



TIPS FOR MEDICAL PROVIDERS PREVENTION, RECOGNITION AND REPORTING CHILD PHYSICAL ABUSE

Educate parents and caregivers about infant crying and normal child development:

- Explain that crying is normal in young babies and is also usually a daily part of toddlerhood. Most children do not gain the ability to stop crying on demand until at least 4 years of age or even older – depending on the reason the child began to cry. It is important to not take the crying personally! It doesn't mean the baby doesn't like them.
- Remind parents and caregivers that it is normal to feel frustrated when a baby or young child cries – but **NO ONE** should **EVER** shake or harm a baby or young child. If parents are feeling frustrated or angry – they can take a break. It's OK to leave the baby in a crib or other safe place while they take a moment to regroup.
- One of the most common risk factors in child physical abuse cases is **unrealistic expectations** for the child's age and level of development. This can apply to crying, potty training issues, or the child's response to instruction or other behavioral issues. When a caregiver mistakenly believes a child can completely control his actions, then frustration, anger, and inappropriate discipline can follow. Help remind parents to have realistic expectations for children – explain that their little brains are still learning to do some of the most basic things!
- Warn caregivers that some abusive events in toddlers occur in response to toilet training accidents. Most children are not fully potty-trained until after 3 years of age, and even after that accidents are common. Again, having unrealistic expectations for a toddler can increase frustration for the caregiver.
- Share with parents that the American Academy of Pediatrics does not recommend spanking or other physical discipline at any age. Research has shown that its effectiveness wears off over time, and the risk of inadvertently causing an injury far outweighs any potential benefits. Research also tells us that children who are spanked or physically disciplined have a higher rate of aggressive behavior toward adults and other children. Provide parents with age-appropriate discipline techniques and anticipatory guidance.

Provide resources and advice to parents about having a plan for when things get difficult:

- Offer yourself and/or your staff as a resource for parents who are feeling stressed or need advice when situations get tense.
- Recommend that parents and caregivers keep a list of phone numbers on hand that they can call for support. This can include friends, family, neighbors, members of the faith community, mental health or other health care providers. Other good support resources are **Prevent Child Abuse Kentucky** or **Prevent Child Abuse Indiana** – see contact information below.

Educate yourself about risk factors, choosing safe caregivers, and early warning signs of child physical abuse:

- Obtain a thorough social history, including questions about who cares for the child, who lives in the home, any new people in the home, substance abuse, intimate partner violence**, mental illness, symptoms of postpartum depression, Child Protective Services and criminal histories of those who care for or share a home with the child. Parents are often willing to discuss these sensitive issues if the questions are asked in a confident, non-judgmental manner. *[**NEVER screen for intimate partner violence in the presence of an intimate partner. This has been shown to increase the risk of escalation for the victim. If you have concerns, try to make an excuse to get the parent alone to allow for screening. Also, most women polled report that they would prefer not to be asked about IPV in the presence of a verbal child.]*
- Inform parents that substance abuse is commonly associated with child physical abuse. Caregivers of babies and young children should be clear-headed and able to make sound decisions. Children should not be left in the care of individuals who might be under the influence of a mind-altering substance—this can include prescription pain killers and “nerve pills.” If a child is brought for an appointment by an adult who appears to be under the influence or not thinking clearly, call 911 immediately and report your concerns. If at all possible, do NOT allow a child to leave your office in a vehicle being driven by an adult that appears impaired.
- Remind parents that intimate partner violence is often associated with child physical abuse. If you suspect that a child’s caregiver has hit, kicked, shoved or threatened another with physical violence – he/she should **NOT** be caring for a young child. Remind parents to be mindful of the possibility of Intimate Partner Violence (IPV) in homes where they might leave their child, as well. If parents take their child to another’s home for care, they should ensure that they know and feel comfortable with ALL of the adults in the home—not just the babysitter.
- Advise parents and caregivers to use care when deciding who can watch their child. If they don’t have total and complete trust in the person, then they shouldn’t trust him or her with their child. Brand new relationships, intimate partner violence, or a boyfriend who is mean to pets or swears at mom or child are warning signs not to leave the child with that person.
- Caring for a baby or young child is hard work! It requires patience, self-control, a basic understanding of the child’s needs, and some specific skills. Make sure that parents and caregivers are aware that anyone who cares for their child should be **PREPARED** to watch their child and **WANTS** to watch their child. A stressed-out caregiver with a temper and unrealistic expectations of the child is NOT A SAFE CAREGIVER.

abuse for infants and children. For a non-mobile infant, bruising of **ANY KIND** is not normal. For a child of any age, bruising to the ears, neck, torso, buttocks or genitals should raise concerns. If you see this kind of bruising, document and report the finding to state social services or law enforcement (more info below,) and proceed with facilitating a complete medical evaluation. Bruising of any kind in a young baby requires immediate medical attention.

- Complete a thorough skin exam on all children under 4 years of age whenever possible, but especially at well-child exams or visits related to injury. Document all injuries that are noted on children during physical exams—even those that appear normal and benign. Include “no bruises or other injuries” as a pertinent negative when documenting skin exam findings.
- If you witness an event that causes you concern (rough-handling of a child in the exam room, for example), attempt to intervene and de-escalate the situation in a kind and non-judgmental manner. Offer assistance with distraction of siblings or a cool drink of water. De-escalation and caring support can go a long way to diffuse tense situations. Ensure that office staff is educated about appropriate de-escalation techniques as well as the criteria for mandated reporting. When appropriate, use the incident as a “teachable moment” regarding realistic expectations—include statements that acknowledge the frustration that can accompany caring for a young child.

Keep hotline contact information available in the office and ensure that staff is trained about recognition and mandated reporting:

- By law, you are required to report suspected child abuse if you have a “reasonable suspicion.” Your options to do so include:

In Kentucky, if you need an immediate response, call the **Kentucky Child Protection Hotline** toll free 24/7 at **(877) KYSAFE1/(877) 597-2331**. To report non-emergency situations that do not require an immediate response, you can use the web-based reporting system at <https://prd.chfs.ky.gov/ReportAbuse>. The web option is available from 8 a.m. to 4:30 p.m. EST, Monday through Friday, except for state holidays.

In Indiana, call the **Indiana Department of Child Services Child Abuse and Neglect Reporting Hotline** toll free 24/7 at **(800) 800-5556**.

The **Childhelp National Child Abuse Hotline** is also available toll free 24/7 at **(800) 4-A-CHILD/(800) 422-4453**.

- There are many good sources for more information about resources and child abuse prevention. In Kentucky, contact **Prevent Child Abuse Kentucky** at **(859) 225-8879**, toll free at **(800) CHILDREN/(800) 244-5373**, or www.pcaky.org. In Indiana, contact **Prevent Child Abuse Indiana** at **(317) 775-6439**, toll free at **(800) CHILDREN/(800) 244-5373**, or www.pcaain.org.

faceitabuse.org

