

An Introduction to
Child Maltreatment

A Five-Unit Lesson Plan
For Teachers of Psychology in Secondary Schools

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A Note to Curriculum Users

The Purpose of this Curriculum

The purpose of this curriculum is to provide teachers of psychology in secondary schools with information related to teaching about the topic of child maltreatment. Because most introductory psychology textbooks provide very limited information on this topic, teachers need supplemental materials that provide specific information about child maltreatment and suggestions for approaching this topic with students. Once teachers are equipped with information and resources on child maltreatment, they can then disseminate information on the topic to their students.

Why the Topic of Child Maltreatment is Important for High School Students

Curriculum materials focusing on issues associated with child maltreatment are important for high school students to further the prevention of child abuse and neglect. Educating high school students about this topic is important to both prevent child maltreatment from occurring in the future and to reduce the impact of child maltreatment that may have already occurred. Education for high school students can serve the following purposes:

- Research on child maltreatment indicates that a significant number of individuals within the general population have experienced some form of child abuse and neglect. Such childhood experiences can have an influence on an individual's physical, cognitive, emotional, and social development. This influence can last throughout childhood and adolescence and extend into adulthood. Education about child maltreatment can be an important component in helping students with abuse histories to understand their experiences and, in turn, reduce the impact of child maltreatment for individual students.
- Research suggests that child abuse and neglect is often associated with a number of factors including deficits in parenting abilities and skills, various social and demographic characteristics, and biological factors. Identifying specific abusive and neglectful parenting behaviors and disseminating information about factors associated with abusive and neglectful parental behaviors to high school students, might help improve understanding about child maltreatment and thus reduce the likelihood of the problem for future generations.

The Content of this Curriculum

This curriculum contains materials and guidance for secondary education teachers who would like to incorporate information about child abuse and neglect into their teaching. The curriculum is designed to be included in an introductory psychology course or courses on health, sex education, safety, or related issues. The curriculum includes an outline of topics that could be incorporated into a comprehensive semester-long course or, alternatively, a short mini-course that includes only selected topics.

The curriculum contains a procedural outline that includes five-unit lesson plans that target the major content areas within the field of child maltreatment. Detailed content outlines, including teaching activities that correspond to each unit lesson plan are also provided. A list of films and fiction for young adults is included to supplement and enhance the information provided in the content outlines. Additional resource information is provided in the form of a listing of online resources for instructors who have access to the Internet. Finally, a series of references to the literature is contained in a bibliography to guide instructors who wish to locate additional information on child maltreatment.

Addressing the Sensitive Nature of Child Maltreatment

Many students who are exposed to this curriculum will have either some direct or indirect experience with issues associated with child maltreatment. Instructors should be aware of the difficult nature of the topic of child maltreatment and attempt to be sensitive to the needs of their students. Some students may experience various negative feelings when discussing the topic of child maltreatment such as embarrassment, shame, fear, or guilt. Instructors should observe students closely for signs of discomfort and attempt to keep discussions as general and impersonal as possible.

One approach to addressing the sensitive and difficult nature of this topic is to create a question box that students can use to ask questions anonymously about the topic. Students can be told that the curriculum addresses a sensitive area and that many people are not comfortable openly asking questions about the topic. Students can then be instructed to write questions for the question box throughout the unit lesson plan. Instructors should take time before beginning each unit to address the questions from the box that are relevant to that particular lesson.

If instructors have a reasonable suspicion that abuse is presently occurring, or has occurred in the past, they should take the appropriate steps to address this issue (see the following section entitled, “Responding to Disclosures of Child Maltreatment”).

Responding to Disclosures of Child Maltreatment.

Because so many children experience various forms of child abuse and neglect, it is likely that some students exposed to this curriculum will have directly experienced child maltreatment. As users of this curriculum, it is important that instructors are equipped to respond appropriately to a student’s disclosure of abuse or neglect. Educators need to understand the importance of their personal reactions toward a victim of abuse in addition to their professional roles and responsibilities.

There is increasing evidence that supportive reactions to an individual’s disclosure of abuse can be influential in shaping the subsequent impact that the abuse experience has on an individual. If victims encounter positive and therapeutic responses when they disclose abuse, then their feelings of self-blame, isolation, embarrassment, or anger may be reduced. Appropriate responses for educators include avoiding negative reactions such as shock, horror, disapproval, or anger; conveying a belief in the victim’s statements; reassuring the child that he

or she is not to blame and that every effort will be made to protect him or her; and acknowledging and praising the victim's courage in disclosing.

Educators who receive disclosures of abuse can also play a critical role in assisting students in finding professional assistance. Instructors should consult with mental health professionals available within their school or district such as the school psychologist or school counselor. Experts agree on the importance of referring children and adolescents into therapy as soon as possible. Therapeutic intervention is essential for abuse victims because it helps to address initial and long-term consequences associated with abuse. Several studies confirm that families are most receptive to seeking such assistance during the crisis/disclosure stage of abuse.

Educators have a mandated responsibility to report child abuse and neglect when they have a suspicion of abuse. Reports should be made to the local department of social services (usually referred to as child protective services), law-enforcement agencies, or central state registries. Most states require reporters to contact the appropriate agency "immediately" after suspicion has been aroused or a disclosure has been made. Educators should also make an effort to document any incident or discussion that leads them to suspect abuse (e.g., date, time, and description of the incident or discussion with the student). All states and districts within the United States provide immunity to reporters who report in good faith with the intention of ensuring a child's safety, and most state statutes contain penalties for failure to report suspected abuse (e.g., misdemeanor subject to a fine and/or jail sentence). Reporting disclosed or suspected cases of abuse to the appropriate authorities is not only mandated, but contributes to the termination of ongoing abuse and also facilitates the implementation of treatment services for victims.

The National Child Abuse Hotline (Child Help USA: (800) 422-4453) can be an important resource for educators who come into contact with students who disclose ongoing or past abuse. The hotline provides crisis counseling, child abuse reporting information, and information and referrals for every county in the U.S. and District of Columbia. Mental health professionals staff the hotline 24 hours a day, 7 days a week.

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The authors of the curriculum welcome any constructive comments about this curriculum. Of particular interest are comments about any needed changes or missing aspects of the curriculum. Feedback about the curriculum will serve as a foundation for any revised editions of the curriculum. Questions or comments about this curriculum should be directed to:

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Procedural Timeline

Lesson 1: Definitions And Rates of Child Maltreatment

Learning Objectives

Defining Child Maltreatment

- Physical abuse

- Sexual abuse

- Child neglect

- Psychological maltreatment

When Do Adult-Child Interactions Become Child Maltreatment?

How Common is Child Maltreatment?

- Estimates of child maltreatment

- Are rates of child maltreatment increasing?

Teaching Activities

- Discussion Questions

- Group Activities

Lesson 2: Factors Associated With Child Maltreatment

Learning Objectives

The Children Who are Abused and Neglected

- Background characteristics

Adults Who Maltreat Children

- Background characteristics

- What factors might lead to child maltreatment?

