



CHILDREN'S ADVOCACY CENTERS™

of Mississippi

Educators and Child Maltreatment

Recognizing Child Abuse and Neglect
Mandated Reporting
Responding to Child Abuse and Trauma

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2 Part Agenda

Part 1

- Define child abuse and neglect
- Describe signs and symptoms of maltreatment
- Outline roles and responsibilities of mandated reporters

Part 2

- Provide standards for best practice investigations of abuse
 - Discuss Dos and Do nots in response to a child's disclosure or suspicion that a child may be a victim of maltreatment
 - Develop confidence of educators to be apart of the safety net for children experiencing maltreatment
-

Initial Assessment

How do you *feel* about child abuse?

How would you define child abuse and neglect?

What is mandated reporting?

When you have suspected child abuse or neglect in the past, what did you do, what was your experience?

Have you ever reported child abuse and neglect? If yes, what was the experience?

What's your school's policy regarding suspicion of child abuse and neglect?

What is your school's protocol for response?

What is a child abuse multidisciplinary team?



Missed Opportunities

[Daniel Pelka](#)

<http://www.bbc.com/news/uk-england-coventry-warwickshire-24106823>

[Penn State](#)

<http://philadelphia.cbslocal.com/2017/03/21/prosecutor-not-reporting-jerry-sandusky-let-evil-run-wild/>



The Adverse Childhood Experiences Study (ACE)

Collaboration between Kaiser Permanente's Department of Preventive Medicine in San Diego and the Center for Disease Control and Prevention (CDC)

The 12 Core Concepts for Understanding Traumatic Stress in Children and Families



Child Abuse Victims in Mississippi

Miss. Code Ann. § 43-21-105 defines an 'abused child' as a child whose parent, guardian, custodian, or any person responsible for his or her care or support, whether legally obligated to do so or not, has caused or allowed to be caused upon the child sexual abuse, sexual exploitation, emotional abuse, mental injury, non-accidental physical injury or other maltreatment.


In FFY 2016, out of 25,977 reports, CPS evidenced 6,865 victims of abuse and neglect.



Child Neglect

Miss. Code Ann. § 43-21-105 defines a neglected child as one whose parent, guardian, custodian, or any person responsible for his or her care or support neglects or refuses, when able to do so, to provide proper and necessary care or support; education as required by law; or medical, surgical, or other care necessary for his or her well-being.

75% of all child victims of abuse suffer child neglect. Most common form of child maltreatment



Physical Abuse

Miss. Code Ann. § 43-21-105 defines an abused child as: a child whose parent, guardian, custodian, or any person responsible for his or her care or support, whether or not legally obligated to do so, has caused or allowed to be caused upon the child non-accidental physical injury or maltreatment.

15% of child abuse victims suffer physical abuse. Second most common form of maltreatment.



Sexual Abuse

Miss. Code Ann. § 43-21-105 defines 'Sexual abuse' as obscene or pornographic photographing, filming, or depiction of children for commercial purposes, or the rape, molestation, incest, prostitution, or other such forms of sexual exploitation of children under circumstances that indicate that the child's health or welfare is harmed or threatened.

10% of all child victims of abuse suffer sexual abuse.



Normal and Abnormal Sexual Behavior

Normal:

Playing doctor with same developmental level by mutual agreement that is not associated with fear, anxiety, or anger.

Red Flags:

Any sexual behavior of children 4 or more years apart
Variety of sexual behaviors displayed on a daily basis
Behavior that results in emotional distress or physical pain
Behavior associated with other physically aggressive behavior
Behaviors that include coercion
Interest in hardcore, deviant, or fetishistic pornography
Sexually bullying or harassment
Any force, coercion, secrecy, or power differentiation
Asking to engage in sex or placing their mouth on sexual parts, French kissing, undressing in front of other, or asking to watch pornography



Psychological Abuse

Miss. Code Ann. § 43-21-105 defines psychological abuse as emotional abuse or mental injury.

Child psychological abuse is the hardest maltreatment to define and it often occurs with other forms of maltreatment.

It often occurs with most other forms of maltreatment



Poly-victimization

The National Children's Advocacy describes poly-victimization as experiences of multiple victimizations of different types. "Research shows that the impact of poly-victimization is much more powerful than even multiple events of a single type of victimization."



What We Know

Children in their first year of life had the highest rate of victimization.

About 27% of victims were younger than 3 years.

