



CHILD ABUSE AND PREVENTION

Colorado Department of Education

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Child abuse is one of the most complex and challenging issues facing communities across the United States. Child maltreatment (abuse and neglect) occurs in every part of Colorado. It happens in cities, suburbs, small towns, and rural areas, and it affects children regardless of family income or ethnic origin.¹ Child abuse and neglect can be divided into four major types:

- **Physical Injury/Abuse** includes injuries of a non-accidental nature, including soft tissue damage, broken bones, burns, head injury, and the like.
- **Mental or Emotional Injury/Abuse** can occur when excessive or unrealistic demands are placed on a child. It includes verbal abuse, such as name-calling, yelling, criticism, and/or teasing. Emotional neglect results when a child does not receive personal warmth, attention, or supervision.
- **Sexual Abuse and Exploitation** includes incest, indecent exposure, fondling, rape, pornography, and sexual exploitation.

- **Negligent Abuse** includes activities that threaten the child's health or welfare, for example, lack of adequate food, clothing, shelter, education, or medical care; allowing inappropriate use of illegal or misprescribed substances; or putting a child at risk of a serious physical injury.

Because the number of incidents is relatively small compared to the number of children, researchers can track rates of confirmed cases. Historically in Colorado, physical and medical neglect are the most common forms of child maltreatment, although over one quarter of all confirmed cases are of physical abuse.

Young children (birth to 3) have the highest victimization rates. The rate of child maltreatment decreases with age, dropping dramatically for older teenagers. In 2000, Colorado's child abuse and neglect rate, per 1000 children in each age group, was:

- 9.1 for children birth to age 3.
- 7.5 for children ages 4 to 7.
- 6.8 for ages 8 to 11.
- 5.7 for ages 12 to 15.
- 2.8 for teens, ages 16 & 17.²

¹ Colorado Children's Campaign. (2003). *KidsCount in Colorado!* and Colorado Department of Education (2000), *The school's role in the prevention and intervention of child abuse and neglect*. www.cde.state.co.us/cdeprevention/download/pdf/child_abuse_manual_2002pdf. Colorado Department of Education.

³ Ibid.

Deleted: ¶





§ 1. OVERVIEW

While the reported rate of child maltreatment fatalities in Colorado is relatively low, they may be underreported and labeled as accidents.³

Abusers are usually, but not always, parents; they can be anyone responsible for the care of a child, for example, childcare providers, teachers, or foster parents.⁴ Certain conditions can increase the risk of occurrence for abuse and neglect:

- A parent or caretaker who was abused or neglected as a child;
- Increases of stress in life, including marital, financial and employment difficulty;
- Substance abuse in the home;
- Parents and child care providers who lack the skill and knowledge for the role;
- Impulsivity and the inability of an individual to tolerate frustration;
- Families and individuals who feel isolated from family, friends, and community.⁵

Abuse and neglect can lead to many problematic behaviors as children grow.⁶ Children who

Have grown up in violent or abusive homes are at risk for recreating the abusive relationships they have observed or experienced, sometimes as aggressors, sometimes as victims.⁷ The direct costs of child abuse impact the health care system (medical care and/or hospitalization for physical injuries), the mental health care system, the child welfare system, special education, law enforcement, and the judicial and corrections systems.⁸

Schools, in partnership with numerous community agencies, can play a pivotal role in child abuse prevention. School personnel and volunteers interact with children on a daily basis over an extended period of time. This regular interaction allows observation of unusual behaviors and the opportunity to develop trusting relationships that may lead to direct or indirect disclosures of child abuse and/or neglect.⁹

⁴ Colorado Children's Campaign. (2003). *KidsCount in Colorado!*

⁵ Virginia Department of Health (n.d.). *Virginia health guidelines*, "Referring to child protection services," p. 304.

<http://www.vahealth.org/schoolhealth/>.

⁶ National Clearinghouse on Child Abuse and Neglect. Information at (800) FYI-3366 or, www.calib.com/nccanch.

⁷ National Center for Education in Maternal and Child Health (n.d.). *Bright Futures: Mental Health*, pp. 167--169., <http://www.brightfutures.org/mentalhealth/pdf/index/html>.

