

# Child Sexual Abuse

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Entry-Level Training for the

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# Mandated Reporter



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## FOREWORD

Whether you are a mandated reporter of child sexual abuse or a concerned citizen who values children and families in our society, this easily read, concise, and well-written manual is for you. This nicely organized little text will be valuable to those whose professional work or employment places them in contact with children and teens or their families. It will also be useful for training employees in multiple settings where children are encountered.

Programs in social work, forensics, mental health, criminal justice, education, child advocacy, daycares, general hospital staff, etc, will find this compact manual ideal for courses on child abuse. Undergraduate professors and high school teachers will benefit from the knowledge this manual imparts for teaching classes on human behavior/development, social responsibility, etc.

The manual is divided into 3 chapters. Each begins with a set of clear objectives. A lesson outline follows. Within the outlines are learning activities which direct the reader to become actively engaged in enhancing his/her knowledge (eg, by performing an online search). The reader is then asked to answer questions to solidify the newly mastered material. The outlines also are embedded with questions, many of which the reader might be formulating about the time the question appears. Tables and Web sites for additional references add to readability and efficiency of this gem. The manual concludes with a set of questions for review and/or class discussion or evaluation, followed by excellent references.

In Chapter 1, the reader will be introduced to the definition and epidemiology of sexual abuse, its victims, and its perpetrators. Signs that might suggest a child has been/ is being abused are listed and the process of disclosure is discussed. Why children often delay telling about their abuse is explained, as well as the possible effects of sexual abuse.

Chapter 2, Responding to Child Sexual Abuse, differentiates the mandated reporter from a permissive reporter, addressing concerns about making false reports and penalties for failing to report. Perhaps most of interest, Dr. Atzemis makes suggestions for how to act and what to say when a child discloses abuse. She then explains the investigative process, describing a multidisciplinary team and the use of child advocacy centers (CACs). As a child abuse pediatrician, Dr. Atzemis is particularly adept at discussing the importance of offering a medical examination for every child who may have been sexually abused. Why most children who have been sexually abused have normal examinations is also elucidated, correcting the myth that a health care provider can readily prove whether a child has been sexually abused.

Although brief, the third chapter on Prevention of Child Sexual Abuse is terribly important. It challenges all of us to make our own commitment to prevention efforts. In the past most efforts for prevention were directed only at children and teens, but parents, communities, organizations, and government agencies, as well as potential abusers, must be enlisted in this fight. Families and caretakers must be strengthened to protect our children.

Dr. Atzemis will have convinced us that “child sexual abuse is a complex problem and the prevention of child sexual abuse is equally complex.”

### **Linda J. Shaw, MD, MSSW**

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## PREFACE

Acts of sexual abuse can be committed against children in every social stratum, against boys as well as girls, and against children of all ethnicities. No particular group is entirely safe from harm at the hands of sexually abusive adults, adolescents, or peers who may be, and frequently are, family members, trusted friends, or authority figures charged with their care. In the interest of child welfare and the greater public good, it behooves those who will, in the course of their professional responsibilities, care for, or otherwise come into contact with children, to understand the nature of sexual abuse and to recognize its telltale signs in order to identify and report suspected abusive incidents and to ensure the safety of abused children.

*Child Sexual Abuse: Entry-Level Training for the Mandated Reporter* is a self-assessment training module for those professionals bound to report incidents of suspected child abuse. Mandated reporters have a vital role to play on the front lines of child protection, and it is important they be prepared to recognize potential cases of abuse and to respond appropriately to disclosures of abusive incidents. It is equally important that the mandated reporter understand when, how, and to whom reports of potential abuse should be made, in order to report promptly and appropriately in all cases.

*Child Sexual Abuse: Entry-Level Training for the Mandated Reporter* is designed with these goals in mind: to understand, effectively respond to, and assist in the prevention of child sexual abuse, however it manifests. It is the author's and the publisher's sincerest hope that this training self-assessment will benefit mandated reporters of every variety, as well as the children and families they work with, by means of continued education in child protection.

Lastly, readers should bear in mind that thoughts of child sexual abuse inevitably elicit strong emotional reactions, such as sadness for abused children, anger toward abusers, shame for our own experiences, and regret for the harm we might have done to others. If these feelings become intense or obtrusive, or if completing this curriculum becomes emotionally troublesome, please reach out to the professionals available to you for assistance. If you work for an organization that offers employee assistance programs, please take advantage of them. Remember that caring for oneself is an important part of caring for others.

