


**ThinkAskLearn**  
Health Professional Education

## Understanding Child Abuse: Red Flags for Nurses

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**WARNING DISTRESSING IMAGES  
AHEAD**

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### Modern Interest in Child Abuse

- Kempe et al (1962)
- Journal of the American Medical Association
- Battered Child Syndrome
- Kempe's Syndrome
- Describes Munchausen Syndrome By Proxy
- Reluctances of Medical Practitioners to accept and report cases of abuse



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## Types of Abuse

- Physical
- Emotional
- Neglect
- Sexual



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## How Common is Child Abuse in Australia?



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## Child Abuse in Australia

- **Notifications**
  - 1999-2000 - 107,134 notifications
  - 2002-2003 - 198,355 notifications (83% increase)
  - 2010-2011 - 163,767
- **Substantiations**
  - 1999-2000 - 24,732
  - 2002-2003 - 40,416 (63% increase)
  - 2010-2011 - 31,527
- **Rates of Abuse**
  - 1.8 -10.1(6.1) per 1000 children aged 0-16

(AIHW 2000-2013)



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## Child Abuse in Australia

- *Substantiations - Type (Queensland)*

- Neglect 38%
- Emotional 34%
- Physical 23%
- Sexual 5%



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## Neglect

- Difficult to define
- Hallmarks of neglecting behaviour is the carer fails to recognise and/or meet the needs of the child
- Strong correlation with poverty and therefore associated problems



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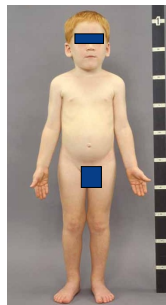
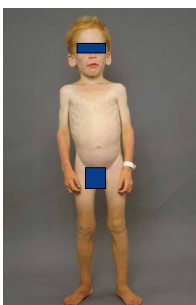
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## Neglect



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## Physical Abuse

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## Parental Characteristics

- Young (poor life skills)
- Single (no additional adult support)
- Poor understanding of child development (unrealistic expectations)
- Socially isolated (poor emotional support)
- History of abuse as child



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## Child Characteristics

- Premature infants (mal attachment from separation and bonding)
- Twins (added stress - usually only 1 twin abused)
- Child from unwanted pregnancy
- "Difficult to rear" (sleep or health problems)
- Children with disabilities



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## *Red Flags to Abuse*

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## Red Flags to Abuse-Bruising

- Bruises are nearly a universal finding in well children examination

### Typically Accidental

Forehead  
Elbow  
Knees  
Shins  
Iliac Crests

### Possibly Nonaccidental

Scalp  
Behind Ears  
Neck  
Axillae  
Inner thighs  
Webs of fingers/toes  
Genitalia

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## Red Flags to Abuse-Bruising

- Bruising
  - in physical abuse - 90% have bruising
- Non-ambulant babies should not bruise



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## Red Flags to Abuse-Bruising

- Bruising
  - in physical abuse - 90% have bruising
- Non-ambulant babies should not bruise
- Posterior Bruising
  - Something ran into child rather than child ran into it



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## Red Flags to Abuse-Bruising

- Bruising
  - in physical abuse - 90% have bruising
- Non-ambulant babies should not bruise
- Posterior Bruising
  - Something ran into child rather than child ran into it
- Multiple Bruises
  - in various stages of healing



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### Red Flags to Abuse-Bruising

- Bruising
  - in physical abuse - 90% have bruising
- Non-ambulant babies should not bruise
- Posterior Bruising
  - Something ran into child rather than child ran into it
- Multiple Bruises
  - in various stages of healing
- Patterned Bruises
  - hands, bite marks, buttocks, circumferential wrist bruising



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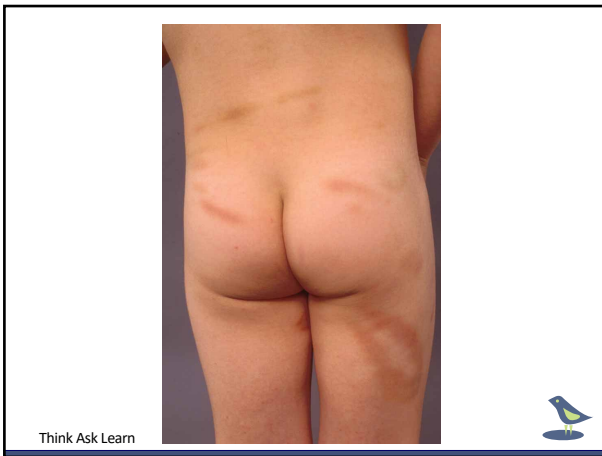
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## Red Flags to Abuse-Fractures

- Various #'s seen
- less than 2 years (25% are abuse)
- less than 1 year (56% are abuse)
- multiple #'s of various healing
- Spiral #'s of long bones
- Rib #'s



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## Red Flags to Abuse-Burns

- 2% of burns are non-accidental
- 'Imply a degree of intent to cause pain'



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### Red Flags to Abuse-Burns

- 2% of burns are non-accidental
- 'Imply a degree of intent to cause pain'
- Stocking or glove type burn
- Absence of splash marks
- Demarcation lines



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### Red Flags to Abuse-Burns

- 2% of burns are non-accidental
- 'Imply a degree of intent to cause pain'
- Stocking or glove type burn
- Absence of splash marks
- Demarcation lines
- Cigarette burns, often clustered



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## Shaken Baby Syndrome

- Classic Triad
  - subdural haematoma,
  - raised intracranial pressure
  - retinal hemorrhages
- 20 seconds or less with probably 40-50 shakes



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## Red Flags to Abuse

- Presentation with adult other than the adult responsible for the child at the time
- History inconsistency
- Delay in presentation to ED
- Unusual interaction with parent and child
- Unusual interaction with parents and staff



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## Red Flags to Abuse

- Bruising, Physical evidence of abuse/neglect
- Conflicting stories about the accident.
- Injury blamed on sibling or other party.
- Injury inconsistent with level of development. i.e. 4 week old baby rolled off the bed.
- Complaint other than the one associated with abuse.



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## ED presentations of Child Abuse

- Guenther et al 2009
- USA Multi centre trial from one state
- 9795 abuse cases and 9795 case control cases
- ED presentations prior to abuse awareness
- Abuse kids twice as likely to have ED visit prior to abuse compared to control
- 53.3% abused kids, 73.0% control had no ED visit.



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## Management of Abuse

- Maintain a high index of suspicion
- Maintain non judgmental outlook
- Ensure safety of child
- Avoid confrontation with parent
- Arrange admission if concerns for safety
- Provide logical explanation for admission (investigate bruising)
- Admit infants <12 months with major trauma



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## Use a checklist!!!!

Is the history consistent?  
Was there unnecessary delay in seeking medical help?  
Does the onset of the injury fit with the developmental level of the child?  
Is the behavior of the child/the carers and the interaction appropriate?  
Are the findings of the top-to-toe examination in accordance with the history?  
Are there any other signals that make you doubt the safety of the child or other family members?

Louwens et al 2012



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## Document

- Contemporaneous
- Accurate
- Uses direct quotes



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