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more than five children  
die from child abuse.

# CHILD ABUSE ALERT

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What You Can Do

## WHAT YOU CAN DO

**CHILD ABUSE ALERT** is addressed to two groups of people —

The **friends, neighbors, and family** members of children at risk, and the community of **people who work professionally with children** and are mandated to report abuse and neglect.

Adults who want to help a child they suspect is being abused face a difficult dilemma. On the one hand, they worry about making an unfair accusation. On the other hand, they worry that if they don't act, a child could be harmed.

This booklet is designed to help you recognize some of the signs that a child is at-risk, and to give you the confidence to act. It discusses four types of child abuse and the signs that will help you identify each.

## INTRODUCTION

*The number of children involved in child abuse reports every year in the United States: **6 million***

*Nearly 80% of children who die because of abuse and neglect are **younger than five years old**.*

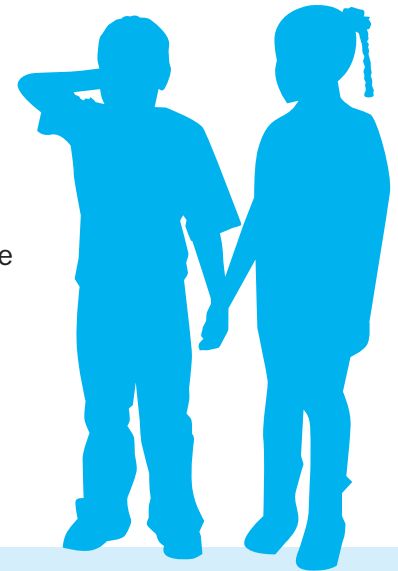
*Most child victims of abuse or neglect suffer at the hands of **someone they know**.*

***Every day** in the U.S. more than **five children die** of child abuse.*

*In 2010 in New York City, **78,690** children were reported in incidents of child abuse and neglect.*

In addition to these shocking statistics, thousands of children each year suffer severe and long-term damage from abuse and neglect, including: impaired mental and physical growth, signs of depression and other psychiatric disorders, teen pregnancy, substance abuse, and poor school performance. Compelling data indicate that abused children are more likely to exhibit anti-social and criminal behaviors as they move into adulthood. They are also more likely to have serious physical illness in adulthood and die at younger ages. Moreover, researchers estimate that one-third of abused and neglected children grow up to abuse their own children once they become parents.

Once child abuse and/or neglect have been identified, the most imperative action is to keep children safe. However, it is important to add that adults who abuse children are not necessarily “bad” people who want to hurt children — rather they are often parents who are themselves struggling with tremendous challenges and few resources. Professionals can work with children and parents to eliminate further abuse and help families stay together and heal.



**To report suspected child abuse or maltreatment, call the New York State Child Abuse Hot Line at the State Central Registry:**

• General Public (*anonymous calls accepted*):

**1-800-342-3720**

• Mandated Reporters:

