



BLESSED BE EDUCATORS



To provide educators with spiritual support & recognition by sponsoring Faith-based programs

Child Abuse Prevention Month
April 2021
Resource Packet Contents in this Order

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*Researched & Prepared by
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BEE is an Affiliate of the Faith-Based Health Collaborative



April is Child Abuse Prevention

What will your church do?

**Blue Sunday
Day of Prayer
for Abused Children
April 25th**


WWW.BLUESUNDAY.ORG

Register for free resources to bring
awareness to your congregation

April Is National Child Abuse Prevention Month



FIND TOOLS, TIPS, AND RESOURCES AT
WWW.CHILDWELFARE.GOV/PREVENTIONMONTH



#SILENCEENDSHERE



APRIL

WE SUPPORT
CHILD ABUSE PREVENTION MONTH



ALLIANCEFORCHILDREN.ORG

Suggested Bulletin Announcements
Prepared by Mary Ann Hvizdos

In Advance of April 25, 2021

April is National Child Abuse Prevention Month. Many came together this past year to take preventive measures to help “flatten the curve.” Let us continue to come together to help “flatten the curve” of child abuse. According to a January 31, 2021 professional publication, over 40,000 children who live in the Commonwealth of Pennsylvania are abused or neglected annually. Late March local media reported that a seven-year-old from a Pittsburgh suburb is recovering from extensive abuse. For the past 27 years, the last Sunday of April has been designated National Blue Sunday Day of Prayer for Abused Children. *(Your church name)*, together with the local faith-based organization, Blessed Be Educators, will participate *(note virtually or in-person if you wish)* in this Day of Prayer on April 25th. We will offer prayers for children who are abused or neglected; and for those who provide children with protection, care and solace. We also will have resources available. For additional information and resources, please visit <https://www.childwelfare.gov/topics/preventing/preventionmonth/>; www.bluesunday.org/ or www.baidos.net.

For Your April 25th Bulletin

Sunday, April 25, 2021 is Blue Sunday National Day of Prayer for Abused Children. For the past 27 years, the last Sunday of April has been designated National Blue Sunday Day of Prayer for Abused Children. *(Your church name)*, together with the local faith-based organization, Blessed Be Educators, is participating in today’s Day of Prayer. We will offer prayers for children who are abused or neglected; and for those who provide children with protection, care and solace. Let us come together in solidarity to “flatten the curve” of child abuse and neglect especially here in Pennsylvania where reported cases number over 40,000 annually. We have resources available for your use. For additional information and resources, visit <https://www.childwelfare.gov/topics/preventing/preventionmonth/>; www.bluesunday.org/; or www.baidos.net

Prayer for the Safety of Returning to School in a Pandemic

Father please hear us when we tell You of our concerns of sending our children and educators back to school.

Know that we are striving to make all of the right decisions and need Your love and power to help us overcome any difficulties.

Please watch over everyone as times and routines are about to change once again.

We know that we can do anything through You, so please help us ensure health and semi-normalcy in the coming months.

We give our hearts to You, now and forever. Amen.

- Author unknown

Covid Poem

When this is over,
may we never again
take for granted
A handshake with a stranger
Full shelves at the store
Conversations with neighbors
A crowded theatre
Friday night out
The taste of communion
A routine checkup
The school rush each morning
Coffee with a friend
The stadium roaring
Each deep breath
A boring Tuesday
Life itself.

When this ends,
may we find
that we have become
more like the people
we wanted to be
we were called to be
we hoped to be
and may we stay
that way--better
for each other
because of the worst.
- Laura Kelley Fanucci



Handout provided by
Blessed Be Educators for
April 2021
Child Abuse Prevention Month

Prayer for Children who are Abused or Neglected & Prayer for Safety

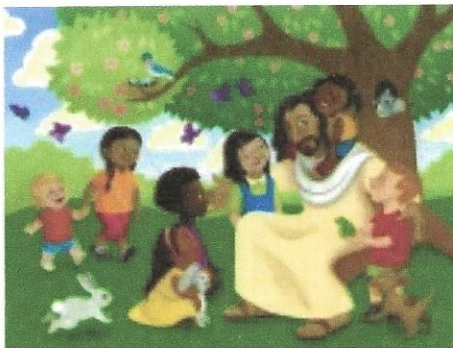
A Prayer for Child Abuse Prevention

Lord who loved the little children saying
"Let [them] come to me, and do not stop
them,
for it is to such as these that the kingdom
of God belongs" (Luke 18:16).
We come to you praying for the children of our
community
who have been hurt by those who profess
to love them
and failed by the system established to
protect them.

