

EARLY CHILDHOOD PROGRAMS

AND THE PREVENTION AND TREATMENT

OF CHILD ABUS AND NEGLECT

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THE USER MANUAL SERIES

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EARLY CHILDHOOD PROGRAMS

AND THE PREVENTION AND TREATMENT OF CHILD ABUSE AND NEGLECT

**[FOR WORKERS IN HEAD START, FAMILY DAY CARE,
PRESCHOOL AND DAY CARE PROGRAMS]**

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PREFACE

It has been determined that approximately 40 percent of substantiated cases of abused and neglected children are of preschool age. Hence, the involvement of those early childhood programs who come in contact with maltreated children is crucial. Early childhood programs include any programs which provide child care or early childhood education services to children of preschool age. They include day care programs, preschools, and Head Start programs.

This manual describes the many roles of early childhood programs in child abuse and neglect identification, treatment and prevention. It is designed primarily for use by preschools, day care centers, family day care providers and Head Start Programs.

This manual may also be used by other professionals dealing with child abuse and neglect and by concerned citizens wanting to better understand the early childhood program's potential role in identifying, preventing and treating child maltreatment.

Early Childhood Programs and the Prevention and Treatment of Child Abuse and Neglect is one of a series of manuals based on the *Federal Standards for Child Abuse and Neglect Prevention and Treatment Programs and Projects*.*

*Other manuals in this series address related topics such as the role of other professionals in preventing and treating child abuse and neglect, treatment of abused and neglected children and community planning. Readers are encouraged to consult other manuals for additional information on ways in which child abuse and neglect can be most effectively addressed in their communities. Information about other manuals in this series may be obtained from the National Center on Child Abuse and Neglect.

I

OVERVIEW OF CHILD ABUSE AND NEGLECT

DEFINITIONS OF CHILD ABUSE AND NEGLECT

The words "child abuse" and "child neglect" mean different things to different people. It is important to have a widely accepted definition of these terms because they describe the situations in which society should and must intervene, possibly against parental wishes, to protect a child's health or welfare. But defining these terms raises the most controversial issues in child abuse and neglect work because they determine the conditions which constitute reportable circumstances and they establish when society, child protective service, and possibly the courts, can intervene into family life.

Definitions of child abuse and neglect seem to many to be both too broad and too narrow. It is difficult to draft legislation which is specific enough to prevent improper application and yet broad enough to cover situations of harm to a child necessitating societal intervention.

As a result, there are many different approaches to defining "child abuse" and "child neglect." One approach is found in the Draft Model Child Protective Services Act:

- (a) "Child" means a person under the age of 18.
- (b) An "abused or neglected" child means a child whose physical or mental health or welfare is harmed or threatened with harm by the acts or omissions of the child's parent or other person responsible for the child's welfare.
- (c) "Harm" to a child's health or welfare can occur when the parent or other person responsible for the child's welfare:
 - (i) Inflicts, or allows to be inflicted, upon the child, physical or mental injury, including injuries sustained as a result of excessive corporal punishment; or
 - (ii) Commits, or allows to be committed, against the child, a sexual offense, as defined by state law; or

- (iii) Fails to supply the child with adequate food, clothing, shelter, education (as defined by state law), or health care, though financially able to do so or offered financial or other reasonable means to do so; for the purpose of this Act, "adequate health care" includes any medical or non-medical health care permitted or authorized under state law; or
 - (iv) Abandons the child, as defined by state law; or
 - (v) Fails to provide the child with adequate care, supervision, or guardianship by specific acts or omissions of a similarly serious nature requiring the intervention of the child protective service or a court.
- (d) "Threatened harm" means a substantial risk of harm.
 - (e) "A person responsible for a child's welfare" includes the child's parent; guardian; foster parent; an employee of a public or private residential home, institution or agency; or other person responsible for the child's welfare.
 - (f) "Physical injury" means death, disfigurement, or the impairment of any bodily organ.
 - (g) "Mental injury" means an injury to the intellectual or psychological capacity of a child as evidenced by an observable and substantial impairment in the child's ability to function within a normal range of performance and behavior, with due regard to the child's culture.

Variations in Definitions of Child Abuse and Neglect

Within any given state and community there are many different definitions of child abuse and neglect; some are found in laws, some are found in procedures and some are found in the informal practices of those agencies assigned to implement laws concerning child abuse and neglect.

It is important that personnel in early childhood programs become familiar with the various formal definitions in their community; these can be found in:

1. Criminal Law Definition - those forms of child abuse and neglect which are criminally punishable.
2. Juvenile Court Act - those forms of child abuse and neglect which authorize the court to provide protective services and, when necessary, remove children from their parents.
3. Reporting Law Definition - those forms of known or suspected child abuse and neglect which require reporting by some persons and permit reporting by others. These reports activate the child protective process.

Each of these definitions has been developed to meet the specific purposes of each function. Although there is a growing convergence of these definitions, they often differ. Most likely the criminal law will focus on specific acts of the parents in such a way as to isolate criminal intent as a reason for prosecution. Most likely, the juvenile court definition will focus on harm to the child as a justification for taking protective steps in relation to the child. And finally, the reporting act will probably describe apparent situations which give rise to sufficient cause for concern ("reasonable cause to believe") to require the investigation of the home situation and the danger to the child by the appropriate investigative agency.

Religious Immunity or Exclusion

Religious immunity or spiritual healing exemption has been adopted by the majority of the states. The clause qualifies a statutory definition of neglect or maltreatment:

. . . any child who does not receive specified medical treatment by reason of the legitimate practice of religious belief of said child's parents, guardian, or others legally responsible for said child, for that reason alone, shall not be considered to be an abused or neglected child... MO.REV.STAT.,210.115(3) (Supp. 1976)

EXTENT OF CHILD ABUSE AND NEGLECT

Because child abuse and neglect usually occur in the privacy of the home, no one knows exactly how many children are affected. Child abuse and neglect must be discovered and reported before the child can be protected, and there is general agreement that this never happens in a majority of abuse and neglect incidents.

There have been a number of estimates made of the incidence of child maltreatment ranging from 500,000 to 4.5 million, but they are unproven. The National Center on Child Abuse and Neglect estimates that approximately one million children are maltreated by their parents each year. Of these children, as many as 100,000 to 200,000 are physically abused, 60,000 to 100,000 are sexually abused, and the remainder are neglected. And each year, more than 2,000 children die in circumstances suggestive of abuse or neglect.

CAUSES OF CHILD ABUSE AND NEGLECT

No one factor accounts for child abuse and neglect. There are a variety of manifestations and causes. Some generally accepted causes of the abuse and neglect of children include a family heritage of violence, the burdens resulting from poverty, and severe emotional pressures or psychopathologies. Instead of one factor which leads to abuse or neglect, there are multiple forces on the family which reinforce each other and which cause abuse and neglect. It is possible to divide these forces into four categories: individual capacities, attitudes and values, specific life situations, and general community welfare.

Individual Capacities

Individual capacities include such factors as physical health, mental health, intelligence, personality and previous life experiences, such as past maltreatment. All of these personal characteristics operate in parents and children; and they reflect both innate and experiential influences. These are probably the most constant influences on behavior.

Attitudes and Values

There are a variety of cultural forces which are incorporated as attitudes and values by individuals and which influence families and their relationships. These forces always exist, but they change less frequently than the other forces having an impact on families.

These forces include attitudes toward: children, changing family roles, violence, corporal punishment, economic and social competition, and religion among others.

Specific Life Situations

Situational forces, either chronic or acute, may affect parents' relationships with their children. These forces can include marital relationships, employment situations, presence of extended family members, housing conditions, financial security and amount of social contact. If these forces have a positive effect, they can strengthen family ties, whereas if they are negative they reinforce any other problems which the family is experiencing.

General Community Welfare

The general community welfare is largely defined by social institutions which affect families on various levels, depending on the purpose of the institution. For example, some institutions, including businesses, churches, schools, police, fire departments, radio, television and newspapers, affect everyone. Some institutions, which are more problem-oriented, affect only specific groups. These include such institutions as mental health departments, child welfare institutions, drug and alcohol abuse clinics, poverty or social welfare institutions. On a third level are those institutions that deal directly with problems of child abuse and neglect, such as child protective services and juvenile courts.

Any of these institutions can have either a positive or negative affect on the occurrence of child abuse and neglect. They may either contribute to the well-being of the family and thus help to prevent child abuse and neglect; or they may exacerbate the problems of family members and generate new crises which could cause child abuse or neglect.

Forces in Combination

Child abuse and neglect are most likely to occur when there is a combination of negative forces affecting the family. These forces work together and reinforce each other. Such a combination can be quite devastating, especially for a family which is not as well equipped to cope with problems as most other families.

EFFECTS OF CHILD ABUSE AND NEGLECT

Child abuse and neglect can result in permanent and serious damage to the physical, emotional, and mental development of the child.

The physical effects of child abuse and neglect may include damage to the brain, vital organs, eyes, ears, arms or legs. These injuries may, in turn, result in mental retardation, blindness, deafness, or loss of a limb. Abuse or neglect may cause arrested development. At its most serious, of course, abuse or neglect may result in the death of a child.

Child abuse and neglect are often as damaging emotionally as they are physically. Abused or neglected children may be impaired in self concept, ego competency, reality testing, defensive functioning and overall thought processes. They also often have a higher level of aggression, anxiety, low impulse control, and self-destructiveness. These characteristics can cause abused or neglected children to display high levels of antisocial behavior as they get older.

Abuse and neglect may also result in restricted cognitive development. Language, perceptual, and motor skills are often underdeveloped, further hindering the child's chances to succeed.

II

WHY PRESCHOOLS, DAY CARE AND HEAD START SHOULD BE INVOLVED

There are many reasons why early childhood program personnel become involved in child abuse and neglect treatment and prevention. Among them are the fact that preschool, day care and Head Start staff work with and for children, that law and policy require their involvement, that professional responsibility demands it, and that they have a deep sense of personal commitment to the children in their care.

COMMUNITY ISSUES AND EARLY CHILDHOOD PROGRAMS

The most practical reason for early childhood program personnel to become involved in the identification, treatment and prevention of child abuse and neglect is that child abuse and neglect are part of the every day reality of working with and for children. Abused and neglected children may be found in almost every preschool, day care center and Head Start program in the country; early childhood program workers are in a unique position to help those children, their families, Child Protective Services, and the community in overcoming the effects of child abuse and neglect.

Abuse and Neglect of Preschool Age Children

The fact that abused and neglected children may be found in any early childhood program in every community across the nation is a compelling reason for program staff to become involved in child abuse and neglect treatment and prevention. While exact statistics are unavailable, recent research indicates that nearly half of the abused and neglected children in America (perhaps as many as 500,000) are of preschool age. In practical terms, this means that there is an average of one abused or neglected child for every 30-35 children of preschool age. For this reason, if for no other, preschools, day care and Head Start programs must take an active role in child abuse and neglect prevention and treatment.

Child Protection as a Responsibility of Early Childhood Programs

Early childhood programs are one of the few places in which preschool age children are seen daily over periods of time by professionals and paraprofessionals trained to observe their appearance and behavior. Not only does the program setting offer a continuum for observation,

it offers a unique opportunity to compare and contrast behaviors which are unusual with those which are not unusual.

Early childhood program providers are often aware that something is not right with a child long before severe physical injury is present. Properly prepared, they can offer a keen case-finding and management tool in the very place where children are to be found most often.

Sometimes staff members are overwhelmed at the thought of the early childhood program taking on yet another responsibility, and one which at first glance seems so far removed from the basic function of care-taking and learning preparation. Effective early childhood programs are not just a place for caring for children and preparing them for school, but a resource, a means of meeting many other needs of children.

The Impact of Child Abuse and Neglect on Learning and Learning Readiness

Child abuse and neglect is clearly related to learning. Research has indicated that abused and neglected children often demonstrate significant learning problems and below grade-level performance in key academic areas. Since many early childhood programs are specifically designed to improve children's performance once they enter school, these programs cannot ignore factors which affect children's learning ability. Learning disabled, mentally impaired or physically handicapped children are given special attention in an effort to enhance their learning. The abused or neglected child is entitled to no less.

Child Abuse and Neglect as a Community Problem

Child abuse and neglect is a community problem; its solution requires community action. As primary sources of services to young children, early childhood programs must be prepared to do their part. Head Start, preschool and day care programs must indicate their willingness to help, particularly in relation to Child Protective Services and the community child protection system, and the community must welcome this help. Early childhood programs offer a great resource for prevention, early identification and treatment of child abuse and neglect, a resource which the community cannot afford to lose.

