



## Appendix A

### **DEFINITIONS AND INDICATORS OF ABUSE**

### Taken from:

- a) Abuse: A Handbook for Early Childhood Education
- b) Child Abuse Handbook for Social Workers in Ontario
- c) Child Abuse, Neglect, and Deprivation: A Handbook for Ontario Nurses

Child abuse can be subdivided into four categories:

- (i) Physical Abuse,
- (ii) Sexual Abuse
- (iii) Emotional Abuse, and
- (iv) Neglect

### **PHYSICAL ABUSE**

Physical abuse consists of any non-accidental form of injury or harm inflicted on a child. This includes but is not necessarily restricted to physical beating, corporal punishment that causes bruises or leads to an injury that requires medical treatment; wounding, burning, kicking, shaking, or throwing the child; use of a closed fist or instrument on a child, poisoning or drugging the child and related assaults causing visible or not visible physical harm. Abusive malnutrition is a deliberate withholding of sufficient nourishment from a child.

Physical Indicators			Behavioural Indicators		
	Unexplained bruises and welts, especially		Reports of injury by parents		
	those:		Extreme wariness of parents		
	<ul> <li>On the face, back, buttocks, thighs</li> </ul>		Extreme wariness of adults in general		
	<ul> <li>In stages of simultaneous healing</li> </ul>		Wariness of physical contact, especially when		
	<ul> <li>In the shape of an instrument such as belt,</li> </ul>		initiated by an adult		
	hairbrush, etc.		Resistance to being touched		
	<ul> <li>Appearing after the child's absence,</li> </ul>		Extreme watchfulness, sometimes described as		
	weekend, vacation		"frozen watchfulness"		
	Unexplained burns:		Apprehension when other children cry		
	<ul> <li>Cigarette burns (hands, feet, back,</li> </ul>		Fear of going home		
	buttocks)		Unexplained prolonged absence (parent/guardian		
	<ul> <li>Immersion burns (sock-like or glove-like in</li> </ul>		may keep child at home while injury heals)		
	shape)		Denial that bruises exist		
	<ul> <li>Burns patterned like electric burner (arms,</li> </ul>		Extreme range of behaviour		
	legs, torso)		<ul> <li>e.g., extreme withdrawal → extreme</li> </ul>		
	<ul> <li>Rope burns (arms, legs, torso)</li> </ul>		aggressiveness		
	Unexplained fractures, especially:		<ul> <li>extreme fearfulness → extreme fearlessness</li> </ul>		
	<ul> <li>To skull or facial structure</li> </ul>		<ul> <li>extreme attention-seeking→extreme attention</li> </ul>		
	<ul> <li>In stages of multiple healing</li> </ul>		avoidance		
	<ul> <li>Multiple of spiral fractures</li> </ul>		<ul> <li>extreme crying → no expectation of comfort</li> </ul>		
	Inappropriate dress, especially long-sleeved				
	clothing in hot weather (parent/guardian may				
	be concealing marks)				





### **SEXUAL ABUSE**

Sexual abuse is the use of a child for the sexual or erotic gratification of a caregiver or other person, performed with or without resistance on the part of the child and with or without accompanying physical abuse. Sexual abuse can range from a parent/caregiver permitting or exposing a child to sexual acts such as prostitution, to actual molestation; including exposure, fondling or masturbation and intercourse; including incest and rape. It also includes exploitation of children for pornographic purposes, including posing children for photographs which are sexual or erotic in content. Most sexual misuse of children occurs at home with persons known to the child.

Physical Indicators		Behavioural Indicators	
	difficulty in walking or sitting		fear of male parent/guardian; fear of all males
	torn, stained or bloody underwear		wariness of physical contact, especially when initiated
	pain or itching in genital area		by an adult
	bruises or bleeding in genital, vaginal,		fear of the night, the dark
	or anal areas		sophisticated or bizarre sexual behaviour or knowledge
	venereal diseases, especially in pre-		seductive behaviour for approval
	teens		unwillingness to change for physical education, or to
	pregnancy		participate in active sports or games
			reports sexual contact with parent or guardian

### **EMOTIONAL ABUSE**

Emotional abuse includes ignoring or passively rejecting the child, overtly "disowning" of a child, scapegoating, criticizing and often, making excessive or unreasonable demands of performance and competence for a child's age and ability. Severe verbal abuse, threatening, constant yelling, berating, and withholding of comfort from an upset or distraught child, are included in emotional maltreatment of a child. Psychological terrorism is present in some cases (for example, locking a child in a dark cellar or threat of malnutrition). When a child's future psychological development is at risk because of a caregiver's actions or failure to act, this is child abuse.

Physical Indicators		Behavioural Indicators		
	bed wetting that is non-medical in origin		developmental lags: physical, mental, or emotional	
	frequent psychosomatic complaints,		habit disorders: sucking, biting, rocking, etc.	
	headaches, nausea, abdominal pains		conduct disorders: antisocial and destructive	
	child fails to thrive		behaviour	
			speech disorder, sleep disorders, inhibition of play	
			extreme passivity/extreme aggressiveness	
			extreme infantile behaviour	
			extreme adult behaviour: appearing to "take over" and	
			care for parents	
			hysteria, obsession, phobias, hypochondria	
			extreme depression, attempted suicide	





# **NEGLECT**

Child abuse covers acts of omission, on the part of the parent/caregiver: failure to provide for a child's basic needs and appropriate level of care with respect to food, clothing, shelter, sleep, health hygiene, safety, and education. This includes the failure to provide adequate supervision, anticipatory prevention of injury and medical attention. Emotional neglect refers to the failure to provide adequate psychological nurturance necessary for a child's growth and development.

Physical Indicators		Behavioural Indicators		
	consistent hunger, malnutrition, underweight,		begging, stealing food	
	dehydration		theft in general	
	poor hygiene, dirtiness, lice, skin disorders		verbal evidence that there is no caregiver, no	
	associated with improper hygiene		one at home, arriving early, staying late at	
	inappropriate dress, exposure symptoms, e.g.,		school	
	sunburn, frostbite, recurrent colds, pneumonia		falling asleep in class	
	consistent fatigue, listlessness		delinquency, drugs, or alcohol	
	unattended health problems			
	inadequate supervision, child left in the care of			
	another child too young to protect his/her			
	abandonment			