Forgive us, we pray, for our own contributions
to the brokenness of this world;
For our hesitancy to speak up for those
who have no voice;
And for our sluggishness to act on
behalf of those who cannot defend themselves.

Bind up those who bear the scars of our
broken world in their bodies or in their hearts.
Give us courage to be advocates and
peacemakers until the kingdom comes in
fullness:
when the streets of this city
and the cities of this world
will at last be safe for
children to play in (Zechariah 8:5). Amen.

- Rev. Barry Chance, Presbyterian Minister,
Hammond, LA on the occasion of Child Abuse
Prevention Month 2016 in his community



You Alone Are My Safe Place (adapted from Psalm 91)

Lord, Most High,
You are my shelter
And I rest in your shadow.

You alone are my safe place.
I trust in you my God

You will rescue me
From every trap
And protect me from disease.

You will cover me with feathers
And shelter me with your wings.

Your faithful promises
Are my armor and protection.

I am not afraid of the night
Or the dangers that come by day.

I am not afraid of the dark
Or disaster that strikes in the light

No evil will touch me
No evil will conquer me
Because God is my refuge.

No plague will come near my home
Because the Lord Most High is my shelter.

He sends his angels
To protect me wherever I go.

The Lord says,
"I will rescue those who love me.
I will protect those who trust in my name."

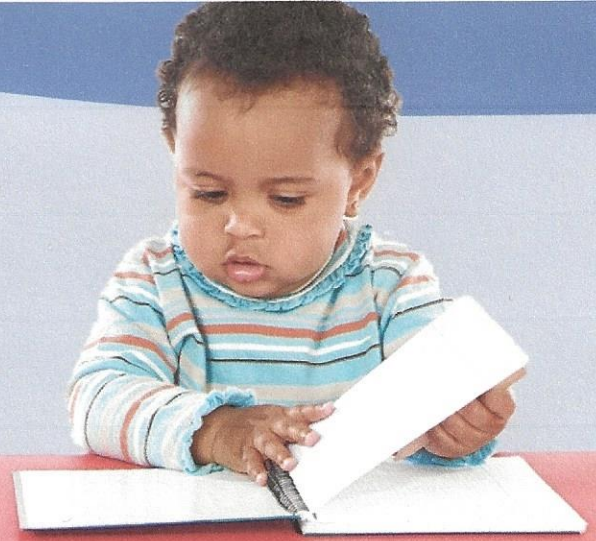
When I call, he answers.
He is with me in trouble.

He will rescue me
He will save me.

<https://www.learnreligions.com/prayers-of-protection-701301>

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APSSAC ALERT



Volume #11 Issue #3

Special Points of Interest:

- *The drastic changes to families' financial well-being, community resources, and overall concern for society pose a significant risk for child well-being.*
- *Child-serving agencies can stay connected with vulnerable families, provide assistance with obtaining public services, and advocate for families at the policy level.*
- *Children will bear a significant burden of the consequences of this public health crisis; however, rapid responses by decision makers in child-serving agencies can help reduce the risk of child neglect.*

Practical Steps to Prevent Child Neglect in the COVID-19 Pandemic

***Megan Feely, PhD
Kerri Raissian, PhD
Will Schneider, PhD
Lindsey Bullinger, PhD***

Introduction

Neglect poses great harm to children: It consistently accounts for 70% of child maltreatment referrals annually and is the form of maltreatment most associated with child death (U.S. Department of Health and Human Services, 2020). Helping to stabilize families' financial resources may be the single most effective child neglect prevention strategy (Bullinger, Feely, Raissian, & Schneider, 2019).

