Child Abuse, Neglect, and Mental Injury

Maryland State Department of Education
Division of Early Childhood Development
Office of Child Care

Resource Guide

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Table of Contents

Reporting Child Abuse, Neglect, or Mental Injury ..........................3

Possible indicators of **CHILD PHYSICAL ABUSE** ........................3

Possible indicators of **CHILD SEXUAL ABUSE** ............................4

Possible indicators of **CHILD NEGLECT** .................................5

Possible indicators of **CHILD MENTAL INJURY** .......................6

Sample Emergency Numbers Form .............................................7
CHILD ABUSE, NEGLECT AND MENTAL INJURY

Reporting Child Abuse, Neglect, or Mental Injury

Each child care facility should have a written policy for reporting child abuse and neglect. Caregivers/teachers are mandated reporters of child abuse and neglect and **must** report to the child abuse reporting hotline, department of social services, child protective services, or police as required by state and local laws, any instance where there is a reasonable cause to believe that child abuse and neglect has occurred. Every staff person should be oriented to what and how to report. A staff member does not have to seek permission from the Director of the child care facility to report suspicions of child abuse, neglect, and/or mental injury. Emergency numbers must be posted for easy access by staff.

Signs and Symptoms of Child Abuse, Neglect, and Mental Injury

The following information is provided to familiarize you with physical and behavioral indicators that are often associated with child abuse, neglect, and mental injury. Please note that the list is not inclusive. Nor does the presence of any of these indicators necessarily mean that a child is being abused or neglected or is a victim of mental injury. However, the repeated occurrence of an indicator, the presence of several indicators in combination, or the appearance of serious injury or harm should alert you to the possibility of abuse or neglect.

**Possible indicators of CHILD PHYSICAL ABUSE include Physical Indicators and/or Behavioral Indicators. For Example:**

- Unexplained welts or bruises (especially facial bruises on infants), burns, fractures, lacerations, abrasions, human bite marks.
- Appearance of injuries after school absence, weekend, or vacation.
- Absence of hair and/or hemorrhaging beneath the scalp due to vigorous hair pulling.
- Cigar or cigarette burns, especially on feet, hands, or buttocks.
- Burns or cuts patterned like an electric burner, iron, belt buckle, etc.
• Immersion burns indicating dunking in a hot liquid (glove-like or sock-like burns on hands or feet, doughnut-shaped burns on buttocks).
• Rope burns that indicate confinement (on arms, legs, neck, and torso).
• Easily frightened or fearful of adults and parents.
• Wary of physical contact initiated by parents or anyone else.
• Apprehensive when adults approach another crying child.
• Constantly on the alert for danger, is guarded and distrustful.
• Destructive to self or others.
• Extremes of behavior – aggressive and withdrawn.
• Runaway or delinquent behavior.
• Reporting unbelievable reasons for injuries.
• Cautious when asked about the sudden appearance of an injury, looks at parent for an answer.
• Wears clothing that is clearly meant to cover the body when not appropriate.
• Seems afraid or reluctant to go home.

**Possible indicators of CHILD SEXUAL ABUSE include Physical Indicators and/or Behavioral Indicators. For Example:**

• Difficulty in walking or sitting.
• Torn, stained or bloody underwear.
• Genital/anal itching, pain, swelling or bleeding or burning.
• Frequent urinary tract or yeast infections.
• Venereal disease.
• Pregnancy.
• Frequent psychosomatic illnesses.
• Extreme fear for no apparent reason.
• Inability to trust.
• Anger and hostility.
• Inappropriate sexual behavior.
• Depression.
• Guilt or shame.
• Sudden drop in school performance.
• Somatic complaints.
• Sleep disturbances (nightmares, bed wetting, sleeping in clothing)
• Eating disorders.
• Withdrawal, fantasy, or infantile behavior.
• Suicidal gestures or statements.
• Running away (especially for females).
• Fire setting; fascination with fire.

Possible indicators of CHILD NEGLECT include Physical Indicators and/or Behavioral Indicators. For Example:

• Poor growth pattern.
• Constant hunger, malnutrition.
• Poor hygiene, body odor, or lice.
• Clothing inappropriate or inadequate for weather condition.
• Constant fatigue.
• Consistent lack of supervision, especially for long periods or in dangerous conditions.
• Unexplained bruises or injuries as a result of poor supervision.
• Unattended physical problems or medical needs such as lack of proper immunizations, gross dental problems, need glasses/hearing aids.
• Developmental lags.
• Begs or steals food, forages through garbage; always hungry.
• Destructive to self and/or others.
• Extremes in behavior-- aggressive and withdrawn.
• Assumes adult responsibilities.
• Exhibits infantile behavior.
• Delinquent behavior.
• Depressed/apathetic; states "no one cares."
• Frequent school absences or chronic tardiness.
• Seeks attention and/or attention.
• Hypochondria.

Possible indicators of CHILD MENTAL INJURY include Physical Indicators and/or Behavioral Indicators. For Example:

• Non-organic failure to thrive.
• Accident prone.
• Small abrasions on limbs that heal slowly.
• Self-destructive both physically and socially.
• Eating disorders, anorexia, bulimia, obesity.
• Gastrointestinal and bowel problems.
• Reduced energy level, lethargy.
• Extreme fear for no apparent reason.
• Inability to trust.
• Anger and hostility, tantrums.
• Inappropriate sexual behavior.
• Depression.
• Guilt or shame.
• School learning problems.
• Lack of exploration and curiosity.
• Lying for no apparent reason, stealing, cheating.
Sample Emergency Numbers Form

Post this information by each telephone or where easily accessible to staff.

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<thead>
<tr>
<th>center and other emergency numbers</th>
</tr>
</thead>
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<td>emergency</td>
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<tr>
<td>poison control center</td>
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<td>available adult name (substitute)</td>
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<td>phone number</td>
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<td>child protective services</td>
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<td>office of child care licensing office number</td>
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<td>health consultant name</td>
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