Child Abuse WHAT IS IT? WHAT CAN YOU DO?

An Informative Handbook



Treatment and Prevention of Child Abuse Founded in 1959 by Sara O'Meara and Yvonne Fedderson

> Childhelp USA® National Child Abuse Hotline 1-800-4-A-CHILD® (1-800-422-4453)

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Childhelp USA®

Mission

Childhelp USA[®] exists to meet the physical, emotional, educational, and spiritual needs of abused and neglected children. We do so by focusing our efforts in the areas of treatment, prevention, and research.

Philosophy

Childhelp USA believes that every child has a unique contribution to make to the world. To that end, we do everything within our power to help each child heal and develop self-esteem.

The entrance of each Childhelp USA facility features the words "All Who Enter Here Will Find Love." We believe it is the foundation upon which all healing begins.

Programs

Childhelp USA provides a broad continuum of child abuse prevention and treatment programs that directly serve children and their families. This includes facilities that care for some of our nation's most severely damaged children. Several of our programs were "firsts," which continue to be studied by professionals worldwide as models that work.

A History of Leadership

Since its founding in 1959, the organization and its co-founders have developed cutting-edge solutions to the problem of child abuse.

In 1978, Childhelp USA developed the first residential treatment facility exclusively for severely abused children – the Village of Childhelp West in Beaumont, California (near Palm Springs). Along with its excellent therapeutic programs, the village incorporated innovative programs such as art and animal therapy, which continue today.

Co-founders Sara O'Meara and Yvonne Fedderson were instrumental in designating April as National Child Abuse Prevention Month. In 1980, they joined President Carter in signing the federal proclamation in the Oval Office.

In the same year, the organization raised national awareness of child abuse and neglect through the first television special addressing the topic. Childhelp USA's program "A Time for Love" was syndicated coast to coast.

Childhelp USA in 1982 began operation of the first national toll-free child abuse hotline, 1-800-4-A-CHILD, 24 hours a day.

Throughout the 1980s and '90s, Childhelp USA continued to open new facilities and expand its programs, which directly serve severely abused and neglected children. These include group homes and specialized foster care programs in California and Virginia; residential treatment facilities (villages) in Virginia (near Washington, D.C.) and in Arizona (near Phoenix); and child abuse advocacy centers in Tennessee, New York, Arizona and Virginia.

Childhelp USA recently initiated the National Day of Hope[®], which is observed on the first Wednesday of April as part of National Child Abuse Prevention Month. The goal of the day is to mobilize everyone across America to stop child abuse and neglect, which kills more than three children EACH DAY.

Programs and Services

Childhelp USA® National Child Abuse Hotline 1-800-4-A-CHILD® (1-800-422-4453)

Staffed 24 hours daily by professional crisis counselors who use a database of thousands of emergency, social service, and support resources. Accessible throughout the U.S., its territories, and Canada. Technology makes possible communication in 140 languages and with the hearing impaired.

Residential Treatment Facilities (Villages)

Provide education and specialized, comprehensive treatment programs for severely abused and neglected children. In addition to psychotherapy, the programs include art, music, animal, and recreational therapy. Located in Beaumont, California; Wickenburg, Arizona; and Culpeper County, Virginia. A village in Tennessee and a short-term assessment center in Michigan are also under development.

Children's Advocacy Centers

"One-stop" centers to examine and interview child victims of abuse. Working together at one Childhelp USA facility, a coalition of law enforcement, prosecution, social services agencies, medical professionals, and crisis counselors focus upon an array of children's issues related to abuse. Located in Knoxville, Tennessee; New York, New York; Fairfax, Virginia; and Phoenix, Arizona.

Foster Care

Recruitment, training, and certification of Childhelp USA foster families in Southern California and Virginia.

Group Homes

Childhelp USA also operates community-based group homes which provide nurturing refuge for children until we can place them in our own foster care, or adoptive parents are found, or the child can safely return to his or her family (as determined by the courts).

Child Abuse Prevention, Education and Training Programs

Head Start preschools for at-risk children; child sexual abuse prevention programs in elementary schools; seminars and training relevant to child abuse; dissemination of informational materials; and public service announcements.

National Day of Hope®

Childhelp USA has established the first Wednesday of each April as the National Day of Hope, part of National Child Abuse Prevention Month. The goal is to raise national awareness of the tragedy of child abuse, and to mobilize individuals, businesses, and organizations across the country to commit their energy and resources to assist and pray for abused and neglected children. Each year, three-wick candles are lit on the National Day of Hope to commemorate the three children who die daily in the United States from child abuse.