The COVID-19 pandemic has resulted in severe and sudden unemployment, school closures, public office closures, and limited hours for accessing essential services, such as grocery stores

("Coronavirus spreads," 2020). These extreme social distancing measures mean hundreds of thousands of vulnerable children face a heightened risk of neglect. Caregivers, and single caregivers in particular, may be unable to provide sufficient resources and supervision, may have difficulty adjusting to the logistics and demands of radically different work and childcare arrangements, and may no longer be able to rely on grandparents for additional care. The pandemic's financial and social strains pose a significant risk for child neglect.

Unfortunately, children's needs have not been at the forefront of discussions about mitigating the pandemic's negative consequences. Discussions concerning families' evolving needs as the pandemic worsens and lingers are also needed. Families are in an unprecedented crisis; decision-makers have a duty to help them survive it—at every stage.

We describe potential challenges families will face and specific actions

decision makers and frontline staff in child-serving agencies should consider in order to assist families at each stage of the pandemic.

Immediate Needs

Immediate needs are straightforward: stabilize income and fill childcare gaps. Low-income families are likely in one of two situations: first, they may not be working and are unpaid or awaiting unemployment benefits. Second, they may be in an “essential” job, ranging from food service to healthcare, but schools and typical childcare arrangements are unavailable. Both types of families are struggling. Unemployed families are struggling to pay bills. Working families are struggling to provide safe and consistent childcare while they work. Many families were already struggling to provide necessities, sufficient nutrition, housing, basic healthcare, and other essentials. The pandemic has critically increased the severity of these needs.

Families need swift and creative solutions to help them access all available supports to reduce the risk of child neglect. For example, frontline staff can:

- Contact families virtually or by phone, review the eligibility criteria for all benefit programs, and help eligible families to complete enrollment forms for programs.
- Explain the “recovery rebate” and confirm that clients are receiving correct amounts.
- Keep families informed of new assistance and help to complete necessary forms.
- Help families file for eviction protection.
- Help families without transportation access food or necessities by arranging delivery or community drop-offs.
- Provide tax-filing assistance, particularly to access EITC benefits.
- Stay in regular touch with all families and create a contact plan for frequent moves.
- Help small-business-owning families connect to the CARES Act, additional business-relief programs, and business resources.

Decision makers can also advocate at state legislatures and with private foundations for cash assistance and flexible funds to meet immediate and dire needs.

Mid-Pandemic Needs

As the pandemic lingers, schools and childcare facilities remain closed, and only essential businesses remain open, support and donations may dwindle. Families who were able to get through the initial phase may develop more severe needs over time. At this stage, unmet needs will likely accumulate, unemployment will increase, savings will be depleted, and fewer emergency services will be available. In addition to ongoing efforts from the initial phase, during this stage frontline staff can:

- Continue to check on all current clients, because disconnected families may experience preventable crises.
- Help families locate medical and dental resources for urgent needs.
- Educate families about workers’ rights, particularly if they are pressured to return to work.

Decision makers can also advocate at all policy levels for families’ needs to be prioritized and met. For example, there may be additional stimulus bills. Advocating for economic provisions to support families during and after the pandemic is a key strategy to preventing child neglect.

For instance, private childcare facilities may be forced to close. However, childcare facilities will be essential in the post-pandemic period and may need financial assistance to reopen promptly. Additionally, standing federal legislation like the Child Abuse Prevention and Treatment Act (CAPTA) may be reauthorized during this time or shortly thereafter, and this crisis may present an opportunity to improve the overall child welfare system and introduce crisis response mechanisms.

Post-Pandemic Needs

We do not know when the acute public health phase of the pandemic will be over; however, we can anticipate some challenges. For many families, the stress of the pandemic’s economic disruption will continue long after the health crisis is controlled. All families will need to establish new routines, which might include new jobs, new childcare arrangements, and new communities. Children’s education and preventive healthcare will be in “catch-up” mode. New challenges, like anxiety and acute

financial or emotional stress, may lead to spikes in child maltreatment. During this phase frontline staff can:

- Help families find jobs and stay enrolled in safety-net programs.
- Work with families to address medical, educational, and mental health needs.
- Be patient with families and continue to provide as much support as possible, as recovery will be slow and difficult for many.