LEGAL ISSUES

The force of law supports the involvement of early childhood program personnel in child abuse and neglect detection. In fact, many state laws provide penalties for not reporting suspected abuse or neglect--in a sense a penalty for not being involved.

State Laws on Reporting Child Abuse and Neglect

No state forbids reporting by early childhood development staff and most states require it, sometimes including these professionals under the general term "educators." The range of persons required to report is broad, including, for example, staff of residential institutions, day care centers and summer camps. In those states which mandate reporting of suspected child abuse and neglect by "any person," all staff or volunteers associated with preschool, day care or Head Start programs are included.

*INFORMATION KEY #1: Who Must Report?

According to laws in this state, persons required to report suspected child abuse and neglect include:

*Throughout the text of this manual are a series of "Information Keys" designed to provide specific information for local programs. Users are encouraged to fill in these "Information Keys" in order to provide the most useful information possible for all persons in the program who will need to know what to do about child abuse and neglect problems which arise.

Penalties for Failure to Report and Immunity from Liability

Many states provide penalties for those mandated to report suspected child abuse and neglect but who fail to do so. These penalties may include fines of up to \$1,000 or prison sentences of up to one year, or both. In some states, recent court decisions have resulted in civil judgments in excess of one million dollars. In addition, professionals who fail to report may be subject to charges of criminal negligence or as accessories to assault or similar charges. On the other hand, every state provides immunity from civil liability and/or criminal penalty for those who do report suspected child abuse and neglect, provided the report has been made in good faith.

In other words, the law is relatively simple. In most states, it requires the involvement of any persons who might be termed "educators" or day care personnel in child abuse and neglect problems. It provides protection to those who become involved, but penalizes those who fail in their obligation.

INFORMATION KEY #2: Reporting Immunity/ Liability

Persons in this state who report suspected child abuse and neglect in good faith are immune from civil liability and/or criminal penalty.

Persons who suspect child abuse and neglect but do not report are subject to:

_____ No penalty

_____ A penalty up to _____

Local Policy

The Head Start Policy Manual delegates staff responsibility in child abuse and neglect situations for such functions as reporting, coordinating program activities, liaison with other agencies, and training. (More details on Head Start policies are included in Chapter VII.) In many instances, it is beneficial for preschool and day care

programs to adopt policies in line with Head Start policies. Early childhood programs can also encourage staff to become involved in the prevention and treatment of child abuse and neglect. Such policies may: provide for periodic staff development, or for representation on a community child abuse and neglect case consultation team;¹ direct that staff support Child Protective Services (CPS) by participating in CPS's initial investigation; or offer direct service to involved families.

INFORMATION KEY #3: Program Policy

This early childhood program:

_____ does have a child maltreatment policy.
In summary, the policy is:

_____ does not have a child maltreatment policy.
(If no policy exists, should one be adopted,
and if so, what should it say to adequately
reflect state law?

ETHICAL ISSUES

At the heart of the question of the involvement of early childhood programs in the child abuse and neglect problem may well be the ethical basis of the profession itself. Some of the strongest reasons

¹Case consultation teams may be designated by a number of different names including multidisciplinary teams or child protection teams.

for involvement come from the professional responsibilities, basic principles of justice and democratic ideals, and the personal commitment of caregivers and educators to the well-being of the children and families they serve.

Professional Responsibility

Persons responsible for the care and training of young children have a keen sense of professional responsibility to the children in their care. They are concerned about these children, about their health, their safety, their happiness. Workers are aware that they are models and examples for the children they serve, and that they may be the only readily available source of support, concern, and caring for many children. Early childhood program staff want to do what is best for the children in their care because their professional standards require it.

Justice and Democratic Ideals

In a very real sense, early childhood programs provide the first significant experience for many children in the principle of equal justice for all. Children begin to understand responsibility and respect for the democratic ideals of equal protection under the law and duty to uphold the law. When it comes to abused and neglected children, early childhood programs are obligated to put these principles into practice. Ethics require their involvement in child abuse and neglect prevention and treatment.

Personal Commitment

For many persons working with preschool age children, their professional responsibility and respect for the law is supported by a deep personal commitment to the welfare of children. The value of this personal commitment must not be underestimated, for without it child abuse and neglect prevention and treatment efforts can be no more than superficial exercises. It is this sense of personal responsibility to and for children that is perhaps the strongest reason for program staff to become involved in the struggle against child abuse and neglect.

III

RECOGNIZING CHILD ABUSE AND NEGLECT IN THE EARLY CHILDHOOD PROGRAM SETTING

Each form of child abuse and neglect -- physical abuse, neglect, sexual abuse, and emotional maltreatment -- can be found among preschool-age children. Sensitive workers can often identify a particular type of maltreatment through the child's appearance or behavior in the program or during routine interviews with parent or child by recognizing physical and behavioral indicators. Psychological clues can also provide some evidence of possible maltreatment.

Physical indicators of child abuse and neglect are indicators which usually are readily observable. They may be mild or severe, but they involve the child's physical appearance. Frequently, physical indicators are skin or bone injuries, or evidence of lack of care and attention manifested in conditions such as malnutrition.

Effective early childhood workers are skilled observers of children's behavior. They are sensitive to the range of behavior expected of children of a given group, and they are quick to notice behaviors which fall outside this range. For the trained worker, behavior can often be a clue to the presence of child abuse and neglect. Behavioral indicators may exist alone or may accompany physical indicators. They range from subtle clues, a "sixth sense" that something is amiss, to graphic statements by children that they have been physically assaulted or sexually molested.

Physical and behavioral indicators are displayed in Exhibit I, following this page. The list is not exhaustive; many more indicators exist than can be included. Neither does the presence of a single indicator prove that maltreatment exists. However, the repeated presence of an indicator, the presence of several indicators in combination, or the appearance of serious injury should alert the caregiver or educator to the possibility that a case of child abuse and neglect is at hand.

PHYSICAL ABUSE

Physical abuse of children includes any nonaccidental physical injury caused by the child's caretaker. It may include burning, beating, branding, punching and so on. By definition the injury is not an accident. But neither is it necessarily the intent of the child's caretaker to injure the child. Physical abuse may result from overdiscipline or from punishment which is inappropriate to the child's age or condition.

EXHIBIT I

PHYSICAL AND BEHAVIORAL INDICATORS OF CHILD ABUSE AND NEGLECT

| TYPE OF CA/N | PHYSICAL INDICATORS | BEHAVIORAL INDICATORS |
|------------------------|---|---|
| PHYSICAL ABUSE | <p>Unexplained Bruises and Welts:</p> <ul style="list-style-type: none"> - on face, lips, mouth - on torso, back, buttocks, thighs - in various stages of healing - clustered, forming regular patterns - reflecting shape of article used to inflict (electric cord, belt buckle) - on several different surface areas - regularly appear after absence, weekend or vacation <p>Unexplained Burns:</p> <ul style="list-style-type: none"> - cigar, cigarette burns, especially on soles, palms, back or buttocks - immersion burns (sock-like, glove-like, doughnut shaped on buttocks or genitalia) - patterned like electric burner, iron, etc. - rope burns on arms, legs, neck or torso <p>Unexplained Fractures:</p> <ul style="list-style-type: none"> - to skull, nose, facial structure - in various stages of healing - multiple or spiral fractures <p>Unexplained Lacerations or Abrasions:</p> <ul style="list-style-type: none"> - to mouth, lips, gums, eyes - to external genitalia | <p>Wary of Adult Contacts</p> <p>Apprehensive When Other Children Cry</p> <p>Behavioral Extremes:</p> <ul style="list-style-type: none"> - aggressiveness, or - withdrawal <p>Frightened of Parents</p> <p>Afraid to go Home</p> <p>Reports Injury by Parents</p> <p>Exhibits anxiety about normal activities, e.g. napping</p> |
| PHYSICAL NEGLECT | <p>Consistent Hunger, Poor Hygiene, Inappropriate Dress</p> <p>Consistent Lack of Supervision, Especially in Dangerous Activities or Long Periods</p> <p>Unattended Physical Problems or Medical Needs</p> <p>Abandonment</p> | <p>Begging, Stealing Food</p> <p>Constant Fatigue, Listlessness or Falling Asleep</p> <p>States There Is No Caretaker at Home</p> |
| SEXUAL ABUSE | <p>Difficulty in Walking or Sitting</p> <p>Torn, Stained or Bloody Underclothing</p> <p>Pain or Itching in Genital Area</p> <p>Bruises or Bleeding in External Genitalia, Vaginal or Anal Areas</p> <p>Venereal Disease</p> | <p>Unwilling to Participate in Certain Physical Activities</p> <p>Withdrawal, Fantasy or Unusually Infantile Behavior</p> <p>Bizarre, Sophisticated, or Unusual Sexual Behavior or Knowledge</p> <p>Poor Peer Relationships</p> <p>Reports Sexual Assault by Caretaker</p> |
| EMOTIONAL MALTREATMENT | <p>Speech Disorders</p> <p>Lags in Physical Development</p> <p>Failure-to-thrive</p> | <p>Habit Disorders (sucking, biting, rocking, etc.)</p> <p>Conduct Disorders (antisocial, destructive, etc.)</p> <p>Neurotic Traits (sleep disorders, inhibition of play)</p> <p>Psychoneurotic Reactions (hysteria, obsession, compulsion, phobias, hypochondria)</p> <p>Behavior Extremes:</p> <ul style="list-style-type: none"> - compliant, passive - aggressive, demanding <p>Overly Adaptive Behavior:</p> <ul style="list-style-type: none"> - inappropriately adult - inappropriately infant <p>Developmental Lags (mental, emotional)</p> |

Physical Indicators of Physical Abuse

Physical indicators of physical abuse in the preschool - age child include:

- Unexplained bruises and welts

- on the face, lips, or mouth
- in various stages of healing (bruises of different colors, for example, or old and new scars together)
- on large areas of the torso, back, buttocks or thighs
- clustered, forming regular patterns, or reflective of the article used to inflict them (electrical cord; belt buckle)
- on several different surface areas (indicating the child has been hit from different directions)
- regularly noted as fading marks when the child returns to the program after an absence, weekend, or vacation

- Unexplained burns

- cigar or cigarette burns, especially on the soles of the feet, palms of the hands, back or buttocks
- immersion or "wet" burns, including glove- or sock-like burns and doughnut-shaped burns on the buttocks or genitalia
- patterned or "dry" burns which show a clearly defined mark left by the instrument used to inflict them (e.g. electrical burner; iron)
- rope burns on the arms, legs, neck or torso

- Unexplained fractures

- to the skull, nose, or facial structure

- in various stages of healing (indicating they occurred at different times)
- multiple or spiral fractures
- swollen or tender limbs
- any fracture in a child under the age of two
- Unexplained lacerations and abrasions
 - to the mouth, lips, gums or eyes
 - to the external genitalia
 - on the backs of the arms, legs, or torso
- Unexplained abdominal injuries
 - swelling of the abdomen
 - localized tenderness
 - constant vomiting
- Human bite marks, especially when they appear adult size or are recurrent.

Behavioral Indicators of Physical Abuse

Conduct, too, can be a tip-off to the presence of child abuse and neglect. Abused and neglected children may demonstrate certain characteristic behavior or conduct which can be spotted by the sensitive early childhood worker. In some cases, behavior may be the only clue to child abuse and neglect. These behaviors may exist independent of or in conjunction with physical indicators.

The following are some of the behaviors which may be associated with physical abuse. The worker should be alert for the child who:

- is wary of physical contact with adults. In the preschool or Head Start classroom, most children accept physical closeness to a teacher or aide. The abused child will often avoid it, sometimes even shrinking at the touch or approach of an adult.

- becomes apprehensive when other children cry
- demonstrates extremes in behavior -- extreme aggressiveness or extreme withdrawal, for example -- behavior which lies outside the range expected for the child's age group
- seems frightened of the parents
- states he/she is afraid to go home, or cries when it is time to leave
- reports injury by a parent.

NEGLECT

Neglect involves inattention to the basic needs of a child, such as food, clothing, shelter, medical care, and supervision. While physical abuse tends to be episodic, neglect tends to be chronic. When considering the possibility of neglect, it is important to note the consistency of indicators. Do they occur rarely, or frequently? Are they chronic (there most of the time), periodic (noticeable after weekends or absences), or episodic (seen twice during a period when there was illness in the family)? In a given community or subpopulation, do all the children display these indicators, or only a few? Is this culturally acceptable childrearing, a different life style, or true neglect? Answers to questions like these can be extremely helpful in differentiating between neglect and differing ways of life.

