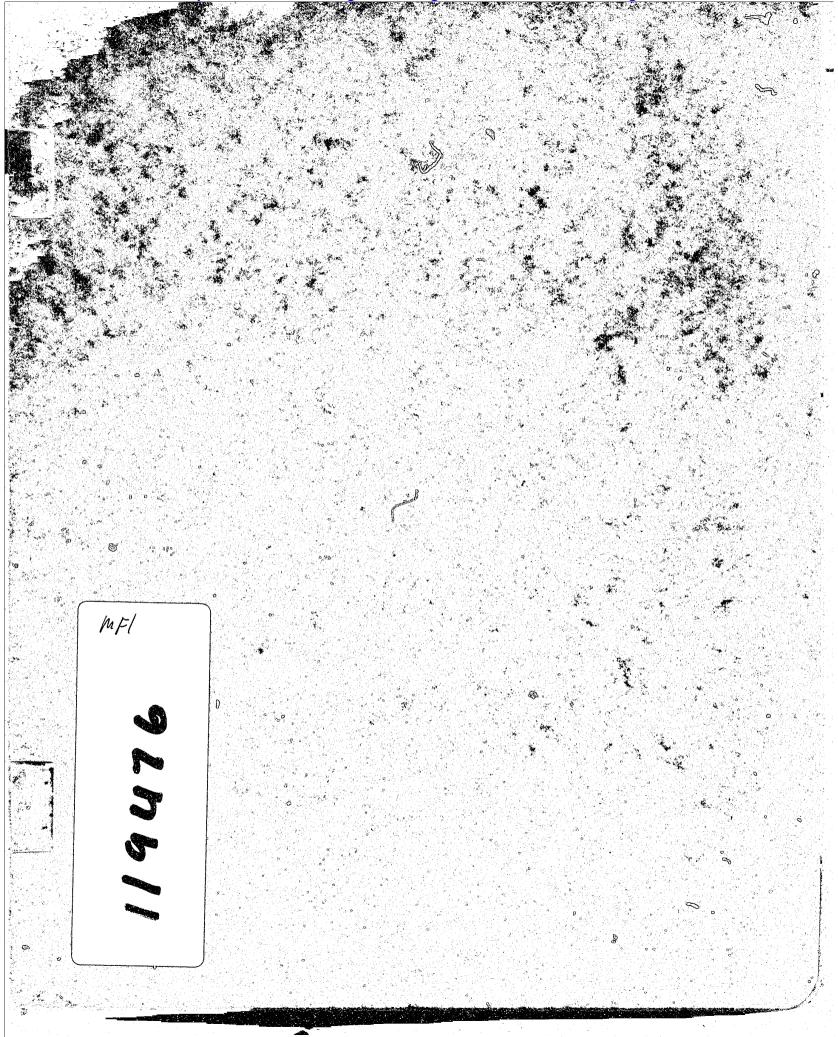
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CHILD ABUSE AND NEGLECT: A SHARED COMMUNITY CONCERN

MARCH 1989

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Office of Human Development Services Administration for Children, Youth and Families Children's Bureau National Center on Child Abuse and Neglect P.O. Box 1182 Washington, DC 20013

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INTRODUCTION

Over the past 20 years our understanding of the complex problems of child abuse and neglect has increased dramatically. This increased knowledge has improved our ability to intervene effectively in the lives of troubled families. Likewise, we have a better grasp of what we can do to prevent child abuse and neglect from occurring. Clearly, we have made great strides. However, our efforts to prevent and treat child abuse and neglect must continue to grow and improve.

Just what have we learned? We have learned that a child of any age, sex, race, religion, and socioeconomic background can fall victim to child abuse and neglect. We have learned that a large number of children who are abused and neglected are never reported to the authorities who can help them and their families. We have learned that we need to provide help and support to abused and neglected children as well as to their parents. And most important, we have learned that child abuse and neglect is a community concern. No one agency or professional alone can prevent and treat the problem; rather all concerned citizens must work together to effectively identify, prevent, and treat child abuse and neglect.

This booklet will help you better understand the problems of child abuse and neglect as well as prevention and intervention efforts. To begin our discussion, we must have a common understanding of how we define child maltreatment.

HOW DO WE DEFINE CHILD ABUSE AND NEGLECT?

The Child Abuse Prevention and Treatment Act (Public Law 100-294) defines child abuse and neglect as "the physical or mental injury, sexual abuse or exploitation, negligent treatment, or maltreatment

- o of a child under the age of 18, or except in the case of sexual abuse, the age specified by the child protection law of the State
- by a person (including any employee of a residential facility or any staff person providing out-of-home care) who is responsible for the child's welfare
- o under circumstances which indicate that the child's health or welfare is harmed or threatened thereby..."

The Act defines sexual abuse as the use, persuasion, or coercion of any child to engage in any sexually explicit conduct (or any simulation of such conduct) for the purpose of o producing any visual depiction of such conduct, or

o rape, molestation, prostitution, or

o incest with children.

As a result of the Child Abuse Amendments of 1984 (P.L. 98-457), the Act also includes the withholding of medically indicated treatment for an infant's life-threatening conditions. The Act defines this provision as "...the failure to respond to the infant's life-threatening conditions by providing treatment (including appropriate nutrition, hydration, and medication) which, in the treating physician's or physicians' reasonable medical judgment, will most likely be effective in ameliorating or correcting all such conditions..."

The four types of child abuse and neglect are physical abuse, child neglect, sexual abuse, and mental injury (also referred to as emotional/psychological abuse). Let us take a brief look at each form of child maltreatment.

Physical Abuse

Physical abuse is characterized by inflicting physical injury by punching, beating, kicking, biting, burning, or otherwise harming a child. Although the injury is not an accident, the parent or caretaker may not have intended to hurt the child. The injury may have resulted from over-discipline or physical punishment that is inappropriate to the child's age.