⁸ S Fromm, S.. (2001). *Total estimated cost of child abuse and neglect in the United State: Statistical Evidence*. Prevent Child Abuse America. http://www.preventchildabuse.org/learn_more/research_docs/cost_analysis.pdf.

⁹ National Association of School Nurses (NASN), (2002). *Position Statement: Child*





§ 1. OVERVIEW

The school nurse and other school health personnel are in unique positions to work directly with students, teachers, and parents to provide prevention, identification, and treatment services related to child abuse.





§ 2. LEGAL CONSIDERATIONS

This section provides a limited overview of legal issues pertaining to child abuse and neglect. The Colorado Department of Education has published a manual, [Child Abuse and Neglect: Guidance for School Personnel](#) that has detailed information on:

- Colorado child abuse and neglect law (definitions, reporting, persons required to report, liability, and immunity).
- Reporting procedures (model school reporting policy).
- Reporting procedures after a report is made.
- Reporting procedures when the suspected abuse is by school employee(s).¹⁰

DEFINITION OF CHILD ABUSE

Colorado's Child Protection Act of 1997 defines in detail what constitutes child abuse.¹¹ The law is not static, but is amended to reflect behaviors and reporting responsibilities.

- For example, the legislature has amended "sexual abuse of a child" to include unlawful sexual behavior, sexual

assault, sexual exploitation, molestation, and prostitution. The latest amendment adds manufacturing controlled substances such as methamphetamines in the presence of children to the definition.¹²

- The latest expansion of reporting responsibilities includes a worker in a child placement agency, residential child care facility, guest child care facility, secure residential treatment center, or a specialized group facility.¹³

REPORTING OF CHILD ABUSE

The federal Child Abuse Prevention and Treatment Act (CAPTA)¹⁴ requires states to have some form of mandatory child abuse and neglect reporting law in order to qualify for funding under CAPTA. Colorado's Child Protection Act requires certain persons, including any registered nurse or licensed practical nurse or public or private school official or employee, to report child abuse, child sex abuse, or child neglect

¹² House Bill 03-1004.

¹³ House Bill 03-1037.

¹⁴ 42 U.S.C. 5101, *et seq.*, as amended by Child Abuse Prevention and Treatment and Adoption Act Amendments of 1996 (P.L. 104-235); Smith, S. K. (2002). *Mandatory Reporting of Child Abuse and Neglect*. http://www.smith-lawfirm.com/mandatory_reporting.htm.

¹⁰ Colorado Department of Education (2000), *The school's role in the prevention and intervention of child abuse and neglect*. www.cde.state.co.us/cdeprevention/download/pdf/child_abuse_manual_2002pdf.

Colorado Department of Education.

¹¹ CRS §§19-1-102-103.





LEGAL CONSIDERATIONS (continued)

The individual who suspects the abuse is legally responsible for making certain that the report is made to the designated agencies immediately.

circumstances or conditions *immediately* when they have reasonable cause to know or suspect that a child has been subjected to abuse or neglect or when they have observed a child being subjected to circumstances or conditions that would reasonably result in abuse or neglect.¹⁵

WRITTEN DISTRICT POLICY FOR REPORTING CHILD ABUSE AND NEGLECT

State regulation requires every school district to have a written district policy for reporting child abuse and neglect. This policy should be based on Colorado law, with input from the local department of social services and local law enforcement agencies. All school district employees should be aware of the existence and content of such a policy and should receive training about reporting requirements. The policy should be reviewed and updated annually.

While each school district may have a differently worded policy, all should include:

- ✓ Rationale for involving school personnel in reporting.