Physical Indicators of Neglect

Physical indicators of neglect include:

- constant hunger, poor hygiene, or inappropriate clothing
- consistent lack of supervision, especially when engaged in dangerous activities or over extended periods of time
- constant fatigue or listlessness
- unattended physical problems or medical needs, such as untreated or infected wounds
- abandonment.

Behavioral Indicators of Neglect

The early childhood program worker should be alert for the child who

- is begging or stealing food
- constantly falls asleep
- states that there is no one to care for or look after him/her.

SEXUAL ABUSE

Sexual abuse includes any contacts or interactions between a child and an adult in which the child is being used for the sexual stimulation of the perpetrator or another person. Sexual abuse may also be committed by a person under the age of 18 when that person is either significantly older than the victim or when the perpetrator is in a position of power or control over another child.

Physical Indicators of Sexual Abuse

Sexual abuse is not often discovered in a preschool setting through physical indicators alone. Occasionally a child confides in a trusted teacher, aide or day care provider that he or she has been sexually assaulted or molested by a caretaker, and that may be the first sign that sexual abuse is occurring.

There are some physical signs to be alert for, however. These include:

- difficulty in walking or sitting
- torn, stained, or bloody underclothing
- complaints of pain or itching in the genital area
- bruises or bleeding in external genitalia, vaginal or anal area
- venereal disease.

Behavioral Indicators of Sexual Abuse

The sexually abused child may

- appear withdrawn; engage in fantasy or unusually infantile behavior; even appear retarded
- have poor peer relationships

- be unwilling to participate in physical activities
- engage in delinquent acts, or run away
- display bizarre, sophisticated, or unusual sexual knowledge or behavior
- state he/she has been sexually assaulted by a caretaker.

EMOTIONAL MALTREATMENT

Emotional maltreatment includes blaming, belittling or rejecting a child; constantly treating siblings unequally; and persistent lack of concern by the caretaker for the child's welfare. Emotional maltreatment is rarely manifest in physical signs, particularly in the normal early childhood program setting. However, speech disorders, lags in physical development, and failure-to-thrive syndrome (which is a progressive wasting away usually associated with lack of mothering) are possible physical indicators of emotional maltreatment. More often it is observed through behavioral indicators, and even these indicators may not be immediately apparent.

While emotional maltreatment does occur alone, it often accompanies physical abuse and sometimes sexual abuse. Emotionally maltreated children are not always physically abused. But physically abused children are almost always emotionally maltreated as well.

Behavioral Indicators of Emotional Maltreatment

The emotionally maltreated child may demonstrate the following behavioral characteristics¹:

- habit disorders such as sucking, biting, rocking, enuresis, or feeding disorders
- conduct disorders including withdrawal and anti-social behavior such as destructiveness, cruelty and stealing
- neurotic traits such as sleep disorders and inhibition of play
- psychoneurotic reactions including hysteria, obsession, compulsion, phobias and hypochondria

¹ Max Wald. *Protective Services and Emotional Neglect*. Denver: The American Humane Association, 1961, pp.6-7.

- behavior extremes such as appearing overly compliant, extremely passive or aggressive, very demanding or undemanding
- overly adaptive behaviors which are either inappropriately adult (parenting other children, for example) or inappropriately infantile (rocking, head-banging or thumbsucking, for example)
- lags in emotional and intellectual development
- attempted suicide.

The behavior of emotionally maltreated and emotionally disturbed children is similar. However, parental behavior can help to distinguish disturbance from maltreatment. The parents of an emotionally disturbed child generally accept the existence of a problem. They are concerned about the child's welfare and are actively seeking help. The parents of an emotionally maltreated child often blame the child for the problem (or ignore its existence), refuse all offers of help, and are unconcerned about the child's welfare.

GENERAL INDICATORS OF ABUSE AND NEGLECT

There are some indicators which, rather than signalling the presence of one particular type of abuse or neglect, may be general signs that the child is experiencing abuse and/or neglect at home. These general indicators include emotional/psychological clues, developmental clues, and other learning-related clues.

Emotional/Psychological Clues

Effective early childhood workers are sensitive to the child who is "different" -- learning disabled, handicapped, or whatever. That sensitivity can be extended to abused and neglected children, who may also appear to be different.

Workers must be alert for the children who are distinctive, those who are the exceptions. Such children may be hostile and angry, effectively alienating all who come in contact with them. Or they may be completely passive, withdrawn and uncommunicative. In any case, they represent extremes in the expected range of behavior, attitude, and affect.

Sudden changes in a child's emotional or psychological well being may also be a clue to child abuse and neglect. The previously happy

child who is now sullen and angry all the time may be reflecting changes in the family's home life. The previously gregarious child who is now uncommunicative may be concealing something upsetting. Children who experience anxiety in connection with routine activities, for example, napping, may be experiencing problems at home.

Children are often barometers of family life: sunny when things are fine, stormy when they are not. A sudden change in attitude or affect does not prove that child abuse and neglect exists. But maltreatment should be one of the possibilities considered when the problem situation is assessed.

Developmental Clues

Recent studies have revealed a relationship between child abuse and neglect and certain developmental delays. For example, delays have been reported in the acquisition of language and of gross motor skills among abused and neglected children.

In a study of 378 children adjudicated "dependent" in Los Angeles, it was found that 25% of the abused children and 64% of the neglected children demonstrated delays in motor development. Thirty-nine percent (39%) of the abused children and 72% of the neglected children demonstrated delays in language development. In addition, these children exhibited delays in typical daily activities such as feeding, dressing, hygiene and toileting; these kinds of delays were present in 34% of abused children and 79% of neglected children.* In other words, the unusually "clumsy" or "uncoordinated" child, or the child with a severely limited age-appropriate vocabulary may be evidencing signs of abuse or neglect, particularly if other indicators are also present.

Other Learning-related Clues

Preschool and Head Start programs have as one of their over-all purposes the development of learning skills and preparation for learning essential to the child's success in school. Even in day care programs where specific learning activities are not regularly planned, effective workers will note the development of language and motor skills in children in the course of providing day-to-day care for those children.

Whether learning is formally structured or informally observed, the performance of a child can often be a tip-off to the presence of child maltreatment. This is particularly true when there are sudden changes in performance. Children who were previously enthusiastic

*James T. Kent. "A Follow-up Study of Abused Children," NIMH Grant No. MH 24741-01.

program participants but who suddenly lose interest in most aspects of the program may be emotionally maltreated. Children who previously enjoyed physical activities but who suddenly withdraw from them may have suffered some form of physical or sexual abuse.

Researchers have associated abuse with diminished intellectual capacity, but whether the diminished capacity preceded or followed the abuse is not clear. Research does indicate, however, that the child who is physically handicapped or mentally impaired is at a statistically greater risk of child abuse and neglect than the normal child. In some instances, the handicapped child may be viewed as a disappointment, a burden, or proof of the parents' "failure." Head Start programs, or any program including handicapped children, will want to be sensitive to the particular stresses having a handicapped child can produce in some families. It is well known that children whose physical needs and problems are ignored may experience learning difficulties.

Of course, learning-related difficulties may have a variety of causes and the presence of a learning problem does not prove that child abuse or neglect exists. But, the possibility of child abuse and neglect must be considered -- along with other possible causes -- when the problem is assessed.

RECOGNIZING ABUSE AND NEGLECT THROUGH CONVERSATIONS AND INTERVIEWS

Preschool, day care, and Head Start programs are generally family oriented, providing a great deal of formal and informal communication between program staff and the parents/guardians of the children in the program. Program staff often gather a great deal of important information about the family from routine conversations with parents and children. Parents may reveal details of family life, discuss methods of discipline, or directly ask for help with a problem in the course of parent meetings or in conversations with program staff, volunteers, or various social services providers. Children, too, may provide information on family interactions and home conditions in the course of both formal group settings and informal conversations with program staff.

Conversations with the parent can provide clues as to how the parent feels about the child. The presence of child abuse and neglect may be indicated if the parent constantly:

- blames or belittles the child
- sees the child as "bad," "evil," a "monster"

- seems unconcerned about the child
- fails to keep appointments or refuses to discuss problems the child may be having in the program
- misuses alcohol or other drugs
- behaves in a bizarre or irrational way.

Knowledge of family situations is an important factor in providing the most effective services to children in any early childhood program. The value of learning activities, for example, is considerably enhanced when the child can experience these activities as consistent with home and family realities. Where child maltreatment is suspected, this awareness of the family can be important also, if the family is to receive the kind of help it may need.

The worker who knows a child's family is in a better position to gauge whether a problem may be child abuse and neglect or something else; a chronic condition, or a temporary situation; a child development problem that early childhood centers generally experience or one that may be abuse or neglect related and that demands outside intervention. Family circumstances may also provide clues regarding the possible presence of abuse or neglect. When families are isolated from friends, neighbors or family, or where there is no apparent "life-line" to which a family can turn in times of crisis, the risk of abuse or neglect increases. Crises in marital, economic, emotional or social factors in a family should be assessed carefully as possible causes of family stress.

Sometimes, when considering the possibility of child abuse and neglect, the worker may want to talk with the parent or child about a particular incident. Such a conversation is appropriate provided it is done nonjudgmentally, carefully, and professionally.

Talking With The Parents

Early childhood program staff should be aware of guidelines for talking to parents in two types of situations:

- When the child is exhibiting unusual behaviors. The staff member may suspect that these behaviors result from family problems, but may not yet suspect child abuse and neglect.

- When the staff member suspects child maltreatment and informs the parents of a report to CPS.

Family Problems

Once the decision has been made to discuss possible family problems with the parents, thought should be given to the most appropriate person to meet with the parents. Where a particular staff member has established a good rapport or working relationship with the parent, this individual might be the best person for the task, particularly since the basic approach to the parents should be made in terms of seeking ways to assist them. In any case, thought should be given as to whether this approach should be made by the teacher or provider who has primary responsibility for the child, by the program director or a social services coordinator, or by a combination of two persons.

Parents may be apprehensive or angry at the prospect of talking with a staff person about problems being exhibited by the child. It is important to make the parents as comfortable as possible. The conversation should be conducted in private, and the parents should be told at the beginning why the discussion is taking place.

The staff member who talks with the parents should be professional, direct, and honest. Parents should be assured of the program's support for them and its continuing interest in the child. It is important that the program not alienate the family. If there seems to be stress in the family, program staff might encourage self-referral to CPS or to some other helping agency. Program staff might provide support to the parents by making an appointment for them and/or accompanying them to the appointment.

Suspected Child Maltreatment

Ideally, early childhood programs should make it routine practice to notify parents when a report of suspected child abuse and neglect has been made by a staff member. The notification should be firm, but kind, should state the legal authority for the report, and cast no blame. The legal obligation to report should be stressed and the program's concern for the child emphasized. Parents may be told to expect a visit from CPS or another investigating agency and offered the support and concern of the program. This procedure can benefit the program as well as the family. Parents are less hostile and resentful when they understand that the program has a legal obligation it must fulfill. In addition, they often appreciate

an expression of concern or an offer of support at a time which, after all, is a very difficult one for them.

It is important to note that it is never appropriate for staff to contact the parents in an effort to "prove" a case of maltreatment by accusations or demands for explanations. When talking with the parents, the staff member should keep in mind that situations that appear to be maltreatment may turn out to be something else. Thus, it is well to conduct oneself professionally by adhering to facts, and by avoiding placing blame and making judgments and accusations.

Parents should be assured of the confidentiality of the interview, but if some of what is discussed must be revealed to a third party, that should be made clear. The interviewer should avoid prying into matters extraneous to the subject of the interview and should never betray the child's confidence to the parents. If parents offer explanations, interviewers should be sympathetic. They should never display anger, repugnance, or shock.

Occasionally an angry parent will come to the program demanding to know why someone is "telling me how to raise my children." This is likely to happen particularly if the program has not informed the parent that it has filed a report of suspected child abuse and neglect. Parents have the right to know that a report has been made. They often feel betrayed, or that someone has "gone behind their back," when they are not told. In any case, the parents nearly always know where the report has come from, and attempts at concealment only anger them further. Should angry parents appear at the program, they should be handled exactly as any other parent angry over any other matter is handled.

Early childhood program staff may feel uncomfortable about discussing their suspicions with the parents. In these cases, it might be preferable to have someone else in the program inform the parents of the report. In addition, program staff may feel that in some cases talking with the parents may result in risk to the child or to the staff member, or that the parents may remove the child from the program. In these cases, it is advisable to report directly without informing the parents.

