



**National Clearinghouse on Child Abuse and Neglect Information
National Adoption Information Clearinghouse**



Gateways to Information: Protecting Children and Strengthening Families

Child Abuse and Neglect General Information Packet

This packet is provided for anyone interested in learning more about child abuse and neglect.

Contents include:

- What is Child Abuse and Neglect?
- Recognizing Child Abuse and Neglect: Signs and Symptoms
- How Does the Child Welfare System Work?
- You Have the Power to Prevent Child Abuse and Neglect
- Long-Term Consequences of Child Abuse and Neglect
- Child Maltreatment 2002: Summary of Key Findings
- Child Abuse Reporting Numbers
- Toll-Free Crisis Hotline Numbers
- National Organizations With Information on Child Abuse and Neglect

The National Clearinghouse on Child Abuse and Neglect Information offers many other resources about child abuse and neglect and child welfare. For more information or to order additional publications, visit the Clearinghouse website at <http://nccanch.acf.hhs.gov>, email the Clearinghouse at nccanch@caliber.com, or call the Clearinghouse at (703) 385-7565 or (800) 394-3366.

**National Clearinghouse on Child Abuse
and Neglect Information**

330 C Street, SW
Washington, DC 20447
(703) 385-7565 or (800) 394-3366
Fax: (703) 385-3206
E-mail: nccanch@caliber.com
<http://nccanch.acf.hhs.gov>

National Adoption Information Clearinghouse

330 C Street, SW
Washington, DC 20447
(703) 352-3488 or (888) 251-0075
Fax: (703) 385-3206
E-mail: naic@caliber.com
<http://naic.acf.hhs.gov>



What Is Child Abuse and Neglect?

How Is Child Abuse and Neglect Defined in Federal Law?

Federal legislation provides a foundation for States by identifying a minimum set of acts or behaviors that define child abuse and neglect. The Federal Child Abuse Prevention and Treatment Act (CAPTA), (42 U.S.C.A. §5106g), as amended by the Keeping Children and Families Safe Act of 2003, defines child abuse and neglect as, at minimum:

- Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or
- An act or failure to act which presents an imminent risk of serious harm.

What Are the Major Types of Child Abuse and Neglect?

Within the minimum standards set by CAPTA, each State is responsible for providing its own definitions of child abuse and neglect.¹ Most States recognize four major types of maltreatment: neglect, physical abuse, sexual abuse, and emotional abuse. Although any of the forms of child maltreatment may be found separately, they often occur in combination.

The examples provided below are for general informational purposes only. Not all States' definitions will include all of the examples listed below, and individual States' definitions may cover additional situations not mentioned here.

Neglect is failure to provide for a child's basic needs. Neglect may be:

- Physical (e.g., failure to provide necessary food or shelter, or lack of appropriate supervision)
- Medical (e.g., failure to provide necessary medical or mental health treatment)²
- Educational (e.g., failure to educate a child or attend to special education needs)
- Emotional (e.g., inattention to a child's emotional needs, failure to provide psychological care, or permitting the child to use alcohol or other drugs)

These situations do not always mean a child is neglected. Sometimes cultural values, the standards of care in the community, and poverty may be contributing factors, indicating the family is in need of information or assistance. When a family fails to use information and resources, and the child's health or safety is at risk, then child welfare intervention may be required.



The Clearinghouses are services of the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services.

¹ See *Definitions of Child Abuse and Neglect*, from the National Clearinghouse on Child Abuse and Neglect State Statutes Series (<http://nccanch.acf.hhs.gov/general/legal/statutes/sag/define.cfm>).

² *Withholding of medically indicated treatment* is defined by CAPTA as "the failure to respond to the infant's life threatening conditions by providing treatment (including appropriate nutrition, hydration, and medication) that in the treating physician's or physicians' reasonable medical judgment, will be most likely to be effective in ameliorating or correcting all such conditions." CAPTA does note a few exceptions, including infants who are "chronically and irreversibly comatose"; situations when providing treatment would not save the infant's life but merely prolong dying; or when "the provision of such treatment would be virtually futile in terms of the survival of the infant and the treatment itself under such circumstances would be inhumane."

Physical Abuse is physical injury (ranging from minor bruises to severe fractures or death) as a result of punching, beating, kicking, biting, shaking, throwing, stabbing, choking, hitting (with a hand, stick, strap, or other object), burning, or otherwise harming a child. Such injury is considered abuse regardless of whether the caretaker intended to hurt the child.

Sexual Abuse includes activities by a parent or caretaker such as fondling a child's genitals, penetration, incest, rape, sodomy, indecent exposure, and exploitation through prostitution or the production of pornographic materials.³

Emotional Abuse is a pattern of behavior that impairs a child's emotional development or sense of self-worth. This may include constant criticism, threats, or rejection, as well as withholding love, support, or guidance. Emotional abuse is often difficult to prove and, therefore, CPS may not be able to intervene without evidence of harm to the child. Emotional abuse is almost always present when other forms are identified.

Resources

Child Maltreatment 2001: Summary of Key Findings

<http://nccanch.acf.hhs.gov/pubs/factsheets/canstats.cfm>

Summarizes national child abuse statistics regarding investigations of child abuse and neglect, victims of maltreatment, perpetrators, fatalities, and services.

How Does the Child Welfare System Work?

<http://nccanch.acf.hhs.gov/pubs/factsheets/cpswork.cfm>

A brief overview of the purposes and functions of the child welfare system from a national perspective.

Legal Issues and Laws

<http://nccanch.acf.hhs.gov/general/legal/index.cfm>

Information about legal aspects of child abuse and neglect from the National Clearinghouse on Child Abuse and Neglect Information.

Recognizing Child Abuse and Neglect: Signs and Symptoms

<http://nccanch.acf.hhs.gov/pubs/factsheets/signs.cfm>

Lists general signs that may signal the presence of child abuse or neglect, as well as signs associated with specific types of abuse.

³ *Sexual abuse* is defined by CAPTA as "the employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct or simulation of such conduct for the purpose of producing a visual depiction of such conduct; or the rape, and in cases of caretaker or inter-familial relationships, statutory rape, molestation, prostitution, or other form of sexual exploitation of children, or incest with children."



Recognizing Child Abuse and Neglect: Signs and Symptoms

Introduction

The first step in helping abused or neglected children is learning to recognize the signs of child abuse and neglect. The presence of a single sign does not prove child abuse is occurring in a family; however, when these signs appear repeatedly or in combination you should take a closer look at the situation and consider the possibility of child abuse.

If you do suspect a child is being harmed, reporting your suspicions may protect the child and get help for the family. Contact your local child protective services agency or police department. **For more information about where and how to file a report, call the Childhelp USA® National Child Abuse Hotline (1-800-4-A-CHILD®).**

Recognizing Child Abuse

The following signs may signal the presence of child abuse or neglect.

The Child:

- Shows sudden changes in behavior or school performance.
- Has not received help for physical or medical problems brought to the parents' attention.
- Has learning problems (or difficulty concentrating) that cannot be attributed to specific physical or psychological causes.
- Is always watchful, as though preparing for something bad to happen.
- Lacks adult supervision.
- Is overly compliant, passive, or withdrawn.
- Comes to school or other activities early, stays late, and does not want to go home.

The Parent:

- Shows little concern for the child.
- Denies the existence of—or blames the child for—the child's problems in school or at home.
- Asks teachers or other caretakers to use harsh physical discipline if the child misbehaves.
- Sees the child as entirely bad, worthless, or burdensome.
- Demands a level of physical or academic performance the child cannot achieve.
- Looks primarily to the child for care, attention, and satisfaction of emotional needs.

The Parent and Child:

- Rarely touch or look at each other.
- Consider their relationship entirely negative.
- State that they do not like each other.



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Types of Abuse

The following are some signs often associated with particular types of child abuse and neglect: physical abuse, neglect, sexual abuse, and emotional abuse. It is important to note, however, these types of abuse are more typically found in combination than alone. A physically abused child, for example, is often emotionally abused as well, and a sexually abused child also may be neglected.

Signs of Physical Abuse

Consider the possibility of physical abuse when the **child**:

- Has unexplained burns, bites, bruises, broken bones, or black eyes.
- Has fading bruises or other marks noticeable after an absence from school.
- Seems frightened of the parents and protests or cries when it is time to go home.
- Shrinks at the approach of adults.
- Reports injury by a parent or another adult caregiver.