**1-800-635-1522**

## TYPES OF ABUSE AND MALTREATMENT

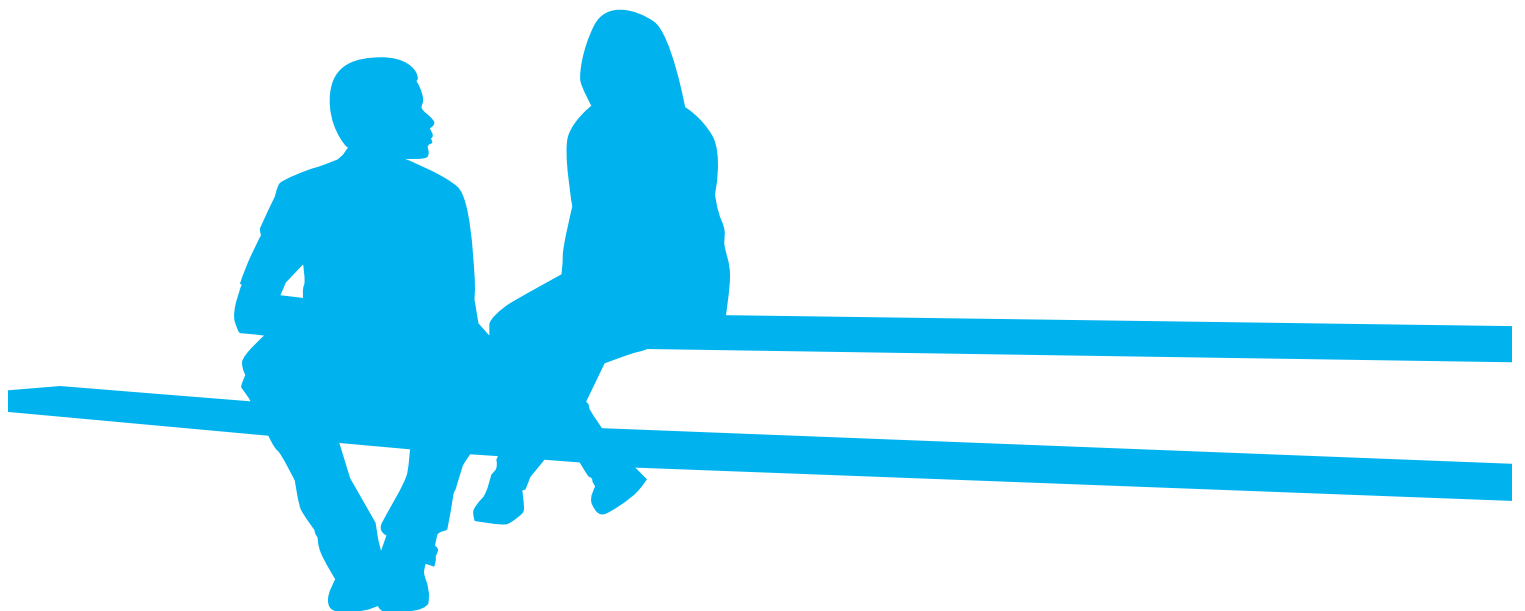
**PHYSICAL ABUSE** occurs when a parent or caretaker inflicts, or allows another person to inflict, physical injury to the child. In its most extreme forms, physical abuse is easy to detect. However, there are usually many warning signs and less severe incidents of abuse that occur before serious injuries happen. A timely response can make the difference.

**NEGLECT** occurs when, regardless of the cause, a parent or caretaker does not provide necessary food, clothing, shelter, education, supervision, or health care for a child. **Neglect is the most frequent form of child maltreatment and may cause more long-term damage than many cases of physical abuse.** Extreme physical neglect is easily identified, but even less severe cases may result in significant, long-lasting consequences for a child.

**SEXUAL ABUSE** is a general term describing behavior by adults or older children that seduces or forces a child into sexual contact, including sexual molestation, incest, sexual assault, or involvement in pornography. Sexual abuse is more difficult to identify than other kinds of maltreatment, as it usually can be suggested only by behavior or learned through a child's disclosure. A physical examination may be necessary for certainty.

**COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN** involves the abuse of children and youth through the exchange of sex or sexual acts for drugs, food, shelter, protection, other basics of life, and/or money (or the promise of these things). Commercial sexual exploitation includes involving children and youth in creating pornography and sexually explicit websites. Other terms that are used to talk about sexual exploitation are "child prostitution" and "youth sex trade." We use the term "commercial sexual exploitation of children" to emphasize that youth in the sex trade are victims, and that the use of children and youth under 18 for sexual acts is ALWAYS abusive.

**IMPORTANT NOTE:** *Many of the signs or behaviors described in this booklet may exist in families in which there is no abuse or maltreatment. Also, families in which there is abuse do not necessarily show any of these signs.*



## PHYSICAL ABUSE

### CHILD: Physical Signs

- Bruises and welts
- Bite marks
- Choke marks and scratches
- Burns
- Fractures
- Loss of hair or bald spot
- Unexplained or vaguely explained injuries
- Many injuries, bruises, or broken bones
- Evidence of multiple former broken bones

### CHILD: Behavioral Signs

- Child tells teachers or others of being hurt at home
- Child's explanation of an injury does not match the physical signs
- Child cringes or flinches when touched
- Child seems afraid of adults
- Child wears long sleeves or other concealing clothing (often inappropriate for season)
- Child stares into space for long periods
- Child fears going home or runs away
- Child is unusually aggressive with peers or younger children

### PARENT/CARETAKER: Behavioral Signs

- Parent/Caretaker uses discipline which is inappropriate or extreme for the child's age or behavior
- Parent/Caretaker explains child's injury in a way that does not match the physical signs
- Parent/Caretaker hides child's injuries and/or does not get medical care for an injured child
- Parent/Caretaker avoids contact with authorities and is reluctant to share information about the child with authorities
- Parent/Caretaker refuses consent for medical examination or diagnostic testing
- Parent/Caretaker uses many different medical facilities
- Parent/Caretaker regularly criticizes or threatens child
- Parent/Caretaker keeps child out of sight
- Parent/Caretaker singles out one child in family as "bad"
- Parent/Caretaker discourages child's social contacts