Child Abuse in America

Approximately three million reports of child abuse are made in the United States each year. The actual incidence of abuse and neglect is estimated to be three times greater than the number reported to authorities.

Statistics:

- A report of child abuse is made—on average—every 10 seconds.
- More children (age four and younger) die from child abuse and neglect than any other single leading cause of death for infants and young children. This includes accidental falls, drowning, choking on food, suffocation or fires in the home.
- Each day in the United States, more than three children die as a result of child abuse in the home.
- Head trauma is the leading cause of child abuse death among babies. This includes Shaken Baby Syndrome, which kills 25% of its victims. The majority of survivors suffer brain damage.
- Most child abuse and neglect fatalities are children below the age of 6.
- Girls are sexually abused four times more often than boys, while boys are a greater risk of emotional neglect and serious injury.
- Women sexually abused before age 18 have lower levels of interpersonal function and social adjustment as adults and are less likely to form trusting relationships.
- It is estimated that half of all homes with adult violence also involve child abuse or neglect.
- Child sexual abuse remains a crime most often perpetrated by relatives and acquaintances rather than strangers.

Sources:

United States Dept. of Health and Human Services United States Advisory Board on Child Abuse and Neglect United States Department of Justice

Defining Child Abuse

Physical Abuse:

Any non-accidental injury to a child. This includes hitting, kicking, slapping, shaking, burning, pinching, hair pulling, biting, choking, throwing, shoving, whipping or paddling.

Neglect:

Neglect is the failure to provide for a child's physical needs. This includes lack of supervision, inappropriate housing or shelter, inadequate provision of food, inappropriate clothing for season or weather, abandonment, denial of medical care or inadequate hygiene.

Sexual Abuse:

Any sexual act between an adult and child. This includes fondling, penetration, intercourse, exploitation, pornography, exhibitionism, child prostitution, group sex, oral sex or forced observation of sexual acts.

Emotional Abuse:

Any attitude or behavior that interferes with a child's mental health or social development. This includes yelling, screaming, name-calling, shaming, negative comparisons to others, telling children they are "bad" or "no good, worthless" or "a mistake."

Emotional neglect is the failure to provide affection and support necessary for the development of emotional, social, physical and intellectual well being of a child. This includes ignoring, lack of appropriate verbal and physical affection, withdrawal of attention, lack of praise or lack of positive reinforcement.

Abuse Indicators

Abuse Type	Physical Indicators	Behavioral Indicators
PHYSICAL ABUSE	Unexplained bruises and welts - on torso, back, buttocks, thighs or face - identifiable shape of object used to inflict injury (belt, electrical cord, etc.) - appear with regularity after absence, weekend or vacation Unexplained burns - on soles of feet, palms, back, buttocks or head - hot water immersion burns (glove-like, sock-like or doughnut-shaped burn on buttocks or genitals) Unexplained fractures or dislocations Bald patches on scalp	Child states he/she "deserves" punishment Fearful when others cry Behavioral extremes
SEXUAL ABUSE	Not meeting basic needs	Begging or stealing food Early arrival or late departure from school Frequent visits to the school nurse Difficulty with vision or hearing Poor coordination Often tired or falling asleep in class Takes on adult roles and responsibilities Substance abuse Acting out behavior Child verbalizes a lack of care-taking Unwilling to change for gym or participate in physical education activities Sexual behavior or knowledge inappropriate to the child's age Sexual acting out on younger children Poor peer relations Delinquent or runaway behavior Report of sexual assault Drastic change in school performance Sleep disorders/nightmares Eating disorders Aggression Withdrawal, fantasy, infantile behavior
		Self-abusive behavior or lack of concern for personal safety Substance abuse Repetitive behaviors - hand-washing, pacing, rocking

Abuse Indicators, continued

EMOTIONAL ABUSE AND NEGLECT - stuttering - baby talk - unresponsiveness Failure to thrive - underweight, small for age Hyperactivity	Learning disabilities Habits - sucking, biting, rocking Sleep disorders Poor social skills Extreme reactions to common events Unusually fearful Overly compliant behaviors - unable to set limits Suicidal thoughts or actions; selfabusive Difficulty following rules or directions Child expects to fail so does not try
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Important Information Concerning Child Abuse

Who Abuses Children?

It is usually someone the child knows. It can be a family member, family friend, neighbor, an older child, or a sibling in a blended family. (This type of abuse is rarely reported and may be dismissed as "sibling rivalry.") The perpetrator can be a person in whose care the child is placed such as a day care worker, baby sitter, teacher, school counselor, coach, camp counselor or clergy.