Talking With The Child

For early childhood programs which include infants and toddlers, these young children may not be able to verbalize in a manner which will be helpful in determining the possibility of child maltreatment. Where the children's verbal skills are conducive to such a discussion, however, it may be necessary to talk with them concerning possible inflicted injuries or conditions of neglect. Should this occur, the interviewer must keep in mind that the child may be hurt, in pain, fearful or apprehensive. Every effort must be made to keep the child as comfortable as possible in the circumstances.

The interviewer should be a person the child trusts and respects. While the interviewer may find it necessary to involve another worker in the discussion, groups of interviewers should be avoided. The conversation should be conducted in a quiet, private, nonthreatening place, free of interruptions. A conference room or an office are possible choices. The child should be put at ease, and the interviewer should sit near the child, not behind a desk or table.

Children should be assured that they are not in trouble, that they have done nothing wrong. Children often feel, or are told, that they are to blame for their own maltreatment and for bringing "trouble" to the family. Therefore, it is important to reassure children that they are not at fault.

Questions and discussion should be in language the child understands. If, in describing something -- an incident of sexual assault, for example -- the child uses a term with which the interviewer is not familiar (a word for a part of the body, for example) the interviewer should ask for clarification or have the child point to the part that is meant. The interviewer should not disparage the child's choice of language; rather the interviewer should use the child's terms to put the child at ease and to avoid confusion.

The primary purpose of this discussion is to gain whatever information the child can reasonably convey, not to press for answers or explanations which the child may be unable or unwilling to give. Within the child's level of understanding, the interviewer should seek to assure the child that the discussion is private and confidential. If, as a result of the conversation, further action is necessary, children should be told, if they can understand, that someone else may wish to talk with them.

If children wish to show their injuries to the interviewer, they should be allowed to do so, but no child should be pressed to remove clothing. The interviewer should not suggest answers or explanations to the child, should not show surprise or frustration if the child's explanation changes during the interview, and should never indicate disapproval or anger toward the child, the parent, or the situation. Finally, the child should not be asked to conceal the conversation from parents.

Sometimes, during the course of an official investigation into a report of suspected child abuse and neglect, a worker from Child Protective Services (CPS) will need to interview a child at the

program center. If this occurs, the program should provide a private place for the interview and someone from the program whom the child trusts should be present throughout the interview. If it is necessary for the CPS worker to remove the child from the center for a medical examination, a written release can be requested from the CPS worker.

"Do's and Don'ts" of Interviewing

Exhibit II, following this page, summarizes some "Do's and Don'ts" of interviewing. Local programs may wish to add other items to these lists based on local policy and procedures.

EXHIBIT II
SOME "DO'S AND DON'TS" OF INTERVIEWING

When Talking With The Parents

DO:

- Select interviewer(s) appropriate to the situation
 - Conduct the interview in private
 - Tell the parent(s) why the interview is taking place
 - Be direct, honest and professional
 - Tell the parent(s) the interview is confidential
 - Reassure the parents of the support of the program
 - Tell the parents if a report has been made or will be made
 - Advise the parent(s) of the program's legal responsibilities to report
-
-

DON'T:

- Try to "prove" abuse or neglect by accusations or demands
 - Display horror, anger, or disapproval of parent(s), child or situation
 - Pry into family matters unrelated to the specific situation
 - Place blame or make judgments about the parent(s) or child
-
-

When Talking With The Child

DO:

- Make sure the interviewer is someone the child trusts
 - Conduct the interview in private
 - Sit next to the child, not across a table or desk
 - Tell the child that the interview is confidential
 - Conduct the interview in language the child understands
 - Ask the child to clarify words/terms which are not understood
 - Tell the child if any future action will be required
-
-

DON'T:

- Allow the child to feel "in trouble" or "at fault"
 - Disparage or criticize the child's choice of words or language
 - Suggest answers to the child
 - Probe or press for answers the child is unwilling to give
 - Display horror, shock, or disapproval of parents, child, or the situation
 - Force the child to remove clothing
 - Conduct the interview with a group of interviewers
 - Leave the child alone with a stranger (e.g., a CPS worker)
-
-

IV

REPORTING CHILD ABUSE AND NEGLECT

The involvement of preschools, day care and Head Start staff in the reporting of child abuse and neglect is supported by federal regulations, state laws, and local policies and procedures. Each of these levels provides authority for, encourages or mandates the involvement of early childhood program personnel in the reporting process by stating what is required of them and how the obligation is to be fulfilled.

FEDERAL REQUIREMENTS

At the federal level, there are some regulations that are directly applicable to the reporting of child abuse and neglect by early childhood programs. They include the *Head Start Policy Manual* from the Department of Health, Education, and Welfare (DHEW), and the Federal Family Educational Rights and Privacy Act (FERPA) of 1974. Although those programs which do not receive any federal funding are not governed by these regulations, they provide good standard practices in reporting child maltreatment.

Head Start

Under regulations adopted in January 1976 as Chapter N-30-356-1 of the *Head Start Policy Manual*, all Head Start programs are required to report incidents of suspected child abuse and neglect to appropriate state or local authorities in accordance with the provisions of applicable state law. The regulations provide that each Head Start program designate a staff member who has responsibility for:

- Serving as liaison to CPS and other agencies mandated to receive reports of suspected child abuse and neglect
- Informing parents and staff of state and local laws regarding child abuse and neglect
- Discussing the report with the family, as appropriate
- Informing other staff of the process for identifying and reporting child abuse and neglect
- Reporting instances of child abuse and neglect on behalf of the Head Start program, where such indirect reporting is permitted.

The regulations also require staff orientation on child abuse and neglect and encourage orientation for parents, stressing help rather than punishment for affected families.

Head Start programs which do not comply with these regulations risk loss of funding or other appropriate action by DHEW.

Federal Family Educational Rights and Privacy Act of 1974

Early childhood programs in school systems may feel constrained from reporting by the Federal Family Educational Rights and Privacy Act of 1974 (FERPA), which governs the release of information from school records. However, FERPA does not bar the reporting of suspected child abuse and neglect by those early childhood education programs which receive federal funding. In the majority of cases, early childhood program personnel will not be relying on program records, but on their own personal knowledge and observations, when reporting a case of suspected child abuse and neglect. Since no program records are involved in these cases, FERPA does not apply.

In a small number of cases, however, it may be necessary to consult program records in order to determine whether a report of suspected child abuse and neglect should be made. Ordinarily parental consent is required before information contained in these records can be released. However, there are exceptions which can apply in the case of suspected child abuse and neglect.

Prior parental consent is not required when disclosing information from program records if a "health or safety emergency" exists. It is the position of NCCAN and the Fair Information Practice Staff (the DHEW unit which administers FERPA) that child abuse and neglect generally may be considered a "health or safety emergency" if the state definition of child abuse and neglect is limited to situations in which a child's health or safety is endangered. Further, NCCAN and the Fair Information Practice Staff have agreed that responsibility for determining whether a "health or safety emergency" exists must be made by the early childhood program personnel involved, on a case-by-case basis. Thus if program staff determine that an emergency exists, information contained in program records can be disclosed without parental consent and without violating the provisions of FERPA.

Another exception to the prior consent rule exists if the release of information contained in program records is made to:

State and local officials or authorities to whom such information is specifically required to be disclosed pursuant to State statute adopted prior to November 19, 1974.

Most state child abuse and neglect reporting statutes both require reporting by early childhood programs to state or local authorities and were enacted prior to November, 1974. Thus, in the majority of states, release of information from program records to state or local CPS agencies is permitted under FERPA. Those programs which receive federal funds should check with legal counsel to be certain whether a particular state enacted a reporting law prior to November 19, 1974, and to determine whether this exception to FERPA provisions applies in their jurisdiction.

A final exception to the prior parental consent rule is provided in FERPA Section 99. This section provides that any information contained in program records may be released without parental consent to

comply with a judicial order or lawfully issued subpoena; Provided that. . . (the program) makes a reasonable effort to notify the parent. . . in advance of compliance.

STATE LAW

Each of the fifty states, the District of Columbia, and the U.S. territories have child abuse and neglect reporting statutes. While each of these laws differs from the others in one or more ways, all share a common framework. In general, state reporting statutes define child abuse and neglect, specify who must report it, to whom it must be reported, and the form and content of the report. Because of the wide diversity in laws, particularly with regard to the definition of child abuse and neglect, and because of the need for accuracy, early childhood program personnel are advised to obtain a copy of their own state's reporting statute and to study its provisions carefully. A review of major points contained in most laws follows.

Who Reports

Most states mandate reporting of suspected child abuse and neglect by those who work with or are in contact with children. These include professionals such as social workers, doctors and nurses, educators, law enforcement officers, and staff of centers. In some states, nonprofessionals and/or paraprofessionals are also required to report. Currently, many states specifically require staff of early childhood programs to report suspected child abuse and neglect directly to a specified agency. While program policy may require reporting to a child abuse coordinator or

program director, this does not eliminate the need for the worker to ensure that a report is filed with CPS. Thus, if the staff member who is designated by the program to report fails to do so, the early childhood worker should report directly.

To emphasize the mandatory or required reporting of suspected child abuse and neglect, many states provide penalties for those who fail to perform their required duties under the law. Penalties can be severe: fines of up to \$1,000 and prison sentences of up to one year in some states. Penalties may exceed these in some situations; for more details on this the reader should refer to Chapter II. For those who do report, however, the law provides protection. Reporters who report suspected child abuse and neglect in good faith are immune from civil liability and criminal penalty. The reporter cannot be successfully sued for reporting child abuse and neglect to authorities, but in many states persons who are required to report and refuse to do so can be successfully sued.

What to Report

It is necessary to consult state statutes to be certain just what is considered maltreatment in a particular jurisdiction. However, most states include in their definition of child abuse and neglect some form of nonaccidental physical injury, neglect, sexual abuse, and emotional maltreatment (sometimes called emotional neglect or mental injury).

Most states require the reporting of suspected child abuse and neglect; *no state requires the reporter to have proof that abuse or neglect has occurred before reporting.* The law may specify reporting of "suspected" incidents or include the phrase "reason to believe." In any case, the intent is clear: incidents are to be reported as soon as they are noticed. Waiting for proof may involve grave risk to the child. Proof may be long in coming; witnesses to child abuse and neglect are rare, and the child's testimony may be disbelieved or inadmissible. Reports are made in terms of the child's possible condition, not in terms of an accusation against parents. A report of suspected child abuse and neglect states that a child *may be* an abused or neglected child, not that the parents *are* causing harm to their child. Therefore, proof is not required of the reporter. Proving the case is properly left in the hands of trained investigators.

INFORMATION KEY #4: Definition of Child Abuse
and Neglect

According to laws in this state, reportable child
abuse and neglect is defined as:

When to Report

State statutes vary with respect to when a report must be filed. Reports may have to be made immediately, within 24 to 48 hours, or during some other specified time period. Sometimes more than one report is required, for example, a written and an oral report, with each report having its own specified time period. Again, it is necessary to check state statutes to be certain which provisions apply in a given jurisdiction.

INFORMATION KEY #5: When to Report

1. An oral report ___ is/___ is not required.
If an oral report is required, it must be made
to the responsible agency within ___ hours.
2. A written report ___ is/___ is not required.
If written report is required, it must be made
to the responsible agency within ___ hours.
3. Special requirements:

If the early childhood program has special
reporting requirements, a _____
(type of report) must be made to _____
(name/position of person) within ___ hours.

Where to Report

Each state specifies one or more agencies as recipients of reports of suspected child abuse and neglect. Usually this agency (or one of the agencies, if two or more are specified) is the department of social services, human resources, or public welfare. Other agencies mandated to receive reports may include the police department, health department, county or district attorney's office, or juvenile or district court.

The local department of social services or other receiving agency may maintain a special child abuse and neglect unit, often called Child Protective Services (CPS). If there is no special unit, the local department itself will have CPS responsibility. The CPS unit receives and investigates all reports of suspected child abuse and neglect and may be involved in treatment and rehabilitation of affected families.

It is important to determine who receives reports of suspected child abuse and neglect in a particular jurisdiction. Requirements of confidentiality should be observed so that reports are made only to authorized persons. The state reporting statute will provide this information. An attorney should be consulted if questions arise.

INFORMATION KEY #6: Where the Report Goes

For this program, reports on suspected child abuse and neglect are made to:

Telephone Number: _____

Address: _____

Note: Fill in above the agency to which the actual report is made, regardless of who, according to program procedures, makes the report.

How to Report

State statutes vary with regard to the form and contents of reports of suspected maltreatment. All states require that either an oral report or a written report or both be made to the agency or agencies specified as responsible for child abuse and neglect. When two reports are required, the oral report is usually required immediately, with the written report following within 24-48 hours.