Decision makers can also advocate for keeping as many people employed as possible and rapidly reopening childcare facilities when safe.

Conclusion

Rapid responses by child-serving agencies can help reduce the very real risk of child neglect COVID-19 presents to children. Yet even the needs mentioned here are conservative, in that they assume that families stay relatively healthy, no one needs intensive medical intervention, and a family member does not die. Additionally, these recommendations do not address or account for the challenges in managing changes in workforce capacity and staff needs. For example, some staff—like their clients—are likely to experience financial hardships and childcare challenges. Agencies must

anticipate and prepare for these scenarios as well. Our nation's most vulnerable families need us to rise to this challenge and make a strategic plan for every stage of the pandemic.

References

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Bullinger, L. R., Feely, M., Raissian, K. M., & Schneider, W. (2019). Heed neglect, disrupt child maltreatment: A call to action for researchers. *International Journal on Child Maltreatment: Research, Policy and Practice*. <https://doi.org/10.1007/s42448-019-00026-5>

Coronavirus spreads amid supply shortages, stay-at-home orders and sobering economics. (2020, April 1). *The New York Times*. <https://www.nytimes.com/2020/04/01/world/coronavirus-live-news-updates.html>

News from APSAC

The 2020 APSAC Colloquium in Rescheduled to September 21-24 in New Orleans

When considering all necessary issues APSAC leadership reached the conclusion that the June 7–11 date brought too many uncertainties and, given the COVID-19 pandemic, was too soon for the 2020 Colloquium. Fortunately, the Sheraton was able to accommodate APSAC with dates later in the year when we hope it is a safe time to travel and gather (with appropriate social distancing). The Colloquium is now scheduled for September 21-24, 2020 - at the Sheraton New Orleans in New Orleans, LA. Details for pre-conference institutes and events are still being finalized. Information including exact dates and times will be on the [APSAC website](#) as details are finalized.

APSAC Provides Online Resources During the COVID-19 Crisis

The COVID-19 pandemic is creating many new challenges for professionals working in child maltreatment. APSAC is helping professionals overcome these challenges by increasing our online resources and providing more opportunities for collegial connection and professional development in the digital world. [Visit our website](#) for [COVID-19 resources and upcoming Zoom chats](#), [upcoming webinars](#), and information on our [online course](#), and check back often for more great resources.

Mental Health During COVID-19: Signs Your Child May Need More Support

American Academy of Pediatrics

Retrieved from <https://www.healthychildren.org/English/health-issues/conditions/COVID-19/Pages/Signs-your-Teen-May-Need-More-Support.aspx>

Last updated March 12, 2021

Spanish Print & Audio Version Available at this link

The ongoing stress, fear, grief, isolation and uncertainty created by COVID-19 pandemic can wear anyone down, but many children and teens have had an especially tough time coping emotionally. At the same time, many families have been separated from loved ones and caregivers, including grandparents, who may serve as vital sources of support.

As more people get COVID-19 vaccines, there is growing hope that pressures of the pandemic will ease. But the struggles and losses of the past year will likely continue to affect families for some time to come. Continue to check in with your child often and watch and listen for signs they are struggling. And remember that your pediatrician is here to help.

How is your child coping during COVID-19?

Invite your child to talk about how they are feeling. Feeling depressed, hopeless, anxious, and angry may be signs they could benefit from more support during this difficult time. Keep in mind that adolescents and young adults may try to hide their struggles because of fear, shame, or a sense of responsibility to avoid burdening others. Younger children may not know how to talk about these feelings but may show changes in their behavior or development.

Recognizing signs of stress in your child

Signs of stress and mental health challenges are not the same for every child or teen, but there are some common symptoms.

Infants, toddlers and young children...

May show backward progress in skills and developmental milestones. They may also have increased problems with:

- Fussiness and irritability, startling and crying more easily, and more difficult to console.
- Falling asleep and waking up more during the night.
- Feeding issues such as frantic nipping, more reflux, constipation or loose stools, or new complaints of stomach pain.
- Separation anxiety, seeming more clingy, withdrawn, or hesitant to explore.
- Hitting, frustration, biting, and more frequent or intense tantrums.
- Bedwetting after they're potty trained.
- Urgently expressed needs while seemingly unable to feel satisfied.
- Conflict and aggression or themes like illness or death during play.

