Understanding Abuse and Neglect

A Collaborative Training Module
by the John H. Stroger Hospital
Medical, Nursing and Social Work Staffs
Training Outline

- Review of definitions and general facts
- Outline of vulnerable populations
  - Victims of physical assault
  - Victims of sexual assault
  - Victims of domestic abuse
  - Victims of elder abuse and neglect
  - Victims of child abuse, neglect, or sexual molestation
- Identification, screening and reporting within each vulnerable group
- Local and national contact and referral information
- Post-seminar test questions
Learning Objectives

At the end of this module, you should know:

1. The importance of identifying possible victims of abuse and neglect
2. Which groups are most vulnerable
3. What physical or mental signs or symptoms may be present with each vulnerable patient group
Learning Objectives

At the end of this module, you should know:

4. How patients are identified, screened or assessed in the Cook County Health and Hospitals System

5. Which abuse/neglect situations require mandatory reporting

6. How to connect victims with useful resources and support
General Facts

Fact # 1: Hospitals and health care settings may often be the primary opportunity for early identification and prevention of abuse and neglect.

Fact # 2: Often victims of abuse or neglect present to health care settings for reasons other than abuse or neglect. Therefore, the health care organization must be focused on identification, screening and assessing possible victims at every clinical encounter.
General Facts

Fact # 3: The State of Illinois requires mandatory reporting of many suspected cases of victims of abuse and neglect.

Fact # 4: As healthcare providers, we must educate ourselves about abuse and neglect, identify possible victims, and provide safe referrals and resources. These actions result in protecting our patients and our community.
General Treatment Guidelines

- Questions should be open-ended and nonjudgmental
- Avoid taking patient histories with possible perpetrator or abuser present
- Document history and physical exam very carefully using exact words of patient, lots of details, and precise descriptions (including body drawings if needed)
Understanding Child Abuse, Neglect and Sexual Molestation
Definition of Child Abuse & Neglect

- Child abuse is the mistreatment of a child under the age of 18 by a parent, caretaker, someone living in their home or someone who works with or around children.

- The mistreatment may cause injury or put the child at risk of physical injury.

- Child abuse can be physical, sexual, or emotional.

- Neglect happens when a parent or responsible caretaker fails to provide adequate supervision, food, clothing, shelter or other basics for a child.
Statistics and Facts about Child Abuse & Neglect

**National**
- 3 Million reports of child abuse/neglect per year
- 1 Million children found to be victims of abuse/neglect per year
- Over 2,000 deaths, most in children under the age of 5, due to child abuse/neglect year.

**Illinois**
- 100,000 reports to the DCFS hotline with
- 30,000 victims of child abuse identified every year.
- The vast majority, almost 80%, of all sexual assault victims are children
Possible Signs of *Child Neglect*

- Failure to thrive
- Medical or dental neglect
- Delay in seeking medical care
- Emotional neglect or psychological abuse
- Parental substance abuse or mental health issues
Signs of Physical Child Abuse

- Subdural hematomas,
- Intra-abdominal injury
- Fractures - long bones, skull, or vertebrae/rib metaphyseal fractures, especially in children less than 2 years of age*
- Suspicious burns – immersion or patterned burns
- Unexplained bruises*(especially in infants*) or skin injuries (any patterned skin lesions in any age child)

* Bruises and fractures in infants and pre-ambulatory children are always concerning. Bruises on the abdomen or over non-bony parts of any child’s body are always concerning.
About Child Sexual Abuse

Sexual Abuse may present as:

- Outcry of sexual abuse
- Witnessed assault
- Behavioral problem
- Ano-genital pain, bleeding or discharge
- STD or Pregnancy

Sexual Abuse includes:

- Intercourse, Fellatio, or Fondling
- Sodomy
- Voyeurism
- Pornography
- Trafficking of minors
Mandated Reporting in Illinois

In the State of Illinois all healthcare providers including doctors, nurses, social workers, mental health professionals and therapists (OT, PT, LSH) are mandatory reporters of child abuse or neglect. If a mandated reporter suspects a child to be a victim of abuse or neglect they must file a report.

The number to call is:

1-800-25ABUSE (1-800-252-2873)

Mandated reporters who make good faith reports have immunity from liability under the law. However, a mandated reporter's failure to report suspected instances of child abuse or neglect to DCFS constitutes a Class A misdemeanor and may result in further abuse, neglect or death of the child.
In the Cook County Health and Hospitals System, a specialized group of experts, consisting of child abuse pediatricians, social workers, nurses and ancillary health staff form the Division of Child Protective Services (CPS) in the Department of Pediatrics at Stroger Hospital.