Some state statutes will specify just what information is to be submitted in a report of suspected child abuse and neglect. Usually this includes:

- Child's name, age, and address
- Child's present location
- Parents' name and address
- Nature and extent of the injury or condition observed
- Reporter's name and location (sometimes not required, but extremely valuable to the CPS unit).

In some states, additional information is required. This may include evidence of previous injury to the child or to another child in the same family; any information which would aid in establishing the cause of the injury; and any information which would aid in identifying the person responsible for the injury.

To facilitate the making of an oral report of suspected child abuse and neglect, some states maintain a toll-free 24-hour telephone line just for receipt of reports of suspected maltreatment. Anyone may use this "hotline" to report an incident of suspected child abuse and neglect anywhere in the state.

To facilitate the making of written reports, some states provide a reporting form for suspected child abuse and neglect. However, early childhood program personnel may not be excused for failing to report by claiming that reporting was not possible because no reporting form was available. The reporter may use any piece of paper so long as the required information is provided.

INFORMATION KEY #7: How to Report

The following information must be provided to:

(name of person/position)

(telephone number or address)

(If the above is a person within the program, see
also Information Key #6)

Child's name: _____ Age: ____

Address: _____

Parent's (s') name(s): _____

Address: _____

Physical indicators observed: _____

Behavioral indicators observed: _____

Other indicators observed/known: _____

Reporter's name and position: _____

Date of report: _____

LOCAL POLICY AND PROCEDURE REGARDING REPORTING

Throughout the country, more and more early childhood programs are enacting policies and procedures regarding child maltreatment. These policies and procedures support state law with regard to reporting, and they often provide internal mechanisms to be followed when a case is reported. Some policies go beyond reporting by encouraging staff to become actively involved with families and children.

Individual Program Policy and Procedure Regarding Reporting

If the early childhood program is to be effective in its response to child abuse and neglect, there must be an established policy which defines the role of the program in identifying and reporting suspected child maltreatment cases. This policy should describe procedures for: identifying suspected child abuse and neglect cases; determining how the problem will be handled within the program, including staff responsibility for decisionmaking and for discussing suspicions with the parents; reporting suspected cases of child abuse and neglect; and following up to determine the outcome of the report.

INFORMATION KEY #8: Program Reporting Requirements

Special requirements for reporting in this program include:

In addition to these specific procedural guidelines, the policy of the early childhood program might also define confidentiality requirements, give general information on the relationship of the program to CPS and other service providing agencies, define the

perceived role of the program in prevention and treatment of child abuse and neglect, establish training requirements for program personnel with regard to identification and reporting, and specify recordkeeping and record expungement procedures.

Assigned Staff Responsibility

The policy of the early childhood program should arrange for appointment of a staff member to coordinate the program's child abuse and neglect activities. This individual would have responsibility for liaison with CPS or any other agency which receives abuse and neglect reports as well as with other community agencies involved with abuse and neglect. This staff member should also ensure that all program staff are aware of procedures for identifying and reporting child abuse and neglect and that parents as well as staff are aware of the legal requirements regarding reporting. This person should report to the appropriate agency and discuss the report with the family. This person should also be aware of medical and other resources available in the community for abusive and neglectful families.

Responsibility of Other Staff Members

All personnel in early childhood programs must be responsible for learning indicators of child abuse and neglect and for following established reporting procedures if they suspect child maltreatment. They must be aware of the importance of confidentiality in these cases. They must also be willing to cooperate with CPS and other community agencies in prevention and treatment efforts.

DIFFICULTIES WHICH MAY BE ENCOUNTERED WHEN REPORTING

A report of suspected maltreatment is not an accusation. It is a request for the process of help to begin. But the reporting process does not always go smoothly. Difficulties may be encountered which can prove a bar to reporting or can discourage continued involvement in child abuse and neglect.

Personal Feelings

One of the biggest obstacles may be personal feelings. Some people just do not want to get involved; others may feel parents have the right to treat children in any way they wish. Generally, once it is understood that involvement is required and that child

abuse and neglect differ from acceptable child-rearing practices, much of this reluctance disappears.

The better acquainted we are with people, the closer they are to us, the more difficult it is for us to admit they may have a problem. This is true for suspected child abuse and neglect as well. It may be extremely difficult for an early childhood worker to face the fact that the son of a colleague or the daughter of a neighbor has been abused or neglected. This is a natural feeling, but it must be overcome. The law does not exclude the children of friends and acquaintances from its protection.

Nature of the Parent-Program Relationship

The nature of the relationship between the early childhood program and the parents of children in attendance may inhibit program staff from reporting suspected cases of child maltreatment. Preschools' and day care programs' livelihood may be dependent upon the attendance of children at the center. These programs may fear that reporting would injure their reputation, lead to a decline in enrollment, or both.

The fact that early childhood programs are providing a service to parents and that there are no buffers between the program and parents may decrease the willingness of program staff to report suspected abuse and neglect. Program personnel may develop close relationships with parents and may give the parents the benefit of the doubt if they observe indicators of abuse or neglect. Even if they do suspect child maltreatment, they may fear that confronting the parents would result in a hostile, indignant, or distressed reaction or retaliation. Frequently, staff are not trained to deal with negative reactions from parents.

These factors are even more pronounced in family day care situations. Family day care providers are likely to observe indicators of abuse and neglect, but may find it even more difficult to report their suspicions. The reader should refer to Chapter VIII on Family Day Care for detailed information.

Problems Internal to the Program

Sometimes program directors place an obstacle in the way of reporting, discouraging staff involvement by refusing to take their reports seriously, or by failing to make an official report of suspected maltreatment once a situation has been brought to their attention. Such actions may be more than obstructive; they may be illegal.

The program director may provide no back-up to line staff, thus undercutting the reporter who has acted in the best interests of the child and complied with the law. Suddenly reporters find their motives questioned. Failure to provide inservice training to staff in order to inform them of their legal obligations also may prove a bar to reporting. Staff who do not know the signs and symptoms of child abuse and neglect and who are unaware of their legal responsibilities will be unable to help abused and neglected children.

Many of these procedural difficulties can be resolved if a reporting policy is adopted, reporting procedures are instituted, and staff development is made mandatory.

Previous Bad Experiences

Early childhood program personnel who have had an unfortunate experience when reporting suspected child abuse and neglect may be reluctant to become involved a second time. They may have been discouraged from reporting, or may have developed a distrust of CPS (or another agency) or its staff, feeling that a previous case was not handled to their satisfaction. These concerns are real, and often valid. Things may not have gone as well as they should have. But a previous bad experience does not mean that the next time things will not be handled well. CPS agencies throughout the country are continually working to upgrade their services. They are becoming more responsive and highly skilled. Communities are providing more resources and increased staff to handle the rising number of child abuse and neglect cases. Altogether the picture is brighter than it was even a year ago, and this trend is likely to continue. However, after an unfortunate experience with CPS agency response, the reporter should not hesitate to request that an agency supervisor intervene in the handling of the case.

Program personnel must report regardless of their concerns or previous experience. The law requires it, and no exemptions are granted to those who have had a bad experience. In addition, while reporting does not guarantee that the situation will improve, not reporting guarantees that, if abuse or neglect exists, the child will continue at risk.

The Belief That Nothing Will Be Done

Sometimes potential reporters become convinced that nothing will be done if they report, so they choose not to report. Aside from the legal considerations (failure to report is against the law in many states) such reasoning is faulty. If an incident of suspected child abuse and neglect is reported, some action will occur. At the very least, a record of the report will be made, the early childhood program's legal obligation fulfilled, and the investigative process begun. On the other hand, if the incident is not reported, one may be sure that nothing will be done. Abused and neglected children cannot be protected unless they are first identified, and the key to identification is reporting.

THE EARLY CHILDHOOD PROGRAM AS A TREATMENT RESOURCE

More than one-third of the reported cases of child abuse and neglect involve children who are less than six years old. Although in the past the roles of early child care workers and educators in cases of abuse have been confined to reporting, it is now recognized that child care program staff are in a unique position to provide both treatment and preventive services to families.

Because child care staff may be the first adults with whom parents share child care responsibilities (outside of neighbors and extended family), caretakers and educators can be in a powerful position to help a family while there is still a good chance of changing harmful attitudes and child rearing practices. Parents with young children may be more receptive to assistance in caring for their children than older families whose patterns have become established.

Staff members in day care programs, preschools, and Head Start programs can be involved with problem families in several ways after abuse and neglect have been reported. First, they can be of help to CPS in designing and implementing treatment plans to meet the needs of a particular family. Second, they can be a major source of information on the child's progress once treatment has begun. Early childhood program staff can also encourage parents to become more involved with their children through participation in special programs with other parents. Finally, program staff can participate in community efforts to improve the quality of child care and develop systems to deal with abused and neglected children.

In addition to services provided through regular early childhood programs, increasing numbers of special facilities are offering intensive therapeutic programs for abused children and their families. The therapeutic facility works closely with the local CPS unit in coordinating both treatment and referrals. Services in a regular early childhood program must be provided within the context of regular program functions, often making individualized treatment impossible. The therapeutic center, however, directs all its energies toward providing highly individualized care in an intensely supportive environment to counteract the effects of abuse and neglect. Therapeutic centers may offer individual or group therapy, a testing program, and special remedial skills training. Services also typically include work with parents to modify the parent/child relationship.

Although both regular and therapeutic early childhood programs can provide services for maltreated children, there is a substantial difference in the nature and extent of treatment that they can provide. These differences will be discussed in the remainder of this chapter.

SUPPORTING ABUSIVE AND NEGLECTFUL FAMILIES IN THE REGULAR EARLY CHILD CARE PROGRAM

Types of Facilities

Child care services for children may be provided in a variety of public or private settings. Programs may range from centers offering basic child care services to elaborate programs providing structured learning experiences. Programs may also reflect widely different goals, depending on their sponsorship and funding, as well as on the philosophies of their staffs. Despite these broad differences, early childhood program staff are in a unique position not only to identify cases of child abuse and neglect, but also to help counteract the adverse effects of maltreatment through consistent and supportive interaction with children, and to support positive changes in family dynamics through services to parents.

While it is highly desirable for programs to offer a range of services to achieve these goals, it is also essential for administrators and planners to recognize the limitations of the general early childhood program in treating abuse and neglect. Many programs do not have the resources to offer elaborate services. Some early childhood programs may decide not to admit children who are known to be maltreated because of the extensive individualized attention these children require.

Most importantly, all services provided for abused and neglected children must be designed to take the child's total family situation into account. Therefore, specific services for children who have been identified as abused or neglected should be provided only in consultation with CPS workers; children who are in need of intensive services such as psychotherapy should usually be referred to a therapeutic facility.

Although they may differ from other early childhood programs in many respects, Head Start programs can serve as one model of a general program's role in support of abused and neglected children. Policy instructions for Head Start emphasize a prevention role in the area of child maltreatment, and all staff members are to be trained in recognizing possible indicators of family stress. While Head Start programs are explicitly instructed not to undertake

treatment on their own, they are expected to work closely with CPS. In many cases, CPS might recommend as part of a treatment plan that an eligible child known to be abused or neglected be admitted to a Head Start program. The policy of Head Start is to accommodate these children by admitting them and retaining them even when circumstances make it difficult for the program to do so. Head Start staff who work with maltreated children or children from families in stress are encouraged to maintain contact with CPS and provide as much support and service as possible.

Of the various types of early childhood programs, Head Start may currently be in the best position to assist abused and neglected children and their families, primarily because regulations encourage it and agencies are required to appoint a staff member to coordinate abuse and neglect activities. Such activities in day care programs and preschools are a matter of individual program policy and are largely dependent on the initiatives of directors and staff members.

The provision of support for families experiencing child maltreatment problems is compatible with the routine operation of most regular early childhood programs. In fact, many practices that are considered most effective in a regular early childhood program can be of great value for maltreated children and their families. Areas in which regular early childhood programs can benefit abused and neglected children and their parents can be discussed in terms of:

- support for the child
- support for the parents
- coordination of supportive activities.

Support for the Child

All children need to interact with warm, supportive adults who are consistent in their attitudes and expectations; this need is even more apparent in abused and neglected children. Staff members who are in frequent and regular contact with abused and neglected children can establish therapeutic relationships with them that may help counteract adverse home situations. If such positive experiences are provided early enough in a child's life, the possibility of counteracting the effects of child maltreatment is increased.

