

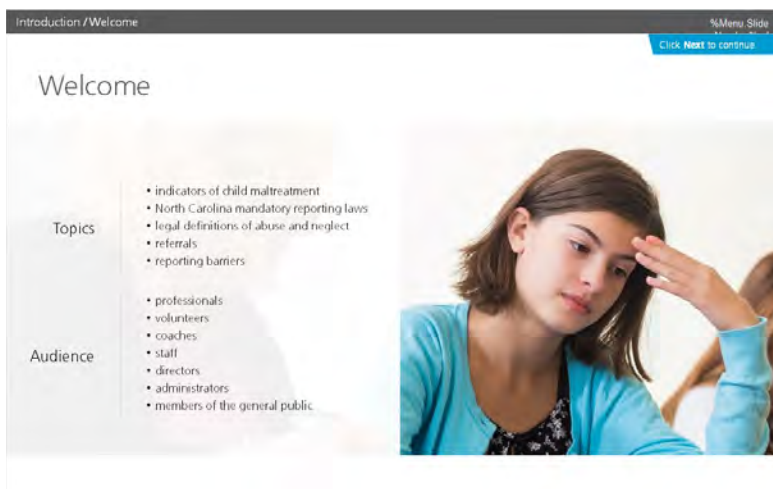
Module 1: Course Introduction

1.1 Introduction



Notes:

1.2 Welcome



Notes:

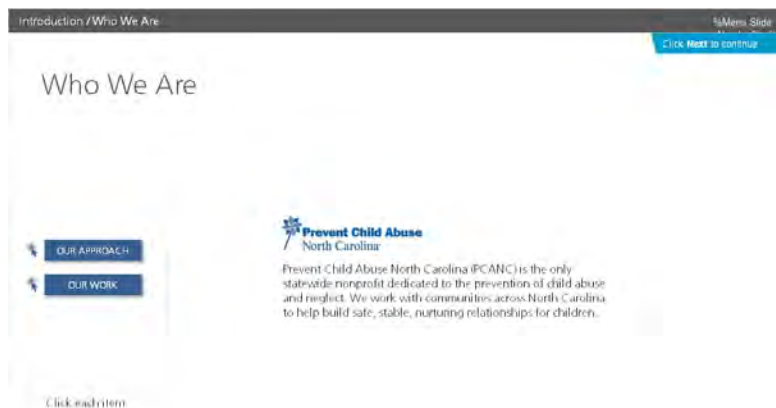
Welcome to the course on Recognizing & Responding to Suspicions of Child Maltreatment. In this course we'll look

at the indicators of child maltreatment, North Carolina mandatory reporting laws, and some legal definitions of abuse and neglect.

We'll also talk about making referrals of suspected child maltreatment and some of the barriers to reporting incidents.

This training is appropriate for professionals, volunteers, coaches, staff, directors, administrators, and members of the general public interested in learning more about child maltreatment prevention.

1.3 Who We Are



Notes:

In case you are not familiar with us and our work, we'd like to introduce ourselves. Prevent Child Abuse North Carolina, or PCANC, is the only statewide nonprofit dedicated to the prevention of child abuse and neglect. We work with communities across North Carolina to help build safe, stable, nurturing relationships for children.

We support programs proven to prevent child maltreatment and build protective factors children need to thrive. And we advocate for policies that support healthy children and families and provide public awareness and professional education opportunities focused on effective prevention strategies.

our work (Slide Layers)



1.4 Our Partnerships



Notes:

PCANC relies on collaborative partnerships with a number of key stakeholders including our Prevention Action Network, a group of over 400 individuals and professional organizations dedicated to strengthening families and communities throughout North Carolina.

Thank you to our partners at NC DHHS for investing in PCANC and this course. To learn more about what we do, visit www.preventchildabusenc.org <<http://www.preventchildabusenc.org>>.

Funding for this training, available in Spanish, is made possible through a grant from the North Carolina Department of Public Safety.

1.5 About This Course



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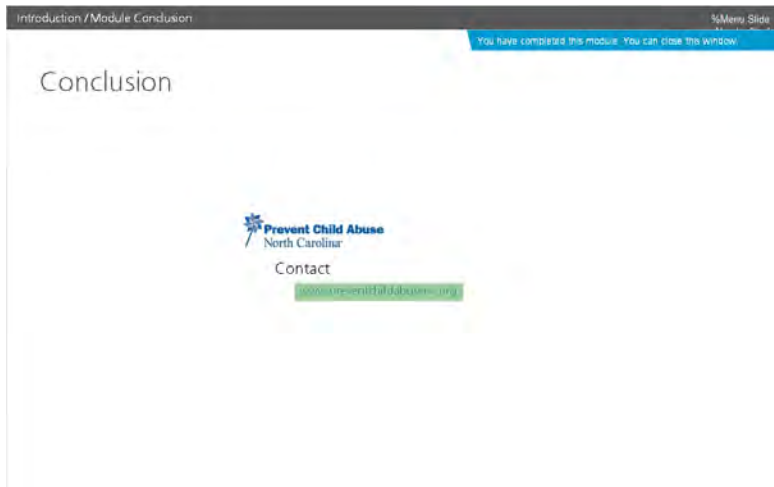
We have organized this course around 3 areas.

First, we'll look at a framework that can help you understand how child abuse happens and strategies that can lower the risk of child abuse from happening to begin with.

The Strengthening Families Protective Factors Framework will not, of course, prevent all child abuse from happening, so we will go through a series of modules that explain how to recognize the different types of child abuse and how to recognize indicators for each type.

Finally, we'll go through a series of modules that explain when, why, and how to make referrals when you see indicators of abuse and information on the rights of persons reporting child abuse and neglect when English is not their first language.

1.6 Conclusion



Notes:

As you work through this course, if you have any problems or questions, please let us know.

The next module will get you started with the Strengthening Families Protective Factors Framework.

Module 2: The Protective Factors Framework

1.1 Introduction



1.2 What is Child Maltreatment?



Notes:

Child maltreatment encompasses both child abuse and neglect. We use the definition shown here as our formal definition of child maltreatment.

Click each of the items to see definitions of child abuse and neglect.

Abuse (Slide Layer)

Introduction / What is Child Maltreatment?

Menu Slide

Click NEXT to continue

What is Child Maltreatment?

ABUSE

NEGLECT

Click each item

Abuse

North Carolina defines abuse as any non-accidental injury or pattern of injuries to a child, including the omission of acts to prevent injury to a child (any person under age 18).

Child Abuse Includes:

- physical abuse
- sexual abuse
- emotional abuse
- child endangerment
- contributing to the delinquency of a minor
 - defined as encouraging children at least 6 years old, but not yet 16, to engage in delinquent acts that involve moral corruption

Neglect (Slide Layer)

Introduction / What is Child Maltreatment?

Menu Slide

Click NEXT to continue

What is Child Maltreatment?

ABUSE

NEGLECT

Click each item

Neglect

Lack of proper care, supervision, or discipline, from the child's parent, guardian, custodian, or caretaker; or the child has been abandoned is considered neglect in North Carolina. A child is neglected if they live in an environment that is harmful to their welfare. A child is also neglected if they are not provided necessary medical care or is unlawfully placed for adoption.

1.3 What Causes Child Abuse & Neglect



Notes:

There is no single cause of child abuse and neglect-it can be a complex combination of factors involving not just the child and parent, but other sources of impact as well.

Here is a simple model that shows how society, community, families, and the individual all contribute to both risks and the well-being of families and children.

Child maltreatment is the result complex interactions between individuals and their environment that influence both development and behavior.

In this module, we will look more closely at how this connection between society, community, families, and the individual works.

2. The Five Protective Factors

2.1 An Analogy

The Five Protective Factors / An Analogy

Click **Next** to continue

An Analogy

- Seat belts are designed to be protective.
- Wearing a protective seat belt reduces your risks, but other factors can influence the outcome of your trip.

Risks

Protective Factors

Some of these factors are at the **Individual** level.

How you drive and the type of training you have received can affect the outcome.

Some factors are at the **Family** level.

A child in the back seat may be distracting, but there may be someone sitting next to you who can help calm the child.

Some factors are at the **Community** level.

Curved and uneven roads can increase your risk, while smooth, well-maintained roads can protect you.

Finally, some factors are at the **Society** level.

Traffic laws and community standards can influence the way you drive.



Notes:

The model can be used to think about both risks a family faces and what we call “Protective Factors” that can mitigate those risks.

Let’s look at an example that demonstrates how risk and protective factors work.

Seat belts are designed to be protective. Wearing a protective seatbelt reduces your risks, but other factors can influence the outcome of your drive. These factors can be at the **Individual** level, **Family** level, **Community** level, and **Society** level.

So, we see that there are many things that can increase or reduce risk for families, and many things that can increase or reduce protection.

2.2 Overview


The Five Protective Factors / Overview

Click Next to continue

Overview

Helping Families Succeed

If we can help strengthen families and help families succeed and thrive in parenting, then child abuse may not happen to begin with.




Notes:

Preventing and responding to child maltreatment is first and foremost about helping families succeed. We take an upstream approach—that is, if we can help strengthen families and help families succeed and thrive in parenting, then child abuse may not happen to begin with.

So, let's start by looking at how we can strengthen families and support parents. This begins with understanding that the families we encounter can and want to be better parents.

Research has shown that there are five protective factors that help families succeed, and that increasing these five protective factors is an effective way to help parents be successful and reduce the risk of child maltreatment occurring.

Read the description for each of the five factors, and then click on each factor to learn more about each.

Knowledge of Parenting & Child Development (Slide Layer)

The Five Protective Factors / Overview

Click Next to continue

Overview



Knowledge of Parenting & Child Development

Knowing what milestones are coming and how to effectively deal with them help prepare parents to care for their children. Knowledge of parenting and child development is like having directions to find your destination rather than hoping the signs you need will be clear and visible.

ACTs can have devastating impacts on long-term health. When a child experiences severe child maltreatment (SCM), it can result in long-term negative health outcomes, including physical, mental, and behavioral health issues.

For more information, please call 1-800-368-5878 or visit PreventChildAbuse.org

Prevent Child Abuse North Carolina

Parental Resilience (Slide Layer)

The Five Protective Factors / Overview

%Menu Slide

Click **Next** to continue

Overview

5 Protective Factors

- Social and Emotional Competence**: Children's early experiences of being nurtured and developing a positive relationship with caring adults affects all aspects of behavior and development.
- Knowledge of Parenting & Child Development**: Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations, and safe opportunities that promote independence.
- Social Connections**: Parents with a social network of emotionally supportive friends, family, and neighbors often find that it is easier for them to care for their children and themselves.
- Resilience**: Parents who can cope with the stresses of everyday life, as well as occasional crises, have resilience. They have the flexibility and inner strength necessary to bounce back when things are not going well.
- Concrete Support**: Families who can meet their own basic needs for food, clothing, housing, and transportation—and who know how to access essential services such as children's health care and mental health services to address family-specific needs—are better able to ensure the safety and well-being of their children.

Adverse events have devastating impacts on long-term health. When children experience adverse events, they are at greater risk for poor outcomes in school, mental health, and physical health. Parents who have resilience are better able to provide support and protection for their children.

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Social Connections (Slide Layer)

The Five Protective Factors / Overview
%Menu Slide
Click Next to continue

Overview

Social Connections
Parenting is much easier if you don't do it all alone. Having a support network is important for a person's social and emotional needs. Parents connected to community and friends are better able to meet children's needs.

Social and Emotional Competence
Children's early experiences of being nurtured and developing a positive relationship with caring adults affect all aspects of behavior and development.

Knowledge of Parenting & Child Development
Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations, and safe opportunities that promote independence.

Resilience
Parents who cope with the stresses of everyday life, as well as occasional crises, have resilience; they have the flexibility and inner strength necessary to handle bad times when things are not going well.

Concrete Support
Families who can meet their own basic needs for food, clothing, housing, and transportation—and who know how to access essential services such as childcare, health care, and mental health services to address family-specific needs—are better able to ensure the safety and well-being of their children.

Social Connections
Parents with a social network of emotionally supportive friends, family, and neighbors often find that it is easier to care for their children and themselves.

5 Protective Factors

ACEs can have devastating impacts on long-term health. While ACEs have long been known to affect health, the research linking experiences of childhood adversity to health outcomes is growing. ACEs are defined as physical, emotional, and behavioral abuse.

For more information
Download our free guide to the Five Protective Factors
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Social and Emotional Competence of Children (Slide Layer)

The Five Protective Factors / Overview
%Menu Slide
Click Next to continue

Overview

Social and Emotional Competence of Children
Many activities that professionals do with children promote a child's ability to interact positively with others and parents' ability to nurture that development. Giving a child language to express his or her emotions, role modeling how to respond sensitively to a child, and promoting attachment and bonding between parents and children are all ways to help prevent child maltreatment.

Social and Emotional Competence
Children's early experiences of being nurtured and developing a positive relationship with caring adults affect all aspects of behavior and development.

Knowledge of Parenting & Child Development
Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations, and safe opportunities that promote independence.

Resilience
Parents who cope with the stresses of everyday life, as well as occasional crises, have resilience; they have the flexibility and inner strength necessary to handle bad times when things are not going well.

Concrete Support
Families who can meet their own basic needs for food, clothing, housing, and transportation—and who know how to access essential services such as childcare, health care, and mental health services to address family-specific needs—are better able to ensure the safety and well-being of their children.

Social Connections
Parents with a social network of emotionally supportive friends, family, and neighbors often find that it is easier to care for their children and themselves.

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2.3 Programs & Strategies

The Five Protective Factors / Programs and Strategies that Strengthen the Five Protective Factors

Click **Next** to continue

Programs and Strategies

Factors That Reduce Risk Of Child Maltreatment

Click each item.

Programs and Strategies that...

- Facilitate friendship and mutual support
- Strengthen parenting
- Respond to family crises
- Link families to services and opportunities
- Facilitate children's social and emotional development
- Observe and respond to early warning signs of child maltreatment
- Value and support parents

Increase Protective Factors...

- Parental resilience
- Social connections
- Knowledge of parenting and child development
- Concrete support in times of need
- Social and emotional competence of children

Lead to...

- Strengthened families
- Optimal child development
- Reduced child maltreatment

Notes:

Research shows that certain programs and strategies can strengthen the Five Protective Factors. This, in turn, leads to certain major benefits.

Click each item to see the details.

2.4 Identifying Risks vs strengths

The Five Protective Factors / Identifying Risks vs Strengths

Click **Next** to continue

Identifying Risks vs Strengths



Look at the image and interact with it.

Click **Continue** after you have made your notes.

Continue

Adapted with permission from Empowerment Skills for Family Violence: A Worker Handbook by Christine Ewan, Cornell University, 1996.

Notes:

EVERY family has protective factors or strengths, even though it may be hard to see at first glance. Here are some of

this family's strengths as identified by previous participants. See how they compare with your list.


When you are ready, click the **Continue** button.

our response (Slide Layer)

The Five Protective Factors / Identifying Risks vs Strengths

5/14/2021 Slide 10
Click **Next** to continue viewing story.

Identifying Risks vs Strengths



Adapted with permission from Empowerment Skills for Family Workers: A Worker Handbook by Christine Dean, Cornell University, 1996.

Our Response

EVERY family has protective factors or strengths, even though it may be hard to see at first glance.

1. Family appears to have housing.
2. It appears that both parents live in the home and the child is excited to see his father.
3. Groceries on counter may indicate that the family has access to food.
4. Toys and books in the home could be a sign that the children have time to engage in playtime and reading.
5. Dad's uniform could indicate that he is employed or has an income.
6. Child is happy to see Dad.

While there are easily identifiable risks present for this family, the strengths or protective factors that exist can serve to mitigate the impact associated with some of the risk factors. Research has shown that a healthy bond between parent and child and the presence of adult role models are of great benefit to children.

2.5 What we Know: Importance of Relationships

The Five Protective Factors / What We Know: Importance of Relationships

5/14/2021 Slide 11
Click **Next** to continue.

What We Know: Importance of Relationships

Relationships shape the intellectual, social, emotional, physical, behavioral and moral development of children.

The caregiver's emotional availability and empathic responsiveness is an important part of a healthy environment.



Notes:

We know that families thrive when protective factors are robust in their lives and communities.

Research has shown that an environment of relationships shapes the intellectual, social, emotional, physical, behavioral, and moral development of children.

Caregivers are the active sculptors of their children's growing brains and the caregiver's emotional availability and empathic responsiveness is an important part of that environment.

2.6 Immigrant Families

The Five Protective Factors / Immigrant Families

Click **Next** to continue

Immigrant Families

Families often move in search of better opportunities. Newcomers may experience isolation – they can be away from the family support that helps them overcome obstacles and reduce stress.

Consider the Risk and Protective Factors for newcomer families and think about how you could increase protective factors for these families by:

- providing support
- helping to connect them with important resources
- providing care for their children to give them a break
- just being a friend



Notes:

Today families often move from one place to another in search of better opportunities and therefore, families are living far from each other and may not have relatives who can provide much support.



This is true of immigrants who move here from other countries.

2.7 The Role We All Play

The Five Protective Factors / The Role We All Play

Click **Next** to continue

The Role We All Play



We hope the Protective Factors Framework will help illustrate the important role we all play in supporting these families so that maltreatment is prevented from happening in the first place.

Prevent Child Abuse North Carolina

Notes:

As you move through this course, you may think of families that you have encountered in personal and professional settings. We hope the Protective Factors Framework will help illustrate the important role we all play in supporting these families so that maltreatment is prevented from happening in the first place.

3. Knowledge Check

3.1 Quick Question

(Multiple Choice, 10 points, 1 attempt permitted)

Knowledge Check / Quick Question

Menu Slide

Quick Question

Which of the following families are more likely to be affected by Child Maltreatment?