- ✓ The name and appropriate section numbers of the state reporting statute.
- ✓ Who is mandated to report.
- ✓ Reportable conditions as defined by state law.
- ✓ Person or agency to receive reports.
- ✓ Information required of the reporter, including a sample of the district reporting form.
- ✓ Expected professional conduct by school employees.
- ✓ Definition of "abuse" and "neglect," including explanation, clarification, or expansion of the definition.
- ✓ Method by which school personnel are to report.
- ✓ Time within which to report.
- ✓ Telephone number of the local social services or law enforcement agency.
- ✓ Statement from the law regarding immunity from civil and criminal liability or termination of employment for those who, in good faith, report or participate in an investigation or judicial proceeding.
- ✓ Penalty for failure to report.
- ✓ Action that will be taken by the school board for failure to report.
- ✓ Provisions of the law regarding the confidentiality of records pertaining to reports of suspected abuse or neglect.

¹⁵ CRS §§ 19-3-304(1), (2), (2.5), 19-3-311 (West Supp. 1998) For more information on who must report, the circumstances under which reporting is required, and privileged communications, see <http://www.calib.com/nccanch/pubs/stats01/m andrep.cfm#co>.





LEGAL CONSIDERATIONS (continued)

Prior parental consent is not required when disclosing information from school records if a "health or safety emergency" exists. Federal officials interpreting the Family Educational Rights and Privacy Act (FERPA) concluded 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.

Generally school employees report suspected abuse to:

- Their administrator or his/her designee or the school district child abuse/neglect team.
- Directly to the Child Protective Services Unit of their county department of social service.
- Or, to their local law enforcement agency.

The school nurse should carefully check the district policy for the proper report routing. The individual who suspects the abuse is legally responsible for making certain that the report is made to the designated agencies immediately. Reporting your suspicion to other school personnel does not satisfy this responsibility. Both verbal and written reports are required. Most school districts provide a standard form for the written report.¹⁶ Abuse Information

Disclosing Child Abuse Information

Ordinarily, parental consent is required before information contained in school records can be released. However, there are exceptions that can apply in cases of suspected child abuse

and neglect. Prior parental consent is not required when disclosing information from school records if a "health or safety emergency" exists. Federal officials interpreting the Family Educational Rights and Privacy Act (FERPA) concluded that the 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. That responsibility for determining whether a "health or safety emergency" exists must be made by the school official involved, on a case-by-case basis. Thus if a school official determines that an emergency exists, information in school records can be disclosed without parental consent and without violating the provisions of FERPA.¹⁷

¹⁶ Colorado Department of Education (2000), *The school's role in the prevention and intervention of child abuse and neglect*. www.cde.state.co.us/cdeprevention/download/pdf/child_abuse_manual_2002pdf.

¹⁷ U.S. Department of Health & Human Services, Administration for Children and Youth, National Clearinghouse on Child Abuse and Neglect Information (2003). *Reporting child abuse and neglect*. <http://www.calib.com/nccanch/pubs/usermanuals/educators/section4.cfm>; Colorado's Safe School Act, CRS § 19-1-302(1)(b), 34C.F.R. § 99.36. *Formal opinion Of Ken Salazar, Attorney General, No. 00-7:Law Enforcement and School Authorities Sharing of Information Alpha No. LW CJ AGBAI*, Issued August 3, 2000. <http://www.ago.state.co.us/AGO/AGO00/ago00-7.htm>.





LEGAL CONSIDERATIONS (continued)

IMMUNITY

In Colorado, people, other than perpetrators of child abuse or accessories, who act in good faith to report suspected child abuse or neglect or are involved in an official investigation of child abuse or neglect have immunity to a legal action brought against them. This immunity prevents termination of employment as a repercussion for making such a report, unless a court finds that the person was acting wantonly or maliciously.¹⁸

¹⁸ CRS §§19-3-309, 32-1-109.1(9)





§ 3. ROLE OF THE SCHOOL NURSE

The role of the school nurse is complex when dealing with the prevention, identification, and treatment of child abuse. It includes:

- Compliance with all applicable laws that identify nurses as mandated reporters.
- Active involvement in establishing safe environments for all children.
- Educating and supporting school staff and school health staff on the signs and symptoms of child abuse and neglect and on mandated reporting laws.
- Supporting victims of child abuse and neglect.
- Assisting victims and families to connect with community resources.¹⁹

The general categories of a school nurse's job responsibilities when addressing child abuse in the school setting are discussed below. Depending on the school district, some of these duties may be assumed by other school personnel such as a school social worker, school psychologist, or prevention coordinator. In many smaller school districts, the school nurse may be the only staff person available.