Older children and adolescents...

May show signs of distress with symptoms such as:

- Changes in mood that is not usual for your child, such as ongoing irritability, feelings of hopelessness or rage, and frequent conflicts with friends and family.
- Changes in behavior, such as stepping back from personal relationships. If your ordinarily outgoing teen shows little interest in texting or video chatting with their friends, for example, this might be cause for concern.
- A loss of interest in activities previously enjoyed. Did your music-loving child suddenly stop wanting to practice guitar, for example? Did your aspiring chef lose all interest in cooking and baking?
- A hard time falling or staying asleep, or starting to sleep all the time.
- Changes in appetite, weight or eating patterns, such as never being hungry or eating all the time.
- Problems with memory, thinking, or concentration.
- Less interest in schoolwork and drop in academic effort.
- Changes in appearance, such as lack of basic personal hygiene (within reason, since many are doing slightly less grooming during this time at home).
- An increase in risky or reckless behaviors, such as using drugs or alcohol.
- Thoughts about death or suicide, or talking about it (see "A word about suicide risk," below).

How your pediatrician can help

Staying in touch with your pediatrician is more important than ever during the pandemic. If you have any concerns, ask your pediatrician's office about checking on your child's social and emotional health. This can be especially important for children facing higher rates of illness or risk from COVID-19, such as minorities and those with special health care needs.

Pediatricians can screen for depression and ask about other concerns like anxiety or trouble coping with stress. The doctor may also ask about these symptoms in other family members, as this can impact your child's health, and whether they know anyone who has become sick with COVID-19. It's important to offer your teen some privacy to talk with the pediatrician during the visit to ensure they have the chance to speak as openly as possible.

Pediatricians are taking extra precautions to make in-person visits safe during the pandemic, and many are also providing telehealth visits.

Dealing with the loss of a loved one to COVID-19

Children, adolescents, and families who experienced the loss of a loved family member or friend to COVID-19 are at increased risk for mental health challenges and may need special attention and professional counseling to manage their loss and grief.

Supporting your child

Your pediatrician can give you guidance on ways to best support your child and help them build resilience. Some children or adolescents may need more time and space to express their feelings. Some may do better with gradual conversations and other activities besides talking, such as painting or drawing to express themselves and manage stress. Others might be more comfortable with direct conversations or activities. They may need to talk to a trusted adult about how to keep up social

connections safely, or their feelings of boredom, loss, and even guilt if they have sometimes not kept up safe physical distancing.

Find more ways to help your child cope with stress and build resilience in Parenting in a Pandemic: Tips to Help Keep the Calm at Home.

A word about suicide risk

Rates of suicide for both adolescents and adults increase during times of high stress. In addition to screening for depression, your pediatrician can screen for suicide risk.

Remember, not everyone who considers suicide will talk about it, and not everyone who talks about suicide will act on their words. However, any talk about suicide should be taken seriously. **If you are worried about your child, it is critical to make your home safe by removing weapons and ammunition from the house and securing medications in a locked cabinet.**

Seek help immediately by calling the National Suicide Prevention Lifeline at 1-800-273-TALK or texting the Crisis Text Line by texting 'TALK' to 741741. Reserve 911 for situations where self-harming actions are happening or are about to happen. In a non-crisis situation, talk with your pediatrician about any concerns you have about your child's mental health.

Self-care and setting the tone

Parents set the tone in the household. Expressing extreme doom or fear can affect your children. It can be challenging to stay positive, especially if you're struggling with your own stress. But try to stay positive and relay consistent messages that a brighter future lies ahead. It helps to set aside time to take care of yourself when possible, and seek the support you may need for your own mental health. Practicing mindfulness, focusing on the present moment, yoga or stretching can help the entire family build coping skills. Build in down time for the whole family to connect and relax, enjoying a nap, movie time or simply spending time together.