Consider the possibility of physical abuse when the **parent or other adult caregiver**:

- Offers conflicting, unconvincing, or no explanation for the child's injury.
- Describes the child as "evil," or in some other very negative way.
- Uses harsh physical discipline with the child.
- Has a history of abuse as a child.

Signs of Neglect

Consider the possibility of neglect when the **child**:

- Is frequently absent from school.
- Begs or steals food or money.
- Lacks needed medical or dental care, immunizations, or glasses.
- Is consistently dirty and has severe body odor.
- Lacks sufficient clothing for the weather.
- Abuses alcohol or other drugs.
- States that there is no one at home to provide care.

Consider the possibility of neglect when the **parent or other adult caregiver**:

- Appears to be indifferent to the child.
- Seems apathetic or depressed.
- Behaves irrationally or in a bizarre manner.
- Is abusing alcohol or other drugs.

Signs of Sexual Abuse

Consider the possibility of sexual abuse when the **child**:

- Has difficulty walking or sitting.
- Suddenly refuses to change for gym or to participate in physical activities.
- Reports nightmares or bedwetting.
- Experiences a sudden change in appetite.
- Demonstrates bizarre, sophisticated, or unusual sexual knowledge or behavior.
- Becomes pregnant or contracts a venereal disease, particularly if under age 14.
- Runs away.
- Reports sexual abuse by a parent or another adult caregiver.

Signs of Emotional Maltreatment

Consider the possibility of sexual abuse when the **parent or other adult caregiver:**

- Is unduly protective of the child or severely limits the child's contact with other children, especially of the opposite sex.
- Is secretive and isolated.
- Is jealous or controlling with family members.

Consider the possibility of emotional maltreatment when the **child:**

- Shows extremes in behavior, such as overly compliant or demanding behavior, extreme passivity, or aggression.
- Is either inappropriately adult (parenting other children, for example) or inappropriately infantile (frequently rocking or head-banging, for example).
- Is delayed in physical or emotional development.
- Has attempted suicide.
- Reports a lack of attachment to the parent.

Consider the possibility of emotional maltreatment when the **parent or other adult caregiver:**

- Constantly blames, belittles, or berates the child.
- Is unconcerned about the child and refuses to consider offers of help for the child's problems.
- Overtly rejects the child.

This fact sheet was adapted, with permission, from *Recognizing Child Abuse: What Parents Should Know*. Prevent Child Abuse America. © 2003.



How Does the Child Welfare System Work?

What is the child welfare system?

The child welfare system is a group of services designed to promote the well-being of children by ensuring safety, achieving permanency, and strengthening families to successfully care for their children. Most families first become involved with the child welfare system due to a report of suspected child abuse or neglect (sometimes called “child maltreatment”). Child maltreatment is defined by Federal law¹ as serious harm (neglect, physical abuse, sexual abuse, and emotional abuse or neglect) caused to children by parents or primary caregivers, such as extended family members or babysitters. Child maltreatment can also include harm that a caregiver *allows* to happen (or does not *prevent* from happening) to a child. In general, child welfare agencies do not intervene in cases of harm to children caused by acquaintances or strangers. These cases are the responsibility of law enforcement.²

The child welfare system is not a single entity. Many organizations in each community work together to strengthen families and keep children safe. Public agencies (departments of social services, child and family services, etc.) often contract and collaborate with private child welfare agencies and community-based organizations to provide services to families, such as in-home (“family preservation”) services, foster care, residential treatment, mental health care, substance abuse treatment, parenting skills classes, employment assistance, and financial or housing assistance.

Child welfare systems are complex, and their specific procedures vary widely by State. The purpose of this fact sheet is to give a brief overview of the purposes and functions of child welfare from a national perspective. Child welfare systems typically:

- Receive and investigate reports of possible child abuse and neglect.
- Provide services to families who need assistance in the protection and care of their children.
- Arrange for children to live with foster families when they are not safe at home.
- Arrange permanent adoptive homes or independent living services for children leaving foster care.

¹ Keeping Children and Families Safe Act of 2003, Title I Child Abuse Prevention and Treatment Act (P.L. 108-36). Each State has its own laws that define abuse and neglect for purposes of stating the reporting obligations of individuals and describing required State/local child protective services agency interventions. For State-by-State information about civil laws related to child abuse and neglect, visit the National Clearinghouse on Child Abuse and Neglect Information website at <http://nccanch.acf.hhs.gov/general/legal/state/index.cfm>.

² While some States authorize child protective services agencies to respond to all reports of alleged child maltreatment, other States authorize law enforcement to respond to certain types of maltreatment, such as sexual or physical abuse.



What happens when a report of possible abuse or neglect is made?

Any concerned person can report suspicions of child abuse or neglect. Most reports are made by “mandatory” reporters (persons who are required by State law to report suspicions of child abuse and neglect). In approximately 18 States, any person who suspects child abuse or neglect is required to report. Reports of possible child abuse and neglect are generally received by child protective services (CPS) workers and either “screened in” or “screened out.”³ A report is screened in if there is sufficient information to suggest an investigation is warranted. A report may be screened out if there is not enough information on which to follow up or if the situation reported does not meet the State’s legal definition of abuse or neglect.⁴ In these instances, the worker may refer the person reporting the incident to other community services or law enforcement for additional help.

In the year 2002, an estimated total of 2.6 million referrals involving 4.5 million children were made to CPS agencies. Approximately 67 percent (1.8 million referrals) were screened in, and 33 percent (861,000 referrals) were screened out.⁵

When a report is “screened in,” what happens next?

CPS workers (often called “investigators”) respond within a particular time period (anywhere from a few hours to a few days) depending on the type of maltreatment alleged, the potential severity of the situation, and requirements under State law. They may speak with the parents and other people in contact with the child (such as doctors, teachers, or childcare providers). They also may speak with the child, alone or in the presence of caregivers, depending on the child’s age and level of risk. Children who are believed to be in immediate danger may be moved to a shelter, foster care placement, or a relative’s home during the investigation and while court proceedings are pending. An investigator’s primary purpose is to determine if abuse or neglect has occurred and if there is a risk of it occurring again.

Some jurisdictions now employ an “alternative response” system. In these jurisdictions, when risk to the children involved is considered to be low, the CPS caseworker may focus on assessing family difficulties and offering needed services, rather than gathering evidence to confirm the occurrence of abuse or neglect.

At the end of an investigation, CPS workers typically make one of two findings—“unsubstantiated” (“unfounded”) or “substantiated” (“founded”). (These terms vary from State to State.) Typically, a finding of “unsubstantiated” means there is insufficient evidence for the worker to conclude that a child was abused or neglected, or what happened does not meet the legal definition of child abuse or neglect. A finding of “substantiated” typically means an incident of child abuse or neglect (as defined by State law) is believed to have occurred. Some States have additional categories, such as “unable to determine,” that suggest there was not enough evidence to either confirm or refute that abuse or neglect occurred.

³ See *Mandatory Reporters of Child Abuse and Neglect and Reporting Procedures*, available from the National Clearinghouse on Child Abuse and Neglect Information Statutes-at-a-Glance Series (<http://nccanch.acf.hhs.gov/general/legal/statutes.cfm>).

⁴ See *Definitions of Child Abuse and Neglect*, available from the National Clearinghouse on Child Abuse and Neglect Information Statutes-at-a-Glance Series (<http://nccanch.acf.hhs.gov/general/legal/statutes.cfm>).

⁵ U.S. Department of Health and Human Services. (2004). *Child maltreatment 2002*. Washington, DC: U.S. Government Printing Office.

The agency will initiate a court action if it determines that the authority of the juvenile court (through a child protection or “dependency” proceeding) is necessary to keep the child safe. To protect the child, the court can issue temporary orders placing the child in shelter care during investigation, ordering services, or ordering certain individuals to have no contact with the child. At an adjudicatory hearing, the court hears evidence and decides whether maltreatment occurred and whether the child should be under the continuing jurisdiction of the court. The court then enters a disposition, either at that hearing or a separate hearing, which may result in the court ordering a parent to comply with services necessary to ameliorate the abuse or neglect. Orders can also contain provisions regarding visitation between the parent and child, agency obligations to provide the parent with services, and services needed by the child.