The service is available 24 hours a day to any CCHHS provider to provide assistance and consultation in all child abuse and neglect assessments and reporting of cases. Internal Consults to Stroger’s CPS Team are mandatory in suspected cases of child abuse, neglect, or sexual molestation.
Services Provided by Child Protective Services

- Assessing the child/family and documenting findings
- Once consulted, helping the healthcare provider or team make a report to DCFS @ 1-800-252-2873
- Connecting families to local resources and support
- Providing comprehensive follow up care for children and families where abuse or neglect has been identified or suspected
- Facilitating trainings to staff on issues related to child abuse and neglect and sexual abuse/assault
Key Contact Information for Child Abuse or Neglect

Illinois DCFS Reporting Hotline Number

- 1-800-25-ABUSE (1-800-252-2873)

Child Protective Services at Stroger Hospital

- Stroger Campus Office: (312) 864-4140
- On Call Contact: A CPS physician is on call every day and may be identified by checking the Pediatrics Plan of the Day available on the Stroger Intranet or by calling the Pediatric Emergency Department.
- Additional Contact: Medical Clinic at the Chicago Children’s Advocacy Center: (312) 492-3860
Understanding Elder Abuse and Neglect
Facts about Elder Abuse and Neglect

In order of prevalence, types of include:

- Neglect—both caregiver and self-neglect
- Psychological or Emotional
- Financial Exploitation
- Physical
- Sexual

Estimated 2-10% of the elderly are estimated to be victims (depending upon sampling and definitions)*

Facts about Elder Abuse and Neglect

1-2 Million US persons 65 years or older have been injured, exploited, or neglected by someone on whom they depended for care or protection.¹

¹Elder Mistreatment: Abuse, Neglect, Exploitation in an Aging America 2003, NCEA

Only one out of six cases of abuse, neglect, exploitation, or self-neglect are reported to authorities.²

²National Elder Abuse Incidence Study, 1998
<table>
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<tr>
<th>Typical Victims</th>
<th>Typical Abusers</th>
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<tr>
<td>Are usually women over the age of 70 (75%)</td>
<td>Mostly male (54%), aged 30’s to 40’s</td>
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<td>Have physical and/or mental impairments</td>
<td>Greater than two-thirds are relatives of victim</td>
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<tr>
<td>Are usually dependent on abuser for care</td>
<td>May be socially isolated, a substance abuser,</td>
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<td></td>
<td>unemployed, or have a history of violence</td>
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<tr>
<td>Are widowed or divorced</td>
<td>May depend on the elder for finances or housing</td>
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<td>Often live with the abuser and socially isolated</td>
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Identifying Victims of Elder Abuse or Neglect

- Some *physical signs of elder neglect* may include:
  - Malnutrition or Dehydration
  - Poor hygiene, soiled clothing, unkempt
  - Decubitus Ulcers
  - Overprotective caregiver
  - Clothing does not match weather conditions (usually with self-neglect)
Identifying Victims of Elder Abuse or Neglect

- Some **physical signs of elder abuse** may include:
  - Bruises in various stages of healing
  - Fractures, welts or burns
  - Skin abrasions from restraints
  - Injuries not consistent with explanation
  - Overprotective or defensive caregiver
Identifying Victims of Elder Abuse or Neglect

- Some *psychological signs of elder abuse or neglect* may include:
  - Anxiety
  - Depression
  - Agitated or fearful
  - Suicidal thoughts
  - Impaired decision making*

* In any suspected cases, the primary medical team and/or consulting psychiatry service should determine if the possible victim has *medical decision-making capacity* and document.
What to do when you suspect elder abuse or neglect

- In any suspected cases, the hospital’s Department of Social Work should be contacted for further assessment and assistance with any reporting.

- The Social Worker in the assigned clinical area will:
  - Coordinate assessment and reporting with the primary team
  - Ensure safe placement or housing options for the victim
When to report elder abuse or neglect

- Mandatory reporting of elder abuse or neglect is only required in victims who lack medical decision-making capacity.

- Victims with mental capacity will be encouraged by the medical and social work staff to report suspected abuse or neglect.

- All reporting is made to the Illinois Department on Aging.
Key Contact Information for Elder Abuse or Neglect

- **Department of Social Work**
  - (312) 864-5071 (For Inpatient Referrals)
  - (312) 333-1728 (For Emergency Referrals)

- **Illinois Department on Aging**
  - 1-800-252-8966 (General)
  - 1-800-279-0400 (For After-Hours Reporting)
  - 1-800-252-4343 (For Reporting of Nursing Homes)
Understanding Sexual Assault and Rape
Some Facts about . . . Sexual Assault and Rape

1 in 6 women\(^1\) (17.7 million) and 1 in 33 men\(^2\) (2.78 million) in the US are the victims of attempted or completed rape

\(^1\)Violence Against Women Survey, CDC 1998
\(^2\)USDOJ Natl Crime Victimization Survey 2003

Most victims of sexual assault are very young:
15% are less than 12 years old
29% are less than 18 years old
80% are less than 30 years old

\(^3\)USDOJ Natl Crime Victimization Survey 2004
Some Facts about . . .
Sexual Assault and Rape

Victims of sexual assault are more likely to be depressed (3 x more), have post-traumatic stress disorder (6 x more), abuse alcohol (13 x more), abuse drugs (26 x more)\(^1\)

\(^1\)WHO, 2002

Perpetrators of sexual assault are only reported in 40% of cases\(^2\) and only 6% will ever spend time in jail\(^3\)

\(^2\)USDOJ, Rape and Sexual Assault Reporting, 1992-2000
\(^3\)National Center for Policy Analysis, Crime/Punishment in America, 1999
Identifying Victims of Sexual Assault or Rape

- Most patients directly report being sexually assaulted or raped and may be brought to hospital by police.