Remember

Keep lines of communication open between you and your child, and don't hesitate to talk with your pediatrician about ways to help maintain your family's mental health during this difficult time.

Handout provided by Blessed Be Educators for April 2021
Child Abuse Prevention Month

Warning Signs of Child Abuse & Neglect

Retrieved from

<https://www.helpguide.org/articles/abuse/child-abuse-and-neglect.htm>

The warning signs that a child is being abused or neglected can vary according to the type of abuse inflicted.

Warning signs of emotional abuse	Warning signs of physical abuse
<p>The child may:</p> <p>Be excessively withdrawn, fearful, or anxious about doing something wrong.</p> <p>Show extremes in behavior (extremely compliant, demanding, passive, or aggressive).</p> <p>Not seem to be attached to the parent or caregiver.</p> <p>Act either inappropriately adult (taking care of other children) or inappropriately infantile (thumb-sucking, throwing tantrums).</p>	<p>The child may:</p> <p>Have frequent injuries or unexplained bruises, welts, or cuts. Their injuries may appear to have a pattern such as marks from a hand or belt.</p> <p>Be always watchful and "on alert," as if waiting for something bad to happen.</p> <p>Shy away from touch, flinch at sudden movements, or seem afraid to go home.</p> <p>Wear inappropriate clothing to cover up injuries, such as long-sleeved shirts on hot days.</p>
Warning signs of child neglect	Warning signs of sexual abuse
<p>The child may:</p> <p>Wear ill-fitting, filthy, or inappropriate clothing for the weather.</p> <p>Have consistently bad hygiene (unbathed, matted and unwashed hair, noticeable body odor).</p> <p>Have untreated illnesses and physical injuries.</p> <p>Be frequently unsupervised or left alone or allowed to play in unsafe situations.</p> <p>Be frequently late or missing from school.</p>	<p>The child may:</p> <p>Have trouble walking or sitting.</p> <p>Display knowledge of sexual acts inappropriate for their age, or even exhibit seductive behavior.</p> <p>Make strong efforts to avoid a specific person, without an obvious reason.</p> <p>Not want to change clothes in front of others or participate in physical activity</p> <p>Have an STD or pregnancy, especially if they're under the age of 14.</p> <p>Try to run away from home.</p>

Centers for Disease Control & Prevention Identify Risk Factors for Child Abuse & Neglect & Protective Factors to Help Shield Against

Last reviewed March 2020

Risk Factors

Risk factors are those characteristics linked with child abuse and neglect, but they may or may not be direct causes. A combination of individual, relational, community and societal factors contribute to the risk of child abuse and neglect. Although children are not responsible for the harm inflicted upon them, certain factors have been found to increase their risk of being abused and or neglected.

Risk Factors for Victimization

Individual Risk Factors

- Children younger than 4 years of age
- Special needs that may increase caregiver burden (e.g., disabilities, mental health issues, and chronic physical illnesses)

Risk Factors for Perpetration

Individual Risk Factors

- Parents' lack of understanding of children's needs, child development and parenting skills
- Parental history of child abuse and or neglect
- Substance abuse and/or mental health issues including depression in the family
- Parental characteristics such as young age, low education, single parenthood, large number of dependent children, and low income
- Non-biological, transient caregivers in the home (e.g., mother's male partner)
- Parental thoughts and emotions that tend to support or justify maltreatment behaviors

Family Risk Factors

- Social isolation
- Family stress, separation or divorce, and violence, including intimate partner violence
- Parenting stress, poor parent-child relationships, and negative interactions

Community Risk Factors

- Community violence
- Concentrated neighborhood disadvantage (e.g., high poverty, high unemployment rates, and high density of alcohol outlets), and poor social connections.

Protective Factors for Child Abuse and Neglect

Protective factors may lessen the likelihood of children being abused or neglected. Identifying and understanding protective factors are equally as important as researching risk factors.

Family Protective Factors

- Supportive family environment and social networks
- Concrete support for basic needs
- Nurturing parenting skills
- Stable family relationships
- Household rules and child monitoring
- Parental employment
- Parental education
- Adequate housing
- Access to health care and social services
- Caring adults outside the family who can serve as role models or mentors

Community Protective Factors

- Communities that support parents and take responsibility for preventing abuse

Overview

Any intentional harm or mistreatment to a child under 18 years old is considered child abuse. Child abuse takes many forms, which often occur at the same time.