In 2002, approximately 896,000 children were found to be victims of child abuse or neglect.⁶

What happens in substantiated cases?

If a child has been abused or neglected, the course of action depends on State policy, the severity of the maltreatment, the risk of continued or future maltreatment, the services available to address the family's needs, and whether the child was removed from the home and a court action to protect the child was initiated. The following general options are available:

- **No or low risk**—The family's case may be closed with no services if the maltreatment was a one-time incident, there is no or low risk of future incidents, or the services the family needs will not be provided through the child welfare agency, but through other systems.
- **Low to moderate risk**—Referrals may be made to community-based or voluntary in-home CPS services if the CPS worker believes the family would benefit from these services and the risk to the child would be lessened. This may happen even when no abuse or neglect is found, if the family needs and is willing to participate in services.
- **Moderate to high risk**—The family may again be offered voluntary in-home CPS services to help ameliorate the risks. If these are refused, the agency may seek intervention by the juvenile dependency court. Once there is a judicial determination that abuse or neglect occurred, juvenile dependency court may require the family to cooperate with in-home CPS services if it is believed that the child can remain safely at home while the family addresses the issues contributing to the risk of future maltreatment. If the child has been seriously harmed or is considered to be at high risk of serious harm, the court may order the child's removal from the home or affirm the agency's prior removal of the child. The child may be placed with a relative or in foster care.

In 2002, an estimated 265,000 children were removed from their homes as a result of a child abuse investigation or assessment.⁷

⁶ Ibid.

⁷ Ibid.

What happens to people who abuse children?

People who are found to have abused or neglected a child are generally offered voluntary help or required by a juvenile dependency court to participate in services that will help keep their children safe. In more severe cases or fatalities, police are called upon to investigate and may file charges in criminal court against the perpetrators of child maltreatment. (In many States certain types of abuse, such as sexual abuse and serious physical abuse, are routinely referred to law enforcement.)

Whether or not criminal charges are filed, the perpetrator's name may be placed on a State child maltreatment registry if abuse or neglect is confirmed. A registry is a central database that collects information about maltreated children and individuals who were found to have abused or neglected those children. These registries are usually confidential, and used for internal child protective purposes only. However, they may be used in background checks for certain professions, such as those working with children, so children will be protected from contact with individuals who may mistreat them.

What happens to children who enter foster care?

Most children in foster care are placed with relatives or foster families, but some may be placed in group homes. While a child is in foster care, he or she attends school and should receive medical care and other services as needed. The child's family also receives services to support their efforts to reduce the risk of future maltreatment and to help them, in most cases, be reunified with their child. Parents may visit their children on a predetermined basis. Visits also are arranged between siblings, if they cannot be placed together.

Every child in foster care should have a permanency plan that describes where the child will live after he or she leaves foster care. Families typically participate in developing a permanency plan for the child and a service plan for the family. These plans guide the agency's work. Except in unusual and extreme circumstances, every child's plan is first focused on reunification with parents. If the efforts toward reunification are not successful, the plan may be changed to another permanent arrangement, such as adoption or transfer of custody to a relative.⁸ Occasionally the plan involves a permanent placement with a foster family, usually for older children who have become strongly attached to the family or for whom a suitable adoptive home cannot be found. In addition to a permanency plan, older children should receive transitional or independent living services to assist them in being self-sufficient when they leave foster care between the ages of 18 and 21.

Federal law requires the court to hold a permanency hearing, which determines the permanent plan for the child, within 12 months after the child enters foster care and every 12 months thereafter. Many courts review each case more frequently to ensure that the agency is actively engaged in permanency planning for the child.

In fiscal year 2001, 57 percent of children leaving foster care were returned to their parents. The median length of stay in foster care was 12 months.⁹

⁸ Under the Adoption and Safe Families Act (ASFA), while reasonable efforts to preserve and reunify families are still required, State agencies are required to seek termination of the parent-child relationship when a child has been in foster care for 15 of the most recent 22 months. This requirement does not apply (at the State's option) if a child is cared for by a relative, if the termination is not in the best interest of the child, or if the State has not provided adequate services for the family.

⁹ U.S. Department of Health and Human Services. (2003). The AFCARS Report (Preliminary FY 2001 estimates as of March 2003).

Summary

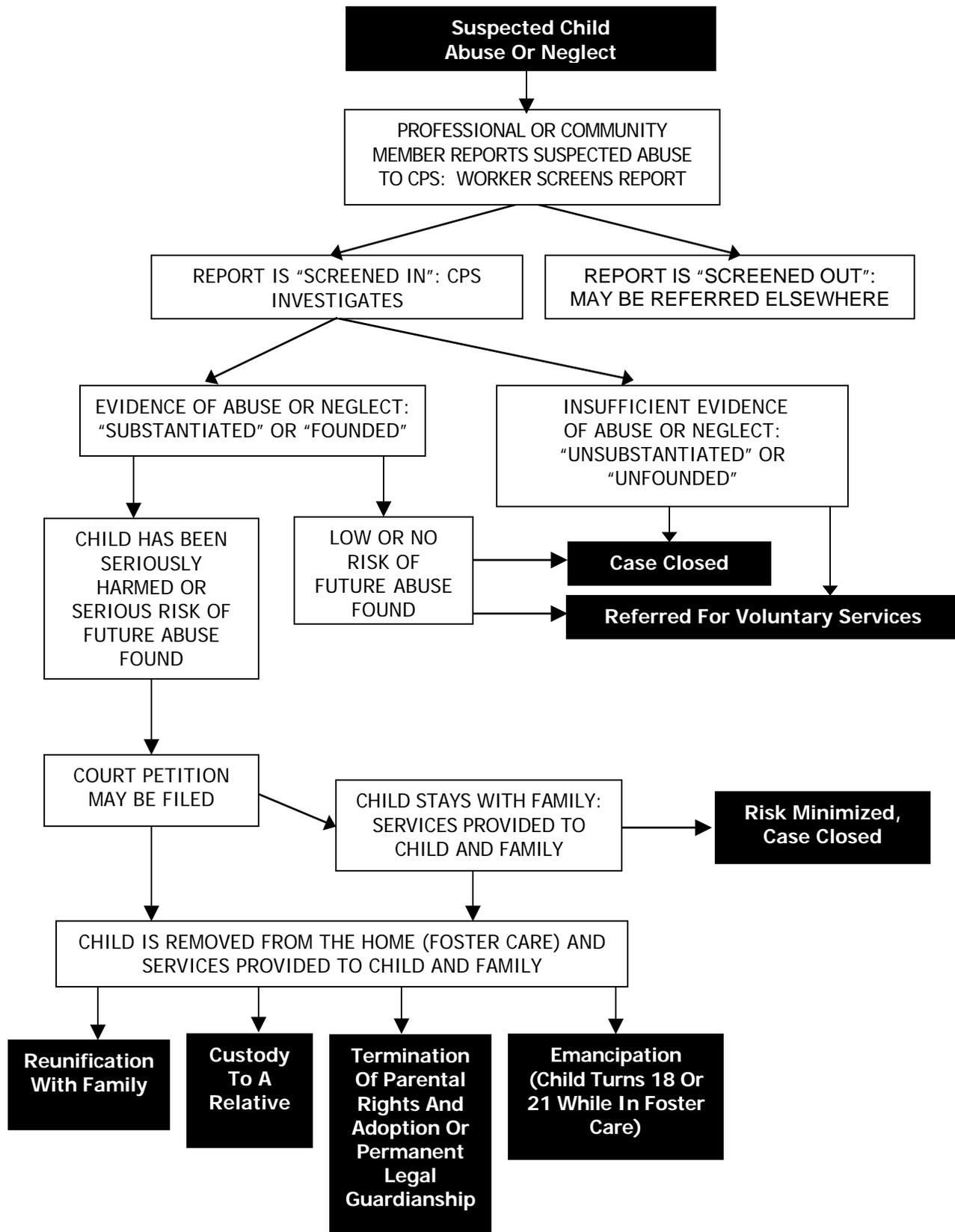
The goal of child welfare is to promote the safety, permanency, and well-being of children and families. Even among children who enter foster care, most children will leave the child welfare system safely in the care of their birth family, a relative, or an adoptive home.