Teaching Activities

- Discussion Questions

- Group Activities

Lesson 3: Effects Associated With Child Maltreatment

Learning Objectives

Problems Associated with Maltreatment

- Initial effects associated with maltreatment

- Long-term effects associated with maltreatment

Factors that Influence Child Maltreatment Outcomes

Teaching Activities

- Discussion Questions

- Group Activities

Lesson 4: Responding To Child Maltreatment

Learning Objectives

Reporting Issues

- Legal mandates

- Supporting individuals who have experienced child maltreatment

Child Protective Services

Interventions

- Counseling interventions

Community interventions
Teaching Activities
Discussion Questions
Group Activities

Lesson 5: Preventing Child Maltreatment

Learning Objectives
Targeting Potential Victims
Targeting At-risk Families
Decreasing Societal Acceptance of Violence
Increasing Society's Commitment to Children
Teaching Activities
Discussion Questions
Group Activities

Content Outlines

Lesson 1: Definitions and Rates of Child Maltreatment

Lesson Objectives

- To show that clear-cut definitions of child maltreatment are difficult to compose
- To provide broad definitions of various types of child abuse and neglect
- To discuss the ambiguity inherent in defining behaviors considered to be child maltreatment
- To provide information about the prevalence of child maltreatment
- To discuss whether rates of child maltreatment have increased over the years

Defining Child Maltreatment

Despite public and research attention directed toward child abuse and neglect, there is little agreement regarding what specific acts constitute various forms of child maltreatment. Terms such as abuse, maltreatment, and neglect are difficult to define objectively and are used to describe different behaviors depending on the different purposes for the definitions. A lawyer presenting a case in a court of law, for example, may use a different definition of child maltreatment than a social worker that is determining whether a child should be removed from his or her home. A psychologist conducting therapy with an individual may use a completely different definition than either a lawyer or social worker. Despite these problems, some consensus has been reached in generally defining the various forms of child maltreatment.

Physical Abuse

Generally refers to the deliberate use of physical force against a child that results in, or has the potential to result in, physical injury. Acts that can constitute physical abuse include beatings; kicking; shaking; throwing; burning; stabbing; knocking a child down; threatening a child with a weapon; or choking a child. Extreme forms of physical abuse can lead to infanticide – the killing of children. Physical abuse is at the extreme end of the continuum of physical punishment, with the most common and culturally accepted form being spanking. Spanking typically refers to hitting a child with an open hand and is a common practice in the U.S. Although spanking is currently legal in all 50 states, it is associated with negative developmental outcomes similar to physical abuse and is a significant risk factor for abuse.

Sexual Abuse

Generally refers to interactions with a minor that include completed or attempted sexual acts, sexual contact, or exploitation (i.e., noncontact sexual interaction such as pornographic picture taking). Acts constituting sexual abuse include: oral, anal, and genital penetration; attempted penetration; fondling of breasts or genitals, sexual kissing, and filming or photographing children for the sexual stimulation of others. One example of child sexual abuse that has received increasing attention is child sex trafficking. The U.S. Trafficking Victims Protection Act of 2018 defines child sex trafficking as “the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act.” The victims of sex trafficking often face an element of force or coercion when they are recruited through kidnapping or physical coercion and/or lured by false promises such as a paying job, sham marriages, or the guise of legitimate

organizations such as modeling or tourist agencies. Estimates of sex trafficking are difficult to determine due to the covert nature of sex trafficking and the lack of a uniform reporting system.

Child Neglect

Generally refers to deficits in the provision of a child's basic needs. Some of these deficits include health care needs (e.g. refusal to allow or provide needed care for diagnosed conditions, noncompliance with medical recommendations), personal hygiene neglect (e.g. failure to meet basic standards of personal care and cleanliness), nutritional neglect (e.g. failure to provide a sufficient and nutritionally balanced diet), educational neglect (e.g. failure to provide care and supervision necessary to promote education), and emotional neglect (e.g. failure to provide child with security, emotional support, and encouragement). Child neglect can also include deficits in environmental safety including neglect of household safety (e.g. failure to eliminate safety hazards in and around the child's living area, neglect of household sanitation (e.g. failure to meet basic standards of housekeeping care and cleanliness), inadequate shelter (e.g. failure to provide adequate physical shelter and/or a stable home), environmental neglect (e.g. lack of environmental safety, opportunities, and resources), parental substance use and abuse (e.g. adult behaviors contribute to a child's exposure to or use of illicit or controlled substances). Child neglect also includes abandonment (physical desertion of the child), supervisory neglect (failure to provide a level of supervision necessary to avoid child injury), and fostering delinquency (encouragement of the development of illegal behaviors in the child).

Psychological Maltreatment

Consists of a repeated pattern or extreme incidents of caretaker behavior that thwart the child's basic psychological developmental needs (e.g., safety, socialization, emotional and social support, cognitive stimulation, respect) and convey to a child he/she is worthless, defective, damaged, unloved, unwanted, endangered, primarily useful in meeting another's needs, and/or expendable. According to the American Professional Society on the Abuse of Children, acts constituting psychological maltreatment include spurning (e.g. verbal and nonverbal hostile rejecting/degrading behaviors), terrorizing (e.g. caregiver behaviors that harm or threaten harm to a child or child's loved ones or possessions), exploiting/corrupting (e.g. encouraging inappropriate behaviors in a child), emotional unresponsiveness (e.g. ignoring a child's needs or failing to express positive affect toward a child), isolating (e.g. denying a child opportunities to interact/communicate with others), and mental health/medical/educational neglect (e.g. failing to provide for a child's needs in these areas). Psychological maltreatment includes both *emotionally neglectful behaviors* such as inadequate nurture or affection, exposure to spouse abuse, permitted drug/alcohol abuse, encouraging delinquency, and refusal/delay in providing psychological care as well as *emotionally abusive behaviors*: tying or binding children; verbally belittling, denigrating, threatening, or rejecting children; deliberately withholding basic needs as a form of punishment; and economic exploitation.

When Do Adult-Child Interactions Become Child Maltreatment?

As noted above, defining the various forms of child maltreatment is a difficult task. Part of the difficulty in defining child maltreatment stems from the fact that behaviors associated with adult-child interactions lie along a continuum. Adult behaviors directed at children range from those that the majority agrees are appropriate (e.g., placing a child in a brief "time-out" as a form

of punishment) to those that the majority agrees are inappropriate (e.g., shooting a child with a gun as a form of punishment). Between these extremes lie behaviors that are not agreed upon in terms of their appropriateness. Some behaviors that lie in this “middle ground” are viewed by some as appropriate but by others as inappropriate. Where the line should be drawn between appropriate adult-child interactions and child maltreatment is not always clear.

Consider, for example, the definition of child neglect. One common conceptualization of neglect focuses on omissions of the physical needs of children such as nutrition or hygiene. The difficulty arises when attempting to determine which incidents qualify as normal characteristics of parenting or parental error, versus serious child neglect. If a child occasionally misses a bath or a meal, for example, few would identify the situation as child neglect. If a 10-year-old bathes only once a month and is fed only potato chips, however, many would probably identify the situation as child neglect. Another good example of the ambiguity inherent in distinguishing between appropriate and inappropriate behaviors is reflected in the debate over whether spanking should be considered a form of physical abuse. Many people consider spanking to be an acceptable part of punishment and child rearing. Surveys of parents show that 90% have used some form of physical punishment on their children. Some experts within the field of child maltreatment, however, have raised questions about the appropriateness of spanking because: 1) a history of spanking is correlated with delinquency, arrest, and homicide; 2) spanking has been associated with other forms of family violence such as spouse and sibling abuse; and 3) spanking may communicate that physical aggression is an acceptable way of dealing with frustration and/or conflict. These issues suggest that conceptual definitions of child maltreatment should also consider the frequency, duration, and consequences associated with various acts as well as cultural issues associated with child rearing.

How Common is Child Maltreatment?

Estimates of Child Maltreatment

Estimating the amount of child abuse and neglect in society is fraught with many problems. Perhaps the most significant problem is the lack of definitional consensus about what behaviors constitute abuse and neglect. Because definitions of abuse change across studies and over time, estimates also vary. Another problem is that child abuse and neglect are often hidden crimes that go unreported. As a result, the true incidence of child abuse and neglect is not known. The best information we have about rates of abuse and neglect are imperfect estimates of its occurrence.