Perpetrators are experts at knowing how to choose victims. They often slowly groom the victim prior to the abuse by giving gifts, spending special time together playing games, going to movies, etc. This can be confusing to the child.

Child abuse honors no boundaries. It occurs at every socio-economic level, across ethnic and cultural lines, within all religions and at all levels of education.

Why Some Children Don't Reveal Their Perpetrators

Victims may be confused by the actions of the perpetrator. Perpetrators may say of the abuse: "It is our little secret." Victims are likely to be told no one will believe their story, or that it is the victim's fault. At times, victims, their pets or families are threatened with injury or death if they tell. These are the ways they may be "SCARED SILENT." It is extremely rare that a perpetrator has but one victim. Children often suffer more than just one type of abuse.

Shaken Baby Syndrome

Definition:

The manual shaking of an infant in a whip-lashing motion, usually while the child is being held by the shoulders or torso. Due to an infant's immature brain and weak neck muscles, this action causes the brain to slam against the skull. Possible results may include death, blindness, deafness, brain damage, attention deficit disorder (ADD), mental retardation or learning and developmental disabilities.

Behavioral Indicators:

There are often no external physical signs of trauma (bruises, skull fractures, swelling). Symptoms may resemble the flu. Crying is one of the main ways an infant communicates its pain or injury.

Prevention of Shaken Baby Syndrome:

- Support an infant's neck and head.
- Don't shake a baby to check for alertness, to prevent vomiting or choking, or to aid breathing.
- Choose caregivers carefully. Get references.

Remember:

Crying is one of the main ways an infant communicates its needs. While this can be frustrating, remember the child is not purposefully trying to make your life miserable. NEVER SHAKE A BABY!

Helpful Suggestions Include:

- Check for basic needs (food, diaper, illness, pain, colic)
- Rock or walk while holding the baby close
- Massage the baby's back
- Offer a toy, pacifier or other distraction
- Sing or play soft music
- Take the baby for a ride (stroller, car)
- Put the baby in a wind-up swing
- Wrap the baby gently in a warm soft blanket
- Call a friend or relative for more suggestions or to give you a break.
- Walk away if necessary, put the child in a safe place and check on him/her every five minutes as you regain control.
- If crying occurs without cause and over an extended time period, check with your pediatrician.

Tips for Positive Parenting

Building Self-acceptance:

- "Catch" your child being good.
- Give praise for trying, not only for succeeding.
- Include your child's opinions when making plans or decisions.
- Give your child age-appropriate responsibilities so he/she feels useful.
- Show your love. Say, "I love you." Give hugs; have fun together.
- Accept children for who they are no one is perfect, not even you.
- Encourage hopes, dreams and curiosity.

Promoting Good Communication:

- Be honest and encourage your child to be honest with you.
- Use good eye contact; stop and give them your attention.
- Take time to LISTEN.
- Use language your child understands.
- Encourage your child to ask questions for clarification.
- Realize that mistakes are part of learning.
- Admit your own mistakes and help your child admit his/hers.

There's no such thing as a "BAD" child, only unacceptable behaviors or choices.

Behavior Management:

- Establish predictable patterns of behavior with your child.
- Be consistent and fair with rules, expectations and consequences.
- Take your child's age and abilities into consideration.
- Be sure all caretakers (parents, grandparents, other family members, babysitters) use the same behavior management and have the same expectations of the child.
- Ensure that consequences for behaviors "fit the crime."

Tips for Positive Parenting, continued

- Allow "natural consequences" to take their course when possible.
- Ignore inappropriate behaviors while focusing on positive ones.
- Follow through on both rewards and consequences.
- Use logical consequences to teach a lesson, not vent your anger.
- Offer rewards for positive behavior (extra or extended privileges, special time or attention from parent, increased independence).

REMEMBER: Rewards do not have to be big or cost a lot of money - your time and attention are the best rewards.

Creating Positive Role Models:

- By your actions, teach your child tolerance.
- Set a good example. Children learn from HOW you act, as well as by WHAT you say.
- Treat children with the respect you wanted as a child.
- Demonstrate appropriate ways to disagree, to be angry, or to be fearful.
- Teach children problem-solving by letting them see how YOU do it.
- Care for yourself in the same way that will appropriately influence your child.