About 19% were 3-5 years of age.

Children with disabilities are at a greater risk.

What We Know

Abuse occurs across all classes, education levels, incomes, regions, cultures, races, religions, and occupational groups. Girls accounted for 50% and boys accounted for 48% of victims. 53% of perpetrators were women.

94% of offenders are known to the child. One or both parents maltreated 19% of victims.

Abuse is usually not an isolated incident and rarely stops without intervention.

GUNDERSEN
HEALTH SYSTEM®



Child Death

<http://www.acf.hhs.gov/sites/default/files/cb/cm2013.pdf#page=31>

In FFY 2015, 49 states reported 1,585 fatalities caused by abuse and neglect.

Mississippi reported 35 child fatalities caused by abuse and neglect.

79% of fatalities were caused by one or both parents



Risk Factors For Child Maltreatment



Characteristics of Maltreating Families

Lack of parenting skills, tend to be more immature or dependent, Lack of education on child development

Emotional detachment or numb, tend to be socially isolated

Crisis oriented or chaotic lifestyle, high stress level

Poor self-esteem

Inability to have fun

Inability to see children as human beings, no belief that children have rights, Distorted ideas about children

Jealousy over the child, Inability to empathize

Feels victimized, helpless, worthless

Belief that corporal punishment is the only form of discipline

Poor communication skills and decision-making skills, coping skills, anger management skills, conflict management

Untreated mental illness, presence of substance abuse, domestic violence

Adults stuck in stages of development

Cognitive Distortions



Signs of Abuse:

Disclosure by child, admission by suspect

Death related to child abuse. Head Trauma is most frequent cause.

Pregnancy, STI related to abuse.

Odd injuries

Odor, wears clothing inappropriate for the weather, difficulty walking

Exceptional fear

Avoidance of people or places, absences from school, arrives early to school or stays late – does not want to go home

Extreme aggressiveness of child, overly compliant, passive child

Self-Destructive, chronic runaway

Uncomfortable with physical contact

Changes in behavior

Effects of Child Abuse and Neglect

<http://www.cdc.gov/violenceprevention/acestudy/index.html>
<http://www.nctsn.org/trauma-types/complex-trauma/effects-of-complex-trauma>
<https://www.nejrs.gov/pdffiles1/ojdp/235504.pdf>

Centers for Disease Control and conducted one of the largest investigations to assess between maltreatment



The National Child Traumatic Stress Network outlines the effects of trauma related to attachment and relationships, long-term health consequences, emotional responses, self-concept, etc.

Effects of Trauma

Trauma can impact school performance

Trauma can impair learning

Traumatized children may experience physical and emotional distress

Trauma facts for educators www.nctcn.org



Dynamics of Abuse

Power

Shame

Fear



Statistics of False Allegations of Child Abuse

National average < 5% lie

More likely for children to deny

Mandated Reporting



What's The Purpose Of Mandated Reporting?



Who Can and Should Report a Suspicion of Abuse or Neglect

Public or Private School Employee

Day Care, Head start, After School Providers, Summer Camp, Extracurricular Staff, Child Caregiver

Teachers, Bus Drivers

Youth Group Leaders

Counselor, Psychologist, Social Worker

Minister

EMTs

Physician, dental providers, Intern, Resident, Nurse

Attorneys

Neighbors and family members

CPS, LE



Reasons of Reluctance To Report

The first condition for protecting children is that the community members believe and have faith that the appropriate agency (DCPS and/or law enforcement, court) will respond in appropriate time frames and with competence to protect children. "It will not make a difference if I report"

Beliefs that what goes on within the boundaries of a family is private "I don't want to interfere in someone else's family" or that maybe it is a one-time incident

Doubt that this may be happening or that this person would not hurt their child "I do not have proof"

Do not want child removed "What if I break up someone's home"

Concern about shaming the family "What if I am wrong"

Parents are paying for their child to attend

Belief that the child deserved the punishment

Belief that someone else will handle it


Unsure if what happened is normal, "Am I overreacting"



Reporting

It is never easy to make a report

Reporting is not an accusation but a request for an investigation and assessment to determine if help is needed. You do not have to know that the allegations are true to make the report.