According to the U.S. Department of Health & Human Services Child Maltreatment 2019 report, the national estimated number of victims of child maltreatment is 656,000. Of these children, the majority were neglected (61.0%), followed by physical abuse (10.3%), sexual abuse (7.2%), and psychological maltreatment (2.4%). Approximately 16% of victims suffered from multiple maltreatment types. Considering the age and sex of victims, approximately one quarter (28.1) of child maltreatment victims were under 2 years of age and boys and girls face similar rates of victimization at 48.3% for boys and 51.4% for girls. American Indian or Alaska Native children have the highest rate of victimization (14.8 per 1,000 children). At the second highest rate, are African American children at 13.8 per 1,000 children. Asian children have the lowest rate of victimization (1.7 per 1,000 children).

Are Rates of Child Maltreatment Increasing?

Whether the rates of child maltreatment are increasing is a difficult question to answer because of the problems, noted above, in estimating the frequency of abuse and neglect. Several experts in the field have concluded that there has been a decline in child maltreatment over the years. Although, the number of incidents reported to Child Protective Services has steadily increased over the past 25 years, the national estimated number of victims decreased by about 4% from 2015 to 2019. Child Maltreatment 2019 estimates that in 2019, there were 8.9 children per 1,000 victims of child maltreatment whereas in 2015 there were 9.2 children per 1,000 victims of child maltreatment.

Teaching Activities

Discussion Questions

- Why is it important to discuss child maltreatment?
- What do you think of when you hear the words *child maltreatment*?
- Do you remember any accounts of child abuse or neglect reported in the media?

Group Activities

- Ask students the following question: “When you hear or read about child maltreatment, what do you think of?” Write students' responses on an easel or chalkboard. Then, as a whole class, try to group the responses into categories such as physical abuse, sexual abuse, neglect, etc.
- Discussion and group activity: Ask pairs of students to define child maltreatment (sexual and physical abuse, psychological maltreatment, and neglect) and to give examples of their definitions. Lead a class discussion to create a consensual definition for each type of child maltreatment.
- Arrange a class debate on the topic of spanking as a form of discipline versus child abuse. Divide the class into three teams. One team should research and present evidence and arguments supporting the use of spanking for disciplining children. The second team should research and present evidence and arguments proposing that spanking is a form of child abuse and should be outlawed. The third group will prepare questions for both teams to ask during the debate. The debate should be followed by a class discussion highlighting key issues.
- Play the song, "My Name is Luca," by Susan Vega and discuss the meaning and implications of abuse as reflected in the song.
- Homework assignment for next class: Ask students to bring in online news articles that describe cases of child maltreatment. During the following class, students will present, in groups of 3-4, their findings. Discuss as a class, some of the issues raised during the individual presentations.

Lesson 2: Factors Associated With Child Maltreatment

Lesson Objectives

- To provide information about the characteristics of the victims of child maltreatment and their families
- To provide information about the characteristics of the perpetrators of child maltreatment, and factors that may lead to child maltreatment

The Children Who are Abused and Neglected

Background Characteristics

Sociodemographic characteristics of children who are victims of child maltreatment do not generally suggest that any particular subpopulation of children is the sole target of abuse and neglect. Girls and boys of all ages are maltreated. A diversity of socioeconomic and ethnic backgrounds also characterize the victims of child maltreatment. There is evidence, however, that some characteristics of victims place them at more risk than others, especially for certain forms of abuse (e.g., age, socioeconomic status, etc.).

Some risk factors for child physical abuse include birth complications, disability, and being male. The risk of child physical abuse also increases with age, although, many believe that there is significant underreporting for very young children. Some risk factors associated with child sexual abuse include early adolescent age, sexual minority status, disability, and various psychological characteristics (i.e., low self-esteem, susceptibility to persuasion, emotional immaturity, loneliness, etc.). Females are more likely to be victims of sexual abuse, although many believe that incidences of male victimization often go unreported. The risk for child neglect declines as children get older with children under 3 years of age at the greatest risk. Poverty is a significant risk factor for child neglect and there appears to be racial disproportionality in child neglect with black children at greater risk than white children, although this disproportionality is likely connected to socioeconomic status. Children are at greater risk for psychological maltreatment when they are older. Child psychological maltreatment is difficult to identify, but some studies are showing that white and black children are at greater risk. Victims of physical abuse, child neglect, and psychological maltreatment are all disproportionately represented among economically disadvantaged groups.

Adults Who Maltreat Children

As is true with the victims of child maltreatment, it is difficult to identify a particular demographic subpopulation of adults as high risk for committing abuse. Men as well as women are reported for maltreating children, and a diverse age range is represented in the literature. A diversity of socioeconomic and ethnic backgrounds also characterizes the perpetrators of child maltreatment. Although no single profile of child maltreatment perpetrators exists, research supports several attributes that are consistently associated with the adult perpetrator of child maltreatment. For all forms of maltreatment, for example, the majority of perpetrators are not strangers, but rather someone the child knows personally (e.g., most commonly a parent, other relative, or friend of the family). Statistics indicate that in the majority of child maltreatment cases (78%) the parents are the perpetrators.

High rates of physical abuse are associated with different biological, psychological, and broader contextual factors such as economic and family characteristics. One such biological factor observed in physically abusive parents is general physiological overactivity (e.g., increased heart rate and blood pressure). The exact connection between this overactivity and physical abuse is still unknown. However, it could be that this physiological overactivity affects the way the parent perceives and cognitively interprets parenting situations and their reactions. Parents who physically abuse their children also tend to have more health issues and physical disabilities than parents who do not abuse their children. Additionally, parents who physically abuse their children are more likely to have intellectual impairment and deficits in problem solving skills compared to other parents. Some of the mental health and behavioral difficulties noted in physically abusive parents include anger control issues and hostility, low frustration tolerance, depression, low self-esteem, substance abuse/dependence, deficits in empathy, and rigidity. Research has also found that high rates of physical abuse are associated with parents who begin their families at a young age. Single parenthood is also associated with child physical abuse. In one study, children that lived in households characterized by poverty are three times more likely to be at risk for physical abuse. Additionally, children that live in low-income households appear to be more likely to experience more severe abuse such as serious or fatal injuries.

Sexual abuse is more likely to be perpetrated by males (96% from one incidence reporting system), although some experts argue that the incidence of female-perpetrated sexual abuse is higher than reported and simply goes undetected by authorities. Only a small minority (about 10% reported in one study) of child sexual abuse victims do not know their perpetrator, indicating that the majority of the time, the perpetrator is a person that is familiar to the child. Research shows that people who sexually abuse children usually experience cognitive distortions, substance abuse, are more likely to have lower social skills including difficulties in intimate relationships, lower levels of empathy, and loneliness. Some psychological characteristics of people who sexually abuse children include aggression/violence, criminal behavior, hostility, paranoia, anxiety, depression, low self-esteem, and external locus of control. Community surveys suggest that children that live in a lower socioeconomic status are more at risk for childhood sexual abuse, although this could be due to uncontrolled and unintentional systemic reporting biases. Risk factors of parents who sexually abuse children include substance abuse, educational deficits, their own history of sexual abuse, and mental health problems.

The majority of reported neglect perpetrators are birth parents and mothers (91% and 87%, as reported in one incidence study). The higher rate of maternal parent reports is likely due to the fact that mothers spend more time with their children. Research suggests that on average, teen mothers are more neglectful than older mothers. Neglectful mothers also report more depressive symptoms, impulsivity, and chronic health problems than non-neglecting mothers. Neglectful mothers may also display more anger, less empathy, show more stress regarding parenting, and be more likely to utilize verbal aggression and spanking as disciplinary strategies. Similar to the physical abuse characteristics noted above, single parenthood is also associated with child neglect. Some research has found that neglectful parents have a history of antisocial behavior, criminal background, health problems, and substance abuse. In one study, parents who abused substances were four times more likely to neglect their children than parents who did not abuse substances.

