

QUICK REFERENCE GUIDE: INDICATORS OF ABUSE AND NEGLECT		
Child Physical Indicators	Child Behavioral Indicators	Parent/Caregiver/Adult Indicators
<ul style="list-style-type: none"> • Unexplained bruises and welts (especially on face, lips, mouth or on torso, back, buttocks, thighs) • Bruises and welts in various stages of healing and/or on several different surface areas • Bruises and welts reflecting the shape of an article used to inflict injury (extension cord, belt buckle) • Unexplained burns • Circular burns possibly caused by cigar, cigarette, match tip specially on soles, palms, torso, buttocks • Scalding or immersion burns (sock-like, glove-like, doughnut –shaped on buttocks or genitalia) • Dry contact burns, perhaps shaped like electric burner, iron, heating coil, radiator • Rope burns on arms, legs, neck, or torso • Unexplained lacerations or abrasions (especially to mouth, lips, gums, eyes, genitals) • Unexplained fractures • Evidence of delayed or inappropriate treatment for injuries • Injuries that regularly appear after school absence, weekend, or vacation • Consistent hunger • Consistent poor hygiene • Body weight and height 	<ul style="list-style-type: none"> • States directly or indirectly that he or she is being injured/abused/sexually abused • States directly or indirectly that a parent/caregiver is being injured/abused (domestic violence) • States or acts as if he or she is afraid of parent/caregiver/adult • States or acts as if he or she is afraid to go home • Complains of soreness or moves uncomfortably • Wears clothing inappropriate to weather, to cover body • Seems wary of adults • Seems apprehensive when other children cry • Exhibits behavioral extremes (very compliant, passive, withdrawn, aggressive, demanding) • Writes about abuse in journal, notes • Depicts abuse in artwork • States directly or indirectly that there is no one home to provide care or supervision • Begs, steals, hides, or hoards, food – begs from classmates • Consistently arrives very early for school and/or stays very late • Is frequently absent from school • Seems constantly fatigued and/or listless, falls asleep in class • Exhibits extreme loneliness and need for affection • Has been harmed in the past as a result of being left alone at home or elsewhere • Is frequently inadequately supervised • Abuses alcohol and/or drugs • Cries or acts fearful for no apparent reason • Refuses to “dress out” or participate in physical education • Masturbates compulsively • Engages in sexualized play, possibly including issues of force • Exhibits bizarre, sophisticated, or unusual sexual behavior or knowledge • Behaves in sexually provocative manner toward peers and/or adults 	<ul style="list-style-type: none"> • Offers conflicting or unconvincing explanation of child’s injuries, or no explanation • Refers to the child as “bad” or uses other negative connotation • Terrorizes child with screaming, threats • Blames or belittles child • Uses harsh physical punishment • Appears indifferent to the child • Appears apathetic or depressed • Behaves bizarrely • Appears not to care whether the child is supervised • Is unusually protective of the child or severely limits the child’s contact with other children • Is jealous or controlling with family members • Locks child in small area, such as a closet • Ties child’s limbs together or to an object • Allows child to be used for prostitution, pornography, or other illegal purposes • Allows child to use alcohol or drugs • Fails to report to law enforcement when child is missing