For more detailed information about child welfare, please refer to the resources listed below. For more information about the child welfare system in your State or local jurisdiction, contact your local public child welfare agency.

Resources

- Badeau, S. & Gesiriech, S. (2003). *A child's journey through the child welfare system*. Washington, DC: The Pew Commission on Children in Foster Care. (<http://pewfostercare.org/docs/index.php?DocID=24>)
- Goldman, J. & Salus, M. (2003). *A coordinated response to child abuse and neglect: The foundation for practice (The User Manual Series)*. Washington, DC: U.S. Department of Health and Human Services.
- McCarthy, J., Marshall, A., Collins, J., Milon, J., Arganza, G., Deserly, K. (2003). *Family guide to the child welfare system*. Washington, DC: National Technical Assistance Center for Children's Mental Health at Georgetown University Center for Child and Human Development. (http://gucchd.georgetown.edu/documents/AFamilysGuideFINAL_WEB_VERSION.pdf)
- Rycus, J. & Hughes, R. (1998). *Field guides to child welfare* (Vol. I – IV). Washington, DC: CWLA Press.
- U.S. Department of Health and Human Services. *AFCARS report #8*. (www.acf.hhs.gov/programs/cb/publications/afcars.htm)
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- U.S. Department of Health and Human Services (2003). *Mandatory reporters of child abuse and neglect*. 2003 Child Abuse and Neglect State Statute Series: Statutes-at-a-Glance. National Clearinghouse on Child Abuse and Neglect Information. (<http://nccanch.acf.hhs.gov/general/legal/statutes/manda.cfm>)
- U.S. Department of Health and Human Services (2003). *Reporting procedures*. 2003 Child Abuse and Neglect State Statute Series: Statutes-at-a-Glance. National Clearinghouse on Child Abuse and Neglect Information. (<http://nccanch.acf.hhs.gov/general/legal/statutes/repproc.cfm>)

The Child Welfare System





National Clearinghouse on Child Abuse and Neglect Information National Adoption Information Clearinghouse



Gateways to Information: Protecting Children and Strengthening Families

You Have the Power to Prevent Child Abuse and Neglect

Introduction

As an individual and as a member of your community, you have the power to prevent child abuse and neglect. Here are some ways to contribute your ounce—or more—of effort to prevention.

Understand the Issues

Understand the Problem. Child abuse and neglect affect children of all ages, races, and incomes. According to the National Child Abuse and Neglect Data System, in 2001, an estimated 903,000 children nationwide were victims of maltreatment. Most experts believe that actual incidents of abuse and neglect are more numerous than statistics indicate.

Understand the Terms. Child abuse and neglect take more than one form. Federal and State laws address four main types of child maltreatment: physical abuse, physical or emotional neglect, sexual abuse, and emotional abuse. Often more than one type of abuse or neglect occurs within families. Some types of maltreatment, such as emotional abuse, are much harder to substantiate than others, such as physical abuse.

Understand the Causes. Most parents don't hurt or neglect their children intentionally. Many were themselves abused or neglected. Very young or inexperienced parents might not know how to take care of their babies or what they can reasonably expect from children at different stages of development. Circumstances that place families under extraordinary stress—for instance, poverty, divorce, sickness, and disability—sometimes take their toll in child maltreatment. Parents who abuse alcohol or other drugs are more likely to abuse or neglect their children.

Get Involved

Support Programs that Support Families. Parent education, community centers, respite care services, and substance abuse treatment programs help to protect children by addressing circumstances that place families at risk for child abuse and neglect. Donate your time or money, if you can.

Report Suspected Child Abuse and Neglect. Some States require everyone to report suspected abuse or neglect; others specify members of certain professions, such as educators and doctors. But whether or not you are mandated by law to report child abuse and neglect, doing so may save a child—and a family. If you suspect a child is being abused or neglected, call the police or your local child welfare agency.

Spread the Word. Help educate others in your community about child abuse and neglect. The resource listed on page 2 can be sources of free materials. Ask if you can leave a stack of brochures at your local public library, recreation or community center, government center, or other public place. You also might make material available at your church, synagogue, mosque, temple, or other faith institutions. Even grocery stores usually have places to distribute community materials.



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Strengthen the Fabric of Your Community. Know your neighbors' names and the names of their children, and make sure they know yours. Give stressed parents a break by offering to watch their children. Volunteer. If you like interacting with children, great, but you do not have to volunteer directly with kids to contribute to prevention. All activities that strengthen communities, such as service to civic clubs and participation on boards and committees, ultimately contribute to the well-being of children.

Be Ready in an Emergency. We've all witnessed the screaming-child-in-the-supermarket scenario. If we are parents, at least once that screaming child has been ours. Most parents take the typical tantrum in stride. But what if you witness a scene—in the supermarket or anywhere else—where you believe a child is being, or is about to be, physically or verbally abused? Responding in these circumstances technically moves beyond prevention to intervention, and intervention is best handled by professionals. Still, if you find yourself in a situation where you believe a child is being or will be abused at that moment, there are steps you can take. Prevent Child Abuse America suggests the following:

- Talk to the adult to get their attention away from the child. Be friendly.
- Say something like, “Children can really wear you out, can’t they?” or “My child has done the same thing.”
- Ask if you can help in any way—could you carry some packages? Play with an older child so the baby can be fed or changed? Call someone on your cell phone?
- If you see a child alone in a public place—for example, unattended in a grocery cart—stay with the child until the parent returns.

Finally—and most important if you are a parent—remember that prevention, like most positive things, begins at home. Take time to re-evaluate your parenting skills. Be honest with yourself—are you yelling at your children a lot or hitting them? Do you enjoy being a parent at least most of the time? If you could benefit from some help with parenting, seek it—getting help when you need it is an essential part of being a good parent. Talk to a professional that you trust; take a parenting class; read a book about child development. Contact the resources below to locate places that parents can get help.

Resources

Parents Anonymous, Inc.

675 W. Foothill Blvd., Suite 220
Claremont, CA 91711
Phone: (909) 621-6184
Fax: (909) 625-6304
E-mail: parentsanonymous@parentsanonymous.org
Web: www.parentsanonymous.org

Parents Anonymous encourages all parents to ask for help early to effectively break the cycle of abuse. Parents Anonymous groups meet in local community centers, churches, schools, housing projects, shelters, and prisons. Parents Anonymous also operates local 24-hour hotlines.

Prevent Child Abuse America

200 S. Michigan Ave., 17th Floor
Chicago, IL 60604-2404
Phone: (800) CHILDREN or (312) 663-3520
Fax: (312) 939-8962
E-mail: mailbox@preventchildabuse.org
Web: <http://preventchildabuse.org>

Prevent Child Abuse America promotes healthy parenting and community involvement as effective strategies for preventing all forms of child abuse. The organization's nationwide network of chapters and local affiliates work to implement direct service programs in hundreds of communities.



Long-Term Consequences of Child Abuse and Neglect

Introduction

An estimated 903,000 children were victims of child abuse or neglect in 2001 (U.S. Department of Health and Human Services, 2003). While physical injuries may or may not be immediately visible, abuse and neglect can have consequences for children, families, and society that last lifetimes, if not generations.

The impact of child abuse and neglect is often discussed in terms of physical, psychological, behavioral, and societal consequences. In reality, however, it is impossible to separate them completely. Physical consequences (such as damage to a child's growing brain) can have psychological implications (cognitive delays or emotional difficulties, for example). Psychological problems often manifest as high-risk behaviors. Depression and anxiety, for example, may make a person more likely to smoke, abuse alcohol or illicit drugs, or overeat. High-risk behaviors, in turn, can lead to long-term physical health problems such as sexually transmitted diseases, cancer, and obesity.

This fact sheet provides an overview of some of the most common physical, psychological, behavioral, and societal consequences of child abuse and neglect, while acknowledging that much crossover among categories exists.

The Federal government has made a considerable investment in research regarding the causes and long-term consequences of child abuse and neglect. These efforts are ongoing; for more information, visit the Web sites listed below.