Characteristics of parents that psychologically abuse their children are associated with different factors including psychological and physical illness. Parents who psychologically maltreat their children tend to have more difficulties with problem solving, building relationships, using effective coping skills, and accessing support networks. Research also suggests that psychologically abusive mothers showed more instances of depression, aggression, hostility, social anxiety, neuroticism, low self-esteem, substance use, and physical illness compared to non-psychologically abusive mothers. Incidence studies suggest that biological parents are the primary perpetrators of reported emotional abuse in the large majority of cases. In one incidence study, females were twice as likely to be reported for perpetrating emotional neglect. However, in that same study, males were more likely than females to be reported for emotional abuse.

What Factors Might Lead to Child Maltreatment?

Many factors have been proposed to explain why adults abuse and neglect children. Unfortunately, no one factor can explain why an adult has abused or neglected a child in each and every case. It is likely that multiple factors are at work in each situation.

A number of researchers have suggested that abuse and neglect is the result of disturbed patterns of parent-child interactions. Several research studies have suggested that a poor bond between parent and child, deficits in parenting skills, the parent's own upbringing, and problem child behavior characterize abusive and neglecting families. Many experts believe that child abuse and neglect results when difficult child behaviors (e.g., noncompliance, aggression) interact with deficits in parenting (e.g., anger control problems, lack of parenting knowledge and skills), leading to abuse and neglect. Vulnerability in the bond between parent and child may lead to further difficult child behaviors and increased challenges for parents, resulting in a negative escalation of abusive parent-child interactions.

One widely accepted explanation for child abuse and neglect involves the transmission of abusive and neglectful behaviors from one generation to the next. When children are exposed to maltreatment, either as direct victims of physical or sexual assault or as witnesses to maltreatment, they are exposed to a set of norms and rationalizations that justify abuse. Children learn that violence and abuse are an acceptable way, or perhaps even *the* way, of resolving family conflict and expressing emotions. Research consistently demonstrates that abusive parents have been exposed to significantly more childhood abuse than have non-abusive parents. Childhood abuse, however, is neither a necessary nor sufficient cause of later adult violence, abuse, or neglect. At best, the data suggest that children who were abused or neglected, are more *likely* than non-maltreated individuals to be abusive adults. It is important to note that they are not predetermined to be abusive. The majority of abused and neglected children do not grow up to be abusive and neglectful parents.

Another common explanation of child maltreatment points to the role that disturbed psychological functioning plays. Some research supports the notion that individuals who are seriously disturbed by some form of mental illness commit various forms of child maltreatment. An individual's mental illness might distort his or her view of the world and serve to contribute to abusive or neglectful behavior. A common mental illness that is seen as a risk factor for multiple forms of child maltreatment is substance abuse. Only a minority of child maltreatment perpetrators, however, demonstrate higher rates of psychological disorders compared to nonperpetrators. Many perpetrators, however, do display greater psychological difficulties that would not be considered a mental disorder when compared to nonoffenders such as cognitive

distortions (e.g., believing that sex with children is a good way to teach them about sex), depressive symptoms, stress, low self-esteem, and substance abuse or dependence.

Biological factors may also explain why some adults abuse and neglect children. Adults who physically abuse children, for example, often show unusual physiological responses (e.g., increased heart rate) to both positive and negative child stimuli. Such hyperresponsiveness might make child abusers more physiologically reactive in stressful situations with children and lead to abuse. Perpetrators of child sexual abuse demonstrate differences in hormonal levels relative to comparison groups that may contribute to their sexual activities with children.

Other theories point to various situational factors that increase the stress and frustrations of adults, which in turn contributes to their likelihood of abusing or neglecting children. As noted above, rates of child maltreatment are higher in economically disadvantaged families. Experts believe that lower-incomes and higher rates of unemployment contribute to an unequal distribution of opportunities, along with the inevitable stressors associated with poverty (e.g., financial worries, ill health, and crowded living conditions), that produce high levels of frustration which may lead to abuse and neglect.

Teaching Activities

Discussion Questions

- What is your theory about why child maltreatment occurs?
- Who commits child maltreatment, and who are the likely victims?
- Do most abuse victims go on to abuse their own children? Identify several factors that might prevent maltreated children from becoming maltreating parents. (Teacher: Create a semantic map based on the students' responses and compare/connect these responses to what is known from the literature).

Group Activities

- Ask students to describe their conceptions (or misconceptions) about the typical child maltreatment victim...the typical child maltreatment perpetrator. Compare and contrast any misconceptions with the facts.
- At the beginning of class, divide students into small groups. Ask each group to create an imaginary profile of either a victim or a perpetrator – background, age, sex, etc. How consistent are these profiles with what is known from the literature?
- As a class, brainstorm about possible reasons why the following facts are true: 1) males are more likely to perpetrate sexual abuse; 2) physical abuse is more likely to occur in single-parent households; and 3) physical abuse is more likely to occur in households with young parents.
- Closure: Ask students to summarize, in one sentence, each of the risk factors that might lead to abuse.
- In pairs or small groups, ask students to work on a headline for a front-page article in the local newspaper on the issue of child maltreatment, based on the topics/issues you have discussed during the lesson.

Lesson 3: Effects Associated With Child Maltreatment

Lesson Objectives

- To provide information and discuss issues related to the initial and long-term effects associated with child maltreatment
- To discuss factors that may influence the impact of child maltreatment on the victim

Problems Associated with Maltreatment

Research has repeatedly demonstrated that child abuse and neglect is associated with a variety of negative psychological, behavioral, and interpersonal problems. The consequences associated with child maltreatment can be classified as either initial effects (occurring within 2 years following the abuse) or long-term (consequences beyond 2 years subsequent to the abuse). It is important to note that it is very difficult to isolate the effects of one kind of child maltreatment from another type of child maltreatment and to isolate child maltreatment from other childhood risk factors because many times, child maltreatment accompanies other problems including marital violence, alcohol/drug abuse, parental depression, and many more.

Initial Effects Associated with Maltreatment

In terms of initial effects, investigators have identified a wide range of emotional, cognitive, physical, and behavioral problems that are more prevalent among child abuse and neglect victims compared to individuals without such a history.

Physically abused children often face negative medical effects ranging from minor injuries (e.g. bruising) to death. Additionally, some other negative medical effects from child physical maltreatment are head injury, failure to thrive, bites, burns, sleep disorders, and traumatic brain injury. Children who experience child physical abuse also can experience negative cognitive effects such as academic problems, intellectual deficits, and deficits in problem solving. Negative behavioral effects also include aggression, fighting, and arrests. There are also negative socioemotional effects such as poor social skills, fearfulness, and delayed play skills. Child sexual abuse victims experience many of the same problems as do children who experience other forms of child abuse and neglect. The most frequently noted symptoms in this group, however, are sexualized behavior (e.g., overt sexual acting out toward adults or other children, compulsive masturbation, excessive sexual curiosity, precocious sexual play and knowledge) and post-traumatic stress symptoms (e.g., nightmares, fears, feelings of isolation and an inability to enjoy usual activities, body complaints).

Child neglect can also result in negative medical outcomes such as failure to thrive, and also death. Additional findings related to the effects associated with child neglect are particularly limited, however, what research is available suggests that child neglect may be more harmful than either physical or sexual abuse. Child neglect can have several negative effects such as social and attachment difficulties (e.g., disturbed peer interactions), cognitive and academic deficits (e.g., low academic achievement, low levels of creativity), emotional and behavioral problems (e.g., low self-esteem, physical and verbal aggression), and physical consequences.