Reporting


The majority of reports come from professionals

- In 2015, the most came from education personnel 18.4% and legal and law enforcement personnel 18.2%



Mandated Reporting

In accordance with Section 43-21-353 of the Mississippi Code of 1972, Annotated, "Any attorney, physician, dentist, intern, resident, nurse, psychologist, social worker, family protection worker, family protection specialist, child caregiver, minister, law enforcement officer, public or private school employee or **any other person** having reasonable cause to suspect that a child is a neglected child or an abused child, shall make a verbal report immediately by telephone or otherwise and followed as soon thereafter as possible by a report in writing to the Mississippi Department of Child Protection Services, and immediately a referral shall be made by the **Department of Child Protection Services** to the youth court intake unit, which unit shall promptly comply with Section 43-21-357...Where appropriate, the MDCPS shall additionally make a referral to the youth court prosecutor.



Reporting to Centralized Intake

Upon receiving a report that a child has been sexually abused, or burned, tortured, mutilated or otherwise physically abused in such a manner as to cause serious bodily harm, or upon receiving any report of abuse that would be a felony under state or federal law, the Department of Human Services shall immediately notify the law enforcement agency in whose jurisdiction the abuse occurred and shall notify the appropriate the appropriate prosecutor within forty-eight (48) hours,...

If a report is made directly to [centralized intake] that a child has been abused or neglected in an out-of-home setting, a referral shall be made immediately to the law enforcement agency in whose jurisdiction the abuse occurred and the department shall notify the district attorney's office within forty-eight (48) hours of such report...


If the out-of-home setting is a licensed facility, an additional referral shall be made by [MDCPS] to the licensing agency. The licensing agency shall investigate the report...



Known vs Suspicion

Do not have to know for sure what occurred, how it occurred, exactly who did the abuse, when it happened, or what specifically happened to report.

You are only required to have a suspicion of abuse or neglect to make a report.



Investigative Jurisdiction

Child Protective Services

Law Enforcement

Department of Health

FBI




Mandated Reporting

A mandated reporter shall report every instance of alleged or suspected abuse or neglect no later than forty-eight hours after the allegation has been brought to the reporter's attention.

- A mandated reporter may not delegate the responsibility to report abuse to any other person but shall make the report personally.

The mandated reporter **may not** use the reporter's own discretion in deciding what cases should or should not be reported to the Department of Child Protection Services, law enforcement agency, or relevant state agency.