☐ families living in poverty

☐ families with a history of abuse

☐ affluent families

☒ families experiencing more risk factors

☐ families experiencing more protective factors

Correct
While a variety of factors may increase a family's risk experiencing child maltreatment, protective factors can mitigate those risks. Having more risk factors than protective factors is what makes a family more likely to experience child maltreatment.

Continue

Notes:

Which of the following families are more likely to be affected by Child Maltreatment?

4. Conclusion

4.1 Module Summary

Conclusion / Module Summary


Menu Slide

Click NEXT to continue

Module Summary

Key Points

- Child maltreatment encompasses both child abuse and neglect.
- Child maltreatment is not the result of a single cause, but of complex interactions between individuals and their environment that influence both development and behavior.
- There is abundant research to support that increasing the five Protective Factors is an effective way to help parents be successful. The Protective Factors Framework focuses on these five Protective Factors.
- Risk factors are behaviors or conditions that have been shown to increase vulnerability to a specific condition or other behaviors.
- The more protective factors and the fewer risk factors present, the less likely it is that child maltreatment will occur.
- The more risk factors and the fewer protective factors that are present, the more likely it is that child maltreatment will occur.
- A healthy bond between parent and child and the presence of adult role models are of great benefit to children.



Notes: Here are some important points we covered in this module.

4.2 Want to Learn More?

Conclusion / Want to Learn More? Menu Slide

You have completed this module. You can close this window.

Want to Learn More?

CTF Alliance Online Training Available

Seven courses are each about two hours in length:

- An introduction to the Protective Factors Framework
- A course on each of the 5 Protective Factors
- A wrap-up course that moves users from knowledge to action

To learn more visit <http://ctf.alliance.org/online-training>

For questions you can contact online.training@alliance.org

1. Introduction
2. Concrete Support in Times of Need
3. Parental Resilience
4. Knowledge of Parenting and Child Development
5. Social and Emotional Competence of Children
6. Social Connections
7. Knowledge to Action Wrap-Up

Contact PCANC for information about in-person trainings and workshops.

Notes:

Would you like to learn more about the Protective Factors Framework? There is online training available to support the implementation of the Strengthening Families Protective Factors Framework in multiple settings.

These trainings are available at no cost. To learn more, visit the CTF Alliance.

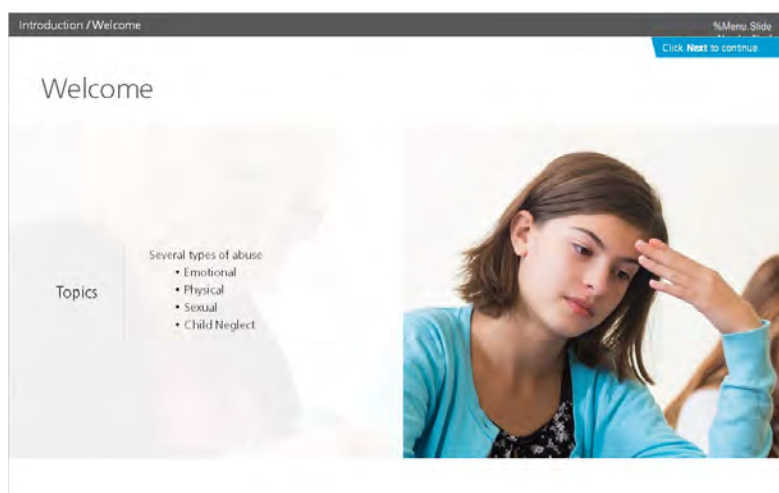
You can also contact us here at PCANC for information about in-person trainings and workshops.

Module 3: Types of Abuse

1.1 Introduction



1.2 Welcome



Notes:

In this module, we'll look at several types of abuse: Emotional, Physical, and Sexual abuse, as well as Child Neglect. We'll look at definitions, examples, and indicators, and we'll discuss case studies and special considerations.

By the end of the module you should be able to recognize each type of abuse.

1.3 About Indicators

The screenshot shows a presentation slide titled "About Indicators". At the top, there is a navigation bar with "Introduction / About Indicators" on the left and "Menu Slide" on the right. Below the title, there are four tabs: "Emotional", "Physical", "Sexual", and "Child Neglect". The "Emotional" tab is currently selected. Below the tabs, the word "Indicators" is displayed. To the right of "Indicators" is a bulleted list:

- Indicators can be signs of abuse or neglect (but are NOT definitive and should be considered red flags).
- Indicators should always be documented.
- Indicators can occur individually but will usually occur together or repeatedly.
- Indicators can be physical, emotional or behavioral.

At the bottom of the slide, a text box states: "When indicators occur together or repeatedly, this is a strong sign that child maltreatment may be present."

Notes:

A quick note before we get started...

For each of the abuse types we will be discussing, we will be referring to **indicators** of child maltreatment.

It is important to remember that indicators are considered red flags. They are not always definitive signs that maltreatment is occurring. Children exhibit a variety of behaviors based on developmental stages and abilities or exposure to environmental stressors.

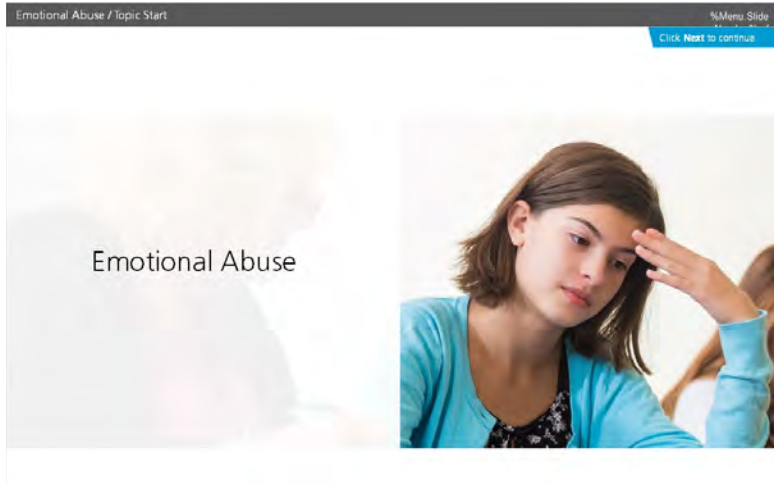
Throughout this training we will talk about the variety of factors we should consider when red flags arise.

When indicators occur together or repeatedly, this is a strong sign that child maltreatment may be present.

Indicators can be physical, emotional, or behavioral.

2. Emotional Abuse

2.1 Emotional Abuse - Start



2.2 Look at This Picture



Notes:

When you look at this picture, you can imagine what this parent could be saying to her daughter.

Maybe her daughter didn't do her homework, forgot to clean her room, came home late, or was picking on a sibling.

Parents may get frustrated with their children and sometimes may raise their voices...

But emotional abuse is very different.

2.3 Examples of Emotional Abuse

Emotional Abuse / Examples of Emotional Abuse

Examples of Emotional Abuse

Emotional abuse is constant and recurring....

- sustained and repetitive verbal assaults or coercive measures
- can be one of the most damaging forms of abuse
- can exist alone and it is a component of all other types of maltreatment

- criticizing a child for developmentally normal behavior, like a toddler wetting her pants.
- setting unrealistic expectations like expecting a child to achieve straight A's or do chores he or she is developmentally unable to do
- belittling or shaming a child, like intentionally embarrassing him publicly or calling him names
- blaming the child for things over which the child has no control, like a divorce
- consistently favoring one child over another, like giving special gifts or attention to one and not the other
- taking little or no interest in the child
- withholding love and affection
- terrorizing the child by doing things like destroying possessions or torturing or killing a pet
- isolating the child by preventing the child from forming friendships and supportive relationships

Click Next to continue

Notes:

Emotional Abuse is constant and recurring.

It's not the mom raising her voice to her daughter shown in the picture, but sustained and repetitive verbal assaults or coercive measures. Here are some examples...

Emotional abuse can be one of the most damaging forms of abuse. It can exist alone, and it is a component of all other types of maltreatment.

2.4 Indicators of Emotional Abuse

Emotional Abuse / Indicators of Emotional Abuse

Indicators of Emotional Abuse

PHYSICAL INDICATORS

CHILD'S BEHAVIOR

Physical And Behavioral Indicators Of Emotional Abuse

Click each item

Notes: There are physical and behavioral indicators of emotional abuse. Click each button to learn more about what to look for.

PHYSICAL INDICATORS (Slide Layer)

Emotional Abuse / Indicators of Emotional Abuse Menu Slide

Click **Next** to continue

Indicators of Emotional Abuse

Click each item

- PHYSICAL INDICATORS
- CHILD'S BEHAVIOR

Physical Indicators

- Bed-wetting or bed soiling that has no medical cause
- Frequent psychosomatic complaints (e.g., headaches, nausea, abdominal pains)
- Prolonged vomiting or diarrhea
- Has not attained significant developmental milestones
- Grew up differently from other children in the family
- Has deprived physical living conditions compared with other children in the family

Child's Behavior

- Suffers from severe developmental gaps
- Severe symptoms of depression, anxiety, withdrawal or aggression
- Severe symptoms of self-destructive behavior—self-harming, suicide attempts, engaging in drug or alcohol abuse
- Overly compliant; too well-mannered; too neat and clean
- Displays attention-seeking behaviors or displays extreme inhibition in play
- When at play, behavior may model or copy negative behavior and language used at home

2.5 Indicators of Emotional Abuse - Case Study

Emotional Abuse / Indicators of Emotional Abuse - Case Study Menu Slide

Indicators of Emotional Abuse Case Study



Hannah is a 14-year-old girl who loves gymnastics. Her mother Tina never misses a practice or a meet. Tina often corrects her daughter during practice, walking onto the mat to point out what she has done wrong. You overhear Tina criticizing Hannah before a regional gymnastics meet. She becomes so disruptive that it catches the attention of other parents and gymnasts. Hannah becomes frustrated and starts arguing with her mom.

Click on the Coach to learn what she does to address Tina's situation.

Notes:

Let's learn more about indicators of emotional abuse by reviewing this case study involving Hannah, her mother Tina, and her gymnastics coach.

Read the description to see what is happening with Hannah.

Then click on the Coach to learn what she does to address Tina's situation.

coach (Slide Layer)

Emotional Abuse / Indicators of Emotional Abuse - Case Study

Menu Slide

Indicators of Emotional Abuse

Case Study



Hannah is a 14-year-old girl who loves gymnastics.

Her mother Tina never misses a practice or a meet. Tina often corrects her daughter during practice, walking onto the mat to point out what she has done wrong.

You overhear Tina criticizing Hannah before a regional gymnastics meet. She becomes so disruptive that it catches the attention of other parents and gymnasts. Hannah becomes frustrated and starts arguing with her mom.

The coach asks Tina to let her talk to Hannah in an effort to diffuse the situation. Tina walks away and returns to her seat to watch the first event. When Hannah falls off the beam, her mother sighs loudly and storms out of the gym. Hannah takes a deep breath and executes the remainder of her routine wonderfully. Hannah seems pleased with how she recovered and runs to her coach smiling and gives her a hug.

Think about the situation and what you think might be the indicators. Then click the **Indicators** button.

INDICATORS

feedback (Slide Layer)

Emotional Abuse / Indicators of Emotional Abuse - Case Study

Menu Slide

Indicators of Emotional Abuse

Case Study



Hannah is a 14-year-old girl who loves gymnastics.

Her mother Tina never misses a practice or a meet. Tina often corrects her daughter during practice, walking onto the mat to point out what she has done wrong.

You overhear Tina criticizing Hannah before a regional gymnastics meet. She becomes so disruptive that it catches the attention of other parents and gymnasts. Hannah becomes frustrated and starts arguing with her mom.

Remember, emotional abuse depends not only on the caregiver's actions, but also on the child's reactions and vulnerability. Hannah is old enough and has enough self-esteem that she was able to express her frustration with her mother. We have also learned that emotional abuse is constant and recurring. Although Tina may be displaying poor parenting, it does not necessarily mean that Hannah is suffering from emotional abuse. Parents who become frustrated and yell often lack more effective parenting strategies. This could perhaps be an opportunity for you to speak to Tina about your concerns or model more effective strategies.

2.6 Topic Summary

Emotional Abuse / Topic Summary

%Menu Slide

Click **Next** to continue

Topic Summary

Key Points

- Emotional abuse can be one of the most damaging forms of abuse; it can exist alone, and it is a component of all other types of maltreatment.
- Emotional abuse is constant and recurring.
- Indicators of emotional abuse can be physical and / or behavioral.
- Emotional abuse depends not only on the perpetrator's actions, but also on the reaction and vulnerability of the child.



Notes:

Here are some important points you learned about in this topic.

3. Physical Abuse


3.1 Physical Abuse - Topic Start

Physical Abuse / Topic Start

%Menu Slide

Click **Next** to continue

Physical Abuse



Notes:

3.2 Physical Abuse - Definition

Physical Abuse / Definition

Physical Abuse

- Non-accidental, serious injury or injuries to a child.
- An actual serious physical injury by other than accidental means.
- A substantial risk of serious physical injury by other than accidental means.
- Cruel or grossly inappropriate procedures, or use of cruel or inappropriate devices to modify behavior.

Notes:

Physical abuse is defined as non-accidental serious injury or injuries to a child. It can include any serious injury or risk of serious injury to a child by other than accidental means.

3.3 Accidental vs. Suspicious Injuries

Physical Abuse / Accidental vs. Suspicious Injuries

Accidental vs. Suspicious Injuries

ACCIDENTAL 1
ACCIDENTAL 2
SUSPICIOUS
NON INDICATORS

Click each item.

Indicators to Consider

Notes:

Because children are objects in motion, injuries are inevitable.

When trying to determine if an injury is suspicious, consider the following things.

one (Slide Layer)

Physical Abuse / Accidental vs. Suspicious Injuries

1/Menu Slide

Click NEXT to continue

Accidental vs. Suspicious Injuries

ACCIDENTAL 1

ACCIDENTAL 2

SUSPICIOUS

NON INDICATORS

Click each item.

Accidental Injuries – Forward Motion

Children generally move in forward motion, resulting in injuries on the front of their bodies. For example, a child who falls is more likely to scrape the front of her hands than the back of her hands.



Accidental Injuries – Examples

- Forehead, nose and chin
- Palms and elbows
- Knees and shins

two (Slide Layer)

Physical Abuse / Accidental vs. Suspicious Injuries

1/Menu Slide

Click NEXT to continue

Accidental vs. Suspicious Injuries

ACCIDENTAL 1

ACCIDENTAL 2

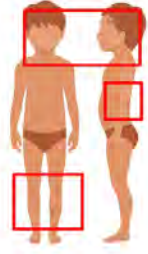
SUSPICIOUS

NON INDICATORS

Click each item.

Accidental Injuries – Bony Parts

Children who accidentally injure themselves through play or developmentally appropriate exploration tend to injure the bony parts of their bodies such as the forehead, nose, chin, palms, knees or elbows.



three (Slide Layer)

Physical Abuse / Accidental vs. Suspicious Injuries

%Menu Slide

Click NEXT to continue

Accidental vs. Suspicious Injuries

ACCIDENTAL 1

ACCIDENTAL 2

SUSPICIOUS

NON INDICATORS


Click each item.

Suspicious Injuries

Children tend to fall to one side or the other. When you see similar markings on both sides of the body there is often high probability that this injury is suspicious. An example of this would be bruises across the back of both legs.

Suspicious Injuries - Examples

- Cheeks and ears
- Upper arms
- Thighs and buttocks



four (Slide Layer)

Physical Abuse / Accidental vs. Suspicious Injuries

%Menu Slide

Click NEXT to continue

Accidental vs. Suspicious Injuries

ACCIDENTAL 1

ACCIDENTAL 2

SUSPICIOUS

NON INDICATORS

Click each item.

Non Indicators

Be aware of common childhood illnesses and birthmarks that have physical indicators. For example:

- Fifth Disease can leave a child's cheeks red, as if they've been slapped.
- Birthmarks like Mongolian spots can be mistaken for bruises.
- Allergies can sometimes cause dark smudges resembling black eyes.

3.4 Burns

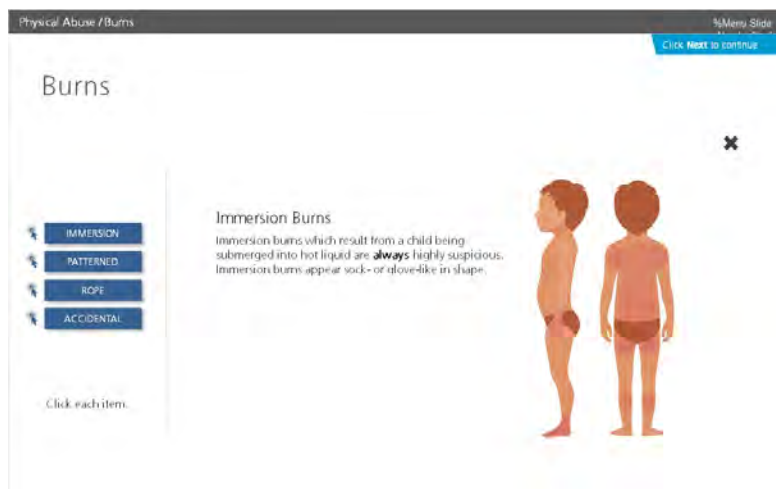


Notes:

Children have thinner, more sensitive skin than adults, and serious burns happen more quickly.

If you see burns in addition to bruises or other physical injuries, there is high reason to suspect child maltreatment.

one (Slide Layer)



two (Slide Layer)

Physical Abuse / Burns

%Menu Slide

Click NEXT to continue

Burns

IMMERSION

PATTERNED

ROPE

ACCIDENTAL

Click each item.