¹⁹ Colorado Department of Education (2000), *The school's role in the prevention and intervention of child abuse and neglect*. www.cde.state.co.us/cdeprevention/download/pdf/child_abuse_manual_2002pdf.

THE SCHOOL NURSE AS TRUSTED ADULT

School nurses are often perceived by a child as someone whom the child can trust in times of physical or emotional stress. Therefore, school nurses need to be well trained in how to respond when a child discloses information about an abusive situation. School nurses also need to be well-educated about how to report an abuse allegation to the appropriate authorities. Their role as a first responder is crucial in child abuse situations.

THE SCHOOL NURSE AS REPORTER

A school nurse is a mandatory reporter of child abuse. If a person fails to report, the child (or other children) is left potentially at risk for future abuse. School nurses, as with all other school personnel, must remember some basic steps about reporting child abuse to ensure the safety of the child:

- School personnel have a legal obligation to make a report if child abuse or neglect is suspected.
- The verbal report to the local child protection agency must be made immediately upon suspicion of abuse.
- An immediate oral report and prompt written follow-up are mandatory.
- The report is not an accusation against a parent or child, but merely a report of a suspicion.





§ 3. ROLE OF THE SCHOOL NURSE

- The report should be handled in a sensitive, non-judgmental manner.
- The person who reports “in good faith” “is immune from liability, both civil and criminal.”
- The person who fails to report is legally liable.
- If you report suspected abuse to someone in your school and expect them to report to social services, it is important to follow-up to make certain the report was made. You, as the person who “knows or suspects” the abuse, are responsible to assure that the suspicion is reported.²⁰

The school nurse may be asked for information pertinent to a child abuse investigation. As with release of any information from a student’s health file, the school nurse should be certain of the identity of the requesting party and that party’s authority to have access to the requested material. Requirements of confidentiality should be observed so that reports are made only to authorized people. The Family Education and Privacy Act (FERPA) allows disclosure without prior consent to child protection officials if the information is necessary to protect the health or safety of the student. The school nurse should consult the state school nurse consultant or district legal counsel if questions arise.

²⁰Ibid.

Local district policies may go beyond reporting requirements by encouraging staff to become actively involved with families and children. For example, local policy may specify that parents be notified when the school has reported a case of suspected child abuse and neglect. A particular staff member, often the principal, may be given this responsibility. Local procedure may also require that administrative staff be notified when a case is reported and a copy of the written report be filed centrally. Procedures for record keeping and destruction may be specified and may vary depending upon whether the case is founded or not. A program coordinator may be assigned this responsibility.²¹ The school nurse needs to be aware of the policy for each of her schools.

THE SCHOOL NURSE AS EDUCATOR, TRAINER, AND EXPERT

Often, a school nurse is called upon to provide child abuse education and training to teachers, school staff, parents, and students. Topics a school nurse or other school personnel should consider including in training are:

- Recognizing and reporting abuse.

²¹ Colorado Department of Education (2000), *The school’s role in the prevention and intervention of child abuse and neglect*. www.cde.state.co.us/cdeprevention/download/pdf/child_abuse_manual_2002pdf.





§ 3. ROLE OF THE SCHOOL NURSE

- Responding sensitively to disclosure.
- Making school a safe place.
- Screening staff and volunteers for prior convictions.
- Recognizing perpetrator behavior of students or adults.
- Establishing and reinforcing personal boundaries.
- Fostering empathy and bonding.
- Increasing comfort in talking about sexuality, personal safety, and workforce issues.
- Fostering partnerships among schools, law enforcement, social services, and community organizations.
- Providing personal safety prevention education.²²

The school nurse needs to be fully apprised of any policies and procedures that the school district has in place related to child abuse identification and reporting. The school nurse must always keep in mind the responsibility to report suspected abuse regardless of district policies and the opinions of others. It is also important for the school nurse to understand the limitations of her knowledge and seek outside expertise when appropriate.