Child Neglect

Child neglect is characterized by failure to provide for the child's basic needs. Neglect can be physical, educational, or emotional. The latest national incidence study defines these three types of neglect as follows. Physical neglect includes refusal of or delay in seeking health care, abandonment, expulsion from home or not allowing a runaway to return home, and inadequate supervision. Educational neglect includes permission of chronic truancy, failure to enroll a child of mandatory school age, and inattention to a special educational need. Emotional neglect includes such actions as chronic or extreme spouse abuse in the child's presence, permission of drug or alcohol use by the child, and refusal of or failure to provide needed psychological care. It is very important to distinguish between willful neglect and a parent's or caretaker's failure to provide necessities of life because of poverty or cultural norms.

Sexual Abuse

Sexual abuse includes fondling a child's genitals, intercourse, incest, rape, sodomy, exhibitionism, and sexual exploitation. To be considered child abuse these acts have to be committed by a person responsible for the care of a child (for example, a parent, a babysitter, or a day care provider). If a stranger commits these acts, it would be considered sexual assault and handled solely by the police and criminal courts.

Many experts believe that sexual abuse is the most underreported form of child maltreatment because of the secrecy or "conspiracy of silence" which so often characterizes these cases.

Mental Injury (Emotional/Psychological Abuse)

This form of child abuse and neglect includes acts or omissions by the parents or other person responsible for the child's care that have caused, or could cause, serious behavioral, cognitive, emotional, or mental disorders. In some cases of emotional/psychological abuse the parental acts alone, without any harm evident in the child's behavior or condition, are sufficient to warrant Child Protective Services (CPS) intervention. For example, the parents/caretakers use extreme or bizarre forms of punishment, such as torture or confinement of a child in a dark closet. For less severe acts, such as habitual scapegoating, belittling, or rejecting treatment, demonstrable harm to the child is often required for CPS to intervene.

Although any of the forms of child maltreatment may be found alone, we often find them occurring in combination. And, emotional abuse is almost always present when other forms are identified.

HOW WIDESPREAD IS THE PROBLEM?¹

The most recent national incidence study estimates that more than 1 million children nationwide experienced demonstrable harm as a result of maltreatment in 1986. According to the same study, more than 1.5 million children nationwide experienced abuse or neglect if children "at risk of or threatened with harm" are included in the estimate. In addition, 1,100 children are known to have died as a result of abuse or neglect in 1986. In

¹Study Findings: Study of National Incidence and Prevalence of Child Abuse and Neglect: 1988. U.S. Department of Health and Human Services, Office of Human Development Services, Administration for Children, Youth and Families, Children's Bureau, National Center on Child Abuse and Neglect.

comparing the 1986 overall incidence rate to the 1980 rate, the number of children who experienced demonstrable harm from abuse or neglect increased 66 percent. The national incidence study concludes that this increase is probably more reflective of increased recognition than of an actual increase in incidence. The number of children reported to CPS increased nearly 57 percent since 1980. CPS officially substantiated 53 percent of the cases that were reported and accepted for investigation in 1986. This reflected an increase of 10 percent in the number of substantiated cases since 1980.

Every State has a child abuse and neglect reporting law that requires certain categories of professionals (for example, social workers, medical personnel, educators, child care staff) to report suspected child abuse and neglect. In addition, States either require or suggest that the general public report suspected incidents of child maltreatment. (Reporting is discussed in detail in "Who Should Report Child Abuse and Neglect?")

Which type of child maltreatment occurs most often?² The 1986 National Incidence Study found that the majority of child maltreatment cases (63 percent) involved neglect (1,003,600 children or 15.9 per 1,000) and less than half (43 percent) involved abuse (675,000 children or 10.7 per 1,000). Let us break down the numbers by the major forms of child maltreatment.

- Physical Abuse. A total of 358,300 children or 5.7 children per 1,000 were physically abused in this country in 1986.
- Emotional Abuse. The next most frequently occurring type of abuse is emotional abuse, involving 211,100 children or 3.4 children per 1,000.
- Sexual Abuse. Although sexual abuse remains the least frequent type of abuse, its incidence is not far behind that of emotional abuse. The national incidence study found that 155,900 children, or 2.5 per 1,000, were sexually abused in 1986. In addition, it is important to note that the known incidence of sexual abuse more than tripled since 1980.

²The statistics from the Study of National Incidence and Prevalence of Child Abuse and Neglect reflect the revised definition of child abuse and neglect, which includes the combined totals of children who were demonstrably harmed and threatened with harm.

Neglect. There are a number of different types of neglect, each with differing incidence rates. Physical neglect is the most frequently occurring type of neglect, involving 571,600 children or 9.1 per 1,000. The second most frequent type of neglect is educational neglect, with 292,100 children or 4.6 per 1,000. The least frequent type is emotional neglect, involving 223,100 children or 3.5 per 1,000.

WHY DOES CHILD ABUSE AND NEGLECT OCCUR?

There are many factors that may contribute to the occurrence of child abuse and neglect. Each family is different; each family's story is unique. We have, however, identified some conditions or situations that <u>may</u> make child abuse and neglect more likely to occur. For discussion purposes, these factors will be divided into three categories.

- o Individual Characteristics.
 - -- Parents may be more likely to maltreat their children if they are emotionally immature or needy; are isolated, with no family or friends to depend on; were emotionally deprived, abused, or neglected as children; feel worthless and have never been loved or cared about; are in poor health; or abuse drugs or alcohol. Many abusive and neglectful parents do not intend to harm their children and often feel remorse about their maltreating behavior. However, their own problems may prevent them from stopping their harmful behavior and may result in resistance to outside intervention. It is important to remember that diligent and effective intervention efforts may overcome the parents' resistance and help them change their abusive and neglectful behavior.
 - -- Children may be more likely to be at risk of maltreatment if they are unwanted, resemble someone the parent dislikes, or have physical or behavioral traits which make them different or especially difficult to care for.
- Family Interactions. Each member of a family affects every other member of that family in some way. Some parents and children are fine on their own, but just cannot get along when they are together, especially for long periods of time. Some characteristics commonly observed in abusive or neglectful families include social isolation and parents turning to their children to meet their emotional needs.

 Environmental Conditions. Changes in financial condition, employment status, or family structure may shake a family's stability. Some parents may not be able to cope with the stress resulting from the changes and may experience difficulty in caring for their children.