Patterned Burns

Patterned burns include those resulting from cigarettes, electric burner coils, irons and other heated objects.



three (Slide Layer)

Physical Abuse / Burns

%Menu Slide

Click NEXT to continue

Burns

IMMERSION

PATTERNED

ROPE

ACCIDENTAL

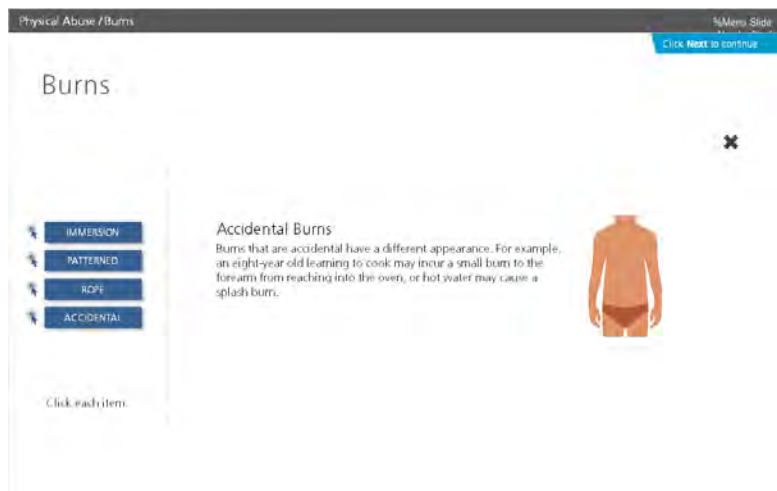
Click each item.

Rope Burns

Rope burns are high cause for suspicion.



four (Slide Layer)



3.5 Questions to Consider



Notes:

In addition to being aware of indicators-looking at risk factors and family history-there are two questions we should ask ourselves when we are considering whether a child has been physically abused.

- Does the injury match the story?
- Is the child developmentally capable of injuring herself in the manner described?

3.6 Abusive Head Trauma

Physical Abuse / Abusive Head Trauma

Abusive Head Trauma
(formerly known as Shaken Baby Syndrome)

Indicators

- Breathing difficulties
- Poor sucking or swallowing
- Lethargy (overly tired)
- Unequal pupil size
- Inability to lift the head or track movement

Effects

Long-term shaking can cause blindness, seizures, learning disabilities, physical disabilities, and death.

What To Do

If you suspect abusive head trauma, get immediate medical attention for the infant.



To learn more about abusive head trauma, visit www.dontshake.org.

Notes:

Abusive Head Trauma (formerly known as Shaken Baby Syndrome) is due to the weakness of neck muscles relative to the size of a baby's head, and it only takes a few seconds of strong shaking to cause serious damage to a child.

3.7 Behavioral / Emotional Indicators

Physical Abuse / Behavioral and Emotional Indicators


Behavioral / Emotional Indicators

Indicators to Look For

- Excessive absences from school or childcare
- Fear of parents or other adults
- Extreme aggressiveness
- Cognitive and intellectual impairment
- Deficits in speech and language
- Hyperactivity, impulsivity, and low frustration tolerance
- Depression, low self-esteem, and suicidal tendencies
- Constant tiredness and inability to stay awake
- Being easily agitated or defensive

Ecological Model

- There are multiple risk and protective factors that contribute to the likelihood of physical abuse.
- Children are 15 times more likely to be physically abused in homes where domestic violence is occurring.



Notes:

Physical abuse can also result in behavioral or emotional indicators. Here are some indicators to look for:

It is important to consider the ecological model; there are multiple risk and protective factors that contribute to the likelihood of physical abuse. For example, research indicates that children are 15 times more likely to be physically abused in homes where domestic violence is occurring.

3.8 Quick Question

(Multiple Choice, 10 points, 1 attempt permitted)

Physical Abuse / Quick Question

% Menu Slide

Quick Question



Your neighbor down the street asks you to watch her 10-year old son while she goes to the grocery store. While helping him climb a tree in the yard, you notice he has many bruises on his belly and back. You notice that these bruises are of various sizes, shapes and colors. This is only your second time watching her son.

Is this injury likely accidental or suspicious?

☐ accidental

☒ suspicious

Correct

Bruises of various shapes indicate that the injuries may have been caused by a variety of objects. The differences in color may indicate that the injuries may have been inflicted over time. Remember when we discussed how children are forward moving objects. The injuries are also located on the softer parts of his body and his back. The correct answer is, these injuries are suspicious.

Continue

Notes: Here's a quick question for you.

3.9 Topic Summary

Physical Abuse / Topic Summary


% Menu Slide

Click NEXT to continue

Topic Summary

Key Points

- Physical abuse is defined as non-accidental, serious injury or injuries to a child.
- When trying to determine if an injury is suspicious there are many things to consider.
- If you see burns in addition to bruises or other physical injuries, there is high reason to suspect child maltreatment.
- The indicators of Abusive Head Trauma may include breathing difficulties, poor sucking or swallowing, lethargy, unequal pupil size, inability to lift the head or track movement.
- Long-term shaking can cause blindness, seizures, learning disabilities, physical disabilities, and death.
- Physical abuse can also result in behavioral or emotional indicators.



Notes: Here are some important points you learned about in this topic.


4. Sexual Abuse

4.1 Sexual Abuse - Topic Start

Sexual Abuse / Topic Start

Click Next to continue

Sexual Abuse



4.2 Sexual Abuse - Definition and Key Points

Sexual Abuse / Definition and Key Points

Click Next to continue

Sexual Abuse

Definition and Key Points

Sexual Abuse

- In North Carolina, children under the age of sixteen are not considered able to consent to a sexual act.
- Sexual abuse is a criminal offense punishable by law.
- CPS is required to make a report to law enforcement.
- North Carolina General Statutes include detailed definitions of sex crimes. See Resources for details.

SAFE Child Act 2019

TOUCHING OFFENSES

include, but are not limited to:

- Anal or vaginal penetration
- Fondling
- Oral-genital contact

SEXUAL ABUSE

consists of non-touching offenses and also the following (including but not limited to):

- Masturbating in front of a child
- Preparation or distribution of obscene pictures or video of a child
- Promotion of prostitution of a child
- Exhibitionism or voyeurism
- Inappropriate discussion about sexual acts intended to arouse the perpetrator
- Obscene telephone calls or email and Internet contacts

Notes:

Sexual abuse includes both physical acts and non-physical or non-touching acts.

It is important to note that in North Carolina, children under the age of 16 are not considered able to consent to a sexual act.

Sexual abuse is a criminal offense punishable by law. When a report is made to CPS about allegations of sexual abuse, the department is required to make a report to law enforcement.

North Carolina General Statutes include detailed definitions of sex crimes; this information is available in the Resources list accessible using the Resources button at the top of the lesson window.

SAFE Child (Slide Layer)

SAFE Child Act 2019

The SAFE Child Act

The **Sexual Assault Fast reporting and Enforcement Act**, signed into law in 2019, **expands and strengthens** protections for children from abuse in our communities and online and modernizes sexual assault laws in North Carolina.

It is important to know that as of 2019, the SAFE Child Act mandates that all reporters of child maltreatment make a referral both to Child Protective Services AND to Law Enforcement*, regardless of their relationship to the child.

*Reports to both CPS and Law Enforcement should be directed to those county offices where the child resides.

[LEARN MORE](#)

4.3 Facts About Sexual Abuse

Sexual Abuse / Facts About Sexual Abuse

Click HERE to continue

Facts About Sexual Abuse

Additional Research



- 1 in 4 girls and 1 in 6 boys will be sexually abused by their 18th birthday.
- 90% of children are sexually abused by a family member or someone they know.
- 40-60% of all child molestations are perpetrated by someone under the age of 18. It is important to note that sexual abuse reports involving two minors may be handled as neglect.
- One-third of sexual abuse victims are under the age of five.
- Less than two percent of sexual abuse allegations are false.
- About 3% of all sex offenders are prosecuted.
- No study indicates that public notification lowers repeat offenses.

Notes:

As additional research becomes available, it sheds light on child sexual abuse.

4.4 Strategies

Sexual Abuse / Strategies %Menu Slide

Click **Next** to continue

Strategies



DISCLOSURE

- Awareness of Strangers
- Good Touch / Bad Touch

PREVENTION

Stewards of Children Darkness to Light
<https://www.d2l.org/education/stewards-of-children/>

Stop it Now
<https://www.stopitnow.org/>

Notes:

Awareness of strangers and good touch/bad touch is important information for kids and can be helpful during the disclosure process. These programs, however, do not actually prevent children from being sexually abused. Unfortunately, there is very little research about effective strategies for preventing child sexual abuse.

Two prevention programs that are being implemented throughout the state of North Carolina are *Stewards of Children Darkness to Light* and *Stop it Now*.

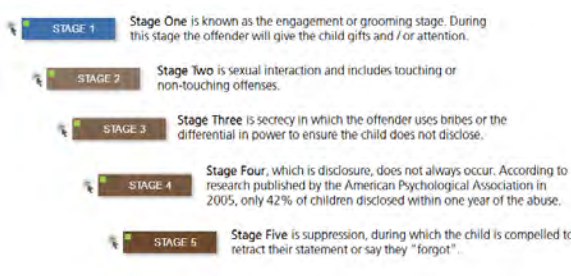
4.5 Stages of Sexual Abuse

Sexual Abuse / Stages of Sexual Abuse %Menu Slide

Click **Next** to continue when done

Stages of Sexual Abuse

Click each item.



STAGE 1 Stage One is known as the engagement or grooming stage. During this stage the offender will give the child gifts and / or attention.

STAGE 2 Stage Two is sexual interaction and includes touching or non-touching offenses.

STAGE 3 Stage Three is secrecy in which the offender uses bribes or the differential in power to ensure the child does not disclose.

STAGE 4 Stage Four, which is disclosure, does not always occur. According to research published by the American Psychological Association in 2005, only 42% of children disclosed within one year of the abuse.

STAGE 5 Stage Five is suppression, during which the child is compelled to retract their statement or say they "forgot".

Notes:


Sexual abuse often happens in stages. Click to learn more about each stage.

4.6 Internet Exploitation

Sexual Abuse / Internet Exploitation

Internet Exploitation

According to research...



- 34% of children in the United States report unwanted exposure to online pornography.
- 70% of youth between the ages of 15 and 17 report that they have accidentally come across pornography online.
- 14% of adolescents report agreeing to meet an online stranger in person.
- Forwarding of pornography via text messages, also known as "sexting" is another growing concern.
- 22% of teenage girls and 18% of teenage boys report sending semi-nude or nude photographs.

Visit these sites to learn more about how to keep children safe while on the Internet:

North Carolina Department of Justice
<https://ncdoj.gov/internet-safety/protect-kids-on-the-internet/>

NetSmartz
<http://www.missingkids.org/netsmartz/home>

Enough is Enough
<http://www.enough.org>

Click Next to continue

Notes:

With society's continued reliance on technology, more children are exposed to sexual solicitation and sexually explicit pictures online. Here are some key findings of research on Internet exploitation.

4.7 Child Pornography Laws

Sexual Abuse / Child Pornography Laws

Child Pornography Laws

Definition	Child pornography is defined as "any visual depiction" of a minor "engaging in sexually explicit conduct."
Punishment	Those caught possessing or receiving child pornography may be sentenced to up to five years in prison, while those convicted of distributing child pornography, which includes the sending of sexually explicit text messages, may face up to 15 years in federal prison.
Obscenity and Sexting	Obscenity is any material depicting sexual conduct in a patently offensive way. In some circumstances, sexting could also constitute first degree sexual exploitation of a minor under general statute. This is a Class D felony, punishable by up to 12 years in prison.

Click Next to continue

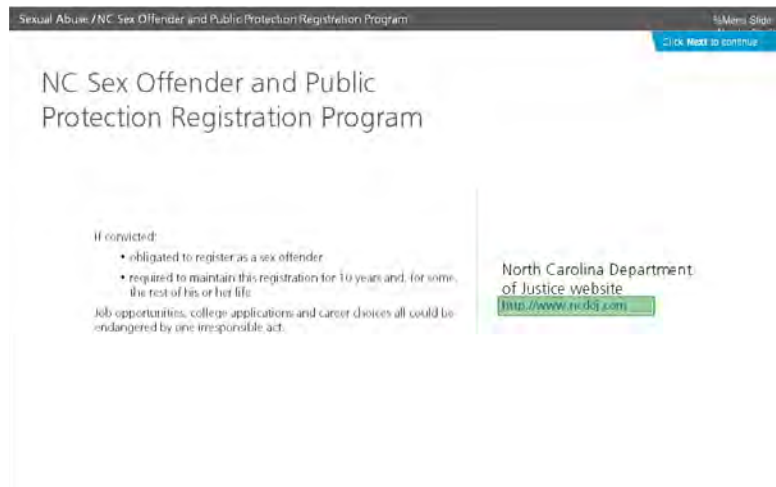
Notes:

Child pornography is defined as "any visual depiction" of a minor "engaging in sexually explicit conduct."

Those caught possessing or receiving child pornography may be sentenced to up to 5 years in prison, while those convicted of distributing child pornography, which includes the sending of sexually explicit text messages, may face up to 15 years in federal prison.

In North Carolina, it is illegal to intentionally disseminate obscenity, which is defined as any material depicting sexual conduct in a patently offensive way. In some circumstances, sexting could also constitute first degree sexual exploitation of a minor under general statute. This is a Class D felony, punishable by up to 12 years in prison.

4.8 NC Sex Offender and Public Protection Registration Program



Notes:

Under North Carolina's Sex Offender and Public Protection Registration Program, anyone convicted of sexual exploitation of a minor is obligated to register as a sex offender. Depending on the nature of the crime, someone found guilty of a sexting-related crime could be required to maintain this registration for 10 years,

..and for some, the rest of his or her life. Job opportunities, college applications and career choices all could be endangered by one irresponsible act.

To learn more about how to keep children safe while on the Internet, visit the North Carolina Department of Justice website at www.ncdoj.com <<http://www.ncdoj.com/>>.

4.9 Sex Trafficking

Sexual Abuse / Sex Trafficking

15 Minutes Slide

Click **next** to continue when done.

Sex Trafficking

- Human trafficking includes labor and **sex trafficking**
- Sex trafficking can be a form of child maltreatment.

SOCIAL
ECOLOGICAL MODEL

VULNERABLE
POPULATIONS

STUDIES

Trafficking Victims Protection Act of 2000

Sex Trafficking - Definition

The recruitment, harboring, transportation, provision, or obtaining of a person for the purposes of a commercial sex act, in which the commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such an act has not attained 18 years of age.

- Minors engaged in commercial sex are considered to be trafficked even when no force, fraud, or coercion is involved.
- Some children or youth may be exploited and induced into commercial sex by a third party.
- Some may trade sex for basic needs in order to survive.
- Some may be victims of child sexual abuse who are trafficked by their abusers.

Click each item.

Notes:

Human trafficking includes labor and sex trafficking. Sex trafficking can be a form of child maltreatment. For the purposes of this training we will discuss child sex trafficking.

In the United States, the Trafficking Victims Protection Act of 2000 defines sex trafficking as shown here.

Note that minors engaged in commercial sex are considered to be trafficked, even when no force, fraud, or coercion is involved.

Some children or youth may be exploited and induced into commercial sex by a third party. Some may trade sex for basic needs in order to survive. Some may be victims of child sexual abuse who are trafficked by their abusers.

Click each item for more insights about sex trafficking.

(Slide Layer)

Sexual Abuse / Sex Trafficking
Menu Slide
Click **Next** to continue when done.

Sex Trafficking

- Human trafficking includes labor and **sex trafficking**.
- Sex trafficking can be a form of child maltreatment.

SOCIAL ECOLOGICAL MODEL

VULNERABLE POPULATIONS

STUDIES

Social Ecological Model

Remember the social ecological model? There are risk factors for trafficking at every level of the social ecological model, including norms about commercial sex work, lack of community resources for homeless and runaway youth, domestic violence, and a history of trauma. There is no single profile of a trafficking victim, however.

Vulnerable Populations

Vulnerable populations may include homeless and runaway youth, a significant proportion of whom identify as lesbian, gay, bisexual, or transgender; individuals with language or legal barriers such as immigration status; or those with a history of trauma or abuse.

Studies

Studies estimate that a large percentage of runaways who don't return home are trafficked or forced to trade sex in exchange for basic needs. In addition, Shared Hope International has found that 65% of minors arrested for prostitution have a prior history of sexual abuse.

4.10 Sex Trafficking Prevalence

Sexual Abuse / Sex Trafficking Prevalence

1/Menu Slide

Click Next to continue when done.

Sex Trafficking Prevalence

The Problem

- There is extremely limited data on trafficking.
- The majority of documented trafficking crimes were uncovered during the course of another investigation.
- We can assume the numbers of children and youth being trafficked are far larger than statistics indicate.

WHAT WE DO KNOW

What We Do Know

- United States estimates of the number of trafficked persons have ranged from 1,400 to 2.4 million; none of these estimates have a strong scientific foundation.
- In 2005 over 1,400 youth involved in sex trafficking within the United States came to the attention of law enforcement.
- In 2014, 41 trafficking cases involving minors in North Carolina were reported to the National Human Trafficking Resource Center hotline.

For more information on organizing and responding to human trafficking in NC, go to: <https://www.projectnorest.org/>

Notes:

There is limited data available to help us understand the prevalence of child sex trafficking. In 2013 the majority of trafficking crimes that were documented, were uncovered during the course of another investigation. Because only a small percentage of sex crimes or sexual abuse cases come to the attention of any system, we can assume the numbers of children and youth being trafficked are far larger than statistics indicate.

Click the **WHAT DO WE KNOW** button to learn more.

4.11 Quick Question


(Multiple Choice, 10 points, 1 attempt permitted)

Sexual Abuse / Quick Question

1/Menu Slide

Quick Question

Which of the following would be considered a form of sexual abuse?