THE SCHOOL NURSE AS SERVICE COORDINATOR

Depending on the size and structure of the school district, the school nurse may be called upon to

²² Ibid.

provide overall coordination and child abuse efforts, both on the individual child level and in the outreach for a wide array of activities related to the district's school community at large. Possible activities include:

- Establishing a school-based child abuse prevention team;
- Scheduling school-wide assemblies related to child abuse prevention;
- Coordinating prevention activities in the classroom;
- Reviewing school-based child abuse prevention programs and making recommendations for appropriate programs;
- Tracking and reporting on the incidence of child abuse in the district;
- Serving on the local community's child protection team;
- Collaborating with community groups on prevention activities and training programs;
- Identifying and developing community resources;
- Providing follow-up on reported cases. (Note: Confidentiality laws and policies often make follow-up impossible.)²³

THE SCHOOL NURSE AS COUNSELOR AND ADVOCATE

²³ National Clearinghouse on Child Abuse and Neglect Information. *On-Line manual: Reporting child abuse and neglect.* www.calib.com/nccanch/pubs/usermanuals/educator/section5.cfm.





§ 3. ROLE OF THE SCHOOL NURSE

In schools without a social worker, school counselor, or school psychologist, the school nurse may have to provide physical treatment and emotional support after a child has been abused. Nurses can provide positive encouragement to the child and determine what the child needs to feel safe at school. Child abuse can leave deep emotional scars within a child, and the school nurse should not attempt to undertake counseling with the child if that is outside the scope of

her training. The school nurse can fully support the child, but therapy is generally best provided by a qualified therapist in a setting outside the school.

In some cases, the child may have to take medication as a result of the abuse. The school nurse should follow all of the standards and procedures for administering medications in the school setting.

ROLE OF THE SCHOOL NURSE IN RESPONDING TO DISCLOSURE

DO

- Remain calm.
- Keep an open mind.
- Support the child with active listening.
- Find a quiet, private place to talk to the child.
- Reassure the child that he/she has done the right thing by telling someone.
- Listen to the child without interruption; let him/her talk openly about the situation; and record concrete information.
- Tell the child that help is available.
- Reassure the child that you will do your best to protect and support him/her.
- Let the child know that you must report the abuse to someone who has helped other children and their families.
- Report the incident to the proper authorities.
- Let the child know what will happen when the report is made (if you have that information).
- Seek out your own support person(s) to help you work through your feelings about disclosure (if needed).
- Be aware of personal issues and how they affect your perception.

DON'T

- Promise confidentiality.
- Express panic, shock or disgust.





ROLE OF THE SCHOOL NURSE (continued)

- Convey anger or impatience if the child is not ready to discuss the abuse.
- Make judgments.
- Make negative comments about the perpetrator.
- Disclose the information indiscriminately. Tell only those who need the information to protect and support the child.²⁴

The school nurse may be called upon by her colleagues for advice. Making a report of suspected child abuse sometimes feels risky, stressful, or confusing. To alleviate at least some of these feelings, school nurses can use the following checklist:

- ✓ Have the data been documented? Has the information been written down in an organized fashion?
 - ✓ Have the data been analyzed? The staff member should consider what causes him/her to suspect abuse/neglect in this particular case. The staff member should list the symptoms—physical or behavioral—and his/her reasons for suspecting abuse or neglect.
 - ✓ Has the staff member been able to observe the parent/child interaction? Does the parent see the child as worthwhile or different and/or hard to handle?
- ✓ Has the staff member spoken with other professionals within the school? Do they have reason to suspect abuse/neglect? Why?
 - ✓ Does the staff member know the procedure outlined in the reporting policy of the school? Does he/she have the necessary information required for a report? Does the school have the necessary report forms?
 - ✓ Is the exact telephone number and address of the agency to which the reports should be made available?
 - ✓ Has the staff member talked with his/her administrator about support available once the report is made? Has the staff member considered what will happen if the parents try to remove the child from the class? Will the staff member have the support of the school administration?

²⁴ Colorado Department of Education (2000), *The school's role in the prevention and intervention of child abuse and neglect*. www.cde.state.co.us/cdeprevention/download/pdf/child_abuse_manual_2002pdf.