In addition to these contributing factors, some societal values may perpetuate child abuse and neglect. For example, the acceptance of violence as a way of life, the conviction that parents have the right to treat children as they please, and the desire to avoid outside involvement in family life may influence the occurrence of child abuse and neglect. Although individuals and families have a right to privacy, no one has a right to abuse or neglect a child. Fear or mistrust of outside intervention should not prevent families from seeking and/or accepting help in ending abusive or neglectful situations.

The research conducted over the last 10 years has helped us better understand why abuse and neglect occurs. Recent significant findings from the national incidence study are presented below.

Age of Child. In 1986, the incidence of physical abuse was lowest among children up to 2 years of age. However, when these children did experience physical abuse they were more likely than older children to sustain serious or fatal injuries. In addition, the incidence of emotional neglect and educational neglect differed according to the child's age. The risk for these two types of neglect increased with age.

Gender. There was no significant difference in the incidence of neglect associated with the sex of the child. However, females experienced more abuse than males. This difference reflected the female's greater susceptibility to sexual abuse. The rate of sexual abuse for females was nearly four times the rate for males (121,000 females or 3.9 per 1,000 females and 34,300 males or 1.1 per 1,000 males).

Family Income. Children from families whose income was less than \$15,000 experienced maltreatment at a rate five times higher than children from higher income families.

Family Size. Families with four or more children showed higher rates of both physical abuse and physical neglect.

Race. A child's race/ethnicity has no significant impact on incidence of maltreatment.

Geographic Location. Child abuse can occur in any community-urban, suburban, or rural.

HOW CAN WE RECOGNIZE CHILD ABUSE AND NEGLECT?

The most common way we identify child abuse and neglect is through the child's and parent's condition and behavior. We need to look for combinations of physical and behavioral indicators in children as well as combinations of parental and child indicators. An example would be a case in which a child who has frequent unexplained injuries has just sustained a broken arm and seems afraid of his or her parents. The parents offer conflicting and unconvincing explanations for the injury.

Sometimes a single physical indicator in a child will be sufficient to make a report, such as a spiral fracture in a 3month-old infant. Some unusual or alarming child behaviors may, in and of themselves, clearly warrant a report. However, some behaviors may have possible explanations other than child abuse and neglect, such as a child who runs away or engages in delinquent behavior. Therefore, behavioral indicators alone may not clearly indicate the child is being abused or neglected, so judgment must be exercised. The individual who suspects that maltreatment <u>is</u> occurring should report these suspicions. Background information about the child and family is helpful but is not necessary to warrant a report.

Let us examine some situations that caused professionals and the general public to suspect child abuse and neglect, and report their concerns to CPS.

REPORT: An 18-month-old boy was brought to the emergency room with second and third degree burns on his legs and buttocks. The doctor noted that the burns extended to a different level on each leg--at mid-calf on the left leg, and mid-knee on the right. In addition, there was an area on the right buttock that was burned. The mother told the doctor that she left her son in the bathtub while she went to answer the telephone. The mother believed that the boy turned on the hot water while she The doctor did not believe that the mother's was gone. explanation was consistent with the injury. The doctor thought that there were two factors which made it unlikely that burns could have occurred as a result of the child turning on the hot water. First, it takes a long time to raise the temperature of normal bath water to the scalding point. Second, if the injuries had occurred as the mother described, the injuries would have been the same. The doctor thought that the injury could have occurred by holding the child and dangling his feet into scalding water.

REASONS: The doctor reported this case to CPS because:

- o The child had sustained a serious injury;
- o The parent's explanation of the cause of the child's injury was implausible; and
- o In his clinical opinion, the injury could likely have been caused by the parent.
- REPORT: Susan, aged 7, was in her first grade class when her teacher noticed that she had difficulty sitting and had some unusually shaped marks on her arm. Susan was sent to the school nurse to be examined. The nurse noted approximately 12 linear and loop-shaped marks on her back and buttocks. These marks ranged in length from 6 to 10 inches. The nurse believed that the marks were inflicted by a belt and belt buckle. The marks were purple, blue, brown, and yellow, indicating that the bruises were sustained at different times. Susan said she did not know how she got the bruises. The nurse spoke with the principal, who called CPS.
- REASONS: The school principal reported this case to CPS because:
 - o The child had sustained a physical injury;
 - o The bruises were inflicted at different times, perhaps days apart. (Even if the bruises had been inflicted at one time this case should still be reported. The fact that the bruises were in different stages of healing raises greater concern for the child's safety); and
 - o The nurse's clinical opinion was that the injuries were inflicted by a belt and belt buckle.
- REPORT: When Cindy was 8 years of age, her teacher called CPS. Cindy was the only child in her family who wore old tattered clothing to school and was not given the same privileges and opportunities as her brothers and sisters. The other children were allowed to join in after school activities; however, Cindy was not allowed to participate in any outside activities. Cindy became very withdrawn at school. She stopped speaking in class and would not engage in play activities with her classmates. Her academic performance declined rapidly. Finally, Cindy became incontinent and had "accidents" in class.

REASONS: The reasons the teacher reported this case to CPS were:

- o Serious differential treatment of one child in the family;
- o Marked decline in academic performance and class participation; and
- o Incontinence.
- REPORT: A neighbor called CPS because a 5-year-old boy wandered around the apartment complex unsupervised, often until 10 or 11 p.m. The child was usually inappropriately dressed for the weather; it was 45 degrees and the child was wearing a short sleeved shirt, long pants, and torn shoes. The child was constantly asking neighbors for food. He always had a runny nose and recently had developed a deep cough. In addition, he picked fights with younger children in the neighborhood. The neighbor thought the boy's mother worked at night; however, she rarely saw her at all.
- REASONS: This case was reported because of a combination of factors:
 - o A young child was unsupervised late at night;
 - o The child was not dressed appropriately for the weather;
 - o The neighbor believed that the child was not receiving sufficient nourishment, as indicated by his constant requests for food; and
 - o The neighbor believed the mother was unconcerned about her child's welfare.
- REPORT: A neighbor called to report possible sexual abuse of Janise, aged 12. Janise had confided in the neighbor's daughter that her father had been "fooling around" with her for several years. The neighbor talked with Janise before making the report. Janise reported that her dad touched her private parts and made her "do it" with him. When Janise was asked if her mom knew what was going on between her and her dad, Janise replied, "Yes, she does!" Janise became frightened when the neighbor said she was going to call CPS. Janise begged her not to call, screaming, "He told me that they'll take me away!" Although the neighbor was horrified that this was

happening, she believed that Janise was telling the truth.