- ▶ **LONGSCAN** (www.sph.unc.edu/iprc/longscan/) is a consortium of longitudinal research studies on the causes and impact of child abuse and neglect, initiated in 1990 with grants from the National Center on Child Abuse and Neglect.
- ▶ **The National Survey of Child and Adolescent Well-Being (NSCAW)** (www.acf.hhs.gov/programs/core/ongoing_research/afc/wellbeing_intro.html) is a project of the Administration on Children, Youth and Families to describe the child welfare system and the experiences of children and families who come in contact with the system.
- ▶ **The National Institutes of Health Child Abuse and Neglect Working Group** (www.nimh.nih.gov/canwg/canwgsum.cfm) reviews NIH research efforts in child abuse and neglect and coordinates activities with other Federal agencies (Administration for Children and Families, National Institute of Justice, Office of Juvenile Justice and Delinquency Prevention, Department of Education, and Department of Defense).



The Clearinghouses are services of the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services.

Factors Affecting the Consequences of Child Abuse

Not all abused and neglected children will experience long-term consequences. Outcomes of individual cases vary widely and are affected by a combination of factors, including:

- The child's age and developmental status when the abuse or neglect occurred
- The type of abuse (physical abuse, neglect, sexual abuse, etc.)
- Frequency, duration, and severity of abuse
- Relationship between the victim and his or her abuser (Chalk, Gibbons, & Scarupa, 2002).

Researchers also have begun to explore why, given similar conditions, some children experience long-term consequences of abuse and neglect while others emerge relatively unscathed. The ability to cope, and even thrive, following a negative experience is sometimes referred to as "resilience." A number of protective factors may contribute to an abused or neglected child's resilience. These include individual characteristics, such as optimism, self-esteem, intelligence, creativity, humor, and independence. Protective factors can also include the family or social environment, such as a child's access to social support; in particular, a caring adult in the child's life. Community well-being, including neighborhood stability and access to health care, is also a protective factor (Thomlison, 1997).

Physical Health Consequences

The immediate physical effects of abuse or neglect can be relatively minor (bruises or cuts) or severe (broken bones, hemorrhage, or even death). In some cases the physical effects are temporary; however, the pain and suffering they cause a child should not be discounted. Meanwhile, the long-term impact of child abuse and neglect on physical health is just beginning to be explored. Below are some outcomes researchers have identified:

► **Shaken baby syndrome.** The immediate effects of shaking a baby (a common form of child abuse in infants) can include vomiting, concussion, respiratory distress, seizures, and death. Long-term consequences can include blindness, learning disabilities, mental retardation, cerebral palsy, or paralysis (Conway, 1998).

► **Impaired brain development.** Child abuse and neglect have been shown, in some cases, to cause important regions of the brain to fail to form properly, resulting in impaired physical, mental, and emotional development (Perry, 2002; Shore, 1997). In other cases, the stress of chronic abuse causes a "hyperarousal" response by certain areas of the brain, which may result in hyperactivity, sleep disturbances, and anxiety, as well as increased vulnerability to post-traumatic stress disorder, attention deficit/hyperactivity disorder, conduct disorder, and learning and memory difficulties (Perry, 2001; Dallam, 2001).

► **Poor physical health.** A study of 700 children who had been in foster care for 1 year found more than one-quarter of the children had some kind of recurring physical or mental health problem (National Survey of Child and Adolescent Well-Being). A study of 9,500 HMO participants showed a relationship between various forms of household dysfunction (including childhood abuse) and long-term health problems such as sexually transmitted diseases, heart disease, cancer, chronic lung disease, skeletal fractures,

Psychological Consequences

and liver disease (Hillis, Anda, Felitti, Nordenberg, & Marchbanks, 2000; Felitti, Anda, Nordenberg, Williamson, Spitz, Edwards, Koss, & Marks, 1998).

The immediate emotional effects of abuse and neglect— isolation, fear, and an inability to trust— can translate into lifelong consequences including low self-esteem, depression, and relationship difficulties. Researchers have identified links between child abuse and neglect and the following:

► **Poor mental and emotional health.** In one long-term study, as many as 80 percent of young adults who had been abused met the diagnostic criteria for at least one psychiatric disorder at age 21. These young adults exhibited many problems, including depression, anxiety, eating disorders, and suicide attempts (Silverman, Reinherz, & Giaconia, 1996). Other psychological and emotional conditions associated with abuse and neglect include panic disorder, dissociative disorders, attention-deficit/hyperactivity disorder, post-traumatic stress disorder, and reactive attachment disorder (Teicher, 2000).

► **Cognitive difficulties.** The National Survey of Child and Adolescent Well-Being recently found children placed in out-of-home care due to abuse or neglect tended to score lower than the general population on measures of cognitive capacity, language development, and academic achievement (2003).

► **Social difficulties.** Children who are abused and neglected by caretakers often do not form secure attachments to them. These early attachment difficulties can lead to later difficulties in relationships with other adults as well as with peers (Morrison, Frank, Holland, & Kates, 1999).

Behavioral Consequences

Not all victims of child abuse and neglect will experience behavioral consequences; however, child abuse and neglect appear to make the following more likely:

► **Difficulties during adolescence.** Studies have found abused and neglected children to be at least 25 percent more likely to experience problems such as delinquency, teen pregnancy, low academic achievement, drug use, and mental health problems (Kelley et al., 1997).

► **Juvenile delinquency and adult criminality.** A National Institute of Justice study indicated being abused or neglected as a child increased the likelihood of arrest as a juvenile by 59 percent. Abuse and neglect increased the likelihood of adult criminal behavior by 28 percent and violent crime by 30 percent (Widom & Maxfield, 2001).

► **Alcohol and other drug abuse.** Research consistently reflects an increased likelihood that abused and neglected children will smoke cigarettes, abuse alcohol, or take illicit drugs. According to the National Institute on Drug Abuse, as many as two-thirds of people in drug treatment programs reported being abused as children (2000).

Societal Consequences

► **Abusive behavior.** Abusive parents often have experienced abuse during their own childhoods. It is estimated approximately one-third of abused and neglected children will eventually victimize their own children (Prevent Child Abuse New York, 2001).

While child abuse and neglect almost always occur within the family, the impact does not end there. Society as a whole pays a price for child abuse and neglect, in terms of both direct and indirect costs.

► **Direct costs.** Direct costs include those associated with maintaining a child welfare system to investigate allegations of child abuse and neglect, as well as expenditures by the judicial, law enforcement, health, and mental health systems to respond to and treat abused children and their families. A 2001 report by Prevent Child Abuse America estimates these costs at \$24 billion per year.

► **Indirect costs.** Indirect costs represent the long-term economic consequences of child abuse and neglect. These include juvenile and adult criminal activity, mental illness, substance abuse, and domestic violence. They can also include loss of productivity due to unemployment and underemployment, the cost of special education services, and increased use of the health care system. Prevent Child Abuse America recently estimated these costs at more than \$69 billion per year (2001).

Summary

Much research has been done about the possible consequences of child abuse and neglect. The effects vary depending on the circumstances of the abuse or neglect, personal characteristics of the child, and the child's environment. Consequences may be mild or severe; disappear after a short period or last a lifetime; and affect the child physically, psychologically, behaviorally, or in some combination of all three ways. Ultimately, due to related costs to public entities such as the health care, human services, and educational systems, abuse and neglect impact not just the child and family, but society as a whole.

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**Additional
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Child Maltreatment 2002: Summary of Key Findings

This fact sheet presents excerpts from *Child Maltreatment 2002*, a report based on data submissions by the States for calendar year 2002. The National Child Abuse and Neglect Data System was developed by the Children's Bureau of the U.S. Department of Human Services in partnership with the States to collect annual statistics on child maltreatment from State child protective services (CPS) agencies.¹

The press release announcing these data is available on the U.S. Department of Health and Human Services website at www.hhs.gov/news/press/2004pres/20040401.html. The *Child Maltreatment 2002* report is available on the Children's Bureau website at www.acf.hhs.gov/programs/cb/publications/cmreports.htm. Limited print copies are available from the National Clearinghouse on Child Abuse and Neglect Information.

Victims

An estimated 896,000 children were determined to be victims of child abuse or neglect in 2002. The rate of victimization per 1,000 children in the national population has dropped from 13.4 children in 1990 to 12.3 children in 2002.