ROLE OF THE SCHOOL NURSE (continued)

- ✓ Has the staff member set up a support system for him/herself with other teachers or administrators? (After the report is made, the staff member may feel vulnerable and need to talk.)²⁵

AFTER A REPORT IS MADE

A member of the local Department of Social Services and your local law enforcement agency will investigate the case, notify that a report has been filed, and check the child's condition. If the child appears to be in immediate danger, he/she will be put in temporary protective custody. In severe cases, the county determines whether temporary or permanent separation from the family is necessary. Treatment for the child and/or family may be recommended or mandated.

²⁵ Colorado Department of Education (2000), *The school's role in the prevention and intervention of child abuse and neglect*.
www.cde.state.co.us/cdeprevention/download/pdf/child_abuse_manual_2002pdf.





§ 4. SCHOOL NURSE AND HER COLLEAGUES

With their hours of access to children and families, school personnel are in unique positions to identify and report child abuse, to work on prevention of child abuse through personal modeling and education, and to support children who are victims of child abuse.

Like the school nurse, all school personnel are considered mandated reporters if child abuse is suspected. Often, a school staff member may be the only trusted adult in the child's life.

- School staff must be educated on the signs and symptoms of child abuse.
- School staff should understand the "do and don'ts" of responding to a child who is discussing her or his abuse.
- School staff should include not only teachers, but also health aides, bus drivers, kitchen staff, athletic coaches, and any other staff members who have contact with students in the school setting.

Classroom teachers and athletic staff have a wonderful opportunity to teach their students about what is appropriate and/or inappropriate touch through their day-to-day classroom activities. They can build non-violent problem solving into the daily classroom and recess routines. Teaching and athletic staffs often have access to parents and can provide education and role modeling on dealing with difficult situations with a child.

In addition to education and role modeling, the classroom teacher has a significant role to play in the rehabilitation of an abused child. Teachers are called upon to create a supportive and safe learning environment when a student returns to school

The school nurse can work with classroom staff to implement procedures outlined in the Colorado Department of Education's *Preventing and Reporting Child Abuse and Neglect, Guidance for School Personnel*.





§ 5. COLORADO RESOURCES

**Colorado Department of
Education**

Prevention Initiatives
201 E. Colfax Avenue
Denver, CO 80203
303-866-3278
www.cde.state.co.us.

**Colorado Department of Human
Services**

Child Welfare Services Unit
1575 Sherman Street
Denver, CO 80203
303-866-3278
www.cdhs.state.co.us.

**Colorado Department of Public
Health and Environment**

Colorado Children's Trust Fund,
Prevention and Intervention
Services for Children and Youth
4300 Cherry Creek Drive South
Denver, CO 80222-1530
[http://www.cdphe.state.co.us/ps/pp/
cctf/cctfhom.asp](http://www.cdphe.state.co.us/ps/pp/cctf/cctfhom.asp).

Best Practices:

[http://www.promisingpractices.net/b
enchmark.asp?benchmarkis=8](http://www.promisingpractices.net/benchmark.asp?benchmarkis=8).





§ 6. NATIONAL RESOURCES

American Humane Association's Children's Services

This agency is a national leader in developing programs, policies, training programs, materials, and services to prevent the abuse and neglect of children, while strengthening families and communities and enhancing social service systems.

63 Inverness Drive East
Englewood, CO 80112-5117
303-792-9900

www.americanhumane.org.

Kempe Children's Foundation

provides clinical treatment, training, research, education, and program development to prevent and treat child abuse and neglect. Located in Denver, the Center has created model programs, provides quality clinical assessment and treatment to abused children and their families, develops curricula to train professionals, trains and consults with other professionals, and conducts research studies that assist in program development and public policy making.

1825 Marion Street
Denver, CO 80218
303-864-5300

www.kempecenter.com.

National Clearinghouse on Child Abuse and Neglect Information

Administration for Children and Families

U.S. Department of Health and Human Services

This clearinghouse is a national resource for professionals and others seeking information on child abuse and neglect and child welfare.

www.calib.com/nccanch



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