- **Physical abuse.** Physical child abuse occurs when a child is purposely physically injured or put at risk of harm by another person.
- **Sexual abuse.** Sexual child abuse is any sexual activity with a child, such as fondling, oral-genital contact, intercourse, exploitation or exposure to child pornography.
- **Emotional abuse.** Emotional child abuse means injuring a child's self-esteem or emotional well-being. It includes verbal and emotional assault — such as continually belittling or berating a child — as well as isolating, ignoring or rejecting a child.
- **Medical abuse.** Medical child abuse occurs when someone gives false information about illness in a child that requires medical attention, putting the child at risk of injury and unnecessary medical care.
- **Neglect.** Child neglect is failure to provide adequate food, shelter, affection, supervision, education, or dental or medical care.

In many cases, child abuse is done by someone the child knows and trusts — often a parent or other relative. If you suspect child abuse, report the abuse to the proper authorities.

Symptoms

A child who's being abused may feel guilty, ashamed or confused. He or she may be afraid to tell anyone about the abuse, especially if the abuser is a parent, other relative or family friend. That's why it's vital to watch for red flags, such as:

- Withdrawal from friends or usual activities
- Changes in behavior — such as aggression, anger, hostility or hyperactivity — or changes in school performance
- Depression, anxiety or unusual fears, or a sudden loss of self-confidence
- An apparent lack of supervision
- Frequent absences from school
- Reluctance to leave school activities, as if he or she doesn't want to go home
- Attempts at running away
- Rebellious or defiant behavior
- Self-harm or attempts at suicide

Specific signs and symptoms depend on the type of abuse and can vary. Keep in mind that warning signs are just that — warning signs. The presence of warning signs doesn't necessarily mean that a child is being abused.

Physical Abuse Signs and Symptoms

- Unexplained injuries such as bruises, fractures or burns
- Injuries that don't match the given explanation

Sexual Abuse Signs and Symptoms

- Sexual behavior or knowledge that's inappropriate for the child's age
- Pregnancy or a sexually transmitted infection
- Blood in the child's underwear

- Statements that he or she was sexually abused
- Inappropriate sexual contact with other children

Emotional Abuse Signs and Symptoms

- Delayed or inappropriate emotional development
- Loss of self-confidence or self-esteem
- Social withdrawal or a loss of interest or enthusiasm
- Depression
- Avoidance of certain situations, such as refusing to go to school or ride the bus
- Desperately seeks affection
- A decrease in school performance or loss of interest in school
- Loss of previously acquired developmental skills

Neglect Signs and Symptoms

- Poor growth or weight gain or being overweight
- Poor hygiene
- Lack of clothing or supplies to meet physical needs
- Taking food or money without permission
- Hiding food for later
- Poor record of school attendance
- Lack of appropriate attention for medical, dental or psychological problems or lack of necessary follow-up care