REASONS: The reasons the neighbor called CPS were:

- o Janise disclosed that her dad had been sexually abusing her; and
- o The neighbor was concerned about Janise, even though it was very difficult to believe that her father might have done this.

WHO SHOULD REPORT CHILD ABUSE AND NEGLECT?

Child abuse and neglect is everyone's responsibility. In order to help maltreated children and their families, professionals and the general public must report suspected child abuse and neglect. You do not have to prove that a child is being abused or neglected; you only have to <u>suspect maltreatment</u> <u>is occurring in order to report</u>. When you report your suspicions to your local child protection agency, you should be prepared to provide information about the abuse and/or neglect, the child, and the family.

For families living on military installations, reports should be made to the Family Advocacy Program. Each branch of the military service has a Family Advocacy Program, commonly referred to as FAP, designed to address the prevention, identification, and treatment of child abuse and neglect.

Today, every State, the District of Columbia, American Samoa, Guam, Puerto Rico, and the Virgin Islands have child abuse reporting laws. These laws mandate or require the reporting of suspected child maltreatment. Your State child abuse reporting law specifies the individuals who must report. Your State law also describes the penalties for not reporting and the specific situations that should be reported to CPS.

If you report suspected child abuse and neglect in accordance with the law, you are immune or protected from civil and criminal liability. For more information on your State child abuse reporting law, check with your local or State CPS agency.

WHAT HAPPENS AFTER THE REPORT IS MADE?

After the report is made to CPS, a staff member will talk with the child and the family, and other people involved with the family to determine if child abuse or neglect has occurred or is likely to occur. In some communities, a law enforcement investigator or both a CPS worker and a police officer will conduct the investigation to determine whether abuse or neglect has occurred. Family Advocacy Program staff on military installations typically cooperate with the responsible civilian authorities and work with CPS to conduct the investigation. They also provide appropriate treatment such as counseling and medical services.

In addition to determining whether abuse or neglect has occurred, or is likely to occur, CPS will evaluate whether the child's life or health is threatened. The primary role of CPS is to ensure that children are protected from harm. If CPS concludes that a child's safety is threatened, it will take action to protect the child. CPS will make all efforts to keep the family together and, at the same time, ensure the child's safety. Sometimes, however, that is not possible and CPS must, through the civil (juvenile or family) courts, remove the child from his or her parents and place the child in foster care.

Whether or not a child is removed, if child abuse or neglect has occurred or is likely to occur in a family, CPS will provide services or refer the family to other community agencies or professionals to help the family members change their unhealthy patterns of behavior that led to the problem.

CPS emphasizes the protection of children and treatment of families. Sometimes abusers are prosecuted in criminal court (most often in cases of sexual abuse or severe physical abuse) in order to ensure that the abuser accepts and follows through with treatment and to ensure that a criminal act is appropriately deterred.

HOW CAN WE HELP THESE CHILDREN AND FAMILIES?

There are still many unanswered questions about child abuse and neglect and how we can prevent and treat it. We have, however, learned enough from research, model programs, and clinical efforts to develop some guiding principles.

o Child maltreatment is a family problem. Consequently, our treatment efforts must focus on individual family members as well as the family as a whole. Treatment must be provided to abused and neglected children as well as their parents. Unless children receive the support and treatment for the trauma they have suffered, they may suffer permanent physical, mental, or emotional handicaps.

- o Although we cannot predict with certainty who will abuse or neglect their children, we do know the signs indicating <u>high risk</u>. People at high risk include young parents who are ill-prepared for the parenting role, families experiencing great stress who have poor coping skills and have no one to turn to for support, and parents who have difficulty with or who have not developed an emotional bond with their infant. We need to be alert to these and other high risk indicators and offer assistance, support, counseling, and/or parent education to families "at risk" before their children are harmed.
- Families "at risk" may be most receptive to help soon after the birth of their first child.
- Child sexual abuse prevention programs aimed at schoolaged children appear to be useful in helping children avoid sexually abusive situations and say no to inappropriate touch by adults. However, prevention programs must be carefully examined and selected. These programs must be responsive to the learning capacities and developmental stages of the children involved. Inappropriately designed programs may frighten young children or fail to teach them what they can do to protect themselves.
- Volunteers can be very effective with some abusive and neglectful parents--especially with those parents who are experiencing stress, who have been emotionally deprived, and who lack knowledge of child development and effective parenting skills. Volunteers must be carefully screened, trained, and supervised.

Clearly, if we are going to stop child abuse and neglect and help the child victims and their families, we all must work together. Efforts must occur at the Federal, State, and local levels.

HOW DOES THE FEDERAL GOVERNMENT SUPPORT STATE AND LOCAL CHILD PROTECTION EFFORTS?

The primary responsibility for responding to cases of child abuse and neglect rests with the State and local agencies. In each community, reports of child abuse and neglect are investigated by CPS and/or the police. Also, prevention and treatment for both children and families are provided by public and private community agencies. Volunteer organizations and self-help groups also provide assistance and support to families. Further, each military installation has a child abuse and neglect program called the Family Advocacy Program (FAP).

The Federal Government furthers these State and local efforts in many different ways. The National Center on Child Abuse and Neglect (NCCAN) was created by the Child Abuse Prevention and Treatment Act of 1974 (P.L. 93-247).* It is the agency responsible for appropriating funds for programs mandated by P.L. 100-294 and coordinating the Federal Government's child abuse and neglect activities. NCCAN provides State grants, funds for disabled infants, Children's Justice Act grants, and challenge grants and funds to child protection agencies that are in compliance with Federal regulations.

NCCAN awards basic State grants to States and Territories for assistance in developing, strengthening, and carrying out child abuse and neglect prevention and treatment programs. In fiscal year 1988, 54 awards were made.