More than 60 percent of child victims experienced neglect. Almost 20 percent were physically abused; 10 percent were sexually abused; and 7 percent were emotionally maltreated. In addition, almost 20 percent were associated with "other" types of maltreatment based on specific State laws and policies.²

Children ages birth to 3 years had the highest rates of victimization at 16.0 per 1,000 children. Girls were slightly more likely to be victims than boys.

American Indian or Alaska Native and African-American children had the highest rates of victimization when compared to their national population. While the rate of White victims of child abuse or neglect was 10.7 per 1,000 children of the same race, the rate for American Indian or Alaska Natives was 21.7 per 1,000 children and for African-Americans 20.2 per 1,000 children.

Reports of Child Abuse and Neglect

In 2002, an estimated total of 2.6 million referrals concerning the welfare of approximately 4.5 million children were made to CPS agencies throughout the United States. Of these, approximately two-thirds (an estimated 1.8 million) were accepted for investigation or assessment; one-third were not accepted.

¹ CPS agencies respond to referrals regarding harm to children caused by *parents* or *primary caregivers*. Incidents of harm to children caused by other people, such as acquaintances and strangers, are not included in these data.

² These numbers add up to more than 100 percent because some children were victims of more than one type of maltreatment.



More than one-half (56.5 percent) of all reports that alleged child abuse or neglect were made by such professionals as educators, law enforcement and legal personnel, social services personnel, medical personnel, mental health personnel, child daycare providers, and foster care providers. Such nonprofessionals as friends, neighbors, and relatives submitted approximately 43.6 percent of reports.

Approximately 30 percent of the reports included at least one child who was found to be a victim of abuse or neglect. Sixty-one percent of the reports were found to be unsubstantiated (including intentionally false); the remaining reports were closed for additional reasons.

Fatalities

Child fatalities are the most tragic consequence of maltreatment. For 2002, an estimated 1,400 children died due to abuse or neglect. Three-quarters (76 percent) of children who were killed were younger than 4 years old; 12 percent were 4 to 7 years old; 6 percent were 8 to 11 years old; and 6 percent were 12 to 17 years old.

Infant boys (younger than 1 year old) had the highest rate of fatalities, nearly 19 deaths per 100,000 boys of the same age in the national population. Infant girls (younger than 1 year old) had a rate of 12 deaths per 100,000. The overall rate of child fatalities was 2 deaths per 100,000 children. One-third of child fatalities were attributed to neglect. Physical abuse and sexual abuse also were major contributors to fatalities.

Perpetrators

More than 80 percent of perpetrators were parents. Other relatives accounted for 7 percent, and unmarried partners of parents accounted for 3 percent of perpetrators. The remaining perpetrators include persons with other (camp counselor, school employee, etc.) or unknown relationships to the child victims.

Female perpetrators, who were mostly mothers, were typically younger than male perpetrators, who were mostly fathers. Women also comprised a larger percentage of all perpetrators than men, 58 percent compared to 42 percent.

Of all parents who were perpetrators, less than 3 percent were associated with sexual abuse. Of all perpetrators of sexual abuse, nearly 29 percent were other relatives, and nearly one-quarter were in nonrelative or nonchildcaring roles.

Services

Approximately 59 percent of victims and 31 percent of nonvictims received services as a result of an investigation or assessment. Additional analyses indicated that children who were prior victims of maltreatment were more than 80 percent more likely to receive services than first-time victims. Additionally, children with multiple types of maltreatment were more than 80 percent more likely to receive services than children with only one type of recorded maltreatment.

Services included both in-home and foster care services. Almost one-fifth of child victims were placed in foster care. About 4 percent of nonvictims also experienced a removal—usually a short-term placement during the course of the investigation.



National Clearinghouse on Child Abuse and Neglect Information National Adoption Information Clearinghouse



Gateways to Information: Protecting Children and Strengthening Families

Child Abuse Reporting Numbers

Each State designates specific agencies to receive and investigate reports of suspected child abuse and neglect. Typically, this responsibility is carried out by child protective services (CPS) within a child welfare agency (for example, Department of Social Services, Department of Human Services, or Division of Child and Family Services). In some States, police departments may also receive reports of child abuse or neglect. For more information or assistance with reporting, please call Childhelp USA®, 1-800-4-A-CHILD® (800-422-4453), or your local CPS agency.

In most cases, the toll-free numbers listed below are only accessible from within the State listed. If calling from out-of-State, use the local (toll) number listed or call Childhelp USA® for assistance.

Alabama

Local: (334) 242-9500

Alaska

Toll-Free: (800) 478-4444

Arizona

Toll-Free: (888) SOS-CHILD (888-767-2445)

Arkansas

Toll-Free: (800) 482-5964

California

Local: (916) 445-2771

Colorado

Contact local agency or Childhelp USA for assistance.

Connecticut

Toll-Free: (800) 842-2288

TDD: (800) 624-5518

Delaware

Toll-Free: (800) 292-9582

Local: (302) 577-6550

District of Columbia

Toll-Free: (877) 671-SAFE (877-671-7233)

Local: (202) 671-7233

Florida

Toll-Free: (800) 96-ABUSE (800-962-2873)

Georgia

Contact local agency or Childhelp USA for assistance.

Hawaii

Contact local agency or Childhelp USA for assistance.

Idaho

Toll-Free: (800) 926-2588

Illinois

Toll-Free: (800) 252-2873

Local: (217) 785-4020

Indiana

Toll-Free: (800) 800-5556

Iowa

Toll-Free: (800) 362-2178

Local: (515) 281-3240

Kansas

Toll-Free: (800) 922-5330

Local: (785) 296-0044

Kentucky

Toll-Free: (800) 752-6200

Local: (502) 595-4550

Louisiana

Local: (225) 342-6832

Maine

Toll-Free: (800) 452-1999

Local: (207) 287-2983

Maryland

Toll-Free: (800) 332-6347



Massachusetts

Toll-Free: (800) 792-5200
Local: (617) 232-4882

Michigan

Toll-Free: (800) 942-4357
Local: (517) 373-3572

Minnesota

Local: (651) 291-0211

Mississippi

Toll-Free: (800) 222-8000
Local: (601) 359-4991

Missouri

Toll-Free: (800) 392-3738
Local: (573) 751-3448

Montana

Toll-Free: (866) 820-KIDS (866-820-5437)
Local: (406) 444-5900

Nebraska

Toll-Free: (800) 652-1999
Local: (402) 595-1324

Nevada

Toll-Free: (800) 992-5757
Local: (775) 684-4400

New Hampshire

Toll-Free: (800) 894-5533
Local: (603) 271-6556

New Jersey

Toll-Free: (800) 792-8610
TDD: (800) 835-5510

New Mexico

Toll-Free: (800) 797-3260
Local: (505) 841-6100

New York

Toll-Free: (800) 342-3720
Local: (518) 474-8740
TDD: (800) 369-2437

North Carolina

Contact local agency or Childhelp USA for assistance.

North Dakota

Local: (701) 328-2316

Ohio

Contact local agency or Childhelp USA for assistance.

Oklahoma

Toll-Free: (800) 522-3511

Oregon

Toll-Free: (800) 854-3508; Ext. 2402
Local: (503) 378-6704
TDD: (503) 378-5414

Pennsylvania

Toll-Free: (800) 932-0313
Local: (717) 783-8744

Rhode Island

Toll-Free: (800) RI-CHILD (800-742-4453)

South Carolina

Local: (803) 898-7318

South Dakota

Local: (605) 773-3227

Tennessee

Toll-Free: (877) 237-0004

Texas

Toll-Free: (800) 252-5400
Local: (512) 834-3784
After hours: (512) 832-2020

Utah

Toll-Free: (800) 678-9399

Vermont

Toll-Free: (800) 649-5285
After hours: (802) 863-7533
During business hours, contact local agency or Childhelp USA for assistance.

Virginia

Toll-Free: (800) 552-7096
Local: (804) 786-8536

Washington

Toll-Free: (866) END-HARM (866-363-4276)

West Virginia

Toll-Free: (800) 352-6513

Wisconsin

Local: (608) 266-3036

Wyoming

Contact local agency or Childhelp USA for assistance.