Staffing

It is extremely important that every early childhood program employ staff who are skilled in working with young children. Abused and neglected children often experience developmental delays, and program staff who will be working with these children should thus have particular knowledge of normal developmental milestones. They should be trained to recognize deficits in development and know how to implement activities which can help these children overcome such deficits.

While most early childhood programs may not be able to retain the 1:3 staff/child ratio considered necessary for therapeutic programs, the 1:10 ratio offered in many programs may be too high to provide effective individualized attention to maltreated children. Where maltreated children are included, efforts should be made to ensure the lowest staff/child ratio possible. Proposed staffing requirements for federally funded day care programs, published June 15, 1979 for public comment, call for ratios of 1:4 or 1:5 for ages 0 to 2½ years; 1:7 or 1:8 for ages 2½ to 4 years; and 1:9 or 1:10 for ages 4 to 6 years.

Staff should also receive special training and orientation in the problems of maltreated children. As discussed in Chapter IV, child care workers should be able to recognize and evaluate the signs of physical or emotional abuse or neglect; procedures for dealing with suspected incidents should be well established. For purposes of referral and coordination the staff should have information regarding medical and social service agencies serving families in stress in the community. Within the constraints of the regular early childhood program, skilled staff can provide support for maltreated children, even if primary services to these children are the responsibility of other agencies.

Aside from the regular early childhood staff, programs that include maltreated children may require the services of professionals who can provide special therapeutic services to children on a part-time or consultant basis. A community health nurse is often attached to programs or facilities in order to periodically check children for vaccinations, nutrition, and general health. Some programs retain a specialist in early childhood development or education to provide structure and direction for the program as well as consultation with full-time staff members. A child psychologist or psychiatrist might also be available for consultation in working with children who have problems, including those who have been abused or neglected. The general early childhood program does not provide therapy, however, and all treatment activities provided for maltreated children should

be designed and carried out under the planning and management of the CPS worker assigned to the case.

Program Guidelines

Individual programs will vary with the goals of the facility. Consideration should be given to such factors as program activities, methods of discipline, special problems of maltreated children, and establishing relationships with maltreated children.

- All early childhood programs should provide a variety of activities and equipment and encourage exploration of the environment, development of skills, and interaction with other children and adults; however, this is especially important for maltreated children who have often not had these experiences at home. This type of support for the child is most effectively provided in a structured, nonthreatening atmosphere where competition is minimized and children can experience success.
- It is especially important when dealing with maltreated children not to reinforce the harmful effects of home discipline. For example, discipline methods involving corporal punishment or isolation of the child must be avoided.
- Abused and neglected children may present special problems which make it particularly difficult for staff to establish relationships with them. Research has shown that children who are handicapped, hyperactive, or emotionally disturbed run a higher risk of maltreatment than do normal children, probably because they are more difficult to deal with. In addition, children who have been maltreated may develop personality characteristics which stand in the way of warm relationships.
- Workers interacting with maltreated children need guidance in how to cope with physical and emotional dysfunction in a warm and supportive manner. This is especially true in working with very young children who have not yet developed sufficient verbal skills to express their feelings.

In all cases staff need to learn how to balance the special requirements of abused children against the demands of the total program; the emotional needs of each child must be met without slighting the group or making any individual child feel conspicuous.

Support for Parents.

Parents who maltreat their children are often socially isolated, without friends or emotional support, and are frequently experiencing problems in other areas of their lives. The fact that many abusive and neglectful families have multiple problems necessitates that the total home situation be taken into consideration in order for services to children to be most effective. While it is unrealistic for all early childhood programs to provide a broad range of social services, every program can be helpful to families by involving parents in the program and developing some supportive activities for them.

Parent Involvement Activities

Early childhood centers are in an especially delicate position regarding abusive and neglectful parents; they depend on parents for support and, if parents feel threatened, they may withdraw their children at any time. In order to develop a successful program for parent involvement, centers must offer services which families cannot find elsewhere and make it convenient for them to participate. Types of programs for parents may vary from community to community, but some possibilities include:

- Parent/teacher conferences. It is good practice to hold conferences with all parents on a regular basis. This allows staff to give families feedback on the well-being of the child, and also gives parents a chance to verbalize their problems and frustrations. This is especially important for abusive and neglectful parents because being able to communicate with staff about family problems reduces their feelings of isolation. In addition, such conferences can provide an opportunity for staff to assess the need for referrals to other agencies and to make such referrals as necessary.
- Additional school/home contacts. Some early childhood programs make home visits to selected families periodically. It is advisable to give priority to abusive and neglectful families in making these visits. This gives program staff a chance to see the child's situation first hand, and may make it possible to avert potential problems. It also gives parents a sense of the program's concern for them and their children.

Staff of early childhood centers may be the only professionals who have access to abusive and neglectful families; the parents may perceive them as helpful and nonthreatening. If visits are not feasible, telephone calls can often substitute.

- Child development/parent skills classes. These classes should be available to all parents, but they are particularly important for abusive and neglectful parents. Presentations could cover such subjects as early childhood development, disciplinary practices, and appropriate recreational activities. Guest speakers might be invited, and topics could extend into areas of general family concern such as establishing credit and housing. Presentations should be relevant to the group attending; material which is applicable to low income or problem families may be helpful where appropriate to the group. The focus should be on improving skills so that it is easier and more rewarding for parents to interact with their children.

Through these classes, abusive and neglectful parents may develop social relationships with other parents and may discover that other parents also need advice regarding child rearing. In addition, through such programs, parents who are having problems learn to regard staff as supportive rather than as adversaries.

- Special programs. Aside from programs designed specifically to provide support to parents, family involvement in program activities and planning is of great value. Some early childhood programs are based on a cooperative structure which requires parents to participate in program activities on a rotating basis. Other programs encourage parents to volunteer to participate in working with the children in the program. Often it is possible for families to assist in program planning. Involvement in these activities can help abusive and neglectful parents to interact with other parents, children, and program staff. This reduces isolation while, at the same time, providing models of more appropriate adult/child interactions.

In setting policy regarding parent participation, early childhood programs should be aware that many parents are burdened with jobs,

commuting, infant care, and other activities which make it difficult for them to take advantage of programs or give their time. Unfortunately this may be the case in families (either single-parent or two-parent) experiencing stress--the very groups most susceptible to child abuse and neglect. Therefore early childhood facilities should make it easy and worthwhile for parents to participate in as many activities as they can.

This might be accomplished by providing volunteer activities on a rotating basis, and by scheduling classes, support groups, and planning sessions during evening hours so that working parents can attend. It is also very helpful if child care and transportation can be provided for parents who need them. By making it easy and rewarding for parents to participate in the activities of the program, staff members help strengthen parent/child bonds and reduce the possibility of child maltreatment.

Joint Parent/Child Activities

In addition to encouraging parent participation in special programs and volunteer work, programs can plan activities which provide abusive and neglectful families with an opportunity to interact with other families in a positive, relaxed setting. Such activities give parents who may be feeling isolated and frustrated a sense that they are part of a larger community of caring people.

Appropriate parent/child activities might include lunches at school, school plays, picnics, holiday celebrations, and field trips of various types. The same considerations regarding participation apply to this type of activity as to special classes and volunteer activities--that is, every effort should be made to schedule plans conveniently, and to see that any parents who wish to participate have transportation

Coordination of Supportive Activities

As explained above, regular early childhood programs must not undertake treatment of neglected and abused children on their own. It is important to make sure that any special program developed for an individual child is worked out in conjunction with CPS and other appropriate community resources.

Staff Meetings

Virtually every early childhood program should hold regular staff meetings. For programs serving maltreated children, these often should be held in consultation with a psychologist or other professional child care worker in order to discuss specific questions about children and deal with problems as they arise. The observations and perspectives of all staff who work with the children can be very illuminating, and discussions can serve to provide a focus for staff efforts with specific children.

CPS Coordination

The approach of early childhood staff with abused and neglected children must be worked out in conjunction with the CPS unit in the community. It is essential for CPS workers and the early childhood program to communicate regularly about the progress of each maltreated child. Often staff can provide invaluable information about the child's well-being, while CPS workers can help the staff understand and respond to special needs and situations.

Referral

Abusive and neglectful parents are almost always in need of services which are beyond the scope of the early childhood program itself such as marriage counseling, legal aid, drug or alcohol treatment, and other types of therapy. The early childhood facility which is serving maltreated children should be ready and able to make such referrals. Staff should familiarize themselves with each family's situation so that they will be able to sense when such assistance is appropriate.

THE THERAPEUTIC PROGRAM FOR ABUSED AND NEGLECTED CHILDREN

The previous section described a regular early childhood program which is generally supportive of children and families. Treatment for abused or neglected children is provided in the context of the regular program and in coordination with the CPS unit in the community. Increasing numbers of therapeutic programs are being established to provide special care and treatment for abused and neglected children and their families. Most of these programs include a range of special services in addition to those described previously.

Enrollment Requirements

Placement in a therapeutic child care facility almost always occurs through referral from the local CPS, the medical establishment, or other authority. The children have almost always been previously identified as abused or neglected. Many of these programs are

attached to a training center or are part of a government sponsored demonstration project. Often these therapeutic programs are free or have fees which are based on a sliding scale. In many instances, enrollment is specified as part of the treatment plan for the family or is mandated by the court.

Staffing

The single most important aspect of a treatment program for abused and neglected children is the quality of the relationship which staff can establish with the children. A therapeutic child care program may be the first and only place where maltreated children can feel free to express their desires and count on a responsible, caring adult. It is essential to have a very low staff/child ratio in order to achieve the kind of relationship with children which is required to counteract abuse. Most authorities recommend a staff/child ratio of not more than 1:3 for programs designed to treat abused and neglected children. In addition, staff should receive thorough training and orientation in working with maltreated children. Aside from regular staff, many therapeutic facilities employ health care professionals, a child psychologist or psychiatrist, a specialist in early childhood education or development, and possibly a social worker. These professional staff are available to provide direction for the total program, to meet in consultation on individual cases, and sometimes for individual therapy, testing, or skills training.

Program Guidelines

Individual programs will vary. However, in addition to providing the range of activities described for general programs, special treatment programs will frequently offer individual or group therapy. There may also be a testing program to identify emotional problems or learning deficits, and remedial skills training may be included.

The classroom program in a general early childhood program typically is designed to allow and encourage choices and success. Most activities are open ended, with no right or wrong approach. This lack of regimentation and freedom to explore and adapt to the environment must receive even greater emphasis in therapeutic child care programs, because this is often the only setting where abused and neglected children can experience such freedom. A wide range of activities similar to those in general programs should be offered, including such things as water play; paints and dough; a housekeeping area with dolls, kitchen equipment, and "dress-up" clothing; indoor and outdoor gym equipment; and movable props which allow children to create their own environment. Therapeutic child care programs may have a greater need than regular early childhood programs for

equipment which gives children an outlet for aggressive behavior, such as punching bags and large pillows.

The goals of the therapeutic program should include development of positive self-image, trust, and autonomy in the child. By providing a safe, predictable environment, the program will help the children become less defensive. Thus they will have more energy to resolve conflicts and pursue activities which are essential to mastery of skills. As a result of extensive experience with warm, caring adults, maltreated children will be better able to utilize the human resources available to them.

Supports for Parents

As discussed earlier, when working with maltreated children it is particularly important to involve parents in the program. Abusive and neglectful families often have many problems, and there will be no lasting benefit to the child unless basic patterns can be changed and primary difficulties addressed.

Therefore, most therapeutic facilities offer specifically focused programs similar to those described earlier in this chapter. Parent/teacher conferences should be frequent, support groups should meet on a regular basis, and volunteer activities are encouraged. In addition, some therapeutic facilities have employed "parent helpers," that is, paraprofessional staff who spend time with parents in the home or at the center, interacting with both parent and child and serving as a parenting model. Another technique which has proved successful involves videotaping interactions between parents and child, and then reviewing the encounter with the parents.

COMMUNITY INVOLVEMENT

It is extremely important for early childhood programs of all types to become involved in community groups which are attempting to coordinate resources toward improved care of children, and toward prevention and treatment of child abuse and neglect. Program representatives should contact existing groups about participation; where groups have not yet been formed, early childhood programs may wish to take the lead in establishing them.

Participation In Multidisciplinary Efforts

Prevention and treatment of child abuse and neglect is an effort which requires that a wide range of professions and disciplines be

involved. In general, multidisciplinary efforts in a community will be of at least two types; overall coordinating bodies often called community child protection coordinating committees, and multidisciplinary case consultation teams.