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## REVIEWS

Child Sexual Abuse: Entry-Level Training for the Mandated Reporter *is an excellent resource for anyone who is a mandated reporter as well as anyone who views themselves as an advocate for children. "Sexual abuse thrives in secrecy and silence. Effectively protecting children and ensuring community justice requires that responsible people speak up and be a voice for vulnerable children." This text requires the reader to research vital information regarding legal definitions of and laws pertaining to child sexual abuse, statistical data, laws pertaining to mandated reporters, and how to access the child advocacy center within the reader's own geographical location. Mandated reporters have a responsibility to children and it is important they understand, "people who report abuse are not asked to prove or verify that the information given by the victim is true." The responsibility of a mandated reporter is to report identified concerns. This text is informative, easy to read, and should be a required educational piece for all mandated reporters.*

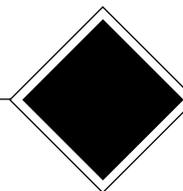
Lisa Baker, MSN, APRN, FNP-C, SANE-P, SANE-A  
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Child Sexual Abuse: Entry-Level Training for the Mandated Reporter *is a clearly written, easy-to-understand curriculum. The organization is intuitive and follows a pathway consistent with how a clinician would think about sexual abuse, starting with definition, moving toward epidemiology, and then looking specifically at concerning behaviors and warning signs. This text presents a well-thought-out, understandable approach to the response when a concern of sexual abuse arises. Dr. Atzemis demonstrates a sound, clinically appropriate approach that uses good judgment and balances legal requirements with professional behaviors towards the child who may be in crisis. Child Sexual Abuse for the Mandated Reporter does a good job at framing out the issues around sexual abuse prevention. This remains an evolving field and Dr. Atzemis correctly reflects that evolutionary approach. Dr. Atzemis has crafted an excellent scholarly work that will be useful to the readers and has distilled down a great deal of complicated material to something manageable and informative.*

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Child Sexual Abuse: Entry-Level Training for the Mandated Reporter *is a well-organized and easy-to-read guide to understanding, responding to, and preventing child sexual abuse. The personalized learning activities are very helpful by actively engaging the reader and re-enforcing important learning points. As a general pediatrician and mandated reporter, I found this curriculum very easy to use and understand. It does a great job defining what child sexual abuse is and describing the best way to deal with it and prevent it.*

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# CONTENTS

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<b>CHAPTER 1: UNDERSTANDING CHILD SEXUAL ABUSE . . . . .</b>	<b>1</b>
Objectives . . . . .	1
Lesson Outline . . . . .	1
I. Definitions . . . . .	1
Personalized Learning Activity 1-1. State and Local Definitions of Sexual Abuse. . . . .	2
II. Epidemiology . . . . .	2
A. Data Collection and Analysis . . . . .	3
B. Self-Report or Survey Data . . . . .	4
Personalized Learning Activity 1-2. Number of Sexual Abuse Victims . . . . .	4
III. Sexual Abuse Victims . . . . .	4
IV. Sexual Abusers . . . . .	5
V. Recognizing Sexual Abuse Victims . . . . .	5
VI. Impact of Sexual Abuse . . . . .	6
<b>CHAPTER 2: RESPONDING TO CHILD SEXUAL ABUSE . . . . .</b>	<b>9</b>
Objectives . . . . .	9
Lesson Outline . . . . .	9
I. Reporting Abuse . . . . .	9
A. Mandated Reporting . . . . .	9
Personalized Learning Activity 2-1. State Mandated Reporting Statutes . . . . .	10
Personalized Learning Activity 2-2. Local Child Abuse Hotlines . . . . .	10
B. Permissive Reporting . . . . .	10
C. Immunity. . . . .	11
D. Penalties . . . . .	11
II. Child Sexual Abuse in the Legal System . . . . .	11
Personalized Learning Activity 2-3. Local Child Advocacy Centers . . . . .	14
III. Child Sexual Abuse in the Medical Setting . . . . .	14
<b>CHAPTER 3: PREVENTION OF CHILD SEXUAL ABUSE . . . . .</b>	<b>17</b>
Objectives . . . . .	17
Lesson Outline . . . . .	17
I. Child Sexual Abuse Prevention Strategies . . . . .	17
Personalized Learning Activity 3-1. Local Prevention Programs . . . . .	18
II. Supporting Protective Factors in Your Community . . . . .	18
Personalized Learning Activity 3-2. Your Personal Commitment. . . . .	18
<b>TEST QUESTIONS FOR CHAPTERS 1-3 . . . . .</b>	<b>19</b>
Entry-Level Child Sexual Abuse Training for Mandated Reporters . . . . .	19
<b>REFERENCES . . . . .</b>	<b>21</b>
<b>ANSWER KEY. . . . .</b>	<b>23</b>

# UNDERSTANDING CHILD SEXUAL ABUSE

## OBJECTIVES

On completion of this chapter, the participant will be able to:

1. Define the terms *child sexual abuse* and *child sexual assault*.
2. Describe and differentiate normal sexual behaviors common to children from problem sexual behaviors.
3. Explain why determining the actual number of sexually abused children is difficult.
4. Recognize factors that put children at risk for sexual abuse.
5. Be aware of how child sexual abusers overcome barriers to sexually abuse children.
6. Understand the variability of how sexually abused children are recognized.
7. List possible consequences of child sexual abuse.