How Do I Make A Report

1-800-222-8000

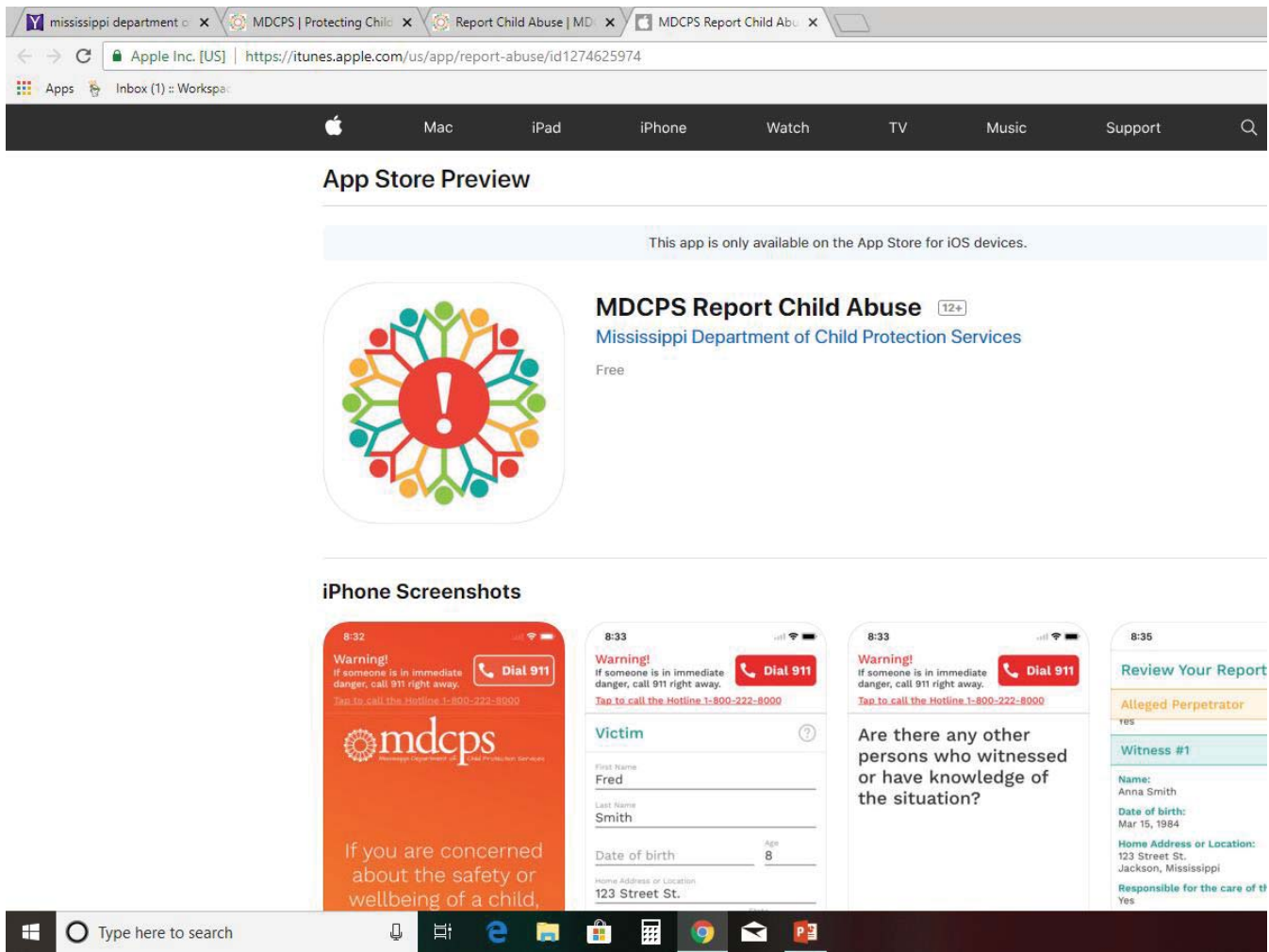
Or

601-432-4570

The screenshot shows a web browser window with the URL <https://reportabuse.mdcps.ms.gov>. The page features the MDCPS logo (Mississippi Department of Child Protection Services) and a warning: "If someone is in immediate danger, call 911 right now." The main content area is titled "Report Child Abuse" and includes a sidebar with navigation options: "Victim" (highlighted), "Alleged Perpetrator", "Witness", "Other Household Members", "Description", and "Reporter". The "Victim" section contains the following form fields:

- First name (text input)
- Last name (text input)
- Date of birth (text input)
- Age (text input)
- Phone number (text input)
- * Home Address or Location (text input)
- City (text input)
- State (text input)
- School Name (text input)
- County (text input)
- Race (dropdown menu)
- Sex (text input)

The Windows taskbar at the bottom shows the search bar and various application icons.



Reporting

Recommend also reporting to the law enforcement jurisdiction where the allegation reportedly occurred.

In emergencies and when children are in imminent danger, dial 911



What To Report

Name of alleged victim

Age of alleged victim

Race and gender

How to locate child

Addresses of the child and persons responsible for their care

Person responsible for child's care

School information

Type of maltreatment and when occurred. Nature and extent of the child's injuries, including any evidence of previous injuries and any information helpful in establishing the cause of the injury

Location of incidents, if known


Identity and age of suspected offender

How concern was discovered



Reporting

The identity of the person who made the report will remain confidential except when the court determines the testimony of the person reporting is material to the judicial proceeding or when the identity of the reporter is released to law enforcement and the prosecutor.




Reporting

Public school district employees making a required report shall be presumed to be acting in good faith and immune from any liability, civil or criminal, that might otherwise be incurred or imposed.



When In Doubt Call It In

Investigating agencies have screening processes to decide once the report is received, is the case will meet the level for investigation or intervention.



Educator Rights

To report suspected abuse or neglect-free of fear, intimidation, or regret.

Making a required report shall be presumed to be acting in good faith and immune from any liability, civil or criminal, that might otherwise be incurred or imposed.

Education professionals may not delegate the duty to report suspected abuse or neglect to any other person.

School district personnel are required to report to the hotline suspicion of abuse or neglect within 48 hours.

Can request a email follow-up acknowledgement that the report was made.

Questions or additional information can be directed to the local MDCPS office where the child lives.



Part 2



6 Lane Highway



The OLD Way- The Agency Centered Approach



History of Children's Advocacy Centers



Coordinated System




Multidisciplinary Team (MDT)

An MDT is a group of professionals of specific, distinct disciplines that collaborates from the point of report and throughout the child and family's involvement with the systems.