Community Child Protection Coordinating Committees

Good organization of services and communication among service providers helps communities deal effectively with problems and crises. In response to the need for overall community coordination, many communities have established a community child protection coordinating committee to provide an organizational structure for cooperation among community agencies and facilities. Such groups help define the roles and responsibilities of the various service providers and to avoid gaps and duplications in services.

In most cases CPS has taken the responsibility for organizing the committee, but if not, early childhood programs in the community might join with CPS in exploring the possibility of establishing the group. If a committee does exist, but does not include early childhood programs, a concerted effort should be made to correct this serious omission. Early childhood advocates and caregivers can bring an invaluable perspective to such coordinating bodies since they often have more direct contact with children at risk and troubled families than agency personnel. More information about these committees is available in the NCCAN User Manual entitled, *A Community Approach: The Child Protection Coordinating Committee*, available through the Regional Resource Centers listed in the Appendix.

Multidisciplinary Case Consultation Teams

In many communities a variety of case consultation teams exist as a means of coordinating all of the service delivery efforts relating to individual families in stress. While most of these teams function under the leadership of a CPS supervisor or caseworker, others may exist as part of a hospital, mental health center, military installation or other facility serving specific populations.

These teams, composed of a variety of professionals dealing with maltreated children and their problems, bring the special skills and knowledge of their respective disciplines to bear in an effort to meet the needs of each family experiencing problems of child maltreatment. Teams can confer regularly to oversee the treatment of special cases and develop community approaches to problems, drawing on a variety of perspectives. It is essential that early child care workers who are working with abused and neglected children participate in such groups.

Obstacles to Coordination

"Turfism," as well as differences in priorities and professional judgment, can create obstacles to cooperation and coordination among service providers. Professionals who have come to child protective services from a variety of disciplines will have been trained differently and may have different perspectives and approaches. Such differences should be openly discussed, and everyone should feel free to contribute his/her views on strategies which are likely to be successful. Often in child protective services an eclectic approach is more effective than one deriving from a single point of view, since each family is unique and services effective for one may not be helpful to another.

Good leadership is essential in establishing immediate and long-term goals, and in defining the most efficient, cost-effective, and ethical means of achieving them. Open communication, clear understanding of mutually set goals, and willingness to compromise can reduce anxiety in those who feel that their interests are not being appreciated. Early childhood care and education staff who serve on such committees can contribute, first, by communicating the value of their unique experience to the group. Beyond that, child care staff should be ready to play a leadership role as appropriate, and, equally important, to bring a spirit of open-mindedness and compromise to the process of developing a community-wide approach to providing quality care and a safe environment for all children.

VI

PREVENTING CHILD MALTREATMENT

As discussed in Chapter V, programs working with very young children are in an excellent position to present alternatives to parents who are having trouble raising their children. It is not unusual for parents of young children to seek advice about common problems in child rearing, and early childhood programs are a nonthreatening source of such information. Because they already are well-known to parents and are accepted authorities on child rearing, early childhood programs can play a vital role in improving the quality of parental care and preventing child maltreatment.

PROGRAMS FOR PARENTS

Research on factors contributing to child abuse and neglect has shown that many abusive and neglectful parents have unrealistic expectations of their children because they are not familiar with normal childhood developmental stages and processes. In addition, many of these parents are heads of multiple problem families, with few life skills and chronic difficulties in coping with financial and emotional stress. These factors will, of course, complicate the stress they feel in relation to their children.

One of the major dynamics of abusive or neglectful families is their isolation. Programs for parents, in addition to providing them with information and problem-solving techniques, allow parents to experience social involvement. This social involvement reduces isolation and provides parents with outside support.

Child Development and Education for Parenthood

Parents of young children may be open to assistance from supportive, informed individuals who clearly want to make it easier for them to be parents. Early childhood educators are a natural resource for parents who are having trouble raising their children, and special programs on common problems such as tantrums, resistance in toilet training, or bedwetting may have wide appeal. For example, nearly all young children have temper tantrums at some point, and inexperienced parents who do not know how common these tantrums are might become extremely frustrated and think of themselves as failures. Young parents who do ask for help typically go to their neighbors, who may be equally uninformed, and ineffective or harmful discipline is a result.

Early childhood programs can intervene in several ways. When the budget permits, attractively designed, easy-to-read brochures on common problems can be sent to parents as part of an ongoing outreach program. Special activities such as get-togethers to discuss particular problems, for example toilet training, can be provided on a regular basis, in addition to regular parent-teacher/staff conferences and special events such as plays and parties.

It may be difficult to involve the parents, since participation is voluntary. One way to find out what parents are interested in is to call them at home and ask what kinds of programs they might attend. Arrangements for transportation and babysitting services will need to be made by the center, preschool or Head Start staff. Another way to involve parents is to begin to work on target behaviors which are likely to be especially annoying to the parents (for example, tantrums, soiling, and uncooperativeness) at the center or preschool; then the parents should be asked to follow similar procedures at home. This will ensure consistency of reaction to the target behaviors. Of course, parents have to be approached very carefully so they do not feel as though their authority or responsibility is being usurped.

The goal of these activities is to teach uninformed parents about normal growth and development so that they have a better idea about what to expect from a child and how to meet the child's needs. In turn, they become more successful parents, their opinions of themselves as parents improve, and the quality of life at home becomes more rewarding to the parents and safer for the child.

Training in Essential Life Skills and Coping Skills

Child rearing skills are not the only skills which problem parents are likely to lack. They may be unable to find jobs, have severe communication difficulties with spouses and extended family, and have trouble planning and making decisions. In addition, they may not know that their situation could be changed; many problem families just accept problems as part of life and do not even think about getting help.

Early childhood programs can provide some basic skills to parents by offering special workshops on child-related problems, such as how to register a child for school. It is unrealistic to expect all early childhood programs themselves to provide information on such topics as applying for credit, rights as a tenant, and so on. They can, however, be aware of what community resources are available. For example, they can serve as clearinghouses for local businesses

with job opportunities and can keep parents informed of other community events and resources that might be of interest.

Help for Families at Risk

Most early childhood programs have staff/child ratios that permit educators and staff members to know individual children and their families well. One of the services an early childhood program can provide is drop-in child care, where parents who are having a rough day can get some relief from child care responsibilities by dropping a child off to stay with responsible adults in a familiar setting. On days when parents are under a particular amount of stress, they can have a few hours break and avoid interacting with their children when they may be afraid of losing control. Through regular telephone contact with parents, the early childhood teacher or staff member can maintain a friendly relationship in which current problems with the children are more likely to be discussed openly.

Another possibility is to offer opportunities for parents, especially single mothers, to meet each other and share child rearing problems and experiences. Small educational groups could meet for a few weeks about a particular topic, for example, looking for a part-time job, sibling rivalry, or better communication with spouses, and could continue on different topics if interest warranted. Support groups also could be started and could be publicized as part of the program's special activities. A staff member might meet with the group for a few weeks and then let parents continue on their own. An extra room in the center or preschool could be fixed up as a meeting room or as a lounge for parents who might drop by during the day, so that they feel welcome when they show interest in their children and the program. Other centers or programs can be contacted and group activities can be planned on a community basis.

The critical issue is how to motivate problem parents to improve their child rearing skills without making them feel singled out or criticized as failures. If common problems are addressed and the program staff establish themselves as concerned people who recognize the stress of having children and want to make it easier on all parents, the problem parents are more likely to become involved.

PROGRAMS FOR THE COMMUNITY

It may seem unrealistic to expect an early childhood program to provide many of the services to adults that are mentioned above. These programs can, however, be an active part of the community support

system and educational network in many ways, through working with other early childhood centers and programs and with other resources in the community.

Encouraging Public Awareness

Early childhood programs can increase public sensitivity to problems involving child maltreatment in a variety of ways. They will be most effective by forming or joining community social service-oriented groups, and in cooperating with the community child protection coordinating committee. Through collective action, more people can be reached and the message will be more effective if it comes from a variety of sources, especially if many are already familiar in the community.

Use of Program Facilities and Resources

Many early childhood programs barely have enough space to meet their requirements, and they often rent their facilities from churches or other organizations. However, whenever possible and practical, their facilities can be offered for community functions, such as self-help groups (for example, Parents Anonymous) or neighborhood associations. This increases the community's awareness of the program by inviting them to become familiar with the physical facilities, and makes the program more a part of the community.

One program can do a great deal to help the parents with whom it comes in contact. By working with other programs and other community services which have direct and indirect contact with families, an even greater impact will be felt.

VII

DEVELOPING A PROGRAM STRUCTURE FOR FULFILLING RESPONSIBILITIES IN PREVENTING AND TREATING ABUSE AND NEGLECT

Chapter N-30-356-1 in the Head Start Policy Manual includes a description of staff responsibility in relation to child abuse and neglect. While the policy is only a requirement for Head Start programs, it also provides a basic structure which can be adapted by all early childhood programs to facilitate their efforts in assisting families with child maltreatment problems. Basically, the staff responsibility is as follows:

- Program directors are to designate a specific staff person with overall responsibility for coordinating child abuse and neglect activities.
- Child abuse and neglect coordinators are responsible for:
 - Establishing and maintaining relationships with CPS and other agencies working with families having abuse and neglect problems
 - Informing parents and staff of the requirements of state and local laws related to child maltreatment
 - Knowing what medical and social services are available in the community for assisting families with an abuse and neglect problem
 - Reporting abuse and neglect incidents in conformity with state law and requirements
 - Discussing the report with the family if it is desirable or necessary to do so
 - Informing other staff regarding the process of identifying and reporting child abuse and neglect (each program should establish its own identification and reporting procedures)
- Each program is required to provide training, including:
 - Training for staff in identification and reporting

- Orientation for parents on prevention of abuse and neglect and protection of children.

The basic thrust of the Head Start policy is to provide and foster a general attitude of helpfulness and support rather than punishment for abusive and neglectful parents.

Using the Head Start policy as a base, then, any early childhood program can both improve its services to families and simplify the coordination of efforts related to these families through the incorporation of five basic elements into the program. These elements can be structured to meet the needs of almost every program, from a large multiple classroom preschool to a loosely knit confederation of family day care providers. The five elements are:

- Designation of a Child Maltreatment Program Coordinator. In designating a single individual to take the lead in coordinating program efforts in preventing and treating child abuse and neglect, the program cannot only provide better and more consistent program efforts, it can also seek information resources, assistance from CPS agencies, and information from the Regional Resource Centers. This single individual, supported by the program's director, staff, parent groups and other interested individuals, can work to develop the policies and provide the information and training needed in the program.
- Support of the Child Maltreatment Efforts by Program Administration. Child abuse and neglect program coordinators should never be left to "fend for themselves" in developing the program. Program administrators and directors should make it known to staff that they support the prevention and treatment efforts, should provide resources to coordinators for receiving training and obtaining information and materials, should work with coordinators in providing training for staff and parents, and should support the establishment of comprehensive program policies and procedures for identification, reporting, prevention, and cooperation with CPS. For large programs, the director or the coordinator could serve as a member of the local community child protection coordinating committee. Where this is not possible, a consortium of early childhood programs in the community can serve the coordinating function and designate a representative to work with the community child protection committee.

- Develop Staff Policies and Procedures. Early childhood programs should develop specific policies and procedures for identification and reporting of suspected child maltreatment (see Chapters III and IV). Beyond this, however, programs can be even more effective in working with families in stress if policies and procedures can be developed for coordinating with CPS on treatment (see Chapter VI) and for initiating prevention efforts (Chapter VII). In the long run, the program will benefit, in that all staff and volunteers will develop better capabilities in working with all children (because every family feels stress at one time or another, and this is reflected in the child's behavior in the program).
- Ensure That the Program Does Not Abuse or Neglect Children. Working with young children can be rewarding and enjoyable, but it can also be frustrating and anxiety producing. In some instances, program staff may desire to focus their efforts on the children who have few problems and who cooperate with the workers. Children who have behavior problems may be subject to severe punishment or totally ignored.

Programs should consider carefully any policies which allow corporal punishment or which permit isolation of children for extended periods of time. In many instances, corporal punishment can be eliminated totally, even if state law permits it, in favor of other alternative means of discipline and management of children. Staff and volunteers should receive training in working with children in positive, constructive, and supportive ways.

- Maintain Internal Communications. Early childhood workers charged with helping abused and neglected children (even only one or two out of a total program) and their families will need continual support and assistance from other program personnel. Workers must have access to supervisors or support personnel who can assist them as problems arise, who can provide advice in difficult situations, and who can share in the responsibility of identification, reporting, and support.