Psychological maltreatment has been studied less extensively than other fields of child maltreatment. However, preliminary evidence suggests similar initial effects associated with this form of child maltreatment. In addition, several studies that have evaluated children experiencing

multiple forms of abuse suggest that psychological maltreatment often co-occurs with other forms of abuse and may be the most destructive form of child maltreatment.

Long-term Effects Associated with Maltreatment

Many of the same social and behavioral impairments found in childhood abuse and neglect victims have also been noted in adults with a history of child abuse or neglect. Difficulties in adults with child maltreatment histories include criminal and violent behavior, post-traumatic stress symptoms, substance abuse, emotional difficulties (e.g., depression and anxiety), cognitive deficits, and interpersonal problems (e.g., parenting deficits, difficulty forming and maintaining relationships).

Factors that Influence Child Maltreatment Outcomes

The experience of child abuse and neglect does not affect each individual in a consistent or predictable way. Some victims display numerous symptoms while others demonstrate few symptoms or a complete absence of symptoms. There is no single symptom or negative effect consistently observed in all children who are victims of child maltreatment. Specific characteristics of victims' families or their abuse experiences can serve to mediate the effects of abuse. Physical abuse victims whose families are characterized by high stress and whose abuse experiences are more severe tend to exhibit greater levels of psychological distress. Conversely, victims who benefit from high levels of intelligence and a supportive parent figure appear to be protected in some way and demonstrate fewer psychological symptoms. For sexual abuse victims, experiences accompanied by threats, force, violence, and serious forms of sexual contact (e.g., vaginal or anal intercourse) are related to an increase in symptoms. In addition, sexual abuse perpetrated by fathers, father figures, or individuals having an intense emotional relationship with the victim are associated with more severe consequences. Negative responses following abuse disclosure by significant adults tend to aggravate the trauma experienced by sexual abuse victims. In contrast, social support following the disclosure of abuse, such as maternal support or a supportive relationship with an adult appears to mitigate negative effects of child sexual abuse.

Teaching Activities

Discussion Questions

- What do you think are some of the problems encountered by children who are maltreated?
- How do you think abuse may affect a child later in life?
- What factors might influence whether or not an individual experiences problems as a result of child maltreatment?

Group Activities

- In small groups, students create a semantic map (a.k.a. Web) depicting the effects of child maltreatment.
- Bring newspapers, magazines, scissors, glue and posters to class. In small groups, students write a short story or create a collage demonstrating the effects of one type of child maltreatment.
- In small groups, have students create a chart of the "costs" of child maltreatment. Suggest that students use the following categories: Physical Costs, Emotional Costs, and Financial

Costs. Encourage students to include information based on their own knowledge or experiences.

- Ask students to write a poem or short story that will attempt to depict, to some extent, the effect of child maltreatment based on what they have learned and discussed in class. In grading the project, evaluate how well the project depicts the experience of maltreated children (and not necessarily the “literary value” of the project). Later in class (or toward the end of the curriculum) students can volunteer to share their projects with their classmates. In addition, you can ask students to submit their projects to include in a booklet incorporating materials that the students produced during this lesson.

Lesson 4: Responding To Child Maltreatment

Lesson Objectives

- To discuss and provide information concerning the legal requirements of reporting child maltreatment
- To discuss and provide information on how to provide support to victims of child maltreatment
- To provide information on government agencies that are responsible for responding to reports of child maltreatment
- To provide information on some forms of intervention in cases of child maltreatment

Reporting Issues

Legal Mandates

During the mid-1960s, all jurisdictions in the United States passed statutes requiring certain professionals to report suspected cases of child maltreatment. Initially, these laws focused primarily on doctors being responsible for reporting injuries from physical abuse; but these laws have grown to include more professionals being responsible for reporting all forms of child maltreatment that might potentially harm a child. For most states, professionals who are mandated to report suspected child abuse and neglect include medical personnel (physicians, dentists, nurses, chiropractors, medical examiners), educators (teachers, school counselors, and administrators), mental health professionals (psychologists, drug and alcohol abuse counselors), social-service professionals (social workers), public agency employees (law enforcement officers, probation officers), and daycare personnel (daycare center staff, childcare workers). There are several penalties for professionals who fail to report suspected cases of child abuse and neglect such as misdemeanor charges subject to a fine and/or jail sentence, tort liability for harm done to the child, and reprimands from ethical authorities (e.g., ethics boards of professional organizations).

Despite mandates for professionals to report suspected cases of child abuse and neglect, many professionals fail to report. In one study, almost 40% of professionals at some time in their careers failed to make a report of suspected abuse or neglect. Professionals may be reluctant to report cases of abuse for several reasons including the following: they may not fully understand their reporting responsibilities, they believe harm will come to the family or victim, or they may fear negative personal consequences will result (e.g., fears of being sued, lost time from work, personal upset).

Supporting Individuals Who Experience Child Maltreatment

Because the reaction that maltreated children receive following disclosure is influential in shaping the effects associated with abuse, it is imperative that individuals have some idea about what it means to respond to victims in a supportive fashion. Supportive responses toward abuse and neglect victims include appropriate reactions following the individual's revelation that he or she was abused. One of the most adaptive responses is to convey a belief in the individual's report of abuse. Another supportive response is to convey to the victim that the episode was completely the responsibility of the perpetrator, instead of becoming angry with the victim or blaming him or her for the event. Staying calm and avoiding overreactions is another important reaction that will communicate support to the victim. Other supportive reactions include

protecting the victim from further harm, acknowledging the courage it took for the victim to disclose, and accepting the victim's feelings about the event. In contrast, maladaptive responses would be to doubt the child's report or to deny that the abuse has occurred. Inappropriate responses also include overprotectiveness, reluctance to touch or interact with the victim, overreacting to the disclosure, and blaming the victim.

Child Protective Services

Federal and state laws provide for the protection of children who are at risk for child abuse or neglect. In most states, such responsibility falls on the local department of social services. The department of social services has a division responsible for the protection of children, usually referred to as child protective services (CPS). The role of CPS is to protect children via four services: investigation of reports of maltreatment, provision of treatment services, coordination of services with other agencies in the community, and implementation of preventive services.

One option for protecting children is the use of out-of-home care such as foster care placements. The Adoption and Foster Care Analysis and Reporting System estimated that in 2019 that about 424,000 children were living in foster care. Although state laws permit placement in out-of-home care to protect children, all states have programs to prevent the dissolution of the family when desirable and possible.

Child abuse and maltreatment is also addressed on the federal level. One example of federal legislation includes the Child Abuse Prevention and Treatment Act (CAPTA), amended most recently in January 2019, which helps provide funding and guidance to states on prevention measures, assessment, investigation, prosecution, and treatment activities. The Promoting Safe and Stable Families (PSSF) Program helps individual state child welfare agencies prevent child maltreatment through family support services, family preservation services, and time-limited family reunification services. The legislation titled the Child and Family Services Improvement and Innovation Act of 2011, which also promotes the safe reunification of children with their families, also places emphasis on the concern for children's safety. Children may be placed in out-of-home care when danger to the child is imminent or when prevention attempts are unlikely to be effective. In addition, the law defines specific situations in which states *are not* required to make "reasonable efforts" to return children to their families (e.g., when the parent has committed murder, manslaughter, or felony assault of the child or another child of the parent). Furthermore, the law emphasizes the minimal use of temporary living situations particularly in younger children to address their developmental needs.

