
FOREWORD

Safeguarding the health and well-being of all children has been an increasing focus of modern society. We have come far from the days when parents considered their children “property.” Along the way we have instituted many measures to improve the health of children: immunizations, car seats, lead detection and abatement, the “Back to Sleep” campaign, and the “Reach Out and Read” campaign, to name a few.

The battle against child abuse and neglect has also made significant strides, although the war is far from over. Twenty years ago our knowledge of normal anogenital anatomy in children was just beginning to emerge, and disclosures about child sexual abuse were often discounted as stories confabulated by children. Secrets about being molested remain hidden in many cases, but sometimes they do surface in the psychiatric and medical complaints of adult men and women. It is hoped that research as well as professional and lay educational efforts have lessened the disease burden of many sexually abused individuals.

Although the various behaviors—shaking an infant, sexual abuse, neglect, etc—involved in child maltreatment are clearly detrimental to children, the mechanisms and supporting evidence required for proof are not always clearly established. For example, simple mathematical models using basic principles of physics do not sufficiently capture the unique properties of the brain. Efforts are being made to create a more precise biomechanical model to simulate an infant’s head and brain during a shaking episode. Additionally, early articles not substantiated by subsequent data sometimes resurface during courtroom testimony. Experts must remain cognizant of the changing literature and information on child maltreatment. There is also the abundance of “experts” who ascribe to faulty and unsubstantiated information. In response, the child abuse community has been moving toward a certification process by the American Board of Pediatrics. Such a process would minimize the opportunity for self-proclaimed experts to contradict legitimate evaluations and testimony.

The challenges that face those who seek to protect children from maltreatment include moving forward, preventing abuse before it starts, and reducing the rate of recidivism in those who have been abused. Professional education and early identification are critical to secondary prevention. Appropriate judicial decisions are also essential to ensure that children are not inappropriately returned to parents who lack the necessary skills to care for their offspring. Interventional programs must be created to make reunification a safe and satisfactory experience for children and their parents. Primary prevention is perhaps even more complicated. Although epidemiological studies have identified high-risk factors for abuse, providing anticipatory interventional services is costly and only partially validated. The societal issues of poverty, violence, and substance abuse are clearly contributing factors.

As professionals committed to helping children reach their potential, we must take steps to ensure that all children are cared for in a safe, nurturing environment. Fortunately many promising programs are on the horizon, such as the Health CARES (Child Abuse Recognition and Evaluation Study) Network and the efforts of the Centers for Disease Control and Prevention (CDC) toward child abuse prevention.

Up-to-date, evidence-based literature plays a vital role in the educational process. *Child Maltreatment: A Clinical Guide and Reference and A Comprehensive Photographic Reference Identifying Potential Child Abuse, 3rd Edition*, with its wealth of information compiled by multiple childcare professionals who work individually and collectively to prevent, identify, evaluate, and treat children and families facing the many challenges associated with a high risk of child maltreatment, is part of this process. The more we learn, the stronger our ability is to effectively keep children safe. Our resolve remains strong to work tirelessly to reduce and eventually remove the threat posed to the well-being of all children by child maltreatment. With education, sound

information such as that contained in this textbook, research, and advocacy, we can work individually and collectively to influence the future of the most vulnerable members of our society.

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FOREWORD

The field of child maltreatment has evolved over a period of many decades. Over the years, the developments have been both heartening and discouraging. Greater attention has been paid to the problem and accompanying issues, raising hope that the epidemic of child abuse can be eradicated. However, as we continue to learn about child maltreatment we see more cases come to light, discouraging the efforts of the individual professionals handling them.

Child maltreatment was once a clandestine topic that was not discussed. Society as a whole viewed it as a problem that did not exist in wealthy or elite families. Often only medical professionals were privy to this family secret and reporting was sporadic. As we have come to know more about the problem we find that it crosses all economic, cultural, social, and racial lines. Any family could harbor some form of child maltreatment, yet appear perfectly normal to the community. It is encouraging to see how many disciplines, including medical, law enforcement, legal, and social science professionals, are now included in the comprehensive approach to child maltreatment. Each specialty has much to contribute as they interact with families. Their efforts are valuable not only in handling the results of child maltreatment, but also in preventing the development of patterns of child maltreatment within the family unit.

Although the medical community is still the primary detection unit, a variety of professionals must be informed and trained to deal with child maltreatment in its many forms. With resources such as this comprehensive volume on child maltreatment, professionals are better equipped to deal with children who have been abused, perpetrators, families in crisis, and individuals who are involved in the process of handling child maltreatment cases. Better dialogue between disciplines is encouraged, as collaboration and cooperation between the disciplines permits all professionals to do their best in addressing maltreatment issues.

The goal is to help children and their families. The first priority is the protection of the child, which is optimally achieved through preventive efforts. This book has ample coverage of the role each professional and caregiver plays in protecting children from abuse. Prevention efforts involve the entire community and are both focused and general in nature. Families and children at particular risk are targeted earlier in many cases. Supportive services for families are becoming more widespread as the impact of child maltreatment has become recognized. This book offers practical advice on how such preventive efforts can be implemented.