The primary goal of the MDT is to assure the most effective coordinated response possible for every child and family. The purpose of interagency collaboration is to coordinate intervention so as to reduce potential trauma to children and families and improve services overall, while preserving and respecting the rights, mandates, and obligations of each agency.

Child Abuse Multidisciplinary Teams in Mississippi

- ✓ Adams
- ✓ Alcorn
- ✓ Amite
- ✓ Benton
- ✓ Bolivar
- ✓ Calhoun
- ✓ Chickasaw
- ✓ Choctaw
- ✓ Claiborne
- ✓ Clay
- ✓ Coahoma
- ✓ Copiah
- ✓ Desoto
- ✓ Forrest
- ✓ Franklin
- ✓ George
- ✓ Greene
- ✓ Hancock
- ✓ Harrison
- ✓ Hinds
- ✓ Holmes
- ✓ Humphries
- ✓ Issaquena
- ✓ Itawamba
- ✓ Jackson
- ✓ Jefferson
- ✓ Lafayette
- ✓ Lauderdale
- ✓ Lamar
- ✓ Lawrence
- ✓ Leake
- ✓ Lee
- ✓ Lincoln
- ✓ Lowndes
- ✓ Madison
- ✓ Marion
- ✓ Marshall
- ✓ Newton
- ✓ Monroe
- ✓ Oktibbeha
- ✓ Panola
- ✓ Pearl River
- ✓ Pike
- ✓ Pontotoc
- ✓ Prentiss
- ✓ Quitman
- ✓ Rankin
- ✓ Sharkey
- ✓ Stone
- ✓ Tallahatchie
- ✓ Tate
- ✓ Tippah
- ✓ Tishomingo
- ✓ Tunica
- ✓ Union
- ✓ Walthall
- ✓ Warren
- ✓ Washington
- ✓ Wayne
- ✓ Webster
- ✓ Wilkinson
- ✓ Yalobusha
- ✓ Yazoo



What Does It Mean To Be Leading, Suggestive, or Coercive?

Providing the child information

Assuming or trying to get the child to affirm previously conceived ideas

Offering the child something or bribing them to disclose

Your body language

Allowing the child to overhear adult conversations regarding abuse

Yes/no or forced choice questions. Did dad do this to you? Were you at grandma's house when this happened?

Being an authority over child

Interrogating the child

Only focusing on the suspect or a particular allegation



Outcomes of Poor Interviewing

Bad interviewing of children can lead to false allegations, putting children and families through unnecessary stress, decreasing a victim's credibility in court, contaminating facts, reducing probability of conviction, draining resources through unsuccessful trials and investigations and reducing resources for legitimate cases.

(Crouch, L. et al. 2006. Forensic Interviewing in child sexual abuse cases: Current techniques and future trends)

Contaminating a child's memory, causing a child to recant, and results in errors of decision making regarding child protection or prosecution.



Do nots

Do not inform the suspect of the allegations prior to investigators becoming aware, question the child in front of the suspect, or force the child to confront the suspect.

Do not talk negatively of the suspect to the child.

Do not try to conduct your own investigation or interfere with the investigation. Do not probe the child, use aides, ask the child to write a written statement, or ask the child to repeat statements to others.

Do not tell others before making a report.

Do not ask leading questions, make any assumptions, or ask questions about their developmental level (dates, number of times, circumstances).

Do not act shocked, horrified, scared, or respond with panic or strong emotion.

Do not lie or make promises to the child you cannot keep.

Do not try to talk the child out of what he/she is disclosing or stop an unsolicited disclosure.

Do not stand over the child while he/she talks to you (get down to their level).

Do not confront, challenge, or interrogate the child.

Do not share the child's sensitive information with others who do not need to know.



Dos

Consider your responses before the situation occurs

Remain calm

Be sensitive and respectful

Pay attention to your body language and remain patient

Develop relationships with local agencies and have a policy for response

Support the Child

Listen to a child who has chosen to disclose to you and let them talk in their own words

Tell the child they did the right thing by telling

Tell the child you believe them

Tell the child they are not in any trouble with you

Tell the child this is not their fault

Explain that you will try to get help and let the child know you will call someone

Connect the child to appropriate services

Respect the child's right not to disclose

Report allegations immediately with all of the information that you know to the child abuse hotline and law enforcement. If child says Daddy touches my private part at night, this is all of the information that child needs to give for a report to be made

Work to ensure the child's safety. Provides supports in school for children who have experienced trauma or who are in foster care. Remain in contact with non-offending caregivers.