In recent years, CPS agencies across the country have come under fire because of concern about the seeming inability of the system to provide adequate protection for those children reported for maltreatment. Concerns about the child welfare response have increased due to the COVID-19 pandemic, which has been associated with increased risk for child abuse and maltreatment. Federal and state prevention efforts have begun to address this criticism. In response to the risk of child maltreatment, the U.S. Advisory Board on Child Abuse and Neglect formulated a national strategy for the protection of children, which includes the following elements:

- Community-based child abuse prevention programs that strengthen and support families
- Reorienting the role of government and funding in child protection toward prevention and treatment rather than investigation
- Targeting societal values such as cultural acceptance of violence and exploitation of children
- Increasing the knowledge base about maltreatment through federal research programs

Interventions

Counseling Interventions

There are several forms of counseling interventions that are available for families affected by child maltreatment. Counseling interventions may take a variety of forms including various combinations of the following: individual counseling, group therapy, couples counseling, and family therapy. Such interventions target adults who have maltreated children, families in which maltreatment has occurred, or the children who have experienced maltreatment.

Interventions for physically abusive and neglectful parents target parenting skills training through education and support programs. These parent education and support programs target four main goals including parenting skills, addressing distorted cognitions, the development of adaptive and nonviolent coping strategies, and greater affective regulation such as anger control and stress management. Interventions for physically abused children include first securing a safe environment, then receiving education about abuse, developing healthy coping skills and regulation of emotional distress, achieving mastery over trauma related memories, and cognitive skills development.

Treatment for child sexual abuse offenders vary although the most popular form of treatment combines both cognitive techniques (e.g., recognizing and changing inaccurate beliefs), behavioral techniques (e.g., aversive therapy to reduce deviant sexual arousal patterns), and relapse prevention. Sex offender treatment might also include a physiological approach such as the administration of drugs to inhibit sexual urges. Family systems approaches for sexual abuse are also used and include comprehensive programs that use a sequence of therapies including individual therapy for each family member as well as family and marital counseling. Interventions for sexually abused children often target the negative feelings associated with abuse such as guilt, shame, anxiety, anger, depression, and stigmatization. Group therapy is often helpful for victims of sexual abuse to help combat self-denigrating beliefs and to confront issues of secrecy and stigmatization associated with the abuse. Some families may need additional treatment interventions that focus on psychiatric disorders, substance abuse problems, or in-home services (e.g., crisis intervention and assertiveness training).

Interventions for parents who psychologically abuse their children focus on improving parental sensitivity, attunement, responsiveness to their children's needs and feelings, and overall relationship with the child. Interventions for children who are victims of child psychological maltreatment are still being developed. However, current research suggests that an important foci of treatment for children that have been psychologically maltreated include intrapersonal relationships (e.g., identity, self-esteem), interpersonal relationships (e.g., relationship problems between people), and behavioral and emotional concerns (e.g., depression, anxiety, aggression, and poor impulse control).

Community Interventions

Several community interventions commonly serve as adjuncts to some of the other intervention methods noted above. Supportive communities can help assist overwhelmed parents address situational and social factors that might contribute to child abuse and maltreatment. Factors such as social isolation and economic stressors can be addressed through a variety of services such as home visits, hotlines, support groups, therapeutic childcare, public awareness campaigns, and government programs that provide financial assistance.

Teaching Activities

Discussion Questions

- What types of professionals are required to report cases of child maltreatment?
- What are some of the consequences of reporting child maltreatment? For the victim of maltreatment? For the person to whom the victim disclosed? For the maltreating family?
- Describe some appropriate responses one can make to someone who discloses abuse.
- What is the role of child protective services in child abuse and neglect cases?
- Identify some of the interventions that are helpful in addressing the problem of child maltreatment. Ask students to identify some of the factors that might contribute to an intervention's effectiveness based on what they have learned.

Group Activities

- Role-play inappropriate responses to child maltreatment disclosure.
- Role-play appropriate responses to child maltreatment disclosure.
- Role-play vignettes, written by the students, on the dilemmas involved in disclosing child maltreatment.
- Role-play vignettes, written by the students, on the dilemmas involved in reporting child maltreatment.
- Divide the class into small groups. Each group should devise a different type of intervention for the perpetrator of abuse, the victim of abuse, and the family. Each group can focus on all forms of child maltreatment or each group can focus on only one form of child maltreatment. Students can then present their interventions to the class.
- Ask students to create crossword puzzles that review the content of the lesson. Students can then exchange crossword puzzles with a classmate and attempt to solve them.

Lesson 5: Preventing Child Maltreatment

Lesson Objectives

- To discuss various approaches to preventing and minimizing the extent of child maltreatment at the level of the individual
- To discuss various approaches to preventing and minimizing the extent of child maltreatment at family and societal levels

Targeting Potential Victims

There have been growing efforts and focus on preventing child maltreatment versus reactively responding after it has occurred. Prevention programs have focused on education and providing support to families through social support and education programs that are designed to prevent intimate violence from occurring. During the 1980s, school-based empowerment programs to help children avoid and report victimization became popular. These programs generally teach children knowledge and skills believed to be important in protecting themselves from a variety of dangerous situations. Most have focused on sexual abuse and emphasized two goals: primary prevention (keeping the abuse from occurring) and detection (encouraging children to report past and current abuse). Research evaluation of school-based programs suggests that in general, exposure to victimization programs increases knowledge and protection skills following participation. Other prevention programs focus on parents and families and include parent training and community support efforts. Parents, for example, are educated on parenting techniques, undergo skills training, and attend support groups. Fortunately, it looks like many of these prevention efforts are working. The national estimated number of victims of child maltreatment has decreased by about 4% from 2015 to 2019.

Targeting At-risk Families

Child abuse and neglect often results when families are overwhelmed by situational circumstances (e.g., low income, unemployment, few social supports) or limited knowledge or skills (e.g., misunderstandings about what constitutes typical child development; effective and safe parenting techniques). Because of these realities, many experts believe that the prevention of abuse and neglect hinges on the ability to provide guidance and support to families at risk for abuse and neglect. In recent years, funding has been focused on prevention approaches that emphasize parental competence and relieving parental stress. These programs operate on the assumption that methods that focus on teaching high-risk parents how to be effective parents should reduce child maltreatment. Parental competency programs typically connect parents with a mentor who regularly visits the home to provide social support, parenting suggestions, community support groups, and help with life decisions (assisting with educational and occupational issues). Many of these programs attempt to identify high-risk parents and intervene before the first child is born. These programs generally have several goals:

- Increasing parent knowledge about child development and child management
- Improving overall parenting skills
- Increasing empathy for and awareness of others' needs

- Improving the self-concept and self-esteem of family members
- Improving family and parent-child communication
- Building family support and cohesion
- Increasing parental knowledge about the triggers of abuse
- Increasing parents' use of nonviolent approaches to child discipline
- Developing the parents' coping and emotion regulation skills

Research evaluating the effectiveness of parental competency programs leads to the conclusion that such programs are generally effective in meeting many of their goals.

Decreasing Societal Acceptance of Violence

In many ways, violence within our culture is an accepted, encouraged, and even glorified form of expression. "Accepted" forms of violence include violence contained in television programs and movies, assaults occurring between parents or other adults, and violent forms of disciplining children. Some social scientists argue that there is a "spillover effect" in which the acceptance of such violence in our culture is normalized and contributes to the acceptance of violence toward children within their homes. The implication of this line of reasoning is that decreasing societal acceptance of violence would ultimately lead to less child abuse and neglect.