## LESSON OUTLINE

### I. DEFINITIONS

Personalized Learning Activity 1-1. State and Local Definitions of Sexual Abuse

### II. EPIDEMIOLOGY

A. Data Collection and Analysis

B. Self-Report or Survey Data

Personalized Learning Activity 1-2. Number of Sexual Abuse Victims

### III. SEXUAL ABUSE VICTIMS

### IV. SEXUAL ABUSERS

### V. RECOGNIZING SEXUAL ABUSE VICTIMS

### VI. IMPACT OF SEXUAL ABUSE

## I. DEFINITIONS

*What is child sexual abuse?*

Even professionals who work in the child sexual abuse field have struggled to define child sexual abuse in a simple way. In general, it is agreed that *child sexual abuse* is the involvement of a child younger than 18 years in sexual activity that they cannot, or do not, consent to for the sexual gratification or financial benefit of the abuser. Sexual activity can include physical contact activities or noncontact activities (**Tables 1-1** and **1-2**).

*Is there a difference between child sexual abuse and child sexual assault?*

Yes. Although the activities of abuse may be identical, the use of the terminology child sexual abuse or child sexual assault depends on the relationship of the perpetrator and the child. *Child sexual abuse* occurs when the activity is perpetrated by an individual who has caretaking responsibilities of the child, such as a parent, babysitter, or teacher, while *child sexual assault* occurs when the inappropriate sexual activity is perpetrated by an individual who does not have caretaking responsibilities of the child, such as a peer, neighbor, or stranger.

# RESPONDING TO CHILD SEXUAL ABUSE

## OBJECTIVES

On completion of this chapter, the participant will be able to:

1. Define and differentiate between mandated and permissive reporting.
2. Understand the responsibilities of and protections afforded to mandated reporters.
3. Appropriately respond to a child disclosing abuse.
4. Recognize the process by which a report of sexual abuse is investigated.
5. Understand that the bodies of most sexually abused children appear normal.
6. Be familiar with the medical needs of sexually abused children.

## LESSON OUTLINE

### I. REPORTING ABUSE

#### A. Mandated Reporting

Personalized Learning Activity 2-1. State Mandated Reporting Statutes

Personalized Learning Activity 2-2. Local Child Abuse Hotlines

#### B. Permissive Reporting

#### C. Immunity

#### D. Penalties

### II. CHILD SEXUAL ABUSE IN THE LEGAL SYSTEM

Personalized Learning Activity 2-3. Local Child Advocacy Centers

### III. CHILD SEXUAL ABUSE IN THE MEDICAL SETTING

## I. REPORTING ABUSE

Sexual abuse thrives in secrecy and silence. Effectively protecting children and ensuring community justice requires that responsible people speak up and be a voice for vulnerable children.

### A. MANDATED REPORTING

*I think I might be a **mandated reporter**. What does that mean?*

Many governments have enacted mandated reporting laws, which require certain people to report possible abuse to authorities. In the United States, each state has enacted unique mandated reporting laws. Some states require all of the states' citizens to report possible child abuse. Many states have selected mandated reporters based on their occupation or place of employment. These selected mandated reporters are typically people who have frequent contact with children, such as school and hospital staff (**Table 2-1**).

Mandated reporting laws include instructions on what must be reported, how it must be reported, and when it must be reported. In general, any reasonable suspicion that a child has been abused must be reported by telephone to an agency responsible for investigating and that telephone call must be made immediately. Mandated reporters are not required to provide definitive evidence or proof that a child has been abused. In fact, there may be penalties incurred if a mandated reporter delays in reporting a case to conduct their own "investigation."

Table 2-1. Examples of Who May Be Mandated Reporters	
BY PROFESSION OR TRAINING	BY PLACE OF EMPLOYMENT
— Teachers	— School
— Health care providers (physicians, dentists, chiropractors, nurses, physician assistants, etc.)	— Youth center
— Childcare providers	— Hospital
— Social workers	— Medical clinic
— Medical examiners/coroners	— Daycare facility
— Law enforcement officers	— Child advocacy center
— Mental health professionals	— Police department
— Substance abuse counselors	— Welfare department
— Firefighters	— Correctional institution
— Domestic violence workers	— Courthouse
— Film processors	
— Animal control or humane officers	
— Clergy	
— Funeral home directors	

**PERSONALIZED LEARNING ACTIVITY 2-1.**

**STATE MANDATED REPORTING STATUTES**

*Purpose:* Become familiar with mandated reporting statutes that apply to you.