Out of the presence of the child, document (exact words, how disclosure or concerned made, affect, concerns, etc)



Your First Response to Allegation of Child Maltreatment

C- Create rapport with child in a safe location

H- Hear what child has to say by identifying your concerns

I – Identify minimal facts (who, what, where, when)

L – Link to the hotline 18002228000

D- Document what you did



What Happens After a Report is Made?

It is up to the investigating agencies to decide to investigate an allegation or intervene in a child's family. It is the responsibility of the investigators to thoroughly investigate the allegations and determine the validity of the allegations. The sooner that investigators are aware of the full allegations that are known, the more likely the investigators are able to ensure the child's safety and needs, and to corroborate the allegations in order to come to accurate conclusions about whether or not the child has been abused or neglected.




Crime Victims Bill of Rights

AG's Office

Victims of crime, as defined by law, shall have the right to be treated with fairness, dignity and respect throughout the criminal justice process...

If the victim is a minor, a family member may be designated as the victim's representative or the court may appoint a representative for the child.

The law enforcement officer assigned to the case will go over the rights and give information about the criminal justice system and the availability of support services within your area.



What You Can Do

Teach children about safety/safety rules, prevention, and practice what to do and how to think if they are harmed. Personal safety should not rest on the shoulders of the child. Model child safe behavior, healthy attention and affection to children.

Teach parents healthy discipline methods, about child development, and coping skills. Provide resources and supports to families who are struggling before abuse occurs. Be open so that families can ask for help. Meet the needs of adult survivors including mental health and medical care. 1 person can make a difference in a child's life especially the child's mother.

Know and routinely review your school's policy and protocol (how to keep children safe in school and how to respond to allegations) to ensure that you are committed to being a part of the safety net for children. Written policy and procedure will help in emotional situations including if someone on staff, a parent, or a known community person is accused. Train staff and volunteers. Complete background checks and pre-employment screens for ANYONE who could come in contact with children. Inform new hires of the child protection policy and require written acknowledgement. Interview with questions pertinent to abuse, corporal punishment, physical violence, bullying, and reporting. Require references and consider a social media check of new hires. Consider a standing committee to update policy regularly and designate a person to log reports and answer questions.



What You Can Do

Ensure supervision of children in your care. 2 adults not related or friends with children at all times. No one on one contact without being in view of others including on overnight trips. Windows, open door policy, and cameras.

Spread the word to others in your community.



What You Can Do

Report every suspicion of abuse and neglect immediately. Become an active participant in the safety team for children. Explore concerns by asking the question “Tell me about...” Work with investigators. Stand with child victims and rally around them. Be careful of your response and be sure to send the message to the child that it is not their fault. Support the non-offending family members. Listen to your gut. Control for rumors.

Leave the investigation to trained investigators- do not interview the suspected victim or suspected offender. Stay within your field of expertise. Build relationships with CPS, LE, CAC, Prosecutors Office, Medical, and Mental Health.

Remember to always keep the child in the center of the intervention.

The process of investigation starts with the reporter.

It takes a team to assess, intervene, and investigate these complex cases and you are part of that team by being the eyes and ears for vulnerable children. CPS and LE cannot protect children and seek justice alone. It has to be the “whole village” watching and listening in order for children to be protected. You may have that one piece of information that ensures a successful case and child outcome.



Prevent Child Abuse America

<https://www.youtube.com/watch?v=SvWUVWhGr6Y>

“School personnel are uniquely situated to identify, respond to, and be impacted by students’ traumatic stress symptoms due to their central role in children’s lives and their continued assessment of children’s learning abilities and relationships with peers and school staff.”

National Child Traumatic Stress Network, Schools Committee. (2017). Creating, supporting, and sustaining trauma-informed schools: A system framework. Los Angeles, CA, and Durham, ND: National Center for Child Traumatic Stress.

Resources

CACM

- One Loud Voice conference
- Chaplains For Children
- CAST

Your local MDT (CPS, LE, Prosecutor)

MS Department of Education (video)

MS Department of Health Child Care Licensure

NCTSN

Child Welfare Information Gateway

Darkness To Light

Gundersen National Child Protection Training Center

Handle With Care

Zero to Three

Stop It Now!

Thank you for being
One Loud Voice for
Mississippi's children!



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