NCCAN provides funds to States that have programs or procedures in their child protection systems that enable them to respond to reports of medical neglect, including instances of withholding of medically indicated treatment from disabled infants with life-threatening conditions. In 1988, 42 States received funds for this program.

Through the Children's Justice and Assistance Act of 1986, NCCAN provides grants to assist States in developing, establishing, and operating programs designed to improve the handling of child abuse cases, especially those involving sexual abuse, in a manner that reduces additional trauma to the child and improves procedures for the investigation and prosecution of child abuse cases, particularly child sexual abuse. To be eligible for funds, a State must have a State Task Force that reviews the State's judicial and administrative procedures for handling child abuse cases and recommends improvements. Funds for this program are allocated from the Department of Justice's Victims of Crime Fund. Grants were awarded to 27 States in September 1988.

Since 1985, NCCAN has provided Challenge Grants to States to encourage the establishment and maintenance of trust funds or other funding mechanisms to support child abuse and neglect prevention activities. To receive these funds, States must have established, in the year prior to the funding request, a trust fund or other funding mechanism available <u>only</u> for child abuse

^{*} The Act that dictates the current functions of NCCAN is P.L. 100-294, <u>Child Abuse Prevention, Adoption, and</u> <u>Family Services Act of 1988</u>, April 25, 1988.

and neglect prevention programs. In fiscal year 1988, 42 States received grants.

NCCAN conducts research into the causes, prevention, and treatment of child abuse and neglect; funds demonstration programs to identify the best means of preventing maltreatment and treating troubled families; and funds the development and implementation of training programs.

Since 1975, NCCAN has provided funds on a competitive basis for more than 700 projects to State and local agencies and organizations nationwide. These projects focus on every aspect of the prevention and treatment of child abuse and neglect. In 1988, NCCAN funded <u>new</u> child abuse and neglect projects in the following areas.

- Programs designed to prevent serious or fatal child maltreatment.
- Programs designed to address child abuse and neglect among minorities.
- Programs designed to prevent child abuse and neglect using the combined resources of public-private partnerships.
- o Programs that train volunteers to serve as advocates for children in criminal court proceedings.
- o Programs designed to develop family-based treatment approaches for intrafamilial child sexual abuse.
- Programs for diagnosing and treating chronically neglecting families.
- Research on the relationships between child abuse and neglect and teenage pregnancy.
- Research on the impact of "screening out" families who have been reported to CPS.
- o Field initiated research for child abuse and neglect.

NCCAN continues to fund the National Resource Center on Child Abuse and Neglect (to improve the capability of public and private agencies to respond effectively to child abuse and neglect), the National Child Abuse and Neglect Clinical Resource Center (to improve frontline clinical work in child protection), and the National Resource Center on Child Sexual Abuse (to assist the field in all aspects of dealing with child sexual abuse). Finally, one of NCCAN's most critical responsibilities is to disseminate up-to-date information on child maltreatment. This is done primarily through the Clearinghouse on Child Abuse and Neglect Information, which is a major resource for professionals and concerned citizens interested in child maltreatment issues. Publications distributed by the Clearinghouse include bibliographies, training materials, and research reviews. The Clearinghouse maintains a database of resources for professionals, which is available to the public through DIALOG Information Services, Inc. (File 64). In addition, the Clearinghouse staff will perform searches on specific topics for users.

If you would like more information about the problems of child abuse or neglect or Federal, State, and local prevention and treatment efforts, you should contact the Clearinghouse.

> Clearinghouse on Child Abuse and Neglect Information P.O. Box 1182 Washington, DC 20013 703-821-2086

STATE CHILD PROTECTION AGENCIES: REPORTING PROCEDURES

Because the responsibility for investigating reports of suspected child abuse and neglect rests at the State level, each State has established a Child Protective Services (CPS) reporting system. Listed below are the name and address of the CPS agency in each State, followed by the procedures for reporting suspected child maltreatment. A number of States have toll-free (800) telephone numbers that can be used for reporting. Some States have two numbers, one for individuals calling within the State and the other for those calling outside of the State. Normal business hours vary from agency to agency, but are typically from 8 or 9 a.m. to 4:30 or 5 p.m.

Alabama: Alabama Department of Human Resources Division of Family and Children's Services

Office of Protective Services 64 North Union Street Montgomery, AL 36130-1801

During business hours, make reports to the County Department of Human Resources, Child Protective Services Unit. After business hours, make reports to local police.

Alaska:

Department of Health and Social Services Division of Family and Youth Services Box H-05, Juneau, AK 99811

Ask the operator for Zenith 4444 to make reports in-State. Out-of-State, add area code 907. This telephone number is toll free.

American Samoa: Government of American Samoa Office of the Attorney General Pago Pago, AS 96799 Make reports to the Department of Human Resources at (684) 633-4485.

Arizona:

Department of Economic Security Administration for Children, Youth and Families P.O. Box 6123 Site COE 940A Phoenix, AZ 85005

Make reports to Department of Economic Security local offices.

Arkansas: Arkansas Department of Human Services Division of Children and Family Services P.O. Box 1437 Little Rock, AR 72203

Make reports in-State to (800) 482-5964.

California: Office for Child Abuse Prevention Department of Social Services 714-744 P Street, Room 950 Sacramento, CA 95814

Make reports to County Departments of Welfare and the Central Registry of Child Abuse (916) 445-7546, maintained by the Department of Justice. Colorado: Department of Social Services Central Registry P.O. Box 181000 Denver, CO 80218-0899 Make reports to County Departments of Social Services. Connecticut: Connecticut Department of Children and Youth Services Division of Children and Protective Services 170 Sigourney Street Hartford, CT 06105 Make reports in-State to (800) 842-2288 or out-of-State to (203) 344-2599. Delaware: Delaware Department of Services for Children, Youth and Their Families Division of Child Protective Services 330 East 30th Street Wilmington, DE 19802 Make reports in-State to (800) 292-9582. District of Columbia: District of Columbia Department of Human Services Commission on Social Services Family Services Administration Child and Family Services

500 First Street N.W. Washington, DC 20001 Make reports to (202) 727-0995. Florida: Florida Child Abuse Registry 1317 Winewood Boulevard Tallahassee, FL 32301 Make reports in-State to (800) 342-9152 or out-of-State to (904) 487-2625. Georgia: Georgia Department of Human Resources Division of Family and Children Services 878 Peachtree Street, N.W. Atlanta, GA 30309 Make reports to County Departments of Family and Children Services. Guam: Department of Public Health and Social Services Child Welfare Services Child Protective Services P.O. Box 2816 Agana, GU 96910 Make reports to the State Child Protective Services Agency at (671) 646-8417. Hawaii: Department of Social Services and Housing Public Welfare Division Family and Children's Services P.O. Box 339 Honolulu, HI 96809 Make reports to each Island's Department of Social Services and Housing

CPS reporting hotline.