- ☐ a 13-year-old female sends your boyfriend Jim a text containing a provocative picture wearing her panties and a bra
- ☐ a 14-year-old freshman has begun having a sexual relationship with an 18-year-old senior at his school
- ☐ having obscene and sexually provocative conversation with a child
- ☐ a 17-year-old runaway has begun trading sex for money with the help of her boyfriend
- ☒ all of the above
- ☐ none of the above

Correct
Sexing, statutory rape, obscene phone calls and sex trafficking are all considered sexual abuse. All of the above would be considered child sexual abuse.

Continue

4.12 Topic Summary

Sexual Abuse / Topic Summary

%Menu Slide

Click **Next** to continue

Topic Summary

Key Points

- Sexual abuse includes both physical acts and non-physical or non-touching acts.
- It is important to note that in North Carolina, children under the age of 16 are not considered able to consent to a sexual act.
- North Carolina General Statutes include detailed definitions of sex crimes.
- Sexual abuse often happens in stages.
- With society's continued reliance on technology, more children are exposed to sexual solicitation and sexually explicit pictures online.
- Child pornography is defined as "any visual depiction" of a minor "engaging in sexually explicit conduct."
- Under the North Carolina's Sex Offender and Public Protection Registration Program, anyone convicted of sexual exploitation of a minor is obligated to register as a sex offender.
- Minors engaged in commercial sex are considered to be trafficked even when no force, fraud, or coercion is involved.
- Because only a small percentage of sex crimes or sexual abuse cases come to the attention of any system, we can assume the numbers of children and youth being trafficked are far larger than statistics indicate.



Notes:

Here are some important points you learned about in this topic.

5. Child Neglect


5.1 Child Neglect - Topic Start

Child Neglect / Topic Start

%Menu Slide

Click **Next** to continue

Child Neglect



5.2 Definition and Key Points

Child Neglect / Definition and Key Points

1/Menu Slide

Click Next to continue

Child Neglect

Definition and Key Points

NEGLECT

SOCIAL ECOLOGICAL MODEL

Click each item.

Definition

A failure to provide for the child's basic needs:

- physical
- medical
- educational
- emotional

Neglect means that, despite available resources, a child's needs are not met.


Neglect

- Neglect is the most basic and frequently charged form of child maltreatment.
- 50% of all child fatalities resulting from child maltreatment are due to neglect.
- While North Carolina physical abuse statutes are narrowly defined, the neglect statute is very broad. In North Carolina, the majority of substantiations made by CTPs are for neglect.

Ecological Model

Take a moment to reconsider the Ecological Model discussed earlier. Parents live in complex environments and there are a variety of stressors that impact their ability to meet the most basic needs of their children.

Some of the things that can impact a parent's ability to meet a child's basic needs are lack of resources, parenting skills, support, knowledge, judgment or dealing with substance abuse or mental health disorders.



Notes:

Child Neglect is a failure to provide for the child's basic needs. It can be physical, medical, educational, or emotional. "Neglect" means that, despite available resources, a child's needs are not met.

Click each item to learn more about neglect and the Ecological Model.

5.3 Types of Neglect

Child Neglect / Types of Neglect

1/Menu Slide

Click Next to continue when done.

Types of Neglect

as defined by North Carolina General Statute 7B-101

LACK OF PROPER CARE

INJURIOUS ENVIRONMENT

INAPPROPRIATE DISCIPLINE

LACK OF MEDICAL OR REMEDIAL CARE

ILLEGAL PLACEMENT OF A CHILD

ABANDONMENT

Click each item.

Lack Of Proper Care

Failure to provide adequate shelter, nutrition, or appropriate clothing:

- home with no panes in the windows or holes in the floors
- child comes to school in summer clothes in winter weather
- little to no food in the home; no space to sleep or eat
- unsanitary home conditions

Leaving children home unsupervised:

- leaving child under age 8 alone
- leaving child in care of a sibling not prepared for the responsibility

Failure to meet the child's educational needs:

- not enrolling a child in school, homeschooling, or arranging for therapeutic childcare
- chronic truancy
- providing drugs or alcohol to a child

Notes:

North Carolina General Statute 7B-101 identifies the following as neglectful.

Click each item to learn more.

(Slide Layer)

Child Neglect / Types of Neglect

Menu Slide

Click Next to continue when done.

Types of Neglect

as defined by North Carolina General Statute 7B-101

LACK OF PROPER CARE

INJURIOUS ENVIRONMENT

INAPPROPRIATE DISCIPLINE

LACK OF MEDICAL OR REMEDIAL CARE

ILLEGAL PLACEMENT OF A CHILD

ABANDONMENT

Click each item.

Injurious Environment

- harm and risk of harm to a child
- child does not need to sustain injury to be substantiated for neglect
- exposure to drugs, violence, domestic violence, and insecure living conditions
- unstable living arrangements - parent's inability to maintain secure living arrangement
- physical condition of housing - disrepair or unsanitary home conditions
- living with a sex offender in the home

Important

While poverty can create several risk factors that may put children at increased risk of neglect (because a family is experiencing poverty), it does not mean they are neglectful. A child living in a small apartment may have more adequate shelter than a child who lives in a more spacious home that is unsanitary. Note that child neglect is more often unnoticed in affluent homes and tends to be easily overlooked.

(Slide Layer)

Child Neglect / Types of Neglect

Menu Slide

Click Next to continue when done.

Types of Neglect

as defined by North Carolina General Statute 7B-101

LACK OF PROPER CARE

INJURIOUS ENVIRONMENT

INAPPROPRIATE DISCIPLINE

LACK OF MEDICAL OR REMEDIAL CARE

ILLEGAL PLACEMENT OF A CHILD

ABANDONMENT

Click each item.

Inappropriate Discipline

- corporal punishment that leaves bruises or other marks lasting longer than 24 hours
- In North Carolina, corporal punishment is not against the law, but is currently prohibited by all 115 school districts in the state (NC HB 295).
 - standing in one place for a long period
 - requiring the child to eat non-food items
 - inappropriate amounts of food or water

(Slide Layer)

Child Neglect / Types of Neglect

Menu Slide

Click Next to continue when done.

Types of Neglect

as defined by North Carolina General Statute 7B-101

LACK OF PROPER CARE

INJURIOUS ENVIRONMENT

INAPPROPRIATE DISCIPLINE

LACK OF MEDICAL OR REMEDIAL CARE

ILLEGAL PLACEMENT OF A CHILD

ABANDONMENT

Click each item.

Lack of Medical or Remedial Care

Includes Medical, dental and /or mental health care / treatment:

- refusing to seek medical care
- refusing to attend to their children's special health care needs
- may include subjecting child to inappropriate treatment

Important

It is important to note that North Carolina does not make exceptions for parents' religious beliefs. These situations are heard on a case-by-case basis.

(Slide Layer)

Child Neglect / Types of Neglect

Menu Slide

Click Next to continue when done.

Types of Neglect

as defined by North Carolina General Statute 7B-101

LACK OF PROPER CARE

INJURIOUS ENVIRONMENT

INAPPROPRIATE DISCIPLINE

LACK OF MEDICAL OR REMEDIAL CARE

ILLEGAL PLACEMENT OF A CHILD

ABANDONMENT

Click each item.

Illegal Placement Of A Child

- placing a child in foster care or put up for adoption by an unlicensed individual or agency
- paying for or accepting money (or anything of value) for the adoption of a child
- unlawful sale, surrender, or purchase of a child

(Slide Layer)

Child Neglect / Types of Neglect %Menu Slide

Click Next to continue when done.

Types of Neglect

as defined by North Carolina General Statute 7B-101

- JACK OF PROPER CARE
- INJURIOUS ENVIRONMENT
- INAPPROPRIATE DISCIPLINE
- LACK OF MEDICAL OR REMEDIAL CARE
- ILLEGAL PLACEMENT OF A CHILD
- ABANDONMENT

Click each item.

Abandonment

- parents' willful refusal to care for and support a child
- leaving a child for increasing periods of time
- child left in temporary care of non-parent, and parent never returns
- child not left under Safe Surrender

Important


North Carolina's Safe Surrender Law states that a parent can surrender an infant with no information given, other than the intent not to return.

5.4 Quick Question

(Multiple Choice, 10 points, 1 attempt permitted)

Child Neglect / Quick Question %Menu Slide

Quick Question



After being out of work for three months, Robert, a former factory worker, takes a job at a store working the 11 PM - 7 AM shift. Robert's job doesn't pay much; the family is still in need of money. His wife begins to look for work, but the only job she could find requires her to leave home at 3 AM. The children, ages two and six, are alone for a few hours until Robert got home.

Is this neglect?

☒ Neglect is likely

☐ Neglect is NOT likely

Correct

We know that most children who are neglected come from families that really could use more support. Robert and his wife clearly want to be able to provide for their family. Despite their well-meaning intentions, the children ages two and six fall below the minimum age requirement of eight outlined in the NC fire code. It is likely that neglect is present, and the family could benefit from additional support.

Continue

Notes:

Let's look at a couple of scenarios and see if we can identify if neglect is present.

Here is the first scenario.

5.5 Quick Question

(Multiple Choice, 10 points, 1 attempt permitted)

Child Neglect / Quick Question

%Menu Slide

Quick Question



Janet, a 13-year-old girl who attends your class is always complaining that she is "hungry" and never brings lunch. Upon questioning, she states that her mother "works all the time" and "doesn't make her breakfast or lunch."

Is this neglect?

☐ Neglect is likely
☒ Neglect is NOT likely

Correct

Janet's mother's long hours at work may make it difficult for her to prepare Janet's breakfast and lunch. It is also possible that Janet's mother believes that she is eating breakfast and lunch at school. It is likely that this is not neglect, however, it could present an opportunity to speak to Janet's mother and connect her with support and resources that can help her.

Continue

Notes:

Here is the second scenario. Read the scenario and identify if neglect is present.

5.6 Topic Summary

Child Neglect / Topic Summary


%Menu Slide

Click NEXT to continue

Topic Summary

Key Points

- Child Neglect is a failure to provide for the child's basic needs. It can be physical, medical, educational or emotional.
- North Carolina identifies the following as neglectful:
 - Lack of proper care
 - Injurious environment
 - Inappropriate discipline
 - Lack of medical or remedial care
 - Illegal placement of a child
 - Abandonment



Notes:

Here are some important points you learned about in this topic.

6. Conclusion

6.1 Module Summary

Conclusion / Module Summary

You have completed this module. You can close this window.

Module Summary

Key Points

- Indicators of abuse are red flags. They are not always definitive signs that maltreatment is occurring. When indicators occur together or repeatedly, this is a strong sign that child maltreatment may be present.
- Indicators of abuse can be physical, emotional or behavioral.
- Emotional abuse is sustained and repetitive verbal assaults or coercive measures.
- Physical abuse is any non-accidental serious injury or injuries to a child.
- Sexual abuse includes both physical acts and non-physical or non-touching acts perpetrated on a child. When a report is made to CPS about allegations of sexual abuse, the department is required to make a report to law enforcement.
- Neglect is a failure to provide for a child's basic needs despite available resources. It can be physical, medical, educational or emotional.



Notes:

Here are some important points we covered in this module.

Module 4: Disclosures, Referrals, Reporting

1.1 Introduction



1.2 Welcome



Notes:

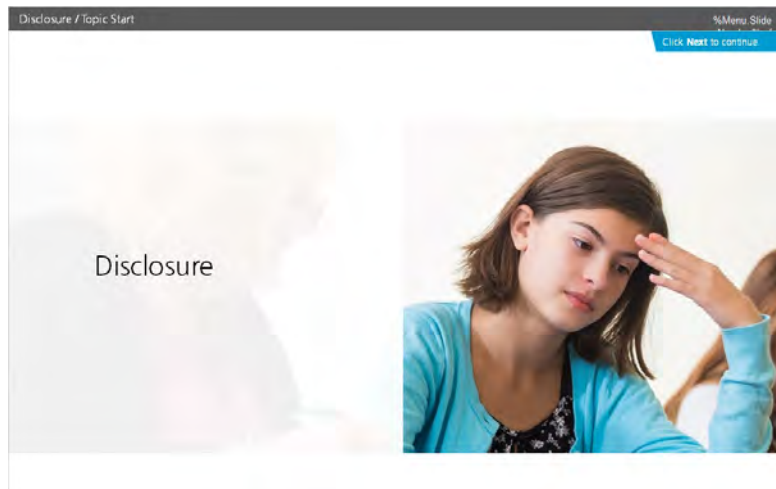
In this module, we'll look at several topics, including:

- Disclosures and how to respond to them
- General information about how the reporting and referral system works
- And who should report suspected abuse and neglect and why
- The legal rights and resources available to Spanish-speaking communities and immigrants

By the end of the module, you should have a general understanding of the Whats and Whys of reporting. Another module will cover details of How to report.

2. Disclosure

2.1 Disclosure - Start



2.2 Disclosure of Child Maltreatment

Notes:

If you work with children for an extended period of time, there is a possibility that a child may disclose maltreatment to you. Sometimes it is relatively clear, but more often children will test the water or disclose indirectly.

There are different types of disclosure. Click each item for examples.

2.3 How to Respond to a Disclosure

Disclosure / How to Respond to a Disclosure

Menu Slide

Click RIGHT to continue

How to Respond to a Disclosure

- PROMISES
- EXPLANATION
- CALM
- NOTES
- BELIEVE
- BOUNDARIES
- SAFEGUARD
- LANGUAGE
- REFRAIN
- REPORT

What should you do when a child discloses maltreatment?

Click each item.

Notes:

What should you do when a child discloses maltreatment?

Click each item to find out.

one (Slide Layer)

Disclosure / How to Respond to a Disclosure

Menu Slide

Click RIGHT to continue

How to Respond to a Disclosure

- PROMISES
- EXPLANATION
- CALM
- NOTES
- BELIEVE
- BOUNDARIES
- SAFEGUARD
- LANGUAGE
- REFRAIN
- REPORT

Don't Make Promises

Don't make promises you cannot keep, such as this will never happen again, I won't tell anyone, or we are getting you out of that house.

Click each item.

two (Slide Layer)

Disclosure / How to Respond to a Disclosure

%Menu Slide

Click NEXT to continue

How to Respond to a Disclosure

PROMISES

EXPLANATION

CALM

NOTES

BELIEVE

BOUNDARIES

SAFEGUARD

LANGUAGE

REFRAIN

REPORT

Include an Age-appropriate Explanation

Include an age-appropriate explanation of what will happen next. For example, you may want to tell the child you will have to share what she told you with your supervisor or another adult so that you can get her help.

Click each item.

three (Slide Layer)

Disclosure / How to Respond to a Disclosure

%Menu Slide

Click NEXT to continue

How to Respond to a Disclosure

PROMISES

EXPLANATION

CALM

NOTES

BELIEVE

BOUNDARIES

SAFEGUARD

LANGUAGE

REFRAIN

REPORT

Stay Calm

Stay calm. If you overreact the child may shut down or become fearful; listen carefully to what the child is saying and be aware of your reaction.

Click each item.

four (Slide Layer)

Disclosure / How to Respond to a Disclosure Menu Slide

[Click HERE to continue](#)

How to Respond to a Disclosure

- PROMISES
- EXPLANATION
- CALM
- NOTES**
- BELIEVE
- BOUNDARIES
- SAFEGUARD
- LANGUAGE
- REFRAIN
- REPORT

Click each item.

Compile Notes

Compile notes using the child's words.



5 (Slide Layer)

Disclosure / How to Respond to a Disclosure Menu Slide

[Click HERE to continue](#)

How to Respond to a Disclosure

- PROMISES
- EXPLANATION
- CALM
- NOTES
- BELIEVE**
- BOUNDARIES
- SAFEGUARD
- LANGUAGE
- REFRAIN
- REPORT

Click each item.

Believe the Child

Let the child know you believe him and that it is not his fault. The child has chosen to disclose to you because he trusts you and believes that you are a person who can help him.



6 (Slide Layer)

Disclosure / How to Respond to a Disclosure

Menu Slide

Click NEXT to continue

How to Respond to a Disclosure

PROMISES

EXPLANATION

CALM

NOTES

BELIEVE

BOUNDARIES

SAFEGUARD

LANGUAGE

REFRAIN

REPORT

Observe Boundaries

Observe boundaries. Secure a safe, semi-private place to talk, and don't touch the child without permission.

Click each item.

7 (Slide Layer)

Disclosure / How to Respond to a Disclosure

Menu Slide

Click NEXT to continue

How to Respond to a Disclosure

PROMISES

EXPLANATION

CALM

NOTES

BELIEVE

BOUNDARIES

SAFEGUARD

LANGUAGE

REFRAIN

REPORT

Safeguard Potential Criminal Investigation

Safeguard a potential criminal investigation by not asking investigative questions or putting words into the child's mouth. Each time a child is questioned her story will inevitably change, and when it does, this may compromise future investigations, especially in cases of severe physical abuse or sexual abuse. In these cases, a child advocacy center will conduct a forensic interview and record the interview, so the child won't have to repeat the story and relive the trauma.

Click each item.

8 (Slide Layer)

Disclosure / How to Respond to a Disclosure

%Menu Slide

Click NEXT to continue

How to Respond to a Disclosure

PROMISES

EXPLANATION

CALM

NOTES

BELIEVE

BOUNDARIES

SAFEGUARD

LANGUAGE

REFRAIN

REPORT

Use the Child's Language

Use the child's language. Avoid words he might not understand or might find embarrassing; ask him to clarify any words you don't understand.

Click each item.

9 (Slide Layer)

Disclosure / How to Respond to a Disclosure

%Menu Slide

Click NEXT to continue

How to Respond to a Disclosure

PROMISES

EXPLANATION

CALM

NOTES

BELIEVE

BOUNDARIES

SAFEGUARD

LANGUAGE

REFRAIN

REPORT

Refrain from Judgment and Blame

Refrain from judgment and blame. When a family member is involved, the child will have an allegiance and loyalty to the family member or may seek to justify their behavior. Blaming the parent or caretaker will only cause the child to feel worse.