Adult Survivor Information

Definition:

A survivor is one who continues to live or exist, despite traumatic life events. An adult survivor of childhood abuse may experience:

- flashbacks
- depression
- anxiety
- self-destructive thoughts and feelings
- anger
- shame
- · eating disorders
- dysfunctional relationships
- dissociative episodes
- drug abuse
- poor decision-making skills
- poor ability to set limits
- sexual identity crisis
- trust issues
- violence and crime
- other destructive actions or reactions

If any of the above are affecting your life, there IS help available. It is important to seek the support and assistance of professionals who specialize in survivor issues. These professionals include psychiatrists, psychologists, counselors and therapist-led support groups. Peer support groups are also available in many areas.

Additional things you can do to help yourself:

- Be sure you are safe.
- Remind yourself that the abuse happened in the PAST; it is not happening to you NOW.
- Make a decision that you deserve to feel better.
- Build a support system of family, friends, and/or community.
- Keep a journal.
- Identify relaxation techniques you can use.
- Take care of your basic needs (eat, sleep, be safe).
- Engage in physical activity: walk, exercise, dance, etc.
- Avoid people and situations that are not helpful.
- Do not "beat yourself up" with words or actions.
- Allow yourself to have positive thoughts.
- Use non-destructive, creative emotional outlets (drawing, painting, clay, dance, etc.)
- Contact the Childhelp USA[®] National Child Abuse Hotline, 1-800-4-A-CHILD[®].

What You Can Do to Help

- Learn to recognize the warning signs of child abuse.
- Learn to recognize the signs of an abusive person, whether a child, teen or adult.
- Learn to recognize your own negative feelings and behaviors. Acquire positive parenting skills and get help when you need it.
- Never discipline children when your anger is out of control.
- Teach your child what is appropriate behavior from another person and what is not. Teach your child how to protect him/herself and what to do when not feeling safe.
- Teach your child the difference between good and bad secrets.
- Teach your children the difference between good and bad touches. Unless a health issue is being
 checked by a nurse, doctor or appropriately concerned adult, touching parts of the body a bathing
 suit covers is not appropriate.
- Be sure your child knows that you are always there to support and listen; then make sure you are consistent. Unfortunately, many children tell a parent or someone they trust about being abused and are not believed. Be aware that young children are likely to speak the truth in these matters.
- Listen when a child tells you he/she does not want to be with someone; find out why.
- Participate in your child's activities and get to know your child's friends.
- Be aware of changes in a child's behavior or attitude; ask questions.
- Be alert for any talk that reveals premature sexual understanding or knowledge.
- Pay attention when someone shows greater than normal interest in your child.

What to Do If You Suspect Child Abuse

- If a child discloses abuse to you, carefully listen and do not push him/her to say more than is comfortable. REMAIN CALM!
- Assure the child that you believe him/her and that what has happened is not his/her fault. The child
 is not bad.
- Reassure the child. Let him/her know telling was the right thing to do and you appreciate that you
 were trusted.
- Do what you can to make him/her feel safe. Let the child know you will report the abuse and get help.
- Although the child's disclosure may make you angry or disgusted, do not attempt to take matters in your own hands. The situation requires professionals. Your interference can make matters worse.
- If you suspect the child has been sexually assaulted, do not change his/her clothes nor wash the child. Go immediately to the emergency room.
- Make a report by calling your local child protective services hotline or local police or sheriff's department. REMAIN CALM.
- If you are unsure who to call, contact the 24-hour Childhelp USA[®] National Child Abuse Hotline at 1-800-4-A-CHILD[®] for that information. Hotline services are described under Childhelp USA on page two.

Suggested Reading for Parents

Parents Under Siege

by James Garbarino, Ph.D., and Claire Bedford

Offers solutions to difficult situations with children.

Ten Talks Parents Must Have With Their Children about Violence

by Dominic Cappelo

Deals with different aspects of violence and offers discussion topics.

The Irreducible Needs of Children (What Every Child Must Have to Grow, Learn and Flourish)

by T. Berry Brazelton, M.D.

Good information and examples.

How To Talk So Kids Will Listen / How To Listen So Kids Will Talk

by Adele Faber and Elaine Mazlish

Good information on issues concerning adolescents.

Parenting For Dummies

by Sandra Hardin Gookia

Straight forward, easy to understand basics for everyday issues.

Suggested Reading for Adult Survivors

The Courage to Heal and Beginning to Heal

by Laura Davis and Ellen Bass

How to identify feelings and begin the healing process.

Victims No Longer

by Mike Lew

Especially good for male survivors.

Betrayal of Innocence

by Susan Forward and Craig Buck

Types of incest and how to heal.

Double Duty

by Claudia Black

Factual information for survivors.



Childhelp USA[®] National Headquarters 15757 N. 78th Street Scottsdale, Arizona 85260 (480) 922-8212

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For further information about Childhelp USA visit its Web site at: www.childhelpusa.org