Regular staff meetings for multiple staff programs are essential, and should provide time and opportunity for discussion of specific problems. In-service training should be provided on an on-going basis. Even in loosely

knit organizations or consortia, a regular schedule of meetings designed to provide these opportunities is essential.

One other reason for maintaining effective communication and shared responsibility is that workers need support when they fail. For example, should a child who is part of a program suffer severe injury or even death as a result of abuse by a parent, the staff member primarily responsible for working with that child should not be left alone to shoulder the blame ("if I'd only done more, the child would be alive"). Working with problem children will create stress in staff, and they need the assurance that they are supported by others who share in the responsibility.

VIII

FAMILY DAY CARE

The term "family day care" refers to a wide range of service providers who share one common factor: they provide child care services in their own home. Family day care providers may be a part of a loosely knit organization which coordinates in-home care for a number of children and families, may be "satellite" providers for a community day care facility, or may be independent individuals who work under formal or informal agreements with two or three other families in their own neighborhood or community. Because of the relatively frequent contact between family day care providers and parents, these providers are in a unique position to be aware of family problems and of difficulties which arise in parent-child interactions. This same frequency of contact, together with the basically voluntary nature of the family day care relationship with parents, can also present problems for providers in becoming involved in families which evidence problems of child maltreatment.

This chapter will identify some of the strengths and problem areas of the family day care situation as it relates to child abuse and neglect and suggest ways in which providers can be of maximum assistance to families in stress.

WHO PROVIDES FAMILY DAY CARE

Family day care providers represent a variety of backgrounds, skills, training and motivation. Providers may be parents who elect to stay at home while their own children are of preschool age and who agree to care for the children of neighbors in order to supplement their own family income. Other providers may be persons who feel that caring for young children is the one thing their own knowledge and skills best equip them to do, and the income generated from providing this service is essential for the well-being of the providers and their own families. Most family day care providers are persons who enjoy working with young children and who see the family day care setting as an opportunity to encourage and enhance the development of a number of children in the relatively controlled environment of the provider's own home.

Because of the nature of family day care and the relatively limited income potential associated with it, the overwhelming majority of providers are women, generally mothers. They may be professional women who have elected to use the years of early child rearing as a respite from their own careers, or they may be women who intend to use the family day care experience (particularly as related to a

structured organization or program) as a means of reentering the labor market after years of absence. In a limited number of cases, family day care providers may view this as their chosen career, believing that this setting will be the most rewarding path they can take in contributing to the lives and well being of others. For still others, providing family day care may be "the only thing I can really do to make a living."

Regardless of the reasons people choose to provide family day care, the majority are concerned about children, view their role as "more than a babysitter," and wish to do whatever they can to maintain a good reputation as a provider while enhancing their abilities to more effectively work with children.

RELATIONSHIPS WITH PARENTS

Most parents who leave their children with family day care providers do so either because it is a relatively inexpensive, informal and convenient arrangement for them, or because they prefer to entrust their children to someone who they know will "help bring them up right." In some cases, parents choose family day care as the only place their children will be, other than home, during their pre-school years, while others view family day care as supplementary to nursery school, preschool, or kindergarten programs.

As might be expected from the variety of reasons that parents place their children in family day care, the relationship between providers and parents will vary from close friend, confidant or partner in the child rearing process to a purely business relationship. In general, family day care providers have enough contact with parents to observe their interaction with their children and to get some idea of what the family's home life is like. For example, parents who are uninterested in the kind of care provided to their child may also be uninterested in the child's growth and development at home.

Many experts in early childhood development encourage early childhood programs to seek to develop a working relationship between parents and the program. While the extent to which this is possible will vary greatly in terms of family day care, providers who seek this kind of relationship with parents will find that it will benefit everyone. For one thing, caring for the child may be easier for the family day care provider who knows the child's home situation. The child's development can be enhanced to the extent that the transitions between day care and home occur within compatible environments. And the parents can benefit from the support and concern of someone who knows and understands their child.

The fact that family day care providers are often economically dependent on their relationship with the parents should not be overlooked. Parents who become angry or dissatisfied with the day care services may withdraw their children from the family day care home and may seek to influence other parents to do the same. In some circumstances it may be true that the family day care provider needs the children more than the parents need that particular day care provider, and this factor may discourage providers from "getting involved" in family stress situations.

REPORTING SUSPECTED CHILD MALTREATMENT

Reporting "On Friends"

Simply to say that family day care providers must report suspected cases of child maltreatment may be true in legal terms, but may fail to recognize many of the inherent difficulties in this kind of situation. If the parents of the abused or neglected child are friends of the provider, the provider may be unwilling to suspect maltreatment ("that couldn't happen to them"), may wish to ignore the problem because of the friendship ("I just couldn't report them, we've been friends a long time"), or may attempt to solve the problem without reporting ("I know they're having some problems now, but I can help them work it out"). In these instances, the provider should be aware that failure to report may not only be illegal, it may further endanger the child. It may also be denying the family access to a number of resources and concerned professionals who can offer genuine assistance to the family. Reports can be made in a spirit of care, concern and friendship, or, if absolutely necessary, a report can be filed anonymously. In either case, the intent of the report is to help the family.

Economic Concerns in Reporting

Reluctance to report also occurs when the providers are economically dependent on the parents for their livelihood. Providers are often concerned that reporting may result in the family withdrawing their child or finding another provider. Since family day care providers are often heavily dependent on word-of-mouth publicity, the fear of gaining a reputation as one who cannot be trusted to maintain family confidence is also a real concern.

Providers should be equally concerned, however, with the welfare of the children entrusted to them. Failing to report may seriously jeopardize the health or even the life of the child. The question of whether or not to report, then, should be the major issue.

Providers should seek to develop skills in relating to parents in such a way as to be able to report suspected incidents of child maltreatment while reassuring the family that the provider is concerned about them and will offer whatever support may be possible to ensure that they obtain genuine assistance.

Other Issues in Recognizing Child Maltreatment and in Reporting

Specific questions related to identifying and reporting suspected child abuse and neglect are discussed in more detail in Chapters III and IV of this manual. Providers are encouraged to seek additional assistance in these areas through their local Child Protective Services (CPS) agency, the local community child protection coordinating committee, or the NCCAN Regional Resource Centers listed in the Appendix.

FAMILY DAY CARE AS A TREATMENT RESOURCE

Family day care providers are in a unique position to work with CPS and with other professionals in aiding families experiencing problems of child maltreatment. In many instances, family day care can be an effective alternative to foster care for abused or neglected children. Family day care programs, in coordination with comprehensive emergency services, can also provide 24-hour and/or on-call child care services for families in crisis.

Many families in stress have few persons to whom they can turn for support and caring. Providers can take the initiative to establish warm working relationships with parents and a general atmosphere of care and concern in relation to child rearing. When parents arrive to pick up children, the provider can discuss the child's activities during the day, propose alternative methods of dealing with problems which the child may have, and offer suggestions regarding alternative patterns of interaction with the child which are effective in guiding the child's actions.

Through informal conversations, the provider can also promote an atmosphere of friendly support and trust with the parent. Without condoning abusive or neglectful behavior, the provider can convey to the parents an understanding of some of the problems and difficulties of child rearing, and can provide the parent with a friendly listener when the parents' stress requires that they talk with someone.

Family day care also offers an excellent means for assisting the child who has been abused or neglected. Abused and neglected children need a safe, caring, protective environment, and family day care providers can often provide individual care for these children to meet their needs. Maltreated children are often overly passive or aggressive and may be delayed in their development. A concerned provider can

work with the local CPS worker and other professionals in identifying actions or activities beneficial to the child.

Not every family day care provider is equipped to provide the therapeutic environment that abused and neglected children need. Family day care providers who will be working with abused and neglected children should have the following special characteristics*:

- Previous experience as day care providers.
- Courses in early childhood education and child development as well as courses or training in behavior management principles or techniques.
- Personal characteristics which include
 - enthusiasm.
 - an interest in learning about child abuse and neglect.
 - the belief that people's behaviors can change.
 - the ability to empathize.
 - warm, understanding, and helpful attitudes toward parents combined with an ability to be assertive and firm; they should not allow themselves to be manipulated or intimidated.
 - a professional attitude; that is, they should view themselves as teachers and facilitators and keep personal feelings protected and out of the way.
 - a liking for children; they are reinforced by seeing children learn new, appropriate behaviors.

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- an understanding that the use of massive amounts of noncontingent tender loving care is not in the best interests of the child.
 - an objective attitude toward abused and neglected children; they do not tolerate different standards of behavior for a child just because he/she has been maltreated.
 - an ability to view abusive and neglectful parents as people who need help in specific areas of their lives; that is, they do not condemn these parents or see them as devoid of positive traits; at the same time, they have a sense of realism and accept the fact that no one person can help everybody.
- Training, including discussion of the following areas regardless of the level of previous training or education:
 - an overview of the phenomenon of child maltreatment, including demographic information and statistics which are provided in a descriptive fashion, avoiding interpretation; all myths about child abuse and neglect should be dispelled.
 - the legal aspects of case handling with information pertinent to country and state.
 - legal responsibility concerning reports of child abuse and neglect.
 - principles and techniques of behavior management.
 - communication skills.
 - assertive behavior skills.
 - facts about child development, hierarchies in learning, assessment of children's behavioral strengths and weaknesses, planning of lesson and educational objectives, educational programming.

LINKS TO THE COMMUNITY

One difficulty encountered by most family day care providers is the problem of being relatively isolated. Working alone in the home, the provider has no staff of coworkers with whom to share problems and discuss alternatives. Even in family day care systems or in cases where the provider is a "satellite" to a day care center, there is a general sense of working alone. Because of the complexities of child maltreatment problems, it is important for providers to seek links to other providers and to the community.

Family day care providers can be included in local child care councils; these include local organizations such as community coordinated child care (4C) committees, child development councils, day care or family day care associations, and associations of day care directors. They can also develop communication networks, either individually or as a group, with the local CPS agency and, in communities where a child protection coordinating committee exists, with that coordinating group. A mutual benefit accrues with this kind of cooperation and coordination. CPS and the coordinating groups are more aware of what is going on in the community and of family day care as a resource. Family day care providers gain the support of a network of professionals which can not only assist them in providing even better care but can also refer children to them should they feel able to include additional children in their day care activities.

Chapter V of this manual includes a further discussion of community coordination, while the program structure suggested in Chapter VII may be adaptable by family day care organizations in order to improve their effectiveness in working with families in stress.

APPENDIX

REGIONAL CHILD ABUSE AND
NEGLECT RESOURCE CENTERS

Region I Child Abuse and Neglect Resource Center
Judge Baker Guidance Center
295 Longwood Avenue
Boston, Massachusetts 02115

617-232-8390
(CT, ME, MA, RI, VT, NH)

Region II Child Abuse and Neglect Resource Center
College of Human Ecology
Cornell University
MVR Hall
Ithaca, New York 14853

607-256-7794
(NJ, NY, PR, VI)

Region III Child Abuse and Neglect Resource Center
Howard University Institute for Urban Affairs and Research
2935 Upton Street, N.W.
Washington, D.C. 20008

202-686-6770
(DC, DE, MD, PA, VA, WV)

Region IV Child Abuse and Neglect Resource Center
Regional Institute for Social Welfare Research
P.O. Box 152
Athens, Georgia 30601

404-542-7614
(AL, FL, GA, KY, MS, NC, SC, TN)

Region V Child Abuse and Neglect Resource Center
Graduate School of Social Work
University of Wisconsin-Milwaukee
Milwaukee, Wisconsin 53201

414-963-4184
(IL, IN, MI, MN, OH, WI)

Region VI Child Abuse and Neglect Resource Center
Graduate School of Social Work
University of Texas at Austin
Austin, Texas 78712

512-471-4067
(AR, LA, NM, OK, TX)

Region VII Child Abuse and Neglect Resource Center
Institute of Child Behavior and Development
University of Iowa, Oakdale Campus
Oakdale, Iowa 52319

319-353-4825
(IA, KS, MO, NE)

Region VIII Child Abuse and Neglect Resource Center
National Center for the Prevention and Treatment of
Child Abuse and Neglect
1205 Oneida Street
Denver, Colorado 80220

303-321-3963
(CO, MT, ND, SD, UT, WY)

Region IX Child Abuse and Neglect Resource Center
Department of Special Education
California State University
5151 State University Drive
Los Angeles, California 90032

213-224-3283
(AZ, CA, HI, NV, Guam, Trust Terr.)

Region X Child Abuse and Neglect Resource Center
Western Federation for Human Service
157 Yesler Way, #208
Seattle, Washington 98104

206-624-5480
(AK, ID, OR, WA)

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