For cases where child maltreatment has taken place, specific medical care is outlined, with special attention given to dealing with parents who are also perpetrators. The roles of medical professionals cannot be overemphasized since the vast majority of child maltreatment cases are seen in the ER or at a primary healthcare provider's office. Careful approaches are offered to teach medical professionals how to maintain evidence that may be crucial to law enforcement personnel while treating the child. The importance of the crime scene is explained, along with the sources of both obvious and less-than-obvious clues as to what has happened. The function of social services personnel who are at hospitals and clinics is described so that this valuable resource is not overlooked.

When first responders at a scene discover evidence of child maltreatment or neglect, the approach differs somewhat from cases discovered by medical personnel. The steps that are taken are outlined clearly, with careful attention to building a foundation of evidence as well as seeking to protect the child. The balance of obtaining medical evidence and being sensitive to the needs of the child and family is explained, with practical approaches to achieving both evidentiary and humanitarian goals. A concise presentation of what happens when the court system becomes involved is also offered.

The third edition of *Child Maltreatment: A Clinical Guide and Reference and A Comprehensive Photographic Reference Identifying Potential Child Abuse* presents a contemporary, complete, and balanced look at the epidemic of child maltreatment and what is being done to combat it. The desired outcome is healthier, happier children who grow to become well-adjusted adults and are readily integrated into society as contributing members. Through the comprehensive approach offered in this textbook it is hoped that we are getting closer to this goal.

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PREFACE

Child maltreatment in its various forms remains a significant problem confronting children and their families worldwide. The incidence and prevalence statistics surrounding child maltreatment continue to be staggering when compared to the reduction in pediatric morbidity and mortality associated with infectious diseases over the past 100 years. This reference is put forth to help healthcare professionals, social service providers, and law enforcement personnel meet the challenges that arise in dealing with this preventable problem that harms children and their families. Although the text is approached primarily from a healthcare point of view, the information contained will also benefit other disciplines and professionals such as social service workers, attorneys, law enforcement officers, state agencies, and others who might be involved with children of suspect child maltreatment. Collected in this third edition is information concerning the multidisciplinary team approach to physical abuse, sexual abuse, psychological abuse, and neglect that has evolved over the past 40 years from the work of dedicated professionals.

The previous two editions of *Child Maltreatment: A Clinical Guide and Reference*, edited by James A. Monteleone, MD, were well-received by clinicians dealing with abused and neglected children and serve as a solid foundation on which this nearly total revision is based. As the new editors, we have recruited 70 new contributing authors to add their expertise. The text has expanded from 28 chapters in the second edition to the current 43 contained in this volume. Since no one person or discipline could effectively address all aspects of child maltreatment, we sought specific expertise in each area and found dedicated colleagues who were willing to share their time and knowledge for this project. The contributing authors are all individuals who have been extensively involved in issues related to child health and protection activities for significant periods of time and are uniformly acknowledged as leading figures in their fields by peers and colleagues.

In addition to the traditional chapters one would expect in a comprehensive text dealing with child maltreatment, such as those dealing with the forms of maltreatment as well as prevention, evaluation, and intervention, we have added chapters on the risk of the Internet to the safety of children, intimate partner violence and its relationship to child abuse, the risks that might be found in a faith-based setting, how to prepare a case for court, how to prepare to be an expert witness, the approach to physician and nurse education regarding child maltreatment, and research and federal funding opportunities in the United States. We have emphasized the multidisciplinary team approach to caring for children who are maltreated. Specialists in each area offer insights regarding approaches to identifying and managing specific forms of child maltreatment, including procedures for evaluation and practical guidelines for handling cases.

The companion volume to this book, *Child Maltreatment: A Comprehensive Photographic Reference Identifying Potential Child Abuse*, has also been expanded with the addition of over 850 new photographs. The format has been revised from the previous editions and, where available, descriptions of the cases being illustrated have been added. Together, these two references present a comprehensive source of information covering all areas of child maltreatment.

It is hoped that with the addition of new chapters and the expansion of existing material, the clinician who deals with any area of child maltreatment will be more fully equipped to assess any situation appropriately and determine the best course of action. Information is a vital ally in recognizing the signs of maltreatment. A thorough clinical examination, interviews with the child and family, and possible site investigations depending on the situation, are critical. Differentiating maltreatment from other patterns of injury helps in the prosecution of the guilty and the protection of innocent caregivers. Clinicians must rely on the best evidence available at the time

of the child's evaluation. Ultimately, all professionals have the shared goal of preventing child maltreatment, and as we move into the next phase of study of child maltreatment, we hope the effective techniques and programs described in the chapter on prevention will take hold and reduce the incidence and prevalence of child maltreatment worldwide. The focus of all our work is the health and well-being of children and their families, and we offer this volume as a powerful tool to use in creating a better future for them.

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