Click each item.

10 (Slide Layer)

Disclosure / How to Respond to a Disclosure

How to Respond to a Disclosure

Ensure A Report Is Made

Ensure that a report is made. Your organization may have specific organizational policies identifying a liaison or agency reporter. As a mandated reporter you are still required to ensure that the report is made.

PROMISES
EXPLANATION
CALM
NOTES
BELIEVE
BOUNDARIES
SAFEGUARD
LANGUAGE
REFRAIN
REPORT

Click each item.


2.4 Quick Question

(Multiple Choice, 10 points, 1 attempt permitted)

Disclosure / Quick Question

Quick Question

If a child discloses maltreatment, you should:



- ☐ Ask plenty of questions so you can gather as much information as possible.
- ☐ Tell the child that they are safe, and you will make sure that they are not hurt again.
- ☒ Listen carefully, and let the child do the talking.
- ☐ Call Prevent Child Abuse North Carolina to find out what to do next.
- ☐ all of the above
- ☐ none of the above

Correct

If a child discloses it is important that you listen; let the child do the talking to avoid compromising any possible investigation with DSS or the Police.

Continue

Notes:

We just covered a large list of things to do if a child discloses maltreatment.

Let's do a quick check to see what you remember.

2.5 Topic Summary

Disclosure / Topic Summary

%Menu Slide

Click **Next** to continue

Topic Summary

Key Points

- There are different types of disclosure: indirect, disguised, and with strings.
- There are many things you should do when a child discloses, including believing the child and using the child's own language as you take notes.
- Ensure that a report is made. Your organization may have specific organizational policies identifying a liaison or agency reporter.
- Remember that everyone is a mandated reporter in NC. As a mandated reporter, you are still required to ensure that the report is made.



Notes:

Here are some important points you learned about in this topic.

3. Legal Rights and Resources


3.1 Legal Rights and Resources - Topic Start

Legal Rights and Resources / Topic Start

%Menu Slide

Click **Next** to continue

Legal Rights and Resources



3.2 Immigration Status

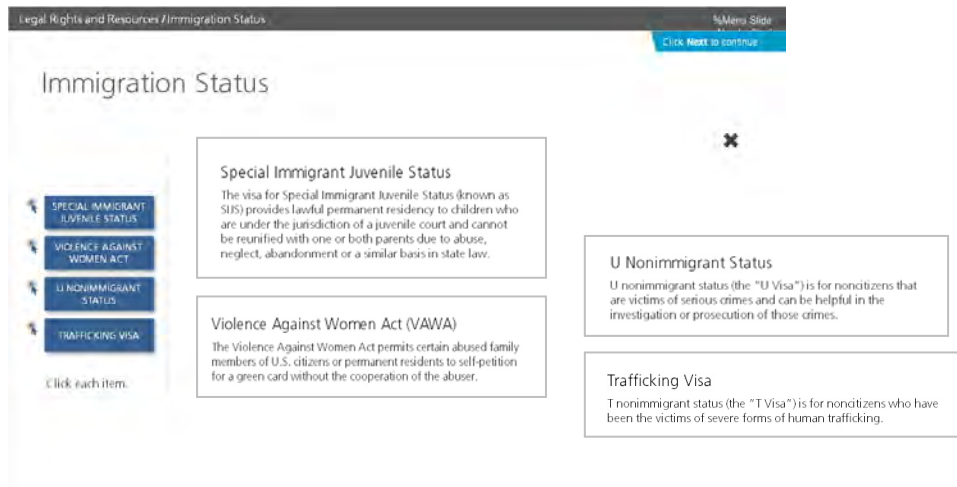


Notes:

US Citizen and Immigration Services, known as USCIS, offer special visas and protections for some undocumented individuals.

Click each item to learn more.

(Slide Layers)



3.3 Immigration Resources

Legal Rights and Resources / Immigration Resources

Menu Slide

Click HERE to continue

Immigration Resources

Resources

- For more detailed information about the different types of visas, go to US Citizen and Immigration Services at <https://www.uscis.gov/government/eligibility-categories>
- If you have questions or concerns about legal rights related to immigration status and the various remedies, contact the **North Carolina Justice Center and Community Center** at 919-856-2579 or go to <http://www.ncjustice.org>
- The **Legal Aid of North Carolina's Battered Immigrant Project** provides legal services to battered immigrants across the state of North Carolina, such as legal assistance with domestic violence protective orders, family law issues, public benefits and immigration issues. Go to <http://www.legalaidnc.org/bipa>

Notes:

There are resources available if you have questions or concerns about Immigration Status.

3.4 Services Provided by DSS

Legal Rights and Resources / Services Provided by DSS

Menu Slide

Click HERE to continue

Services Provided by DSS

Services

All families are entitled to:

- All services in Spanish (or other languages) through a bilingual staff member or through a qualified interpreter.
- Language services in Spanish (or other languages) through a bilingual staff member or a qualified interpreter. The services of an interpreter should be free, prompt, and available at all points of contact between the family and DSS.
- Provide all vital written forms and documents to clients in Spanish.

If you, or someone you know, are not given services in your own language you may complain to your social worker, supervisor and / or file a Title VI complaint. Find the form online at: <https://files.nc.gov/ncdhs/NC-DSS/civil-rights-complaint-form-7013.pdf>

Notes:

Families should have full access to services when they encounter the Department of Social Services because of a report of child maltreatment, regardless of language.

3.5 Implications for Undocumented Families

The slide is titled "Implications for Undocumented Families". At the top, there is a header bar with "Legal Rights and Resources / Burns" on the left and "Menu Slide" on the right. Below the header, there is a blue button that says "Click NEXT to continue". The main content area has two blue buttons: "I AM UNDOCUMENTED AND I MAKE A REPORT TO DSS" and "I REPORT A FAMILY TO DSS FOR SUSPICION OF CHILD MALTREATMENT". To the right of these buttons is the text "Click each item:". Below the buttons, there is a list of bullet points:

- DSS is not interested in the legal status of a reporter or of a family when a referral for suspicion of child maltreatment is made.
- You will not be deported because you made a report to DSS, and families will not be deported solely because they are reported to DSS for suspected child maltreatment.

Notes:

DSS is not interested in the legal status of a reporter or of a family when a referral for suspicion of child maltreatment is made.

You will not be deported because you made a report to DSS, and families will not be deported solely because they are reported to DSS for suspected child maltreatment.

Click each scenario to learn more.

one (Slide Layer)

This slide is identical to the one above, but it includes a close button (an 'X' icon) in the top right corner of the content area. The header bar and the main content area are the same as in the previous slide.

two (Slide Layer)

Legal Rights and Resources / Burns

Menu Slide

Click Next to continue

Implications for Undocumented Families

I AM UNDOCUMENTED AND I MAKE A REPORT TO DSS

I REPORT A FAMILY TO DSS FOR SUSPICION OF CHILD MALTREATMENT

Click each item

- There is no policy that links the reporting of a family for abuse or neglect to DSS with deportation.
- However, one circumstance that could result in deportation is a criminal conviction of child abuse or other crimes. The criminal justice system can and often is linked to immigration enforcement in a way that child protective services is not; however, families might be involved in both systems.
- It is also important to know that there are federal laws that allow people that are being victimized to apply for relief.

3.6 Topic Summary

Legal Rights and Resources / Topic Summary

Menu Slide

Click Next to continue

Topic Summary

Key Points

- Federal and state laws exist to make sure that all children receive equal attention from DSS when there are concerns that they are being abused and neglected.
- US Citizenship and Immigration Services offer special visas and protections for some undocumented individuals.
- Families should have full access to services when they encounter the Department of Social Services because of a report of child maltreatment, regardless of the language they speak.
- You will not be deported solely because you made a report to DSS.
- Families will not be deported solely because they are reported to DSS for suspected child maltreatment.

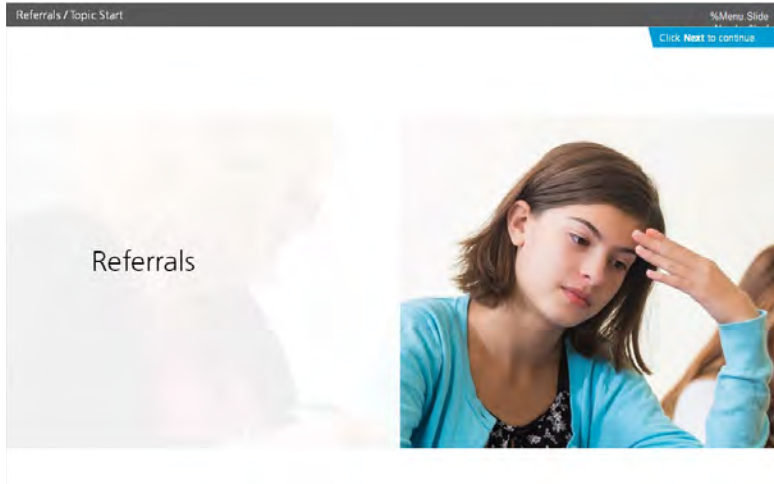


Notes:

Here are some important points you learned about in this topic.

4. Referrals

4.1 Referrals - Topic Start



4.2 Reporting and Referring

Reporting and Referring Overview

SAFE Child Act 2019

- Reporting is the legal and standard term used for making a referral to DSS.
- DSS has undergone extensive reforms to improve the way they work with families.
- When you think of making a report to DSS, think of it as assisting the family in obtaining resources which they would not otherwise be able to access.
- Because change is a process and not necessarily a tool one, we will often use the terms referral and report interchangeably as we make this shift or transition.

Click the box to learn more about reporting and the SAFE Child Act

The SAFE Child Act

The Sexual Assault Fast reporting and Enforcement Act, signed into law in 2019, expands and strengthens protections for children from abuse in our communities and online and modernizes sexual assault laws in North Carolina.

It is important to know that as of 2019, the SAFE Child Act mandates that all reporters of child maltreatment make a referral both to Child Protective Services AND to Law Enforcement*, regardless of their relationship to the child.

*Reports to both CPS and Law Enforcement should be directed to those county offices where the child resides.

[LEARN MORE](#)

Notes:

Reporting or referring a family is done through the Department of Social Services, or DSS. Let's learn a little more about the department, its role, and the general process of what happens when a report is made.

4.3 Child Protective Services (CPS)

Referrals / Child Protective Services (CPS) Menu Slide
[Click HERE to continue](#)

Child Protective Services (CPS)

Ensure the safety of the child and provide services that can help preserve, strengthen, and support families in time of need.

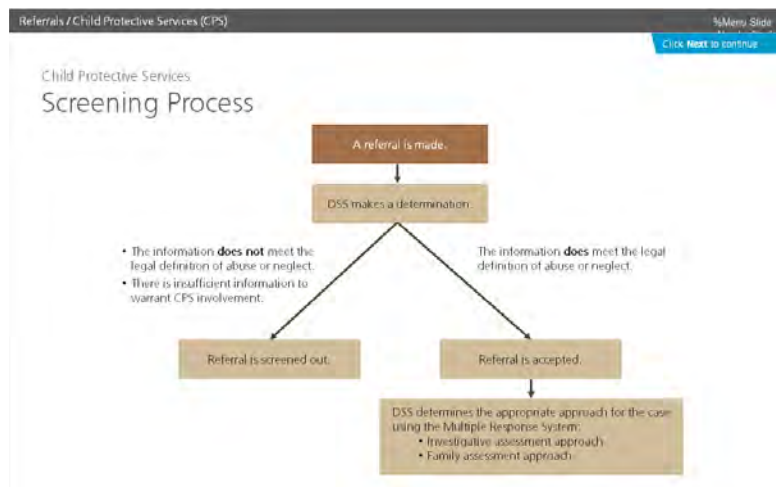
Child Protective Services

- The role of CPS is to screen, assess and/or investigate child abuse & neglect referrals within the family.
- Each county Department of Social Services (DSS) has a CPS Department.
- DSS now uses the Multiple Response System (MRS): Family-Centered Approach.

Notes:

The unit within the Department of Social Services which handles reports of child maltreatment within a family is Child Protective Services. The purpose of CPS is to ensure the safety of the child and provide services that can help preserve, strengthen, and support families in time of need.

4.4 CPS - Screening Process



Notes:

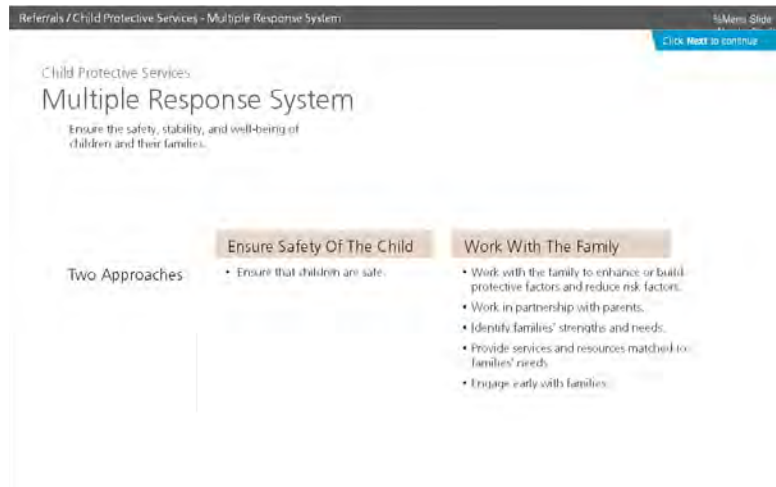
When CPS is contacted, a determination is made about the referral.

If the information does not rise to the legal definition of abuse or neglect-or there is insufficient information to warrant a CPS investigation-the report will be screened out.

If the case is accepted, CPS will use one component of the Multiple Response System to determine whether the Investigative Assessment or Family Assessment is the most effective way to screen the family for services.

CPS will consider a variety of factors, including the type of maltreatment, to assist them in making this decision.

4.5 CPS - Multiple Response System



Notes:

The goal of the Multiple Response System is to ensure the safety, stability, and well-being of children and their families.

These two approaches:

- Ensure that the children are safe
- Work in partnership with parents
- Provide services and resources matched to families' needs
- And allow for early engagement with families

The Multiple Response System first addresses the safety of the child, then works with the family to enhance or build protective factors and reduce risk factors.

4.6 Family Centered Principles of Partnership

Referrals / Family Centered Principles of Partnership Menu Slide

[Click Next to continue](#)

Family Centered Principles of Partnership

Six Family Centered Principles of Partnership

1. Everyone deserves respect.
2. Everyone needs to be heard.
3. Everyone has strengths.
4. Judgments can wait.
5. Partners share power.
6. Partnership is a process.

Respect the families by:

- Listening to what they have to say,
- Focusing on their strengths,
- Refraining from making hasty judgments,
- Sharing power with families as partners, and
- Remaining engaged with them in the process of partnership.

Notes:

The Multiple Response Systems focuses on the six Family Centered Principles of Partnership and respects the families they work with by...

- Listening to what they have to say,
- Focusing on their strengths,
- Refraining from making hasty judgments,
- Sharing power with families as partners, and
- Remaining engaged with them in the process of partnership.

4.7 A Mother's Story

Referrals / How DSS and Families Work Together Menu Slide

[Click Next to continue when done](#)

VIDEO: How DSS and Families Work Together

A North Carolina Mother Shares Her Story



00:00 / 05:28

For CLOSED CAPTIONS, click the  symbol below.

Notes:

In this video, a North Carolina mother shares her story.

4.8 Topic Summary

Referrals / Topic Summary

% Menu Slide

Click Next to continue

Topic Summary

Key Points

- Reporting is the legal and standard term used for making a referral to DSS.
- The purpose of CPS is to ensure the safety of the child and provide services that can help preserve, strengthen, and support families in time of need.
- When CPS is contacted, a determination is made about the referral; CPS will consider a variety of factors including the type of maltreatment to assist them in deciding about referral.
- The Multiple Response System first addresses the safety of the child, then works with the family to enhance or build protective factors and reduce risk factors.
- The Multiple Response Systems focuses on the six Family Centered Principles of Partnership.



Notes:

Here are some important points you learned about in this topic.

5. Who and Why


5.1 Who & Why - Topic Start

Who & Why / Topic Start

Menu Slide

Click **Next** to continue

Who & Why



5.2 North Carolina Law

Who & Why / North Carolina Law

Menu Slide

Click **Next** to continue

North Carolina Law

North Carolina law defines who should REPORT suspected abuse or neglect as:

Any person or institution that has cause to suspect that a child is being abused or neglected is required by law to report it.

Everyone is a mandatory reporter in North Carolina, and everyone is protected by law.

Keep in Mind

- If you make the report in good faith, you will receive immunity from possible civil or criminal liability that may result from your report.
- This means there is a legal obligation to report. This legal obligation supersedes organizational policies.
- It is the liaison's duty to convey the report, not screen whether a report needs to be made.
- The individual who is the source of the report is still responsible for ensuring the report is made.
- The individual who is the source of the report is free to personally communicate with DSS.
- You cannot lose your job for making a report.

SAFE Child Act 2019

Mandatory reporters are **forced** to report to both DSS and Law Enforcement. Click the box to learn more.

The SAFE Child Act

The Sexual Assault Fast reporting and Enforcement Act, signed into law in 2019, **expands and strengthens** protections for children from abuse in our communities and online and modernizes sexual assault laws in North Carolina.

It is important to know that as of 2019, the SAFE Child Act mandates that all reporters of child maltreatment make a referral both to Child Protective Services **AND** to Law Enforcement*, regardless of their relationship to the child.

*Reports to both CPS and Law Enforcement should be directed to those county offices where the child resides.

[LEARN MORE](#)

Notes:

North Carolina defines who should REPORT suspected abuse or neglect as: Any person or institution that has cause to suspect that a child is being abused or neglected is required by law to report it. This means that **"Everyone is a mandatory reporter in North Carolina, and everyone is protected by law"** from liability if they make a report in good faith.