Increasing Society's Commitment to Children

Many experts have argued that one factor that has contributed to the abuse and neglect of children is the marginal status that children hold within our society. Children have traditionally been viewed as helpless, dependent, and powerless members of society. Others have suggested that children are not highly valued by our society, as evidenced by the fact that we allow millions of children to live in economically and educationally impoverished environments. Advocates of this position argue that in order to prevent child abuse and neglect, we must begin to value children.

One indication of the growing commitment to children is the work of the United Nations Convention on the Rights of the Child, a worldwide effort to define children's rights. The findings of the convention raise awareness about the continuing vulnerability of children and articulate inherent childhood rights of *protection* (e.g., protection from abuse, torture, and exploitation), *enhancement* (e.g., rights to an adequate standard of living and education), and *autonomous participation* (e.g., freedom of religion and privacy).

Teaching Activities

Discussion Questions

- Describe several approaches designed to prevent child maltreatment.
- How might societal acceptance of violence, in general, contribute to child abuse and neglect?
- Describe the many ways in which society appears to condone violence.

Group Activities:

- Whole class: Brainstorming activity on how to prevent child maltreatment
- In small groups, students will create a "Bill of Rights" for all children, in view of what they have learned. The whole class will then create a list of the 5 most important rights of children.

Following that discussion, the class will compare what laws are currently protecting the rights of children (provided in a handout) to their "Bill of rights," find any discrepancies (if any exist), and point out what legal changes, in their opinion, still need to take place.

- Ask students to find out about current child maltreatment issues in their community. Students can interview police officers, judges, social workers or other professionals (e.g., child protection workers) to find out about the extent of child maltreatment in their community and what is being done to prevent it. Students can then present some of their findings to the class.
- Divide students into small groups. Direct each group to create a proposal for how best to reduce child maltreatment in their community. Groups can take turns orally presenting their proposals to the class.
- Create a brief survey that assesses how many violent movies and TV programs students watch every week and administer the survey to the class. Ask them to write down some of their reactions after viewing such media. Summarize the results and discuss the impact of violence in the media on their lives.
- Ask students to watch and/or videotape a children's television program. Ask students to evaluate the types and quantity of violence depicted in the program. Discuss the impact such violence might have on children's lives.

Enrichment Activities

- In pairs or triads, ask students to review what they have learned about child maltreatment. Then, using a variety of media materials, instruct students to create a collage, poem, short story, poster, or picture that depicts their interpretation and impressions of what they have learned from the curriculum. This activity will encourage cooperative learning, and will require students to discuss openly and express artistically their understanding of the subject. Students' work could be presented at the end of the curriculum as a school exhibit.
- Ask students to write an article for the school's newspaper about some of the things they learned about child maltreatment.
- Ask students to begin a journal the first day that the curriculum is presented and continue until its completion. In the journal students could include their thoughts, feelings and reactions to the material presented in class. Following the last day of the curriculum, ask for volunteers to share some of their ideas and reflections in small groups. Alternatively, dedicate 10-15 minutes at the beginning of each class to share journal entries in small groups.
- Log on to the website of the "Minnesota Center Against Violence and Abuse" (<http://www.mincava.umn.edu/>). This site provides hypertext links to various resources on child abuse and violence, including children's art on the subject. These resources can be printed and shared with students. For example, students can be divided into small groups of 3-4 students each. Hand out a picture to each group (or use a projector), and ask students to either title the pictures, write a reaction to/reflection paragraph on the picture, or write a poem or short story about the child who drew the picture. Have students share their work with the rest of the class, and discuss their reactions to the assignment.
- Invite a police officer or a child protection and welfare worker from your community to speak to the class about the problem of child maltreatment and how it is addressed in your community.

Movies/Media

The following listing includes program descriptions as provided by vendors' sales brochures for films and videos in the areas of physical child abuse, child sexual abuse, and child neglect and psychological maltreatment. Contact information for film and video vendors is provided following the film and video descriptions.

Physical Child Abuse

No One Would Tell

Laura Collins, a single mom to daughter Sarah, is thrilled when Sarah begins dating the popular and charismatic Rob Tennison. It soon becomes clear that Rob has a darker, possessive side.

2018 (Video) 90 Minutes

Available on Amazon, Direct TV

Buy \$5.99 HD or \$3.99 SD

Ordinary People

Abusive parents could be your neighbors... or even relatives. They look no different from anyone else, but under tense circumstances they become enraged and react violently with their children. Viewers will see that the potential for violence in a family of "ordinary" people is accompanied by a multitude of distress signals that should be recognized and heeded to prevent this crime against defenseless children.

1980 (Video) HCA-25 minutes

Streaming on Hulu, Epix, DIRECTV, Spectrum On Demand, Paramount Plus, Paramount+ Amazon Channel, EPIX Amazon Channel.

Child Sexual Abuse

I Am Still Here

Exploring the serious issue of Human trafficking in our own country; especially the trafficking of children as young as five years. Giving an inside look at the devastation these children face on a daily basis.

2017 (Video) 1 hr 44 minutes

16+

Available on Tubi

The Dancing Boys of Afghanistan

In Afghanistan today, in the midst of war and endemic poverty, an ancient tradition — banned when the Taliban were in power — has re-emerged across the country: Many hundreds of boys, often as young as 11, are being lured off the streets on the promise of a new life, many unaware that their real fate is to be used for entertainment and sex. With remarkable access inside a sexual exploitation ring operating in Afghanistan, an Afghan journalist investigates this illegal practice, talking with the boys and their masters, and documenting how the Afghan authorities responsible for stopping these crimes are sometimes themselves complicit in the practice.

2010 (Video) 56 minutes

Available on Amazon

Buy: \$44.99

Precious

Precious is one of the many kids that never got a fair shot in life as she was raped by her father twice and contracted HIV from him as well. Her two kids, Mongo and Abdul, are the only bright spots in her life aside from the chance she finally sees near the end of the film to do something positive. Those that try to help her are as sincere as they can be, and offer a very supportive shoulder to lean on.

2009 (Video) 1 hour 50 minutes

Available on HBO Max and Netflix

Rated R

The Tale

The Tale is a 2018 American drama film written and directed by Jennifer Fox and starring Laura Dern, Ellen Burstyn, Jason Ritter, Elizabeth Debicki, Isabelle Nélisse, Common, Frances Conroy, and John Heard. It tells the story about Fox's own childhood sexual abuse and her coming to terms with it in her later life. It premiered at the 2018 Sundance Film Festival and aired on HBO on May 26, 2018.

2018 (Video) 1 Hour 54 Minutes

Available on HBO Max, Hulu, and Amazon Prime Video

Child Neglect And Psychological Maltreatment

Children of Invention

Two young children living illegally in a model apartment outside Boston are left to fend for themselves when their hardworking mother disappears.

2009 (Video) 86 minutes

Available on Amazon Prime

Low Tide

A 12-year-old boy and his single mother live separate lives. The boy spends his days alone while his mother works and goes out with her friends. The boy's solitude is both a source of freedom and a cause for grief. His explorations slowly bring to light the dark contrast between the rules of society and the laws of nature. And before long, the delicate balance of his inner world becomes shattered by unforeseen events.

2012 (Video) 92 minutes

Mockingbird Don't Sing

In 1970, 13-year-old Katie Standon (Tarra Steele) gains national media attention for having suffered through one of the most extreme cases of child abuse ever discovered. After being locked in a closet for 12 years, Katie is unable to speak or function properly in the outside world. With the attention Katie now receives, researchers and social workers from all over offer to help her -- but not all of them have entirely pure intentions, as some only seek to garner fame from her spotlight.

2001 (Video) 1 hour 38 minutes

Available on Tubi

Treeless Mountain

In Seoul, Korea, two sisters must look after each other when their mother leaves them to search for their estranged father.