<p>significantly below average</p> <ul style="list-style-type: none"> • Face appears lined/elderly, pinched/sharp • Clothing is frequently insufficient or inappropriate for weather • Consistent lack of supervision, especially in dangerous activities • Untreated injuries, illnesses, psychological problems • Abandonment • Unattended medical needs • Difficulty walking or sitting • Torn, shredded, or stained/bloody underclothing • Bruises or bleeding in genital or anal area, inner thigh • Pain or itching in genital area • Venereal diseases, especially in pre-teens • Odor coming from genital area • Frequent urinary tract or yeast infections • Speech disorder • Lags in physical development • Failure to thrive 	<ul style="list-style-type: none"> • Massive weight change • Withdraws from other people or from reality, engages in infantile behaviors • Has poor peer relationships and/or is not allowed to socialize outside of school • Has sudden decline in school performance • Seems to have habit disorder (sucking, biting, rocking) • Threatens or attempts self-harm or suicide • Shows diminished cognitive ability • Hoards or hides food or possessions • Seems to have conduct disorder (antisocial, destructive) • Seems to have sleep disorder • Inhibition to play • Seems to have hysteria, obsessions, compulsions, phobias • Behaves in infantile manner • Acts “parentified” – inappropriately adult-like/engaged in role reversal in which the child seems to be “parenting” his or her parent, and overly concerned for siblings • Has developmental lags • Self destructive behavior • Chronic runaway • Has history of delinquency • School dropout 	
<p>Indicators of child victims of human trafficking:</p> <ul style="list-style-type: none"> • Sneaking use of texting, talking on cell phone • Inappropriate dress • Tattoos of names on inner wrist, neck, chest, or inner thigh • Poor school attendance • Tired, sleeping in class • Eating disorders • Fear and anxiety 		

QUICK REFERENCE GUIDE: REPORTING CHILD ABUSE AND NEGLECT		
Method	Information Needed	What Happens Next?
<ul style="list-style-type: none"> Phone 1-800-96-ABUSE Benefits: <ul style="list-style-type: none"> • Speak to a live counselor • Two way communication • Investigation Decision given at the end of the call Fax 1-800-914-0004 Benefits: <ul style="list-style-type: none"> • No wait time Web – Online Reporting http://www.dcf.state.fl.us/abuse/report/ Benefits: <ul style="list-style-type: none"> • Start a report and finish it later • No wait time • Confirmation of Report • Log in to retrieve Investigation Decision • Referral information <p>*Immediate issues should not be reported using the Fax or Web tool method.</p> <p>To determine which method is best for you, please look at the benefits for each of the methods available for reporting.</p>	<p>What information is needed to make a report? Please have the following information ready when you make a report:</p> <ul style="list-style-type: none"> - Participant information: (victim, alleged perpetrator, household members, other children in the home, and any sources that may have information about the abuse or neglect.) Names, and if known, the Dates of Birth and Social Security numbers for all participants. - Address information for the victim and family. Remember, the Department of Children and Families must have a correct address to locate the child or family. In the event the investigator cannot locate the family, you may be contacted to provide additional information. - Your information: Name, ALL phone numbers (i.e., cell, home, etc.), address of school, name of school, phone number of school, hours you can be contacted, and how you know about the allegations of abuse and neglect. Since you are a professionally mandated reporter you may not remain anonymous, however, your identity will be kept confidential pursuant to Section 39.201, Florida Statutes. - Any Information regarding your concerns about the child and/or family. Based on the information you provide, the Hotline will make a decision whether to dispatch an investigator or not. Please make sure you provide the who, what, when, where, why, and how of the situation. Also, please be prepared to answer questions about the child’s behavior in school, any interactions with the parents or caregivers, family dynamics, and parenting practices in general. 	<p>The school is not responsible for nor obligated to inform the parent/guardian that a report has been made.</p> <p>Reporting suspected abuse does not mean the child will automatically be removed from the home. Child protective services and the court system attempt to keep families together when this option is appropriate, but they do provide emergency shelter and crisis care outside the home.</p> <p>During the course of an investigation into possible abuse, neglect, and/or abandonment of a child, the law enforcement officer investigating the allegation may choose to interview the child at the school. The officer is authorized to remove the child from any public or private school for a medical examination or forensic interview, or for any other procedure deemed necessary.</p>
<ul style="list-style-type: none"> Section 39.202(5), F.S., states, “Any person who reports a case of child abuse or neglect may, at the time he or she makes the report, request that the department notify him or her that a child protective investigation has occurred as a result of the report.” The statute further states, “Any person specifically listed in s. 39.201(1) who makes a report in his or her official capacity may also request a written summary of the outcome of the investigation. The department shall mail such a notice to the reporter within 10 days after completing the child protective investigation.” 		