It is acceptable to have organizational policies that include a designated liaison, for example a supervisor, administrator, social worker, nurse, or other designee who is responsible for making reports for your organization.

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5.3 Why Should I Make a Referral?

The screenshot shows a presentation slide with a dark header bar containing the text 'Who & Why / Why Should I Make a Referral?' on the left and 'Menu Slide' on the right. Below the header, there is a blue button labeled 'Click RIGHT to continue'. The main content area has a light blue background with the title 'Why Should I Make a Referral?' in a large, bold font. Below the title, there are two sections: 'Basic Reasons' and 'Additional Reasons'. 'Basic Reasons' lists three bullet points: 'Professional responsibility', 'Moral obligation', and 'For the safety of the child and other children in the home'. 'Additional Reasons' lists three bullet points: 'Referring a family to DSS can prevent ongoing maltreatment to the child or other children in the home', 'Making a referral can put the family in touch with resources, information or tools to help with the challenges of raising children', and 'Making a referral may save a child's life'. At the bottom of the slide, there is a red text box that says 'It's the right thing to do, because Child Maltreatment has serious and long-lasting consequences.'

Notes:

Some basic reasons for making a referral are:

- Professional responsibility
- Moral obligation
- For the safety of the child and other children in the home

In addition to those reasons, referring a family to DSS can prevent ongoing maltreatment to the child or other children in the home.

Making a referral can put the family in touch with resources, information or tools to help with the challenges of raising children.

Lastly, making a referral may save a child's life. It's the right thing to do, because Child Maltreatment has serious and long-lasting consequences.

5.4 Voices From the Field

Who & Why / Voices From the Field Menu Slide

Click **Next** to continue.

VIDEO: Voices From the Field



00:00 / 02:28

For CLOSED CAPTIONS, click the  symbol below.



Notes:

5.5 Impact Over the Lifespan

Who & Why / Impact Over the Lifespan Menu Slide

Click **Next** to continue when done.

Impact Over the Lifespan



- WHAT ARE ACEs?
- OUTCOMES
- LASTING IMPACTS

Click each item.

Adverse Childhood Experiences (ACE Study)

The ACE Study was conducted in the late 1990s by the Centers for Disease Control and Prevention at a Kaiser Permanente site in San Diego, California.

This study reveals that child maltreatment is not simply a child welfare issue but rather a public health issue.

Source: Centers for Disease Control and Prevention

See **Resources** for more detail about the ACEs study and downloadable materials.

<https://www.cdc.gov/evidence-prevention/child-abuse-and-neglect/acesstudy>

[Click here for PDF: The Truth About ACEs](#)

Notes:

The Adverse Childhood Experiences, or ACE Study, was conducted in the late 1990s by the Centers for Disease Control and Prevention at a Kaiser Permanente site in San Diego, California.

This study reveals that child maltreatment is not simply a child welfare issue but rather a public health issue.

Click each item to learn more.

one (Slide Layer)

Who & Why / Impact Over the Lifespan

9/10 Menu Slide

Click **Next** to continue when done.

Impact Over the Lifespan



WHAT ARE ACES?

OUTCOMES

LASTING IMPACTS

Click each item.

What are ACES?

Adverse Childhood Experiences, or ACEs, are potentially traumatic events that occur in childhood such as experiencing violence or abuse, witnessing violence in the home, and having a family member attempt or die by suicide.

They can also include aspects of the child's environment that can undermine their sense of safety, stability, and bonding such as growing up in a household with substance abuse, mental health problems, or instability due to parental separation or incarceration of a parent, sibling, or other member of the household.

two (Slide Layer)

Who & Why / Impact Over the Lifespan

9/10 Menu Slide

Click **Next** to continue when done.

Impact Over the Lifespan



WHAT ARE ACES?

OUTCOMES

LASTING IMPACTS

Click each item.

Outcomes

Adverse Childhood Experiences have been linked to

- risky health behaviors
- chronic health conditions
- low life potential
- early death

As the number of ACEs increases, so does the risk for these outcomes.

three (Slide Layer)

Who & Why / Impact Over the Lifespan Menu Slide

Click **Next** to continue when done.

Impact Over the Lifespan

WHAT ARE ACEs?
OUTCOMES
LASTING IMPACTS

Click each item.

Lasting Impacts

The presence of ACEs does not mean that a child will experience poor outcomes. However, children's positive experiences or protective factors can prevent children from experiencing adversity and can protect against many of the negative health and life outcomes even after adversity has occurred.

5.6 Impact on Brain Development

Who & Why / Impact on Brain Development Menu Slide

Click **Next** to continue when done.

Impact on Brain Development

VIDEO: Experiences Build Brain Architecture

Impact Of Maltreatment On A Child'S Brain Development

ENGLISH
SPANISH

Click the appropriate button to view the video in the language of your choice.

Your video will open in a separate tab.

Source: Center on the Developing Child at Harvard University
<https://developingchild.harvard.edu>

Notes:

Let's take a look at the impact of maltreatment on a child's brain development.

5.7 Impact on Attachment

Who & Why / Impact on Attachment

Menu Slide

Click RIGHT to continue

Impact on Attachment

- Child maltreatment can lead to attachment disorders.
- Children experiencing attachment disorders may be difficult to manage in a group setting.
- Children with attachment disorder are at greater risk of the issues shown here.

Impact

- Having low self-esteem
- Being needy, clingy or pseudo-independent
- Decompensating when faced with stress and adversity
- Showing lack of self-control
- Inability to develop and maintain friendships
- Becoming alienated from and oppositional with parents, caregivers, and other authority figures
- Displaying antisocial attitudes and behaviors
- Showing aggression or violence
- Having difficulty with genuine trust, intimacy and affection
- Having a negative, hopeless or pessimistic view of self, family and society
- Showing lack of empathy, compassion and remorse
- Having behavioral and academic problems at school

Source: <https://www.evergreenpsychotherapycenter.com/attachment-therapy/traits-disrupted-attachment/>

Notes:

Over time, child maltreatment can lead to attachment disorders. Children experiencing attachment disorders may be difficult to manage in a group setting.

According to Evergreen Psychotherapy Center Attachment and Treatment and Training Institute, children with attachment disorder are at greater risk of the issues shown here.

5.8 Topic Summary

Who & Why / Topic Summary


Menu Slide

Click RIGHT to continue

Topic Summary

Key Points

- Everyone is a mandatory reporter in North Carolina, and everyone is protected by law from liability if they make a report in good faith.
- Making a referral can put the family in touch with resources, information or tools to help with the challenges of raising children.
- The effects of Child Abuse and Neglect have serious implications, not just during the childhood years, but over the entire lifespan.
- The impacts of child maltreatment can come at great cost to our society, and research continues to show that it is difficult to undo the damage of child maltreatment.
- Over time child maltreatment can lead to attachment disorders; children experiencing attachment disorders may be difficult to manage in a group setting.
- The ACE Study reveals that child maltreatment is not simply a child welfare issue but rather a public health issue.



Notes:

Here are some important points you learned about in this topic.

6. Conclusion

6.1 Module Summary

Conclusion / Module Summary

You have completed this module. You can close this window.

Menu Slide

Module Summary

Key Points

- When a child discloses abuse, sometimes it's clear and direct, but more often children will test the water or disclose indirectly.
- Above all, you should believe the child and let them tell you what happened in their own words. Observe physical boundaries and don't make promises you cannot keep.
- Make notes in the child's language, and make sure a report is made to CPS.
- The purpose of CPS is to ensure the safety of the child and provide services that can help preserve, strengthen, and support families in time of need.
- Regardless of immigration status, federal and state laws exist to make sure that all children receive equal attention from DSS, and that services are provided in multiple languages.
- The Multiple-Response System first addresses the safety of the child, then works with the family to enhance or build protective factors and reduce risk factors.
- Ensure that a report is made. Your organization may have specific organizational policies identifying a liaison or agency reporter.
- Everyone is a mandatory reporter in North Carolina, and everyone is protected by law from liability if they make a report in good faith.
- The research on ACEs shows us that effects of Child Abuse and Neglect have serious implications, not just during the childhood years, but over the entire lifespan.



Notes:

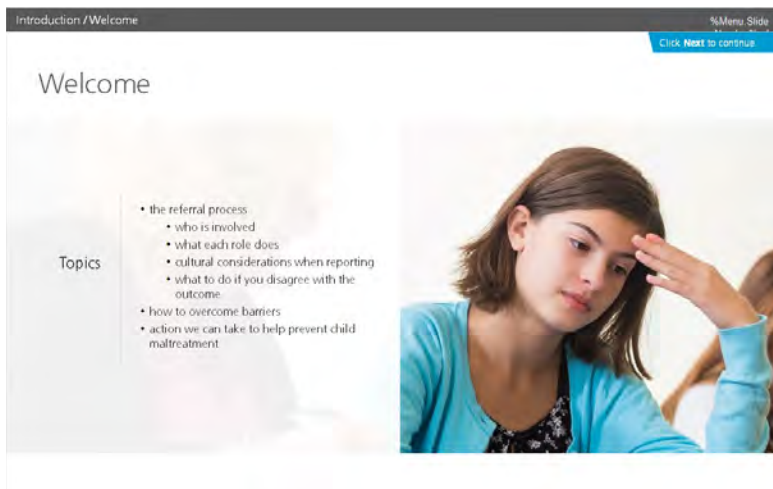
Here are some important points we covered in this module.

Module 5: Taking Action

1.1 Introduction



1.2 Welcome



Notes:

In this module, we will look at actions you can take as an adult who cares about the well-being of children and families.

First, we'll look at the referral process—who is involved and what each role does during the process, cultural considerations when reporting, and what to do if you disagree with the outcome.

Then we'll look at how to overcome barriers that may prevent you or others from referring families to DSS.

Finally, we'll look at action we can take to help prevent child maltreatment in the first place.


2. The Referral Process

2.1 The Referral Process - Start

The Referral Process / Topic Start

Click **Next** to continue

The Referral Process



2.2 Overview

The Referral Process / Overview

Click **Next** to continue

Overview

To Make a Referral	<ul style="list-style-type: none">• only need reasonable suspicion of abuse or neglect• do not need proof
Responsibility	CPS bears the responsibility to determine if maltreatment occurred.
Process	<div><div>STAGE 1</div>Before Making the Referral</div> <div><div>STAGE 2</div>Making the Referral</div> <div><div>STAGE 3</div>After Making the Referral</div>

SAFE Child Act 2019

Mandatory reporters are now required to make a report to both DSS and Law Enforcement. Click the box to learn more.

The SAFE Child Act

The Sexual Assault Fast reporting and Enforcement Act, signed into law in 2019, **expands and strengthens** protections for children from abuse in our communities and online and modernizes sexual assault laws in North Carolina.

It is important to know that as of 2019, the SAFE Child Act mandates that all **reporters of child maltreatment make a referral both to Child Protective Services AND to Law Enforcement***, regardless of their relationship to the child.

*Reports to both CPS and Law Enforcement should be directed to those county offices where the child resides.

[LEARN MORE](#)

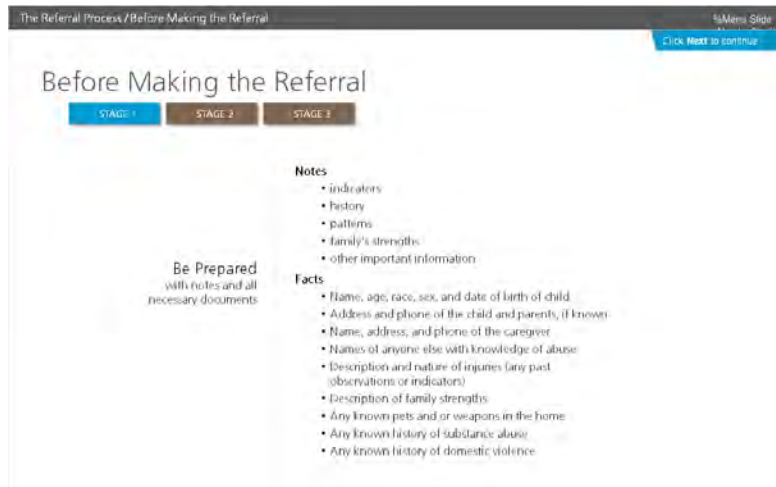
Notes:

All you need to make a referral is reasonable suspicion of abuse or neglect. You do not need proof. CPS bears the responsibility to determine if maltreatment occurred.

We'll look at the process in 3 stages--Before Making the Referral, Making the Referral, and After Making the Referral.

We will look at what each role is doing at each stage.

2.3 Before Making the Referral

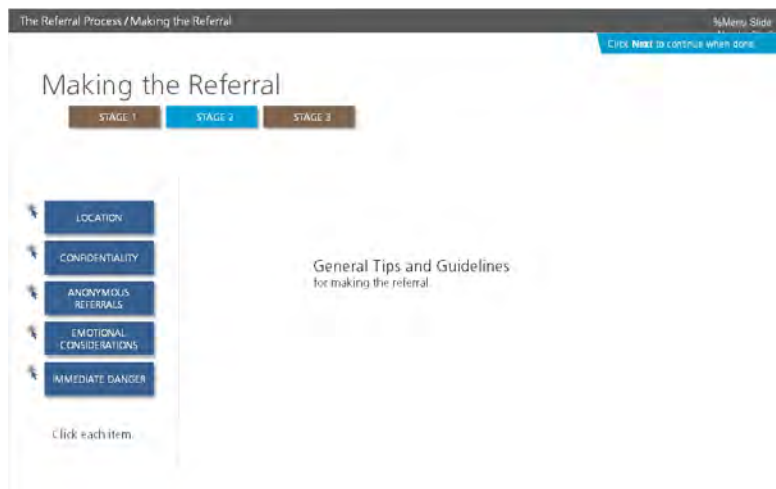


Notes:

When you are ready to make a referral, be sure to have your notes and all necessary documents, such as indicators, history, patterns, family's strengths, and other important information in front of you. Be certain that you are in a quiet room without distractions and that you have the following information written down.

Keep in mind that you do not have to know the answer to all these questions to make a referral. This Checklist is designed as a guide to assist in preparing for the questions that the intake worker will ask when you call.

2.4 Making the Referral



Notes: Here are some general tips and guidelines for making the referral. Read through each one and then click Continue when you are done.

one (Slide Layer)

The Referral Process / Making the Referral

Click Next to continue when done.

Making the Referral

STAGE 1 STAGE 2 STAGE 3

LOCATION

CONFIDENTIALITY

ANONYMOUS REFERRALS

EMOTIONAL CONSIDERATIONS

IMMEDIATE DANGER

Click each item.

Location

It is preferred that the report is made where the child lives or is found. However, we realize that this is not always possible. If you are not sure where the child lives, you can make a report to any DSS, and they should route your report to the appropriate CPS unit who can complete the assessment.

two (Slide Layer)

The Referral Process / Making the Referral

Click Next to continue when done.

Making the Referral

STAGE 1 STAGE 2 STAGE 3

LOCATION

CONFIDENTIALITY

ANONYMOUS REFERRALS

EMOTIONAL CONSIDERATIONS

IMMEDIATE DANGER

Click each item.

Confidentiality

You can make a report anonymously, however DSS will not be able to provide you with any information about the case or notify you of the outcome. The Child Protective Services (CPS) worker also may need to contact you for clarification or more information.

If you decide to provide your information, DSS is required to keep it confidential. In rare instances, a judge might request the information during a court case.

three (Slide Layer)

The Referral Process / Making the Referral

Click Next to continue when done.

Making the Referral

STAGE 1 STAGE 2 STAGE 3

LOCATION
CONFIDENTIALITY
ANONYMOUS REFERRALS
EMOTIONAL CONSIDERATIONS
IMMEDIATE DANGER

Click each item.

Anonymous Referrals

The Child Protective Services (CPS) worker may need to contact you for clarification or more information.

If you make the report anonymously, DSS will not be able to provide you with any information about the case or notify you of the outcome.

four (Slide Layer)

The Referral Process / Making the Referral

Click Next to continue when done.

Making the Referral

STAGE 1 STAGE 2 STAGE 3

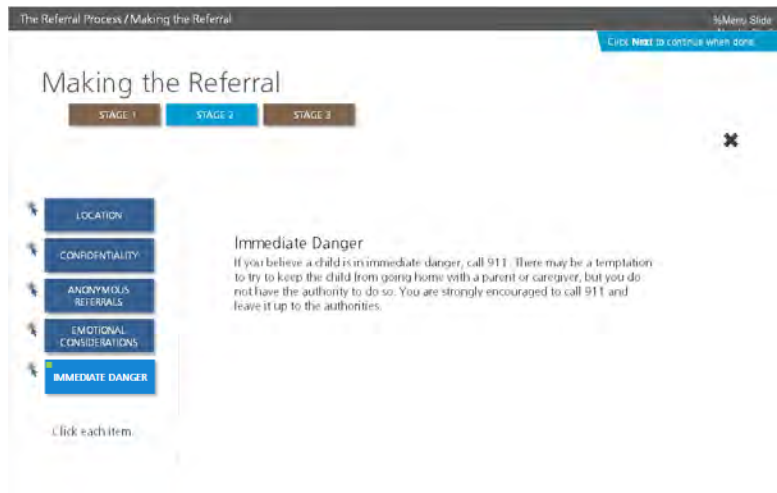
LOCATION
CONFIDENTIALITY
ANONYMOUS REFERRALS
EMOTIONAL CONSIDERATIONS
IMMEDIATE DANGER

Click each item.

Emotional Considerations

Various emotions may be associated with making the referral. Whether you find it difficult to make the referral, or you feel a sense of resolve or anger, it is important to assess your emotions and process them with someone you trust without sharing any confidential information.

five (Slide Layer)



2.5 Notifying the Family



Notes:

Notifying parents is something that may be covered in your agency's organizational policies. If your organization has a policy about discussing referrals with families, it may relieve you of making that decision. This decision is not always black and white and can be difficult to make.