Division

Idaho: Department of Health and Welfare Field Operations Bureau of Social Services and Child Protection 450 West State, 10th Floor Boise, ID 83720 Make reports to Department of Health and Welfare Regional Offices. Illinois: Illinois Department of Children and Family Services Station 75 State Administrative Offices 406 East Monroe Street Springfield, IL 62701 Make reports in-State to (800) 25-ABUSE or out-of-State to (217) 785-4010. Indiana: Indiana Department of Public Welfare-Child Abuse and Neglect Division of Child Welfare-Social Services 141 South Meridian Street Sixth Floor Indianapolis, IN 46225 Make reports to County Departments of Public Welfare. Iowa: Iowa Department of Human Services Division of Social Services Central Child Abuse Registry Hoover State Office Building Fifth Floor Des Moines, IA 50319 Make reports in-State to (800) 362-2178 or out-of-

State (during business hours) to (515) 281-5581. Kansas: Kansas Department of Social and Rehabilitation Services Division of Social Services Child Protection and Family Services Section Smith-Wilson Building 2700 West Sixth Street Topeka, KS 66606 Make reports to Department of Social and Rehabilitation Service Area Offices. Kentucky: Kentucky Cabinet of Human Resources Division of Family Services Children and Youth Services Branch 275 East Main Street Frankfort, KY 40621 Make reports to County Offices in 14 State districts. Louisiana: Louisiana Department of Health and Human Resources Office of Human Development Division of Children, Youth, and Family Services P.O. Box 3318 Baton Rouge, LA 70821 Make reports to parish Protective Service Units. Maine: Maine Department of Human Services Child Protective Services State House, Station 11 Augusta, ME 04333 Make reports to Regional Office of Human Services;

in-State to (800) 452-1999
or out-of-State to (207)
289-2983. Both operate 24
hours a day.
Maryland:

Maryland Department of Human Resources Social Services Administration Saratoga State Center 311 West Saratoga Street Baltimore, MD 21201

Make reports to County Departments of Social Services or to local law enforcement agencies.

Massachusetts: Massachusetts Department of Social Services Protective Services 150 Causeway Street 11th Floor Boston, MA 02114

Make reports to Area Offices or Protective Screening Unit or in-State to (800) 792-5200.

Michigan: Michigan Department of Social Services Office of Children and Youth Services Protective Services Division 300 South Capitol Avenue Ninth Floor Lansing, MI 48926

Make reports to County Departments of Social Services.

Minnesota: Minnesota Department of Human Services Protective Services Division Centennial Office Building St. Paul, MN 55155

Make reports to County Departments of Human Services. Mississippi: Mississippi Department of Public Welfare Bureau of Family and Children's Services Protection Department P.O. Box 352 Jackson, MS 39205 Make reports in-State to (800) 222-8000 or out-of-State (during business hours) to (601) 354-0341. Missouri: Missouri Child Abuse and Neglect Hotline Department of Social Service Division of Family Services DFS, P.O. Box 88 Broadway Building Jefferson City, MO 65103 Make reports in-State to (800) 392-3738 or out-of-State to (314) 751-3448. Both operate 24 hours a day. Montana: Department of Family Services Child Protective Services P.O. Box 8005 Helena, MT 59604 Make reports to County Departments of Family Services. Nebraska: Nebraska Department of Social Services Human Services Division 301 Centennial Mall South P.O. Box 95026 Lincoln, NE 68509

Make reports to local law enforcement agencies or to local social services offices or in-State to (800) 652-1999.

Nevada: Department of Human Resources Welfare Division 2527 North Carson Street Carson City, NV 89710

Make reports to Division of Welfare local offices.

New Hampshire: New Hampshire Department of Health and Welfare Division for Children and Youth Services 6 Hazen Drive Concord, NH 03301-6522

Make reports to Division for Children and Youth Services District Offices or in-State to (800) 852-3345 (Ext. 4455).

New Jersey: New Jersey Division of Youth and Family Services P.O. Box CN717 One South Montgomery Street Trenton, NJ 08625

Make reports in-State to (800) 792-8610. District offices also provide 24-hour telephone services.

New Mexico: New Mexico Department of Human Services Social Services Division P.O. Box 2348 Santa Fe, NM 87504

Make reports to County

Social Services offices or in-State to (800) 432-6217.

New York: New York State Department of Social Services Division of Family and Children Services State Central Register of Child Abuse and Maltreatment 40 North Pearl Street Albany, NY 12243

Make reports in-State to (800) 342-3720 or out-of-State to (518) 474-9448.

North Carolina: North Carolina Department of Human Resources Division of Social Services Child Protective Services 325 North Salisbury Street Raleigh, NC 27611

Make reports in-State to (800) 662-7030.

North Dakota: North Dakota Department of Human Services Division of Children and Family Services Child Abuse and Neglect Program State Capitol Bismarck, ND 58505

Make reports to County Social Services Offices.