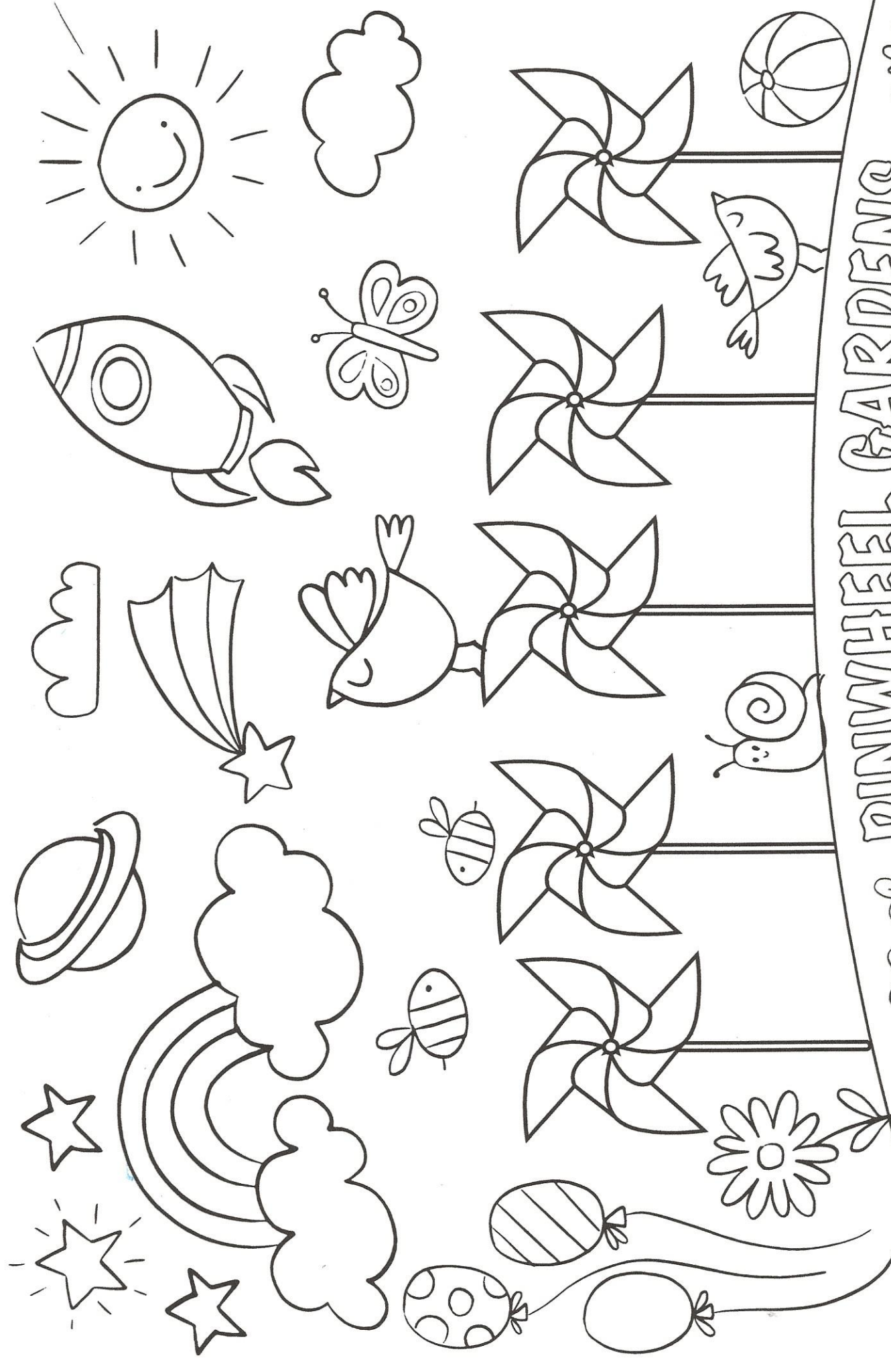
Parental Behavior

Sometimes a parent's demeanor or behavior sends red flags about child abuse. Warning signs include a parent who:

- Shows little concern for the child
- Appears unable to recognize physical or emotional distress in the child
- Blames the child for the problems
- Consistently belittles or berates the child, and describes the child with negative terms, such as "worthless" or "evil"
- Expects the child to provide him or her with attention and care and seems jealous of other family members getting attention from the child
- Uses harsh physical discipline
- Demands an inappropriate level of physical or academic performance
- Severely limits the child's contact with others
- Offers conflicting or unconvincing explanations for a child's injuries or no explanation at all

Child health experts condemn the use of violence in any form, but some people still use corporal punishment, such as spanking, as a way to discipline their children. Any corporal punishment may leave emotional scars. Parental behaviors that cause pain, physical injury or emotional trauma — even when done in the name of discipline — could be child abuse.

Handout provided by Blessed Be Educators for April 2021 Child Abuse Prevention Month



PINWHEEL GARDENS
STAND FOR EVERY CHILD'S
RIGHT TO BE SAFE, LOVED, and RESPECTED



I AM THE BOSS OF MY BODY!

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SOY EL DUEÑO DE MI CUERPO!

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