*Preparation:* Find your jurisdiction’s mandated reporting statutes by contacting your local Child Protective Service agency or using online resources such as <http://www.childwelfare.gov/>.

*Procedure:* Read the applicable statutes for your jurisdiction.

Answer the following questions:

- Are you a mandated reporter?
- What must be reported?
- When must it be reported?

**PERSONALIZED LEARNING ACTIVITY 2-2. LOCAL CHILD ABUSE HOTLINES**

*Purpose:* Become familiar with your local child abuse hotline number.

*Preparation:* Find your local child abuse hotline number in the phonebook, online, or other location.

*Procedure:* Write or post your local child abuse hotline number in a prominent location.

**B. PERMISSIVE REPORTING**

*I am not a mandated reporter. Can I still report my concerns that a child is being sexually abused?*

Even if you are not mandated to report possible abuse, you can be a *permissive reporter*. A permissive reporter can voluntarily make a report to authorities if they have a concern that a child is a victim of abuse.

# PREVENTION OF CHILD SEXUAL ABUSE

## OBJECTIVES

On completion of this chapter, the participant will be able to:

1. Understand the many aspects of preventing child sexual abuse.
2. List 6 protective factors to strengthen families and prevent child abuse.

## LESSON OUTLINE

### I. CHILD SEXUAL ABUSE PREVENTION STRATEGIES

Personalized Learning Activity 3-1. Local Prevention Programs

### II. SUPPORTING COMMUNITY PROTECTIVE FACTORS

Personalized Learning Activity 3-2. Your Personal Commitment

## I. CHILD SEXUAL ABUSE PREVENTION STRATEGIES

People who picture child sexual abuse perpetrators as strange men prowling the neighborhood's playgrounds and schoolyards may consider teaching children to stay away from strangers as sufficient child sexual abuse prevention. Child sexual abuse is a complex problem and the prevention of child sexual abuse is equally complex.

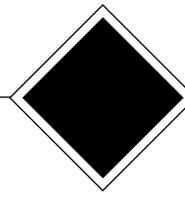
Traditionally, child sexual abuse prevention has been focused on:

- Empowering children to resist sexual touch.
- Identifying abused children.
- Encouraging a child to disclose sexual abuse.
- Restricting a known child sexual abuser from having access to children.

The true effectiveness of these techniques is not known. If the goal is to prevent a child from being sexually abused at all, our prevention efforts must go much further. Prevention efforts must be comprehensive and be directed toward all members of the community. Adults must take the lion's share of responsibility to protect children from abuse.

Prevention programs and strategies can be categorized by their intended audience:

- Children
  - Preschool-aged children
  - Elementary-aged children
  - Adolescents/Teenagers
- Adults who spend time with children (parents, caregivers, teachers, coaches)
- Organizations or institutions
- Legislators or other government officials
- Known or potential abusers



# TEST QUESTIONS FOR CHAPTERS 1-3

## CHILD SEXUAL ABUSE: ENTRY-LEVEL TRAINING FOR THE MANDATED REPORTER

1. Which of the following situations should prompt concern for possible sexual abuse?
  - a. A 3-year-old tries to peek at a sibling in the bathroom.
  - b. Two 4-year-olds are caught playing “house” undressed to their underwear.
  - c. A 2-year-old pulls on his penis during diaper changes.
  - d. A 5-year-old attempts to put his penis in his sibling’s vagina.
  - e. None of the above.
  
2. Which of the following statements about child sexual abusers are true?
  - a. Pedophiles have a persistent sexual interest in young children.
  - b. Both men and women have sexually abused children.
  - c. A sexual abuser typically targets children they know.
  - d. Heterosexual adults have sexually abused children.
  - e. All of the above are true.
  
3. All sexually abused children can be recognized by paying close attention to their abnormal behaviors.
  - a. True
  - b. False
  
4. You are walking down a quiet hallway with a 6-year-old child. The child says to you, “My bottom hurts. When that boy put his thing in there I told him to stop but he didn’t.” Which of these responses would be inappropriate?
  - a. Tell me what happened.
  - b. What boy did that?
  - c. Where were you when he did that?
  - d. Thank you for telling me.
  - e. You should not let people touch you there.