Ohio: Ohio Department of Human Services Bureau of Children's Protective Services 30 East Broad Street Columbus, OH 43266-0423

Make reports to County

Departments of Human Services. Oklahoma: Oklahoma Department of Human Services Division of Children and Youth Services Child Abuse/Neglect Section P.O. Box 25352 Oklahoma City, OK 73125 Make reports in-State to (800) 522-3511. Oregon: Department of Human Resources Children's Services Division Child Protective Services 198 Commercial Street, S.E. Salem, OR 97310 Make reports to local Children's Services Division Offices and to (503) 378-4722. Pennsylvania: Pennsylvania Department of Public Welfare Office of Children, Youth and Families Child Line and Abuse Registry Lanco Lodge, P.O. Box 2675 Harrisburg, PA 17105 Make reports in-State to CHILDLINE (800) 932-0313 or out-of-State to (713) 783-8744. Puerto Rico: Puerto Rico Department of Social Services Services to Family With Children P.O. Box 11398 Fernandez Juncos Station Santurez, PR 00910

Make reports to (809) 724-1333. Rhode Island: Rhode Island Department for Children and Their Families Division of Child Protective Services 610 Mt. Pleasant Avenue Bldg. #9 Providence, RI 02908 Make reports in-State to (800) RI-CHILD or 742-4453 or out-of-State to (401) 457-4996. South Carolina: South Carolina Department of Social Services 1535 Confederate Avenue P.O. Box 1520 Columbia, SC 29202-1520 Make reports to County Departments of Social Services. South Dakota: Department of Social Services Child Protection Services Richard F. Kneip Building 700 Governors Drive Pierre, SD 57501 Make reports to local social services offices. Tennessee: Tennessee Department of Human Services Child Protective Services Citizen Bank Plaza 400 Deadrick Street Nashville, TN 37219 Make reports to County Departments of Human Services.

Texas: Texas Department of Human Services Protective Services for Families and Children Branch P.O. Box 2960, MC 537-W Austin, TX 78769 Make reports in-State to (800) 252-5400 or out-of-State to (512) 450-3360. Utah: Department of Social Services Division of Family Services P.O. Box 45500 Salt Lake City, UT 84110 Make reports to Division of Family Services District Offices. Vermont: Vermont Department of Social and Rehabilitative Services Division of Social Services 103 South Main Street Waterbury, VT 05676 Make reports to District Offices or to (802) 241-2131. Virgin Islands: Virgin Islands Department of Human Services Division of Social Services P.O. Box 550 Charlotte Amalie St. Thomas, VI 00801 Make reports to Division of

Social Services (809) 774-9030.

Virginia: Commonwealth of Virginia Department of Social Services Bureau of Child Protective Services Blair Building 8007 Discovery Drive Richmond, VA 23229-8699 Make reports in-State to (800) 552-7096 or out-of-State to (804) 281-9081. Washington: Department of Social and Health Services Division of Children and Family Services Child Protective Services Mail Stop OB 41-D Olympia, WA 98504 Make reports in-State to (800) 562-5624 or local Social and Health Services Offices. West Virginia: West Virginia Department of Human Services Division of Social Services Child Protective Services State Office Building 1900 Washington Street East Charleston, WV 25305 Make reports in-State to (800) 352-6513. Wisconsin: Wisconsin Department of Health and Social Services Division of Community Services Bureau for Children, Youth, and Families 1 West Wilson Street Madison, WI 53707

Make reports to County Social Services Offices.

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Wyoming: Department of Health and Social Services Division of Public Assistance and Social Services Hathaway Building Cheyenne, WY 82002

Make reports to County Departments of Public Assistance and Social Services.

NATIONAL ORGANIZATIONS CONCERNED WITH CHILD MALTREATMENT

Action for Child Protection 428 Fourth Street, Suite 5B Annapolis, MD 21403 (301) 263-2509

Professional and institutional inquiries only.

American Academy of Pediatrics 141 Northwest Point Boulevard P.O. Box 927 Elk Grove Village, IL 60009-0927 (800) 433-9016

For professional and public educational materials contact the Publications Department. For information on activities of the AAP Task Force on Child Abuse and Neglect, contact James Harisiades (Ext. 7937).

American Bar Association
National Legal Resource Center
for Child Advocacy and
Protection
1800 M Street, N.W., Suite 200
Washington, DC 20036
(202) 331-2250

Professional and institutional inquiries only.

American Humane Association American Association for Protecting Children 9725 East Hampden Avenue Denver, CO 80231 (303) 695-0811 (800) 227-5242

Professional publications and public inquiries regarding child protective services and child abuse and neglect. American Medical Association Health and Human Behavior Department 535 North Dearborn Chicago, IL 60610 (312) 645-5066

American Public Welfare Association 810 First Street, NE Suite 500 Washington, DC 20002 (202) 682-0100

Contact: Karen Bonner or Toshio Tatara

Association of Junior Leagues 660 First Avenue New York, NY 10016 (212) 683-1515

Contact: For legislative information, Public Policy Director; for individual Junior League programs and child abuse and neglect information, League Services Department.

Boys Clubs of America Government Relations Office 611 Rockville Pike, Suite 230 Rockville, MD 20852 (301) 251-6676

Contact: Robbie Callaway

1,100 clubs nationwide serving 1.3 million boys and girls. Offers child safety curriculum.

C. Henry Kempe Center for Prevention and Treatment of Child Abuse and Neglect 1205 Oneida Street Denver, CO 80220 (303) 321-3963 Contact: Gail Ryan for publications.

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Child Welfare League of America 440 First Street, N.W. Suite 310 Washington, DC 20001 (202) 638-2952

Contact: Beverly Jones

Professional and institutional inquiries only.

Childhelp USA 6463 Independence Avenue Woodland Hills, CA 91367 Hotline: (800) 4-A-CHILD or (800) 422-4453

Provides comprehensive crisis counseling by mental health professionals for adult and child victims of child abuse and neglect, offenders, parents who are fearful of abusing or who want information on how to be effective parents. The Survivors of Childhood Abuse Program (SCAP) disseminates materials, makes treatment referrals, trains professionals, and conducts research.

General Federation of Women's Clubs 1734 N Street, N.W. Washington, DC 20036 (202) 347-3163

Contact: Program Office

10,000 clubs nationwide. Provides child abuse and neglect prevention and education programs, nonprofessional support, and legislative activities. Programs are based on needs of community.

