



UNIVERSITY OF
ILLINOIS
URBANA - CHAMPAIGN

WEEK TWO: ASSESSMENTS, SCREENING, AND COMMUNICATION STRATEGIES

THIS WEEK ADDRESSES HOW TO REPORT SUSPECTED CHILD ABUSE, HOW TO ASSESS FOR TRAUMA, AND HOW TO COMMUNICATE WITH PEOPLE WHO HAVE SURVIVED MALTREATMENT AND TRAUMA

WHO, WHAT, WHEN, HOW AND WHY OF REPORTING SUSPECTED CHILD ABUSE IN PA.

- Review the information and videos available through this link provided by Penn State Hershey Medical School:
- <https://lookoutforchildabuse.org/>
- Review each module: There are multiple links for each module. To return to the main page, click the “Look out for Child Abuse” link at the top of any page.

WHAT MUST PROVIDERS DO?

IF YOU CAN ANSWER THESE QUESTIONS, YOU WILL DO WELL ON QUIZ AND ASSIGNMENT

- Many human service professionals, including those who work in health care settings and in schools, universities, among others, are mandated to report suspected child abuse.
- As you access the “Look Out for Child Abuse” website and review the training material, make sure you can answer these questions:
- What are the 16 categories of legally mandated reporters in PA?
- Summarize the steps a mandated reporter must take when child abuse is suspected.
- Review the legal FAQs. What is excluded from the definition of child abuse?

IF YOU CAN ANSWER THESE QUESTIONS, YOU WILL DO WELL ON THE QUIZ

- Read pages 2-3 and p. 62 of the [Child Welfare report on Definitions of abuse and maltreatment](#), answer the following questions:
- What is CAPTA? (p. 2)
- What is the CAPTA definition of abuse? (p.2)
- What are the types of maltreatment? (pp. 2-3)
- How does PA define abuse for each type (p. 62)
- Read the summary report pp. viii – xii of the Child Maltreatment 2015 Report, answer the following questions:
 - What is the most common type of maltreatment?
 - True/False: Children aged 3-6 are at highest risk for maltreatment
 - Who is most likely to report?
 - Who is most likely to perpetrate?

IF YOU CAN ANSWER THESE QUESTIONS, YOU WILL DO WELL ON THE QUIZ AND ASSIGNMENT

- Read the article by [Wolfe & Mclsaac \(2011\)](#) “Distinguishing Poor Parenting and Child Emotional Maltreatment”.
- What is the optimal parenting style for instilling positive social development? What are the two dimensions of this style of parenting?
- Describe two styles of negative or dysfunctional parenting and explain why these are considered “poor” parenting.
- What is “relational aggression”? What does this kind of parent-child interaction lead to later in life?

SCREENING AND ASSESSING FOR MALTREATMENT AND TRAUMA

- Review the article by Strand, et al (2005) *Trauma Screening and Assessment tools for Children and Adolescents*.
- Identify 3 Instruments described in the article. Pay attention to the **description of the instrument, and for whom it is intended**.
- Skim over all the information you don't understand. I can explain in class, and you don't need to understand the psychometrics (at least not for this class).

RESPOND TO QUESTIONS FOLLOWING EACH CASE VIGNETTE AND SUBMIT TO DROP BOX.

- I recommend waiting to submit your responses to case studies **AFTER** we meet as a class to discuss. These are difficult to process on your own. Focus on readings, videos, links, and validation assignment to do on your own. Case studies will be our focus of class meeting this week.
- Submit your responses to questions following each vignette in the Case Vignette Drop Box
- For each case, identify if the case reflects maltreatment, or poor parenting? Explain your thoughts for each one. If maltreatment, identify the category. Would you report to CS for each case?

CASE VIGNETTE I

SCHOOL PERSONNEL

- You are a school counselor or teacher who has several meetings with a 10 y.o. boy and his father about some behavioral issues that have surfaced in the classroom and on the playground. Specifically, the boy has been reported using swear language and pushing some of the other kids on the playground. One time he stole a cookie from another kid at lunch. In the course of the meetings with the father and son, you observe the father berating his son for his behavior; a direct quote from the father to the son: “Well, I’m not surprised to learn you getting into trouble. You been trouble all your life.” You also notice the boy is wearing long sleeved shirts and pants on a hot day when the other kids are wearing shorts and short sleeves. When you ask about this, the boy responds this was all that was clean, his other clothes were dirty. You notice the long sleeved shirt and pants don’t look that clean to you. In the course of your conversations with, and observations of the father, you notice he has limited language skills, and at times has difficulty following the conversation. He seems to struggle to understand some basic questions you have about home life. You learn from your principle that other teachers suspect the father of having low I.Q. and a developmental disability.
- What are the ethical dilemmas to navigate? What specific steps would you take?

CASE VIGNETTE 2: COMMUNITY AGENCY OR CHILD PROTECTIVE SERVICES

You are working with a family of four: your identified client is Joshua, aged 7; he lives with his biological mother, Jasmin, 40 years old; Jasmin's sister, Gabrielle, 44 years old, and Gabrielle's son, and Joshua's cousin, Loius, who is 16. During the intake session you noticed a lot of tension in the family. It appeared that Jasmin and Gabrielle were hostile toward each other. When you asked about their relationship, they were resistant and stated, "We just have a lot of issues with each other. Typical sister issues". During the third session, the tension was still apparent; however, you were able to facilitate an activity with the family in which they worked on their communication skills. The family enjoyed the activity and said they plan to utilize open and honest communication outside of counseling. After the session, you received a call from Jasmin. She was infuriated and upset as she shared that Gabrielle was hiding a secret from her. Before sharing the secret, Jasmine told the story from the beginning in which she peered into her son's bedroom to find Louis touching the private parts of Joshua. Jasmine said she then hit Louis repeatedly using a belt, a book, and anything else she could "get her hands on". Jasmine then explained that Gabrielle walked into the room exclaiming she knew Louis was touching Joshua for the past three months. Jasmin tells you that Gabrielle never told Louis that this was inappropriate behavior, rather she chose to ignore the issue.