Here are a set of factors to consider when determining if you should notify the family.

Click each item.

one (Slide Layer)

The Referral Process / Notifying the Family

Menu Slide

Click Next to continue when done.

Notifying the Family

STAGE 1STAGE 2STAGE 3

HONESTY & TRANSPARENCY

IMMEDIATE DANGER

HISTORY

DOMESTIC VIOLENCE

IF YOU DECIDE TO NOTIFY

IF YOU DECIDE NOT TO NOTIFY

Click each item.

Honesty & Transparency

It is best to air on the side of honesty and transparency with parents. By being honest, you avoid anger and hurt feelings later. It also takes some of the stigma out of reporting to DSS for the family.
Remember, these families may likely be screened through the Family Assessment Approach and may need you to advocate on their behalf. If you are asked to participate in child and family team meetings. However, in cases of physical or sexual abuse, where an Investigative Assessment and /or a criminal investigation might be initiated, you should notify CPS and allow them to contact the family. Notifying the family may hinder a potential investigation.

two (Slide Layer)

The Referral Process / Notifying the Family

Menu Slide

Click Next to continue when done.

Notifying the Family

STAGE 1STAGE 2STAGE 3

HONESTY & TRANSPARENCY

IMMEDIATE DANGER

HISTORY

DOMESTIC VIOLENCE

IF YOU DECIDE TO NOTIFY

IF YOU DECIDE NOT TO NOTIFY

Click each item.

Immediate Danger

If the child is in immediate danger, refrain from notifying the family. Contact DSS to notify them of your concerns, in addition to calling law enforcement or 911 to tell them you feel the child is in immediate danger.

three (Slide Layer)

The Referral Process / Notifying the Family

Menu Slide

Click **Next** to continue when done.

Notifying the Family

STAGE 1STAGE 2STAGE 3

HONESTY & TRANSPARENCY

IMMEDIATE DANGER

HISTORY

DOMESTIC VIOLENCE

IF YOU DECIDE TO NOTIFY

IF YOU DECIDE NOT TO NOTIFY

Click each item.

History of Violent or Aggressive Behavior

Exercise extreme caution if the family has demonstrated a history of violent or aggressive behavior, or you believe notifying the family would be detrimental to your personal safety. Referring a family to DSS when domestic violence is present can be dangerous to the non-offending parent and any children in the home.

four (Slide Layer)

The Referral Process / Notifying the Family

Menu Slide

Click **Next** to continue when done.

Notifying the Family

STAGE 1STAGE 2STAGE 3

HONESTY & TRANSPARENCY

IMMEDIATE DANGER

HISTORY

DOMESTIC VIOLENCE

IF YOU DECIDE TO NOTIFY

IF YOU DECIDE NOT TO NOTIFY

Click each item.

Domestic Violence

When domestic violence is present the perpetrator will feel a loss of power and, as a result, may become hostile and demand that the non-offending parent or children prevent DSS from intervening or recant any disclosure. If you are considering referring a family to DSS, and you suspect domestic violence is present, you should carefully assess the situation.

When appropriate, talk to the non-offending parent, and inform them of your obligation as a mandated reporter. Encourage them to contact DSS with you. Remind them that asking for help is a sign of strength. Tell them that you would like to support them. Try to assist the non-offending parent or caregiver in preparing a safety plan and provide them with a list of emergency contacts.

five (Slide Layer)

The Referral Process / Notifying the Family Menu Slide

Click **Next** to continue when done.

Notifying the Family

STAGE 1 STAGE 2 STAGE 3

HONESTY & TRANSPARENCY
IMMEDIATE DANGER
HISTORY
DOMESTIC VIOLENCE
IF YOU DECIDE TO NOTIFY
IF YOU DECIDE NOT TO NOTIFY

Click each item.

If You Decide to Notify a Parent

- Discuss your legal obligation as a mandatory reporter in North Carolina.
- Discuss your ethical responsibility to support the families and children in your community and the support and resources available within DSS and the community.
- Discuss your desire to partner with them.
- Show empathy for how challenging caring for a family can be.
- Use more support and less judgement.
- Let them know that you would like to advocate for the services and supports they believe are most beneficial to their family.
- Have a plan of action in case the parent caregiver becomes hostile.

six (Slide Layer)

The Referral Process / Notifying the Family Menu Slide

Click **Next** to continue when done.

Notifying the Family

STAGE 1 STAGE 2 STAGE 3

HONESTY & TRANSPARENCY
IMMEDIATE DANGER
HISTORY
DOMESTIC VIOLENCE
IF YOU DECIDE TO NOTIFY
IF YOU DECIDE NOT TO NOTIFY

Click each item.

If You Decide **Not** to Notify a Parent

If you determine it is not safe to notify the parent because of the history and patterns of violence, or the type of child maltreatment suspected, consider distributing information on domestic violence services available in your community to all parents being served at your organization.

2.6 If Domestic Violence is Present

The Referral Process / If Domestic Violence is Present Menu Slide
[Click HERE to continue](#)

If Domestic Violence is Present

STAGE 1 STAGE 2 STAGE 3

CPS will ensure:

- the child is safe
- all family members will be safe from harm
- the non-offending parent / adult victim will receive services designed to protect and support him or her
- the children will receive services designed to protect support and help them cope with the effects of domestic violence.
- the alleged perpetrator of domestic violence will be held responsible for his or her abusive behavior
- the incidents of child maltreatment co-occurring with domestic violence will be reduced.

Key Points

- Research indicates a high rate of co-occurrence between domestic violence and child maltreatment.
- A CPS report in which the only allegation is domestic violence does not in itself meet the criteria for child abuse and neglect.
- When domestic violence is present, air on the side of caution. Express your concerns about child and family to a DSS intake worker and let them determine if it meets the criteria for child abuse or neglect.

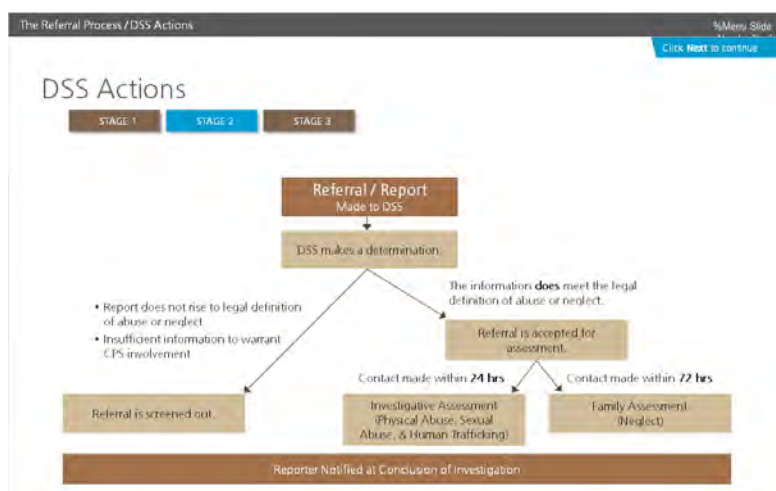
Notes:

When domestic violence is present in the home, the goal of Child Protective Services is to ensure the child and family is safe.

Research has shown that there is a high rate of co-occurrence between domestic violence and child maltreatment. However, a CPS report in which the only allegation is domestic violence does not in itself meet the criteria for child abuse and neglect.

When domestic violence is present, it is best to air on the side of caution. Express your concerns about child and family to a DSS intake worker, and allow them to determine if it meets the criteria for child abuse or neglect.

2.7 DSS Actions



Notes:

When a referral is received at DSS, Child Protective Services will determine if the referral warrants further investigation.

If your report is screened in, or accepted, by Child Protective Services for further investigation, the investigation begins no later than:

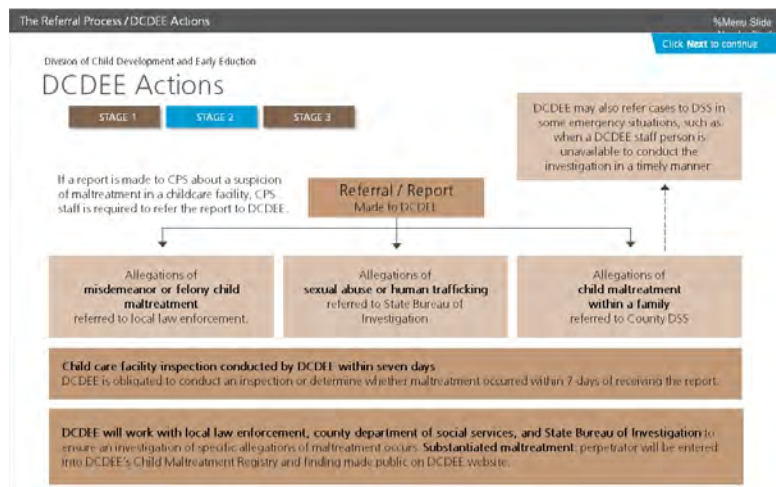
- 24 hours after Child Protective Services has received your report of suspected physical abuse, sexual abuse, or human trafficking
- 72 hours after Child Protective Services has received your report of suspected neglect

DSS will screen the referral out if it does not meet the legal definition of abuse, neglect, or there is insufficient information to warrant an investigation.

At the conclusion of the investigation DSS will send the reporter written notification of the outcome of the decision, unless the report was made anonymously.

Anonymous reporters will not be notified of the outcome.

2.8 DCDEE Actions



Notes:

If a person suspects maltreatment in a childcare facility, the law mandates a report be made directly to the Department of Health & Human Services, Division of Child Development and Early Education, also known as DCDEE. DCDEE investigates all allegations of Child Maltreatment that occur within childcare.

The chart shows the process that occurs when a report is made to DCDEE.

2.9 Your Actions After the Referral

The slide is titled "Your Actions After the Referral" and is part of a presentation on "The Referral Process/Your Actions After the Referral". It features a navigation bar with "STAGE 1", "STAGE 2", and "STAGE 3" (highlighted in blue). A "Click HERE to continue" button is in the top right. The main content area is titled "Your Actions" and lists several bullet points:

- Document the referral according to your organizational policy
 - date and time you made the referral
 - name of the person or persons with whom you spoke
 - any other relevant information
- Allow investigators to do their job and support and advocate for the child while the process is ongoing
- Respect confidentiality
- Use less judgment and more support of parents

Notes:

After you have made the referral, document the referral according to your agency's policies.

However, let the investigators do their job without interference. When you make the report, you can let the intake worker know what you are willing to do to help the family. For example, are you willing to participate in child and family team meetings or act as an advocate for the family?

While you are waiting for the disposition of the case, respect the confidentiality of the parents, and try not to be judgmental. Remember that good parents are made, not born, and we can help in that process.

2.10 If You Disagree with the Outcome

The slide is titled "If You Disagree with the Outcome" and is part of a presentation on "The Referral Process/If You Disagree with the Outcome". It features a navigation bar with "STAGE 1", "STAGE 2", and "STAGE 3" (highlighted in blue). A "Click HERE to continue with stage" button is in the top right. The main content area is titled "Appeals Process" and lists several bullet points:

- In the state of North Carolina there is no appeal process for cases requiring a DSS investigation.
- There are however several steps that may be taken if you have concerns about an assessment or disagree with the outcome of DSS' findings.
- For cases involving a DCDEE investigation, the process is a little different.

On the left, there are two buttons: "DSS / CPS" and "DCDEE". Below them is a "Click each item" instruction. On the right, there are two boxes with additional information:

DSS / CPS

- Contact the CPS intake worker to get more clarity about the decision and provide any additional information that you may have.
- If you are still unsatisfied, follow the CPS supervision chain, up to the department director and state your concerns.
- If you are unhappy with the outcome after you have spoken to the DSS Director, then contact the policy division of the state Division of Social Services.
- It is important to note that the Director, while unable to reverse a decision made at the local level, is able to provide feedback on practice issues. The policy department can be reached at 919-733-1622.

DCDEE

- Childcare providers who disagree with the findings of an investigation may file an appeal. Instructions about the appeal process will be included in the letter they receive regarding the outcome of the investigation.
- As mentioned in the previous slide, reporters who feel that the reasons for making a referral have not been addressed may contact DCDEE and provide any new information that they have.

Notes:

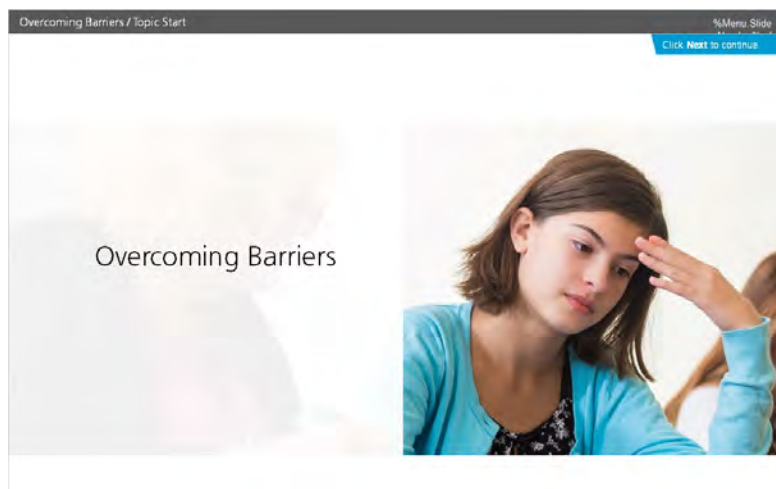
In the state of North Carolina there is no appeal process for cases requiring a DSS investigation. There are however several steps that may be taken if you have concerns about an assessment or disagree with the outcome of DSS' findings.

For cases involving a DCDEE investigation, the process is a little different.

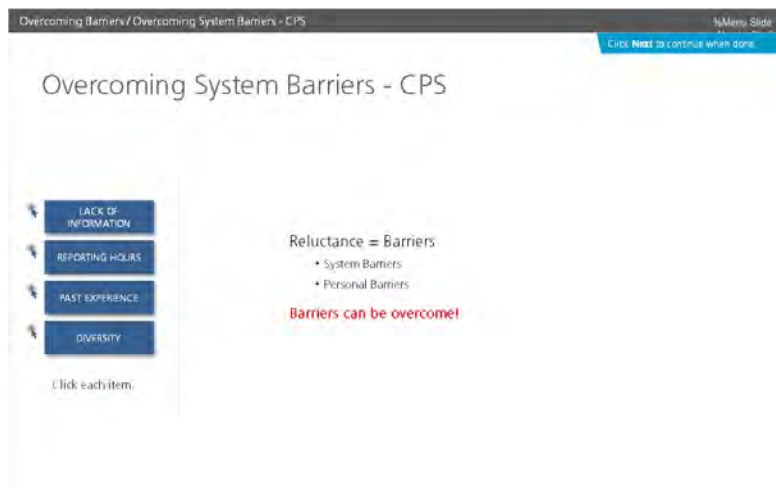
Click each item to learn more.

3. Overcoming Barriers

3.1 Legal Rights and Resources - Topic Start



3.2 Overcoming System Barriers - CPS



Notes:

We have looked at the process for making a referral, but some people may be reluctant to make a report for various reasons-we call these barriers. Some of these barriers may be related to the “system” and some may be personal.

These barriers can, however, be overcome. Let’s start with system barriers.

Click each item to learn more.

one (Slide Layer)

Overcoming Barriers / Overcoming System Barriers - CPS

Menu Slide

Click Next to continue when done.

Overcoming System Barriers - CPS

- LACK OF INFORMATION
- REPORTING HOURS
- PAST EXPERIENCES
- DIVERSITY

Click each item.

Lack of Information

One common barrier is a lack of information about where and how to file a report. Although it is preferred that the reporter contact the CPS office in the county where the child lives or is found, this may not always be possible due to a number of barriers, including lack of information. Recently DSS has begun training CPS intake workers how to handle referrals that involve children living in other counties. Regardless of which county you call DSS should take your report and refer it to the appropriate county.

two (Slide Layer)

Overcoming Barriers / Overcoming System Barriers - CPS

Menu Slide

Click Next to continue when done.

Overcoming System Barriers - CPS

- LACK OF INFORMATION
- REPORTING HOURS
- PAST EXPERIENCES
- DIVERSITY

Click each item.

Reporting Hours

Another common barrier is the perception that reports cannot be accepted after 5:00 PM. After 5:00 PM, reports can be made to the local police department or by calling 911. A social worker on duty will take your information and route it to the appropriate DSS.

three (Slide Layer)

Overcoming Barriers / Overcoming System Barriers - CPS

Menu Slide

Click Next to continue when done

Overcoming System Barriers - CPS

LACK OF INFORMATION

REPORTING HOURS

PAST EXPERIENCE

DIVERSITY

Click each item.

Past Experience

Some people may be hindered by a past negative experience with attempting to report suspected child maltreatment.

Remember the reforms we discussed that have taken place within DSS. Keep in mind that your legal obligation as a mandated reporter should empower you to prioritize the well-being of the child over any other barrier you may encounter.

four (Slide Layer)

Overcoming Barriers / Overcoming System Barriers - CPS

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Click Next to continue when done

Overcoming System Barriers - CPS

LACK OF INFORMATION

REPORTING HOURS

PAST EXPERIENCE

DIVERSITY

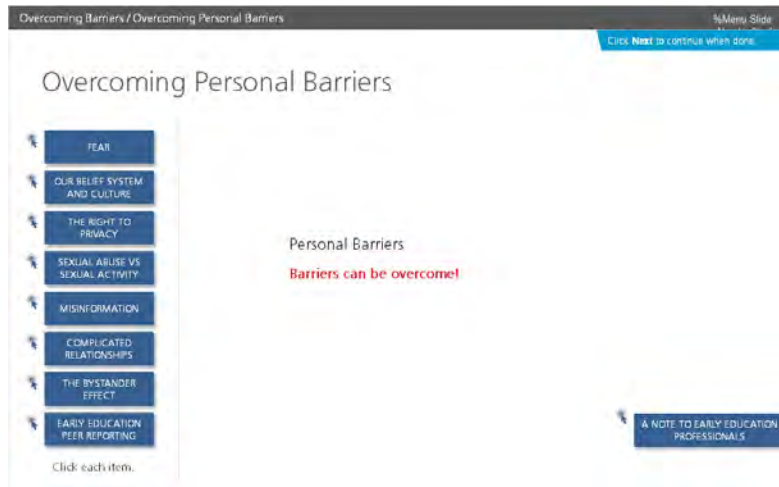
Click each item.