2008 (Video) 89 minutes

Available on Tubi

Online Resources

One method for keeping abreast of the voluminous information in the field of child maltreatment is through access to online services. Following are a number of key online resources that are updated on a regular basis. This listing is not meant to be comprehensive, but rather a sampling of the many online resources available on this topic. Due to the dynamic nature of the internet, please be aware that sites and addresses may change over time.

- ***American Professional Society on the Abuse of Children*** (<https://www.apsac.org/>). [Non-profit organization that is focused on meeting the needs of professionals that are serving children who have experienced maltreatment and their families.]
- ***AVANCE, Inc.*** (<https://www.avance.org/>). [Organization whose goal is to provide resources and services that will strengthen low-income families by providing a community-based interventions.]
- ***Center for Effective Discipline*** (<https://www.zeroabuseproject.org/>). [This organization is focused on providing educational information regarding corporal punishment and alternative forms of discipline.]
- ***Child Abuse Prevention Network***
(https://www.childwelfare.gov/organizations/?CWIGFunctionsaction=rols:main.dspList&rolType=Custom&RS_ID=75&rList=ROL)[This website links to the six members of the Child Abuse Prevention Network. The network is dedicated to enhancing internet resources for the prevention of child abuse and neglect and reducing the negative conditions in the family and the community that lead to child maltreatment].
- ***Children's Institute International*** (<http://childrensinstitute.org/>). Operated by a non-profit organization that helps treat and prevent child maltreatment. [This website provides links to many other sites related to child abuse, neglect and prevention].
- ***International Society for Prevention of Child Abuse and Neglect (ISPCAN)*** (<https://www.ispcan.org/?v=402f03a963ba>). [This website provides information on the International Society for Prevention of Child Abuse and Neglect, congresses and conferences it organizes, the journal "Child Abuse and Neglect" etc.].
- ***National Center for Missing and Exploited Children***
(<http://www.missingkids.com/home>). [The National Center for Missing and Exploited Children works in recovering missing children and raising public

awareness regarding sexual exploitation, molestation, and preventing child abduction.]

- **National Committee to Prevent Child Abuse** (<http://www.childabuse.org/>). [This website provides recent statistics from research on child abuse, provides information on child abuse facts, local chapters in the U.S.A., and available resources on this topic.]
- **Kempe Center Programs** The Kempe Center for the Prevention & Treatment of Child Abuse (<https://medschool.cuanschutz.edu/pediatrics/sections/child-abuse-and-neglect-kempe-center>). [Beginning in 1972, the C. Henry Kempe National Center for the Prevention and Treatment of Child Abuse and Neglect provides a clinically based resource for training, program development and evaluation, and research on all forms of child abuse and neglect. This website also provides information on programs offered, and research conducted, at the center].
- **Administration for Children and Families (ACF)** (<https://www.acf.hhs.gov/>). [This website includes information about ACF, which is a division of the U.S. Department of Health & Human Services (HHS). The website includes information about grants and various resources related to children and families. The website also includes ACF data and reports on various programs and grants that attempt to improve the lives of children and families.].
- **Minnesota Center Against Violence and Abuse** (<http://www.mincava.umn.edu/>). [This website provides a large number of hypertext links to various resources on child abuse: articles and other informative resources; books, journals, reports, as well as children's art on the subject].

Young Adult Fiction on Child Abuse and Neglect

The following books were selected from a number of resources including good reads. Although this list is not exhaustive, it provides a representative view of resources available for young adults on child abuse and neglect.

Anderson, L. H., & Carroll, E. (2019). *Speak*. Hodder Children's Books.

"Speak up for yourself—we want to know what you have to say." From the first moment of her freshman year at Merryweather High, Melinda knows this is a big fat lie, part of the nonsense of high school. She is friendless—an outcast—because she busted an end-of-summer party by calling the cops, so now nobody will talk to her, let alone listen to her. Through her work on an art project, she is finally able to face what really happened that night: She was raped by an upperclassman, a guy who still attends Merryweather and is still a threat to her. With powerful illustrations by Emily Carroll, Laurie Halse Anderson's *Speak: The Graphic Novel* comes alive for new audiences and fans of the classic novel."

Bliss, B. (2019). *We'll fly away*. Greenwillow Books, an imprint of HarperCollins Publishers.

"Uniquely told through letters from death row and third-person narrative, Bryan Bliss's hard-hitting third novel expertly unravels the string of events that landed a teenager in jail. Luke feels like he's been looking after Toby his entire life. He patches Toby up when Toby's father, a drunk and a petty criminal, beats on him, he gives him a place to stay, and he diffuses the situation at school when wise-cracking Toby inevitably gets into fights. Someday, Luke and Toby will leave this small town, riding the tails of Luke's wrestling scholarship, and never look back. But during their senior year, they begin to drift apart. Luke is dealing with his unreliable mother and her new boyfriend. And Toby unwittingly begins to get drawn into his father's world, and falls for an older woman. All their long-held dreams seem to be unraveling. Tense and emotional, this heartbreaking novel explores family, abuse, sex, love, friendship, and the lengths a person will go to protect the people they love. For fans of NPR's Serial podcast, Jason Reynolds, and Matt de la Peña."

Smith, A. (2017). *The Way I Used to Be*. Margaret K. McElderry Books.

"In the tradition of *Speak*, this extraordinary debut novel shares the unforgettable story of a young woman as she struggles to find strength in the aftermath of an assault. Eden was always good at being good. Starting high school didn't change who she was. But the night her brother's best friend rapes her, Eden's world capsizes. What was once simple, is now complex. What Eden once loved—who she once loved—she now hates. What she thought she knew to be true, is now lies. Nothing makes sense anymore, and she knows she's supposed to tell someone what happened but she can't. So she buries it instead. And she buries the way she used to be. Told in four parts—freshman, sophomore, junior, and senior year—this provocative debut reveals the deep cuts of trauma. But it also demonstrates one young woman's strength as she navigates the disappointment and

unbearable pains of adolescence, of first love and first heartbreak, of friendships broken and rebuilt, and while learning to embrace a power of survival she never knew she had hidden within her heart.”

Surmelis, A. (2019). *The dangerous art of blending in*. Balzer + Bray, an imprint of HarperCollinsPublishers.

“Seventeen-year-old Evan Panos doesn’t know where he fits in. His strict Greek mother refuses to see him as anything but a disappointment. His quiet, workaholic father is a staunch believer in avoiding any kind of conflict. And his best friend Henry has somehow become distractingly attractive over the summer.” Tired, isolated, scared—Evan’s only escape is drawing in an abandoned church that feels as lonely as he is. And, yes, he kissed one guy over the summer. But it’s his best friend Henry who’s now proving to be irresistible. It’s Henry who suddenly seems interested in being more than friends. And it’s Henry who makes him believe that he’s more than his mother’s harsh words and terrifying abuse. But as things with Henry heat up, and his mother’s abuse escalates, Evan has to decide how to find his voice in a world where he has survived so long by avoiding attention at all costs.”

Instructors may wish to use one or more of the books that are listed in the following ways:

1. In coordination with the language arts/English teacher, psychology teachers can develop an enrichment/follow-up unit to this curriculum based on one of the books listed above. The unit could include classroom activities and assignments such discussions, personal reflection journals based on the reading and the material presented in the course, role playing, rewriting alternative endings or extensions to the book or to a particular chapter, to name a few.
2. Teachers can assign a book as an extra credit assignment, which will require students to write a reflective book report integrating some of the issues taught in this curriculum as they are reflected in the book.
3. Teachers can use excerpts from a book as a common thread throughout the curriculum, anchoring the material through the personal story of the child in the book.

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