**The professional’s role**

**Materials Needed**

* **Handout B-1 “The Professional’s Role” and Teacher’s Key**

Distribute **Handout B-1.**  Give time for each participant to write down the potential signs of abuse and neglect. We have all heard stories of people who have been questioned regarding a child’s injury or condition. For example, a father takes his three-week old infant to the emergency room with an injury. The ER physician diagnoses a spiral fracture of the leg. But because the father cannot explain the injury, and such fractures are *usually* the result of physical trauma, the physician contacts CPS to file a report of suspected abuse. The father is shocked and maintains his innocence. Facilitate a short discussion on the potentially conflicting roles a professional carries out:

* Identifying children who are neglected or abused.
* Protecting children from any type of harm.
* Establishing trusting relationships with family members.

**Handout B-1**

**The Professional’s Role**

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; 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.

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

**The Child:**

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**Parent or other Adult Caregiver:**

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**The Parent and Child Together:**

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**The Professional’s Role**

**Teacher’s Key**

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; 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.

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

**The Child:**

* Shows sudden changes in behavior or performance
* Has not received help for physical or medical problems brought to the parent’s 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
* Has unexplained burns, bites, bruises, broken bones or black eyes
* Offers conflicting explanations as to how the injury occurred
* Has fading bruises or other marks noticeable after an absence from school
* Is 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

**The Parent or other Adult Caregiver:**

* 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 providers 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
* 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

**The Parent and Child Together:**

* Rarely touch or look at each other
* Consider their relationship entirely negative