abuse occurring.
    - CPS may remove the child from the home, place him/her in protective custody, and may terminate parental rights.
  - Law enforcement agencies conduct **criminal investigations** if it appears that a person should be charged with any criminal misconduct against a child.
Completing a CPS Report: Step 1

- **By Phone:** 1-800-252-5400
- **Online:**
  - Go to: [https://www.txabusehotline.org/Login/Default.aspx](https://www.txabusehotline.org/Login/Default.aspx)

Create an account or use an existing one.
Completing a CPS Report: Step 2

- Enter passcode and click on “Report Child Abuse”
Completing a CPS Report: Step 3

- Enter your information under “Reporter”.
Completing a CPS Report: Final Steps

- Enter information for “victimized child” and complete all sections of report

- Be READY to provide information for all sections of report.

- WRITE DOWN the “E-Report Confirmation Number”
Completing a CPS Report: DFPS Training (free)

- COMPLETE the following training:
  http://www dfps state tx us Training Reporting default asp
Post-CPS Report: What Happens?.

- Texas Department of Family and Protective Services:

  - An investigation will be opened from 24 to 72 hours after a report is made.
  - CPS will interview the child and will assess family dynamics/living situation.
  - CPS will determine whether the child will remain at home (with a “safety plan”) or will be removed from the home.
  - If the case goes to court, the individual making the report may be called to provide testimony of incident(s).
Post-CPS Report: Emotional Care

- Counseling and psychological services are highly important for children/families undergoing CPS investigations.

- Counseling will equip children and families with coping skills to prevent/ameliorate emotional problems associated with abuse/neglect.

- Without counseling services, children/families may return to previous behavioral patterns (family cycles) and negative emotional symptoms may exacerbate.

(Cohen, Mannarino, & Knudsen, 2005)
Counseling and Psychological Services in Hidalgo County

Martha Calderon Galassi, MA, LPC Intern
galassicounseling@gmail.com
(956) 560-1360

The Counseling Center, PA
1512 E Griffin Pkwy, Mission, TX 78572
(956) 424-3433

Mujeres Unidas (Women Together)
511 N Cynthia St, McAllen, TX 78501
Crisis Hotline: 1-800-580-4879

Children's Advocacy Center of Hidalgo County, Inc.
Estrella’s House
525 W. Wisconsin Road, Edinburg, Texas 78539
Phone: (956) 287-9754 / Fax: (956) 287-1494
References


- Texas Department of Child and Protective Services. *A parent’s guide to a child protective services (CPS) investigation*. Retrieved on 02/14/2016 from http://www.dfps.state.tx.us/

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