## NEGLECT

### CHILD: Physical Signs

- Child appears malnourished; always hungry
- Child's medical and/or dental needs are not met
- Child wears clothing that is not right for season
- Child is constantly tired or without energy
- Child is regularly dirty and messy
- Child cannot do things that same age children can do (developmental lags)
- Child has significant weight loss

### CHILD: Behavioral Signs

- Child begs or steals food
- Child is frequently late or absent from school
- Child reports that there is no caretaker at home
- Child uses alcohol or drugs
- Child bites, sucks, or rocks beyond age 3
- Child demands either constant attention or seeks no attention
- Child has trouble paying attention

### PARENT/CARETAKER: Behavioral Signs

- Parent/Caretaker leaves child with caretakers who are too young or unable to care for child
- Parent/Caretaker appears intoxicated or high
- Parent/Caretaker allows child to do dangerous things
- Parent/Caretaker maintains excessively dirty, dangerous, or chaotic home
- Parent/Caretaker does not take child to the doctor or follow up with medical care
- Parent/Caretaker does not protect child from contact with dangerous or illegal substances
- Parent/Caretaker ignores child's requests for affection and attention
- Parent/Caretaker regularly fails to keep appointments concerning child's needs



## SEXUAL ABUSE

### CHILD: Physical Signs

- Child has bruises, bleeding, or abnormalities in genital or anal area
- Child has pain or itching in genital area
- Child has venereal diseases, vaginal, or urinary tract infections
- Child has difficulty walking or sitting
- Child has frequent bad dreams, nightmares, or sleep problems
- Child has eating problems
- Child has frequent wetting or soiling after toilet training has been achieved

### CHILD: Behavioral Signs

- Child talks explicitly about adult sexual acts
- Child behaves in a seductive or promiscuous (sexual) manner
- Child shows extreme interest in his or her sexual organs, in other children's organs, or in parents' organs
- Child engages in inappropriate sexual play
- Child seems unusually fearful of a particular person or setting
- Child masturbates excessively
- Child either avoids being touched or is constantly seeking physical contact
- Child acts suspicious, watchful, or fearful of a physical examination
- Child regularly behaves in either a very babyish or very adult-like way
- Child demonstrates big behavior changes

### PARENT/CARETAKER: Behavioral Signs

- Parent/Caretaker has a history of sexual abuse offenses
- Parent/Caretaker is very watchful and guarded about issues related to sexuality
- Parent/Caretaker uses many different medical facilities
- Parent/Caretaker is physically intrusive with child (does not respect child's privacy)
- Parent/Caretaker acts as though child is either much older or younger than actual age
- Parent/Caretaker prevents or limits child's outside social contacts
- Parent/Caretaker views child as a possession

## COMMERCIAL SEXUAL EXPLOITATION

### CHILD: Physical Signs

- Child has brands or tattoos
- Child dresses like a much older person to "pass" as an adult
- Child has unexplained injuries or signs of physical abuse

### CHILD: Behavioral Signs

- Child uses street slang such as "bottom girl" (the head girl), "out of pocket" (to look or talk to another pimp), or "track" (where the children work)
- Child has an unexplained source of money and/or expensive/fancy clothing or objects
- Child runs away from home for significant periods of time
- Child is unwilling to share his or her whereabouts
- Child is always in the presence of a controlling or abusive adult or teen
- Child is unwilling to communicate openly
- Child appears to be anxious, fearful, tense, and nervous
- Child often appears depressed and/or shows submissive behavior

### PARENT/CARETAKER: Signs

Parents of sexually exploited youth have often done nothing that either directly or indirectly results in their child being commercially sexually exploited. There are therefore no caretakers' behaviors that might be a sign of commercial sexual exploitation of a child.

## FAMILY RISK FACTORS

Parent/Caretaker and family characteristics and conditions that are often related to abuse and maltreatment:

- Parents/Caretakers were themselves neglected or abused as children or adolescents
- Drug or alcohol problems (any family member)
- Parent/Caretaker has little or no contact with extended family or other supportive adults
- Parent/Caretaker is not familiar with normal child development and expects child to act like a much older child
- Parent/Caretaker only knows how to use physical discipline
- Chronic illness, physical or mental disability (any family member)
- Multiple moves or changes in household membership
- Overcrowded or inadequate housing
- Loss of employment or other source of income

## QUESTIONS FOR MANDATED REPORTERS

If you are a mandated reporter (caseworker, teacher, healthcare worker, etc.), the following questions may be useful to help gather information from children and caretakers to determine risk. Please remember that there are no right answers to these questions. The questions are designed to simply open the door to further conversation with family members about their relationships.