Diversity

North Carolina is a diverse state. While our diversity adds to the richness of our state's culture, it can also present a barrier to reporting for individuals who don't speak English fluently.

If you know of someone who has expressed a concern about the safety or well-being of a child but is hindered from contacting DSS by a language barrier, inform them that the Department of Social Services should have a qualified interpreter or competent bilingual staff available to take their report and through all points of contact with the family.

3.3 Overcoming Personal Barriers

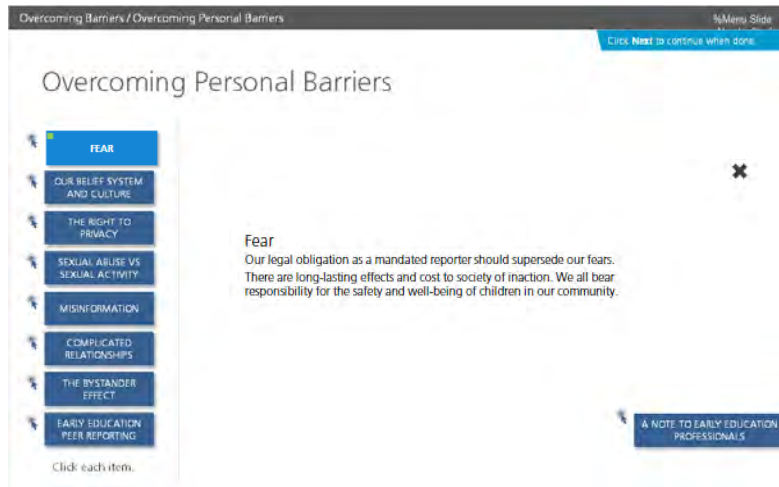


Notes:

Here are some personal barriers that prevent people from referring families to DSS.

Click each item to learn more.

one (Slide Layer)



two (Slide Layer)

Overcoming Barriers / Overcoming Personal Barriers

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Overcoming Personal Barriers

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MISINFORMATION

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THE BYSTANDER EFFECT

EARLY EDUCATION PEER REPORTING

Click each item.

Our Belief System and Culture

Groups tend to have very different ideas, values and beliefs when it comes to corporal punishment and discipline. Something one person may view as abuse, another may view as discipline, and vice versa.

A NOTE TO EARLY EDUCATION PROFESSIONALS

three (Slide Layer)

Overcoming Barriers / Overcoming Personal Barriers

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Click each item.

The Right to Privacy

Some people prefer not to get involved, thinking that families deserve the right to privacy or that what happens in one person's family is not anyone else's business. This is sometimes referred to as the "family bubble". We know from the ecological model that families do not exist in isolation, and that our interactions with each other and support for one another is critical to preventing maltreatment.

A NOTE TO EARLY EDUCATION PROFESSIONALS

four (Slide Layer)

Overcoming Barriers / Overcoming Personal Barriers

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Click each item.

Sexual Abuse Versus Sexual Activity

Some people may find sexual activity between adults and minors to be a difficult issue to address, especially when perceived as a cultural issue.

A NOTE TO EARLY EDUCATION PROFESSIONALS

five (Slide Layer)

Overcoming Barriers / Overcoming Personal Barriers

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Click each item.

Misinformation

Misinformation can lead to reluctance to report; some people believe that maltreatment only occurs in certain types of households or is only an issue in poor or minority families.

A NOTE TO EARLY EDUCATION PROFESSIONALS

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Click each item.

Complicated Relationships with Families

There are also barriers stemming from the complicated relationships that we have with families.

Someone may have a close relationship with the family and feel like a report could get the family in trouble. Other times, someone might have trouble believing that someone they know is capable of child maltreatment.

A NOTE TO EARLY EDUCATION PROFESSIONALS

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Click each item.

The Bystander Effect

There is a psychological phenomenon known as the bystander effect. This is when we do not intervene on someone else's behalf because we think someone else will. If we all believe that, no one will act on behalf of an abused or neglected child. We all bear responsibility for the safety of children in our community.

A NOTE TO EARLY EDUCATION PROFESSIONALS

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Overcoming Barriers / Overcoming Personal Barriers

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Click each item.

Early Education Peer Reporting

Reporting concerns of maltreatment by a peer can be a frightening. Remember, as a childcare provider, you are in a unique position to ensure the well-being of all children who attend your facility. You should not have to fear negative consequences for your efforts to advocate on behalf of children who attend your facility.

A NOTE TO EARLY EDUCATION PROFESSIONALS

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Overcoming Barriers / Overcoming Personal Barriers

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Overcoming Personal Barriers

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Click each item.

A Note to Early Education Professionals

- As a child care provider, you are in a unique position to ensure the well-being of all children who attend your facility. You should not have to fear negative consequences for your efforts to advocate on behalf of children who attend your facility.
- Reporting concerns of maltreatment by a peer can be frightening, and we will discuss this and many other reasons why people are reluctant to report in the section of this course.

A NOTE TO EARLY EDUCATION PROFESSIONALS

3.4 Discipline vs Abuse

Overcoming Barriers / Discipline vs Abuse

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Click **Next** to continue

Discipline vs Abuse

Drawing the line between discipline and abuse

- Discipline is a learning process with a goal of teaching appropriate behavior.
- Abuse is unpredictable.
- Abuse teaches fear rather than alternative, acceptable behaviors.
- Abuse teaches violence rather than reason.

Notes:

Professionals and parents may both struggle with drawing a line between what is discipline and what is abuse.

- Keep in mind that discipline is consistent and is part of a learning process with the goal of teaching appropriate behavior.
- Abuse is unpredictable and has no clear boundaries as to what will trigger it.
- Abuse teaches fear rather than an acceptable alternative to the child's behaviors.
- Abuse teaches violence rather than reason.

Abuse is not only damaging to the child-it is also ineffective in changing a child's behavior. When a parent continues to struggle with a child's behavior, there is risk of increasingly severe punishments.


3.5 Personal Bias

Overcoming Barriers / Personal Bias

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Click **Next** to continue

Personal Bias



Child maltreatment cuts across all segments of our society.

Notes:

Which of these families do you think would be most likely to incur child maltreatment?

Would it be this family? Would it be this family?

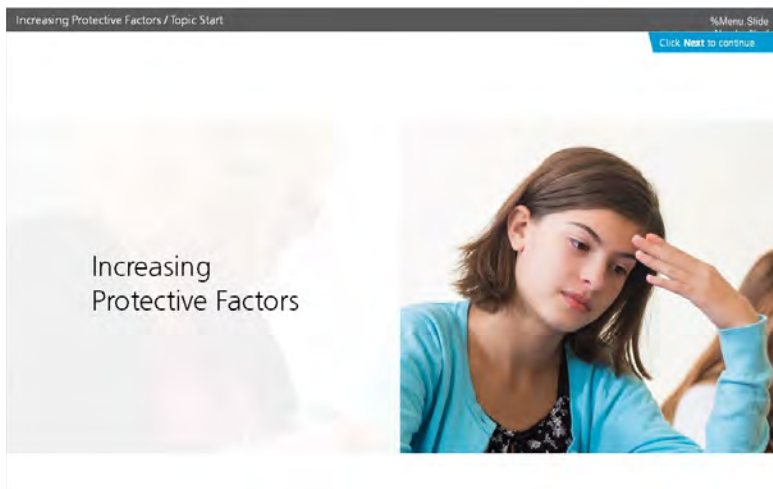
It can occur in a family, regardless of their race or ethnicity.

It can occur in a family, regardless of their religion. It can occur in any family structure.

Child maltreatment cuts across all segments of our society.

4. Increasing Protective Factors

4.1 Increasing Protective Factors - Topic Start




4.2 Increasing Protective Factors in our Professional Lives

Increasing Protective Factors / Increasing Protective Factors in our Professional Lives


Click NEXT to continue

Increasing Protective Factors in our Professional Lives

Helping Families Succeed
If we can help strengthen families and help families succeed and thrive in parenting, then child abuse may not happen to begin with.
It is our goal to increase protective factors in our communities.
Look for opportunities to partner with other community organizations to provide additional services and resources to families.



Families we encounter can and want to be better parents.



5 Protective Factors

- Social and Emotional Competence**
Children's early experiences of being nurtured and developing a positive relationship with caring adults affects all aspects of behavior and development.
- Knowledge of Parenting & Child Development**
Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations, and safe expectations that promote independence.
- Resilience**
Parents who can cope with the stresses of everyday life, be well on emotional levels, have confidence they have the flexibility and inner strength necessary to bounce back when things are not going well.
- Concrete Support**
Families who can meet their own basic needs for food, clothing, housing, and transportation—and who know how to access essential services such as childcare, healthcare, and mental health services to address family-specific needs—are better able to ensure the safety and well-being of their children.
- Social Connections**
Parents with a social network of emotionally supportive friends, family, and neighbors often find that it is easier to care for their children and themselves.

ACEs can have devastating impacts on long-term health.
More information: <https://www.healthychildren.org/Parents/Prevention/Preventing-Child-Abuse/Pages/ACEs.aspx>

For more information
Please call 800-368-5841 or visit [PreventChildAbuse.org](https://www.preventchildabuse.org)

Prevent Child Abuse North Carolina

Notes:

So far in this module, we have been looking at the actions that you can take when you suspect child maltreatment.

However, we would like to restate how important it is to do all we can to help prevent child maltreatment from happening to begin with.

At the beginning of the training we discussed risk and protective factors. As adults who care about the well-being of children and families it is our goal to increase protective factors in our communities.

Here are a few simple ways to increase protective factors for the parents we interact with in our agencies.

Click each item to learn more.

Knowledge of Parenting & Child Development (Slide Layer)

5 Protective Factors

- Social and Emotional Competence**
Children's early experiences of being nurtured and developing a positive relationship will carry over into all aspects of behavior and development.
- Knowledge of Parenting & Child Development**
Children's development proceeds and varies at different rates, and every individual, but also recognizes common milestones, and can expect behaviors, and will appropriately respond.
- Resilience**
Kids cope with the challenges of everyday life, have confidence in themselves, and are able to bounce back when they face adversity.
- Concrete Support**
Families who can count on each other for help with the challenges of everyday life, and have someone to turn to when they need it, are more likely to have successful outcomes for their children.
- Social Connections**
Parents with a social network of supportive family, friends, and neighbors often find that it is easier to do everything that is best for their children.

Additional Information:
These factors have a powerful impact on a child's health, behavior, and development. They are the foundation for a child's well-being and are the key to a child's success in life.

For more information:
Contact your local health department or visit www.PreventChildAbuseNC.org

Prevent Child Abuse North Carolina

Parental Resilience (Slide Layer)

[illegible]

Concrete Support in Times of Need (Slide Layer)

Increasing Protective Factors / Increasing Protective Factors in our Professional Lives

Click Next to continue

Increasing Protective Factors in our Professional Lives

5 Protective Factors

- Social and Emotional Competence**
Children's early experiences of being nurtured and developing a positive relationship with caring adults affect all aspects of behavior and development.
- Knowledge of Parenting & Child Development**
Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations, and safe opportunities that promote independence.
- Resilience**
Parents who cope with the absence of family life, as well as occasional crises, have resilience. They have the flexibility and inner strength necessary to bounce back when things are not going well.
- Concrete Support**
Families who can meet their own basic needs for food, clothing, housing, and transportation—and who know how to access essential services such as childcare, health care, and mental health services to address family-specific needs—are better able to ensure the safety and well-being of their children.
- Social Connections**
Parents with a social network of emotionally supportive friends, family, and neighbors often find that it is easier to cope for their children and themselves.

Concrete Support in Times of Need
We all need a hand now and then. Parents who have dependable support and are not afraid to turn to others for help are less likely to be involved in abuse and neglect.

Social Connections (Slide Layer)

Increasing Protective Factors / Increasing Protective Factors in our Professional Lives

Click Next to continue

Increasing Protective Factors in our Professional Lives

5 Protective Factors

- Social and Emotional Competence**
Children's early experiences of being nurtured and developing a positive relationship with caring adults affect all aspects of behavior and development.
- Knowledge of Parenting & Child Development**
Children thrive when parents provide not only affection, but also respectful communication and listening, consistent rules and expectations, and safe opportunities that promote independence.
- Resilience**
Parents who cope with the absence of family life, as well as occasional crises, have resilience. They have the flexibility and inner strength necessary to bounce back when things are not going well.
- Concrete Support**
Families who can meet their own basic needs for food, clothing, housing, and transportation—and who know how to access essential services such as childcare, health care, and mental health services to address family-specific needs—are better able to ensure the safety and well-being of their children.
- Social Connections**
Parents with a social network of emotionally supportive friends, family, and neighbors often find that it is easier to cope for their children and themselves.

Social Connections
Reach out to families who may be dealing with increased economic or personal stressors and be supportive by providing a non-judgmental listening ear if clients need to talk.

At the time of this document's release, the COVID-19 pandemic has caused a significant increase in economic and personal stressors for many families. This document is intended to provide information and resources to help families cope with these challenges.

For more information, visit www.preventchildabuse.org or call 1-800-4-A-CHILD.

Prevent Child Abuse North Carolina

Social and Emotional Competence of Children (Slide Layer)

Increasing Protective Factors / Increasing Protective Factors in our Professional Lives 1 of 1

Click Next to continue.

Increasing Protective Factors in our Professional Lives

Social & Emotional
Modeling nurturing and responsive interactions with children and families is a great way to provide parents with effective techniques for forming healthy relationships with their children.

5 Protective Factors

- Social and Emotional Competence**
Children's early experiences of being nurtured and developing a positive relationship with caring adults affects all aspects of behavior and development.
- Knowledge of Parenting & Child Development**
Children thrive when parents provide safe and effective, but also respectful, encouragement and follow-through, consistent rules and consequences, and safe opportunities that promote independence.
- Social Connections**
Parents with a social network of emotionally supportive friends, family and neighbors often find that it is easier to plan for their children's care.
- Resilience**
Parents who can cope with the stresses of everyday life, as well as occasional crisis, have resilience. They have the flexibility and inner strength necessary to bounce back when things are not going well.
- Concrete Support**
Families who can meet their own basic needs for food, clothing, housing, and transportation—what these have in common is essential services that all children need. Family support needs can better able to ensure the safety and well-being of their children.

ACTs can have devastating impacts on long-term health. When a child experiences a traumatic event, it can lead to long-term health problems, including mental health issues, substance use, and chronic diseases. For more information, visit www.preventchildabuse.org.

For more information, visit www.preventchildabuse.org.

Prevent Child Abuse North Carolina

4.3 Increasing Protective Factors in our Personal Lives

Increasing Protective Factors / Increasing Protective Factors in our Personal Lives 1 of 1

Click Next to continue when done.

Increasing Protective Factors in our Personal Lives

Everyone has a role to play in building strong families. The investments we make in children and families today will pay dividends for many years to come.

Our interactions with families do not end when we leave work. Each of us can support families and build protective factors in our personal situations as well.

Click each item.

For more tips on supporting families, visit: www.preventchildabuse.org

SUPPORT
Support parents who need help by offering to babysit or providing parents with a break.

HELP
Help yourself when you feel overwhelmed with the challenges of parenting by reaching out for support.

WORK
Work to eliminate corporal punishment in NC state law, now that it has been banned in all 115 school districts. Model effective non-spanking discipline techniques to other parents you meet.

ACT
Act when you see a parent struggling in public by offering words of encouragement or distracting the child.

Participate
Participate in Child Abuse Prevention activities in your community during the month of April.

Volunteer
Volunteer to help at agencies working with children and families.

Report
Report suspected child maltreatment.

Advocate
Advocate for children and families by supporting policies and programs that promote the well-being of children and families.

Give
Give a donation to agencies working to build strong, healthy families in your community.

Notes:

Everyone has a role to play in building strong families. The investments we make in children and families today will pay dividends for many years to come.

Our interactions with families do not end when we leave work. Each of us can support families and build protective factors in our personal situations as well.

Here are some ways to support families.

5. Conclusion

5.1 Module Summary

Conclusion / Module Summary

Menu Slide

You have completed this module. You can close this window.

Module Summary

Key Points

- As an adult in North Carolina, you have a legal obligation as a mandatory reporter.
- All you need to make a referral is reasonable suspicion of abuse or neglect. You do not need proof. CPS bears the responsibility to determine if maltreatment occurred.
- You can make a report anonymously, however DSS will not be able to provide you with any information about the case or notify you of the outcome. If you decide to provide your information, DSS is required to keep it confidential.
- Child Protective Services will assess and determine if a report is screened in or out. DCDEE will investigate all allegations of Child Maltreatment that occur within childcare facilities.
- Some people may be reluctant to make a report for various reasons - we call these barriers. Some of these barriers may be related to the "system" and some may be personal. These barriers can, however, be overcome.
- Remember the 5 Protective Factors: social and emotional competence, knowledge of parenting & child development, social connections, resilience, and concrete support.
- Look for opportunities to partner with other community organizations to provide additional services and resources to families.
- Each of us can support families and build protective factors in our personal situations as well.



Notes: Here are some important points we covered in this module.