National Clearinghouse on Child Abuse and Neglect Information National Adoption Information Clearinghouse



Gateways to Information: Protecting Children and Strengthening Families

Toll-Free Crisis Hotline Numbers

Child Abuse

Childhelp USA

Phone: 800-4-A-CHILD (800-422-4453)

Who They Help: Child abuse victims, parents, concerned individuals

Youth Crisis Hotline

Phone: 800-HIT-HOME (800-448-4663)

Who They Help: Individuals reporting child abuse, youth ages 12 to 18

Family Violence

National Domestic Violence Hotline

Phone: 800-799-SAFE (800-799-7233)

Who They Help: Children, parents, friends, offenders

Missing/ Abducted Children

Child Find of America

Phone: 800-I-AM-LOST (800-426-5678)

Who They Help: Parents reporting lost or abducted children

Child Find of America – Mediation

Phone: 800-A-WAY-OUT (800-292-9688)

Who They Help: Parents (abduction, prevention, child custody issues)

Child Quest International Sighting Line

Phone: 888-818-HOPE (888-818-4673)

Who They Help: Individuals with missing child emergencies and/or sighting information; victims of abduction

National Center for Missing and Exploited Children

Phone: 800-THE-LOST (800-843-5678)

Who They Help: Families and professionals (social services, law enforcement)

Operation Lookout National Center for Missing Youth

Phone: 800-LOOKOUT (800-566-5688)

Who They Help: Individuals with missing child emergencies and/or sighting information (for children ages 18 and under)

Rape/Incest

Rape and Incest National Network

Phone: 800-656-HOPE; Ext. 1 (800-656-4673; Ext. 1)

Who They Help: Rape and incest victims, media, policy makers, concerned individuals



**Relief for
Caregivers**

National Respite Locator Service

Phone: 800-677-1116

Who They Help: Parents, caregivers, and professionals caring for children and adults with disabilities, terminal illnesses, or those at risk of abuse or neglect

**Youth in
Trouble/
Runaways**

Girls and Boys Town

Phone: 800-448-3000

Who They Help: Abused, abandoned, and neglected girls and boys; parents; family members

Covenant House Hotline

Phone: 800-999-9999

Who They Help: Problem teens and homeless runaways (ages 21 and under), family members, youth substance abusers

National Referral Network for Kids in Crisis

Phone: 800-KID-SAVE (800-543-7283)

Who They Help: Professionals, parents, adolescents

National Runaway Switchboard

Phone: 800-621-4000

Who They Help: Runaway and homeless youth, families

National Youth Crisis Hotline (Youth Development International)

Phone: 800-HIT-HOME (800-448-4663)

Who They Help: Individuals wishing to obtain help for runaways; youth (ages 12 to 18) experiencing drug abuse, teen pregnancy, homelessness, prostitution, or physical, emotional, or sexual abuse

**Crime
Victims**

National Center for Victims of Crime

Phone: 800-FYI-CALL (800-394-2255)

Who They Help: Families, communities, and individuals harmed by crime



National Clearinghouse on Child Abuse and Neglect Information National Adoption Information Clearinghouse



Gateways to Information: Protecting Children and Strengthening Families

National Organizations with Information on Child Abuse and Neglect

The following is a selected list of national organizations that provide information for the general public on child abuse and neglect. Inclusion is for information purposes only and does not constitute an endorsement by the Clearinghouse or the Children's Bureau. To find additional national organizations, search the Clearinghouse database at <http://nccanch.acf.hhs.gov/general/organizations>.

American Humane Association (AHA)

Child Welfare Division
63 Inverness Dr. East
Englewood, CO, 80112-5117
Phone: (303) 792-9900
Phone: (703) 294-6690
Fax: (303) 792-5333
Toll-Free: (866) 242-1877
Email: children@americanhumane.org
URL: <http://www.americanhumane.org>

The American Humane Association's mission is preventing cruelty, abuse, neglect, and exploitation of children and animals. AHA's Child Welfare Division has worked for many years to improve the public and private child welfare systems so they can respond more effectively to the needs of abused and neglected children. AHA is a national association of child protection programs, agencies, and individuals, and its membership includes State and local social service agencies, child advocates, courts, hospitals, schools, mental health professionals, and concerned citizens in every State. AHA information assists professionals and citizens in making informed decisions about how to help children and families in crisis. The association also develops resources and programs which help communities and citizens prevent child abuse.

American Public Human Services Association (APHSA)

810 First Street NE, Suite 500
Washington, DC, 20002
Phone: (202) 682-0100
Fax: (202) 289-6555
Email: jpatterson@aphsa.org
URL: <http://www.aphsa.org>

The American Public Human Services Association is an organization of individuals and agencies concerned with human services. APHSA works to educate members of Congress, the media, and the broader public on what is happening in the States in regard to welfare, child welfare, health care reform, and other issues involving families. APHSA's mission is to promote, develop, and implement public human service policies that improve the health and well-being of families and children. As a major affiliate of APHSA, the National Association of Public Child Welfare Administrators (NAPCWA) represents administrators of State and local public child welfare agencies working to meet the goals outlined in APHSA's mission statement.

Chapin Hall Center for Children

1313 East 60th Street
Chicago, IL, 60637
Phone: (773) 753-5900
Fax: (773) 753-5940
Email: webmaster@chapinhall.org
URL: <http://www.chapin.uchicago.edu>

Chapin Hall is a research and development center focusing on policies, practices, and programs affecting children and the families and communities in which they live. The Center devotes special attention to children facing significant problems such as abuse or neglect, poverty, and mental or physical illnesses, and to the service systems designed to address these problems.

National Clearinghouse on Child Abuse and Neglect Information

330 C St., SW
Washington, DC 20447
(703) 385-7565 or (800) FYI-3366
nccanch@caliber.com
<http://nccanch.acf.hhs.gov/>

The Clearinghouses are services of
The Children's Bureau
Administration for Children and Families
U.S. Department of Health and Human Services



Child Trends

4301 Connecticut Avenue NW
Suite 100
Washington, DC, 20008
Phone: (202) 362-5580
Phone: (202) 362-5533
Email: amoores@childtrends.org (research inquiries)
URL: <http://www.childtrends.org>

Child Trends is a research organization dedicated to studying children, youth, and families through research, data collection, and data analyses. Among the major areas of research and evaluation are the effects of welfare and poverty on children; issues related to parenting, family structure and fatherhood; and major indicators of children's health and well-being.

Child Welfare League of America (CWLA)

Headquarters
440 First Street NW
Third Floor
Washington, DC, 20001-2085
Phone: (202) 638-2952
Fax: (202) 638-4004
Email: webweaver@cwla.org
URL: <http://www.cwla.org/>

The Child Welfare League of America is the oldest national organization serving vulnerable children, youth, and their families. CWLA provides training, consultation, and technical assistance to child welfare professionals and agencies while also educating the public on emerging issues that affect abused, neglected, and at-risk children. Through its publications, conferences, and teleconferences, CWLA shares information on emerging trends, specific topics in child welfare practice (family foster care, kinship care, adoption, positive youth development), and Federal and State policies.

Childhelp USA

15757 North 78th Street
Scottsdale, AZ, 85260
Phone: (480) 922-8212
Fax: (480) 922-7061
TDD: (800) 2-A-CHILD
Toll-Free: (800) 4-A-CHILD
URL: <http://www.childhelpusa.org>

Childhelp USA is dedicated to meeting the physical, emotional, educational, and spiritual needs of abused and neglected children by focusing its efforts and resources in the areas of treatment, prevention, and research. Its programs and services include the operation of the Childhelp USA National Child Abuse Hotline, residential treatment facilities for severely abused children, child advocacy centers that reduce the trauma of child abuse victims during the interview and examination process, group homes, foster family selection, training and certification, Head Start programs for at-risk children, child abuse prevention programs, and community outreach.

Children's Defense Fund (CDF)

National Headquarters
25 E Street NW
Washington, DC, 20001
Phone: (202) 628-8787
Email: cdinfo@childrensdefense.org
URL: <http://www.childrensdefense.org>

The Children's Defense Fund focuses on key issues affecting the well-being of children by helping develop, implement, and monitor State and Federal policies. CDF gathers and disseminates data on children, promotes public education, provides technical assistance to State and local child advocates, and pursues an annual Federal legislative agenda.