### Questions for Mandated Reporters to Engage Children

- What do you like most about yourself?
- What do you feel proud of?
- What do you do that makes your parents proud of you?
- How do your parents show you that they are proud of you?
- What do you do that makes your parents angry or worried?
- How do they show you that they are angry or worried?
- What happens when you do something wrong?
- What kinds of things worry you about yourself?
- What kinds of things worry you about your family?
- What do you do when you are scared?
- Who do you talk to when you are sad or worried?
- When you do something great, who do you tell about it?

### Questions for Mandated Reporters to Engage Parents, Foster Parents, or Other Caretakers

- What about your child do you like best?
- How does your child make you proud?
- What do you do when you are pleased with your child?
- What kinds of things did you do as a child that upset your parents?
- What do you do when your child upsets you?
- How do you punish your child?
- What are your greatest worries about your child?
- What do you do well as a parent/caretaker?
- What do you need to learn as a parent/caretaker?
- What advice would you give someone who was thinking about becoming a parent/caretaker?

## MAKING A REPORT

To report suspected child abuse or maltreatment, call the **New York State Child Abuse Hot Line** at the State Central Registry (SCR):

**GENERAL PUBLIC** *anonymous calls accepted*

**1-800-342-3720**

When you make a report to the Hotline, you will be asked to describe what you have witnessed or heard that makes you suspect that a child has been abused or maltreated. If you are a mandated reporter (meaning that you are making the report in your professional capacity), you will be asked for information regarding yourself, including your professional relationship with the child and/or caretaker and your contact information.

In response to your call, Hotline personnel will determine whether further investigation is needed. If so, they will “register” the case and refer it to the local Child Protective Services (CPS) for investigation. The report is then investigated and a Safety Assessment is performed by the local CPS. The report will be either “indicated” or “unfounded.” If the report is unfounded, then it will be sealed.

After the call, in New York State, mandated reporters must also fill out a 2221-A form within 48 hours. Forms are available on the OCFS website: [www.ocfs.state.ny.us/main/cps](http://www.ocfs.state.ny.us/main/cps). Additional information about being a mandated reporter is also available on the OCFS site.

**MANDATED REPORTERS**

**1-800-635-1522**

If a case is “indicated,” the local CPS will determine whether community services are needed to support the family and will make referrals for services. Families receiving services will continue to be monitored until services are no longer needed. In some cases, where there is extreme risk, children may be removed from their home and placed in foster care. Whenever possible, every attempt is made to keep families together, or to reunite families as soon as possible if the children need to be removed from home.

When the circumstances of your call involve a crime (as can be the case for commercially sexually exploited youth), the State Central Registry will send the information to the New York State Police Information Network (NYSPIN) or to the New York City Police Department (NYPD) for necessary action.

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## ABOUT JCCA

JCCA's mission is to provide the highest quality child welfare and mental health services to New York's neediest and most vulnerable children and families to insure that their safety, permanency and well-being leads to a life of stability and promise.

We are guided by the Jewish mandate of *tikkun olam*—the responsibility of every person to make the world a better place. Our highly trained, dedicated staff works in partnership with families to build on their strengths, preserve the family when possible, and help create new families when necessary, so that all children may thrive through experiencing the benefits of a healthy family and belonging to a community of support.

This booklet has been developed by JCCA's experts and distributed to the community in order to further our mission of *tikkun olam* and help families, caretakers, and professionals protect all the children in our communities.

**JCCA**

**Repair the world  
child by child**

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## ABOUT COFCCA

The Council of Family and Child Caring Agencies is the principal representative for nearly all the not-for-profit organizations providing foster care, adoption, family preservation, juvenile justice and special education services in New York State. COFCCA is comprised of over 100 member organizations, ranging in size from small community based programs to the nation's largest multi-service agencies — all of which share the mission of serving children and families. COFCCA works with its members and government to ensure quality services for our most vulnerable children — children who have suffered abuse and abandonment and children at-risk.

**COFCCA**

**Council of Family and Child Caring Agencies**  
Leadership, Voice and Vision for Child Welfare in New York State

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