Military Family Resource Center (MFRC) Ballston Centre Tower Three Ninth Floor 4015 Wilson Boulevard Arlington, VA 22203 (202) 696-4555

Recommends policy and program guidance to the Assistant Secretary of Defense (Force Management and Personnel) on family violence issues and assists the military services to establish, develop, and maintain comprehensive family violence programs.

National Association of Social Workers 7981 Eastern Avenue Silver Spring, MD 20910 (301) 565-0333

Professional and institutional inquiries only.

National Black Child Development Institute 1463 Rhode Island Avenue, N.W. Washington, DC 20005 (202) 387-1281

Provides newsletter, annual conference, and answers public inquiries regarding issues facing black children/youth.

National Center for Child Abuse and Neglect (NCCAN) Children's Bureau Administration for Children, Youth and Families Office of Human Development Services Department of Health and Human Services P.O. Box 1182 Washington, DC 20013 Responsible for the Federal Government's child abuse and neglect activities. Administers grant programs to States and organizations to further research and demonstration projects, service programs, and other activities related to the identification, treatment, and prevention of child abuse and neglect.

Clearinghouse provides selected publications and information services on child abuse and neglect. (703) 821-2086

National Center for Missing and Exploited Children 1835 K Street N.W., Suite 700 Washington, DC 20006 (202) 634-9821 or (800) 843-5678

Toll-free number for reporting missing children, sightings of missing children, or reporting cases of child pornography. Provides free written materials for the general public on child victimization as well as technical documents for professionals.

National Committee for Prevention of Child Abuse

332 South Michigan Avenue Chicago, IL 60604 (312) 663-3520

68 local chapters (in all 50 States). Provides information and statistics on child abuse and maintains an extensive publications list. The National Research Center provides information for professionals on promising programs, methods for evaluating programs, and research findings.

National Council of Juvenile and Family Court Judges P.O. Box 8970 Reno, NV 89507 (702) 784-6012

Contact: James Toner

Primarily professional and institutional inquiries.

National Council on Child Abuse and Family Violence 1050 Connecticut Ave. N.W., Suite 300 Washington, DC 20036 (800) 222-2000

Contact: Mary-Ellen Rood

National Crime Prevention Council 733 15th Street N.W., Rm. 540 Washington, DC 20005 (202) 393-7141

Contact: Terry Modglin, Director of Youth Programs

Provides personal safety curricula, including child abuse and neglect prevention school children and model prevention programs for adolescents. Educational materials for parents, children, and community groups are available.

National Education Association (NEA) Human and Civil Rights Unit 1201 16th Street N.W., Rm. 714 Washington, DC 20036 (202) 822-7711

Contact: Mary Faber

Offers training to NEA members. Sells child abuse and neglect training kits and supplemental materials to professionals and the general public.

National Exchange Club Foundation for Prevention of Child Abuse 3050 Central Avenue Toledo, OH 43606 (419) 535-3232

Contact: George Mezinko, Director of Foundation Services.

Provides volunteer parent aide services to abusive and neglecting families in 37 cities.

National Network of Runaway and Youth Services 905 Sixth St. N.W., Ste. 411 Washington, DC 20024 (202) 488-0739

Contact: Renee Woodworth

Provides written materials, responds to general inquiries regarding runaways and adolescent abuse, and serves as a referral source for runaways and parents.

National Organization for Victim Assistance (NOVA) 717 D Street N.W. Washington, DC 20004 (202) 393-NOVA

Provides information and referral for child victims as well as crisis counseling. National Runaway Switchboard Metro-Help, Inc. 2080 N. Lincoln Chicago, IL 60657 800-621-4000 (toll-free) (312) 880-9860 (business phone)

Contact: Beverly Edmonds

Provides toll-free information, referral, and crisis counseling services to runaway and homeless youth and their families. Also serves as the National Youth Suicide Hotline

Parents Anonymous 7120 Franklin Avenue Los Angeles, CA 90046 (800) 421-0353 (toll-free) (213) 410-9732 (business phone)

Contact: Margot Fritz, Acting Executive Director

1,200 chapters nationwide. National program of professionally facilitated selfhelp groups. Each State has different program components.

Parents United/Daughters and Sons United/Adults Molested as Children United P.O. Box 952 San Jose, CA 95108 (408) 280-5055

150 chapters nationwide. Provides guided self-help for sexually abusive parents as well as child and adult victims of sexual abuse. VOCAL

 Victims of Child Abuse Laws (VOCAL)
 P.O. Box 11335
 Minneapolis, MN 55412
 (612) 521-9714 .

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NATIONAL CHILD WELFARE RESOURCE CENTERS

National Child Abuse and Neglect Clinical Resource Center Kempe National Center University of Colorado Health Sciences Center 1205 Oneida Street Denver, CO 80220 (303) 321-3963

National Child Welfare Resource Center for Management and Administration University of Southern Maine 96 Falmouth Street Portland, ME 04103 (207) 780-4430 (800) HELP-KID

National Legal Resource Center for Child Welfare American Bar Association 1800 M Street N.W. Suite S-200 Washington, DC 20036 (202) 331-2250

National Resource Center for Foster and Residential Care Child Welfare Institute 1430 N. Peachtree St. Suite 510 Atlanta, GA 30309 (404) 876-1934

National Resource Center for Special Needs Adoption A Division of Spaulding for Children 3660 Waltrous Road P.O. Box 337 Chelsea, MI 48118 (313) 475-8693 National Resource Center for Youth Services The University of Oklahoma 125 North Greenwood Ave. Tulsa, OK 74120 (918) 585-2986

National Resource Center on Child Abuse and Neglect American Association for Protecting Children American Humane Association 9725 East Hampden Avenue Denver, CO 80231 (303) 695-0811

National Resource Center on Child Sexual Abuse 11141 Georgia Avenue Suite 310 Wheaton, MD 20902 (301) 949-5000 (Maryland) (205) 533-KIDS (Alabama) (800) KIDS-006

National Resource Center on Family Based Services The University of Iowa School of Social Work Oakdale Campus, N240 OH Oakdale, IA 52319 (319) 335-4123

National Resource Institute on Children and Youth with Handicaps Child Development and Mental Retardation Center University of Washington Mailstop WJ-10 Seattle, WA 98195 (206) 543-2213

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