- However, other patients may deny.

Some identification signs may include:

- Suspicious genital or rectal tears
- Patterned abrasions on neck, elbows or feet
How to assess and help Victims of Sexual Assault or Rape

- In order to complete appropriate history and physical exam, appropriate consents must be obtained (depending upon age of victim)

- All suspected cases are reported to the City of Chicago Police Department in accordance with mandatory reporting laws in the State of Illinois
How to assess and help Victims of Sexual Assault or Rape

- Physical exam and documentation
  - State Police Sexual Assault Collection Kit to be used only once Police Report initiated
  - Documentation of all bruises, bite marks, burns and other physical/emotional signs should be noted

- Lab Tests*: STDs, HIV, U/A, Pregnancy

*Medications may be given for STDs, pregnancy or HIV exposure (as indicated and desired)
Rape Victims Advocacy (RVA) Team

- On the Stroger Hospital campus, a specialized group of counseling experts, known as the Rape Victim Advocacy Team (or RVA) are available for any suspected cases of sexual assault or rape.

They provide:

- Immediate protection for the victim
- Local resources and support to victims and families
- Immediate and ongoing legal and counseling services
Key Contact Information for Sexual Assault and Rape

- Stroger Hospital Police Department
  - (312) 864-8097

- Rape Victims Advocacy (RVA) Service
  - (312) 864-6111 (Office Number)
  - (773) 907-1062 (24 hour On-Call Service)

- Chicago Rape Crisis Line:
  - 1-888-293-2080
Understanding Domestic Abuse and Intimate Partner Violence
Some Facts about . . .
Domestic Abuse or Violence

- Intimate partner abuse results in 2 million injuries to women and 600,000 injuries to men each year in the United States.
  (CDC, Morbidity and Mortality Weekly Report, 2008)

- In 70-80% of intimate partner homicides, the female victim was physically abused before the murder.
Some Facts about . . . Domestic Abuse or Violence

- 15.5 million children in the United States live in families in which partner violence occurred at least once in the past year, and 7 million children live in families in which severe partner violence occurred.

(Journal of Interpersonal Violence 2003)
Identifying Victims of Domestic Abuse or Violence

- Many patients are too ashamed or afraid to disclose the abuse they experience but will disclose it if the provider initiates the conversation in a sensitive non-judgmental manner.

- In four different studies of survivors of abuse, 70 percent to 81 percent of the patients studied reported that they would like their healthcare providers to ask them privately about Intimate Partner Violence.

="Inside Pandora’s Box”: Abused Women’s Experiences with Clinicians and Health Services”}
How to Ask about Domestic Violence

Begin with framing statements like:

- Because domestic violence is a major health problem, I’ve begun asking all my patients about it.

- Because violence is so common, our policy is to ask everyone a few questions about abuse....

- Many of my patients report not feeling safe at home, so I now ask about it routinely....
How to Ask about Domestic Violence

Sample Questions

- “Has your partner or family member ever hit, kicked or slapped you or hurt you in any other way?”
- “Has your partner ever forced you to have sex against your will?”
- “Are you afraid of your partner or afraid to go home?”
How to assess and help Victims of Domestic Abuse & Violence

- Although the State of Illinois does not mandate reporting, suspected victims should be encouraged to report to the City of Chicago Police Department at Stroger Hospital.

- Understand that it should be the patient’s choice; calling the police does not work for all victims.
Hospital Crisis Intervention Project (HCIP) Service

- On the Stroger Hospital campus, a specialized group of counseling experts, known as the *Hospital Crisis Intervention Project (or HCIP)* is available for suspected cases of domestic abuse. They help provide:
  - An immediate *safety assessment* for the victim
  - Local resources and support for victims
  - Immediate and ongoing legal and counseling services
  - Individual and family safety plans
Key Contact Information for Sexual Assault and Rape

- Stroger Hospital Police Department
  - (312) 864-8097

- City of Chicago & Statewide DV Helpline
  - 1-877-863-6338

- Hospital Crisis Intervention (HCIP) Service
  - (312) 864-1095 (Office Number)
  - (312) 903-8407 (Pager)
  - (312) 333-1728 (After-hours contact)
Final Words about Abuse and Neglect

Ask or screen for victims of trauma, abuse, or neglect

Document history and physical carefully

Report suspected cases to hospital and to required external agencies (DCFS, Police, Council on Aging)

Support victims through on-site resources and community linkages to comfort the victim now and help protect them in the future!!!