What specific steps would you take (remember, you are a PA mandated reporter)?


Who in this case would be considered the person who harmed a child? Are there more than one in this case?

CASE VIGNETTE 3 SUBSTANCE ABUSE COUNSELOR/CASE WORKER

- You are a corrections counselor working with inmates who have been sentenced to complete jail time due to drug offenses. Your clients are all mandated to receive substance abuse counseling as part of their sentence. You work for the corrections agency and have developed a good rapport with Jessie, one of your clients, a 36 y.o female. Jessie has had a difficult life and has limited support for herself and her three kids. She has worked hard in the past 5 months since you've known her and you are hopeful about her future. She is demonstrating a connection with others in group, and has expressed that she plans to attend peer support meetings, such as Narcotics Anonymous, when she is released. Just before the start of a group counseling session focused on abstinence strategies and relapse prevention, you over-hear Jessie telling another inmate that she is scared "the law will take my kids away from me". You know that Jessie's kids have spent time in foster homes after she was arrested for providing drug sales and prostitution services in her home. Jessie's release date is in one week, where she will serve the rest of her time at home on probation if she tests negative for drugs each week. Jessie says in group session that day that she doesn't think she'll be able to stay sober when she is released, and the only way she knows how to make a living is selling drugs. She cannot afford daycare for her youngest child, who is not yet in school. She says she just wants to go home and be with her kids, ages 4, 7 and 9. She doesn't see the harm in occasional drug use, or selling drugs when the oldest are at school. There is such a demand and she can make good money to provide for her kids. Jessie says she know she won't be able to remain sober if her kids are taken away from her.
- Would you report Jessie to child protective services? Explain your decision. What do you think is the most important priority when working with Jessie in the next week? Explain.

CASE VIGNETTE 4 HEALTHCARE PROVIDER

- You are a nurse in a OBGYN's office. One of your regular patients, Jordan, a 12 y.o. girl has an appointment with the physician today for her first visit because she started menstruating and is experiencing cramping and discomfort. Her mother, 34 y.o., accompanies Jordan and both answer basic medical questions. Her height and weight are recorded as part of her medical report. Jordan is above average height and overweight, not obese. She appears to be an early developer (has breasts), and is otherwise healthy. In the course of the interview, you ask Jordan about her eating and exercise habits. She says "I try to work out, and I eat pretty healthy." Her mother interjects and responds with "You never work out, and you eat a lot of junk food, which is why you're overweight. I try to encourage her to eat healthier and exercise so she'll look fit and beautiful." When the nurse and doctor are alone with Jordan for the physical exam, you follow up with Jordan about her mother's comment. Jordan says "Yeah, my mom really wishes I was skinny like her and my sister. I wish I was, but I sometimes eat too much. My mom is always saying how pretty and skinny my sister is. She won't let me wear a bikini or shorts because of my body and stretch marks. I guess she's embarrassed that I'm so fat and ugly."
- Does this meet the criteria for emotional abuse? Why or why not? What would you do in this case?

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- Many professionals working in a range of human service settings will work with kids and adults who survived maltreatment. **Communicating that you are safe person to disclose information to, and doing so in a validating way, is very important.** Validation of a person's lived experiences, pain, and emotional distress is a way of demonstrating empathy, support, and importantly, communicating that you believe the person, and understand. Well intentioned providers who are not trauma informed can inadvertently respond in ways that are invalidating, adding insult to injury, or adding salt to a wound. This can result in silence and shame in survivors.
 - Trauma-uninformed providers often miss important signs or cues that a person is or was maltreated, are reluctant to report or probe further because they do not know what to do, they believe reporting will make things worse, or **they communicate minimizing messages, all of which can cause additional trauma.**

VALIDATING AND INVALIDATING RESPONSES

- <https://blogs.psychcentral.com/emotionally-sensitive/2012/02/understanding-the-levels-of-validation/>
- <http://drjamielong.com/validation-5-things-not-to-say/>
- <https://blogs.psychcentral.com/emotionally-sensitive/2012/02/practicing-validation/>
- After reading these online posts, pay attention to the ways in which you feel **validated or invalidated** in your conversations this week.
- After reading these online articles, apply what you've learned about validating responses and practice with friends.
- **Submit your reflections related to your experiences of being validated or invalidated, as well as what you learned when you communicated in a validating way to the [Validation Drop Box](#)**

ACKNOWLEDGEMENTS

This training was developed with support from the Vocational Rehabilitation Technical Assistance Center for Targeted Communities (VRTAC-TC or Project E3) at the Department of Rehabilitation and Disability Studies, Southern University, Baton Rouge, LA funded by the U.S. Department of Education, Rehabilitation Services Administration (Grant# H264F15003).

The ideas, opinions, and conclusions expressed, however, are those of the authors and do not represent recommendations, endorsements, or policies of the U.S. Department of Education.



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