Kempe Children's Center

1825 Marion Street
Denver, CO, 80218
Phone: (303) 864-5252
Email: kempe@kempecenter.org
URL: <http://www.kempecenter.org>

The Kempe Children's Center is a clinically based resource providing training, consultation, program development and evaluation, and research in child abuse and neglect. The Center is committed to multidisciplinary approaches to the prevention, identification, and treatment of all forms of abuse and neglect.

National Clearinghouse on Child Abuse and Neglect Information

330 C Street SW
Washington, DC, 20447
Phone: (703) 385-7565
Fax: (703) 385-3206
Toll-Free: (800) FYI-3366
Email: nccanch@caliber.com
URL: <http://nccanch.acf.hhs.gov>

The National Clearinghouse on Child Abuse and Neglect Information, a service of the Children's Bureau, helps professionals locate information on child abuse and neglect and related child welfare issues. Among its resources, the Clearinghouse offers a bibliographic database of child maltreatment and related child welfare materials, summaries of State laws concerned with child abuse and neglect and child welfare, fact sheets, resource lists, bulletins, and other publications. Jointly with the National Adoption Information Clearinghouse (NAIC), the National Clearinghouse on Child Abuse and Neglect Information publishes the Children's Bureau Express, an online digest of news and resources for professionals concerned with child maltreatment, child welfare, and adoption.

National Foster Parent Association (NFPA)

7512 Stanich Avenue
No. 6
Gig Harbor, WA, 98335
Phone: (253) 853-4000
Fax: (253) 853-4001
Toll-Free: (800) 557-5238
Email: info@NFPAINC.org
URL: <http://www.nfpainc.org>

The National Foster Parent Association is a nonprofit volunteer organization established in 1972. The Association's purpose is to bring together foster parents, agency representatives, and people in the community to improve the foster care system. NFPA promotes mutual coordination, cooperation, and communication among foster parents, foster parent associations, child care agencies, and other child advocates in an effort to encourage the recruitment and retention of foster parents and to inform the Association's membership and the general public of particular children needing foster care placement.

National Indian Child Welfare Association (NICWA)

5100 SW Macadam Avenue
Suite 300
Portland, OR, 97239
Phone: (503) 222-4044
Fax: (503) 222-4007
Email: info@nicwa.org
URL: <http://www.nicwa.org>

NICWA functions as the only Native American organization focused specifically on issues of child abuse and neglect and tribal capacity to prevent and respond effectively to these problems. They provide workshops and training programs, using one or more of over 25 culturally appropriate NICWA developed resources, including training materials, curricula, and books. They also offer technical assistance and training on child care, family preservation, and substance abuse.

Prevent Child Abuse America

200 South Michigan Avenue
17th Floor
Chicago, IL, 60604-2404
Phone: (312) 663-3520
Fax: (312) 939-8962
Email: mailbox@preventchildabuse.org
URL: <http://www.preventchildabuse.org/>

Prevent Child Abuse America is committed to promoting legislation, policies, and programs that help prevent child abuse and neglect, support healthy childhood development, and strengthen families. Working with chapters in 37 States and the District of Columbia, Prevent Child Abuse America provides leadership to promote and implement prevention efforts at the national and local levels.

Shaken Baby Syndrome Prevention Plus (SBS Prevention Plus)

PO Box 205
Groveport, OH, 43125-0205
Phone: (614) 836-8360
Fax: (614) 836-8359
Toll-Free: (800) 858-5222
Email: sbsp@aol.com
URL: <http://www.sbsplus.com>

Shaken Baby Syndrome Prevention Plus develops, studies, and distributes informational materials that discourage Shaken Baby Syndrome and other physical child abuse and promote positive parenting and child care.



National Clearinghouse on Child Abuse and Neglect Information National Adoption Information Clearinghouse



Gateways to Information: Protecting Children and Strengthening Families

ABOUT THE CLEARINGHOUSES

OUR MISSION

The Clearinghouses connect professionals and concerned citizens to practical, timely, and essential information on programs, research, legislation, and statistics to promote the safety, permanency, and well-being of children and families.

The **National Clearinghouse on Child Abuse and Neglect Information** and the **National Adoption Information Clearinghouse** are federally funded services of the Children's Bureau, U.S. Department of Health and Human Services. The Clearinghouses provide a wide range of print and online information on child abuse, child welfare, and adoption, representing a full continuum of child welfare issues, ranging from prevention to permanency.

The Clearinghouses connect child welfare administrators, professionals, and others with information, research, and resources to:

- Promote safety, permanency, and well-being outcomes for children and youth
- Improve the delivery and evaluation of services
- Enhance the administration of public and private child welfare agencies and organizations

Clearinghouse Services

Personalized customer responses to more than 14,000 telephone and email inquiries each year.

Print and electronic document dissemination, including more than 140,000 copies of print products and 988,000 copies of electronic products created by the Children's Bureau and other Federal agencies, their grantees, and the Clearinghouses.

New publications, including factsheets for families, bulletins for professionals, resource lists, summaries of State laws, and syntheses of recent research.

Searchable online databases for information on child maltreatment, child welfare, and adoption, including 45,000 abstracts covering journal articles, reports, books, dissertations, and videotapes; Federal and State legislation; licensed adoption agencies; and conferences.

Children's Bureau Express, a monthly online digest available through free subscription and on the web, providing current information to professionals in the field, as well as access to previous issues. <http://cbexpress.acf.hhs.gov>

E-lert!, an electronic product alert available via a free monthly email service that alerts subscribers to new publications and resources distributed by the Clearinghouses. <http://nccanch.acf.hhs.gov/admin/subscribe.cfm>



U.S. Department of Health
and Human Services
Administration for Children
and Families
Administration on Children,
Youth and Families
Children's Bureau

Clearinghouse Websites

Each Clearinghouse has a website recently redesigned to feature clear information organized by topic or audience, dynamic database search capabilities, and resources for both professionals and families. Resources available through the websites can be downloaded, ordered online, or ordered by email or telephone through customer services.

The lists below highlight some of the current features of each website.

NATIONAL CLEARINGHOUSE ON CHILD ABUSE AND NEGLECT INFORMATION

330 C Street, SW
Washington, DC 20447
(800) 394-3366 or (703) 385-7565
Fax: (703) 385-3206
Email: nccanch@caliber.com

Website: <http://nccanch.acf.hhs.gov>

Web Highlights

Preventing Child Abuse and Neglect, including resources and information on Child Abuse Prevention month:
<http://nccanch.acf.hhs.gov/topics/prevention>

Legal issues, including Federal and State laws:
<http://nccanch.acf.hhs.gov/general/legal>

Workforce and Training Resources, including curricula, publications, training organizations, and university degree programs:
<http://nccanch.acf.hhs.gov/profess/workforce>

Spanish-language publications:
<http://nccanch.acf.hhs.gov/general/spanish>

Systems of Care, including how to build Systems of Care to enhance service array and collaboration in local communities:
<http://nccanch.acf.hhs.gov/profess/systems>

Issues associated with child abuse and neglect, including domestic violence, substance abuse, and mental health issues:
<http://nccanch.acf.hhs.gov/topics/issues>

Clearinghouse Library Search:
<http://basis1.calib.com/BASIS/chdocs/docs/canweb/SF>

NATIONAL ADOPTION INFORMATION CLEARINGHOUSE

330 C Street, SW
Washington, DC 20447
(888) 251-0075 or (703) 352-3488
Fax: (703) 385-3206
Email: naic@caliber.com

Website: <http://naic.acf.hhs.gov>

Web Highlights

National Adoption Directory, including State-by-State listings of adoption agencies, State officials and services, and support groups:
<http://naic.acf.hhs.gov/general/nad>

National Adoption Month, promoting adoption of children from foster care:
<http://naic.acf.hhs.gov/general/adoptmonth>

Legal issues, including Federal and State laws:
<http://naic.acf.hhs.gov/general/legal>

What Works in Adoption, including information for professionals on promising practices:
<http://naic.acf.hhs.gov/profess/admin/works>

Resources for Parents, including information for prospective and adoptive parents:
<http://naic.acf.hhs.gov/parents>

Statistics and Research, including information on adoption trends:
<http://naic.acf.hhs.gov/profess/admin/stats>

Clearinghouse Library Search:
<http://basis1.calib.com/BASIS/chdocs/docs/naicweb/SF>