

Mid-Atlantic P.A.N.D.A.

Prevent Abuse and Neglect through Dental
Awareness



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Corporate Sponsor



Course Description*

**Maryland State Board of Dental Examiners has approved this course to fulfill the required 2 CE as needed for Maryland license renewal for dentists and hygienist.*

Mid-Atlantic Prevent Abuse and Neglect Through Dental Awareness is a :

Continuing education course designed to educate dentists, dental hygienists, dental assistants and others about the problems of child abuse and neglect, domestic violence, elder abuse and neglect, and human trafficking .

This course aims to:

- Teach recognition of the indicators of abuse and neglect.
- Inform about the legal and ethical responsibilities in reporting and referring victims.
- Educate to become knowledgeable to **recognize, report and refer.**

Abuse and Neglect

Abuse and neglect increasing problem

DP's often first to render treatment

Few DP's make reports

Early recognition important

Timely reporting and referrals



Facial swelling due to abscessed tooth, advanced ECC Photo courtesy: Dr. Brian Williams
www.first5oralhealth.org

Objectives

Upon completion of this course participants will be able to:

1. Discuss the background of abuse and neglect, events of historical significance, and the effects of maltreatment of children, adults, and the elderly.
2. Define, identify facts, and discuss child abuse and neglect, domestic violence, vulnerable adults, elder abuse and neglect, and human trafficking.
3. Describe the health care providers' role, ethical and legal responsibility in reporting suspicious cases of maltreatment of children and vulnerable adults.
4. Identify the problem of abuse and neglect from a dental health perspective.

Objectives

Upon completion of this course participants will be able to:

5. Identify local and national agencies to contact to appropriately report suspicious cases of maltreatment of children and vulnerable adults.
6. Describe the health care providers' role in recognizing, reporting and referring victims of domestic violence, elder abuse and neglect, and human trafficking.
7. Discuss risk factors, indicators, screening questions, barriers to seeking help, and education needed regarding abuse and neglect of children, domestic partners, vulnerable adults, elders and victims of human trafficking.

The Three Rs

Recognize



Report



Refer



Mission Statement

To create an atmosphere of understanding in dentistry and other professional communities which will result in the prevention of abuse and neglect through early identification and appropriate intervention for those who have been abused or neglected.



**She's not
Hiding,
She's
Hurting**



Legal & Liability Issues

Mandated Reporters

Immunity

Confidentiality

Privileged Communication

Failure to Report

Principles of Ethics & Code of Professional Conduct

Mandated reporters

- Dentists
- Dental Hygienists
- <10% reports from medical personnel
- Significantly less from DP's



U.S. DHHS, Administration for Children and Families,
Administration of Children, Youth and Families, Children's Bureau.
(2010). Child Maltreatment 2009.

Making a Report: Immunity

Annotated Code of Maryland: Family Law 5-708

Family Law 5-708:

Provides Immunity to “any person who makes or participates in making a report of (child) abuse or neglect under **sec. 5-704** or **sec. 5-705** of this subtitle
or

Participates in an investigation or resulting judicial proceeding shall have the immunity described under **sec. 5-620** of the Courts and Judicial Proceedings Article from civil or criminal penalty.”

Reporter Protection

*Annotated Code of Maryland:
Human Services Article 1-202: Section (b)(2)(ii)*

Human Services Article sec. 1-202...

States that information can only be released if:

“Provisions are made to comply with other State and Federal confidentiality laws and to protect the identity of the reporter or other person whose life or safety is likely to be endangered by the disclosure.”

Family Violence



- Child Abuse and Neglect
- Domestic Violence:
 - "Spousal abuse" or "Intimate Partner Violence"
 - Elder Abuse and Neglect
- Human Trafficking

The Need for Education

Survey of RDH's in Texas

- >50% no abuse education in curriculum
- 81% unknowledgeable on reporting elder abuse



Murphree KR et al. How well prepared are Texas dental hygienists to recognize and report elderly abuse? *J Dent Educ.*2002;66(11):1274-80.

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The Need for Education

UCSF School of Dentistry

- 88% of dentists didn't screen for domestic violence
- Those who received education more likely to screen and intervene



Love C., et al. Dentists Attitudes and Behaviors Regarding Domestic Violence :The Need for an Effective Response *J of the Amer. Dent Assoc.* 2001; 85-93.

Family Violence and Dentistry

Majority of physical abuse involves injuries to the head or neck area

Abusers often avoid the same physician, but return to the same dental office

Children & adults are more likely to have regular preventive care in the dental office

HISTORY OF ABUSE AND NEGLECT



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History

- New York 1874
- Mary Ellen Wilson
- 9 years old



American Society for the Prevention of Cruelty To Animals

(ASPCA) 1823-1888

- Carried Mary Ellen into court in horse blanket
- Asked she be treated like a **“Dumb Animal”**
- Place her in the **“Sheltering Arms of ASPCA”**



Henry Bergh, Founder ASPCA

Mary Ellen Wilson



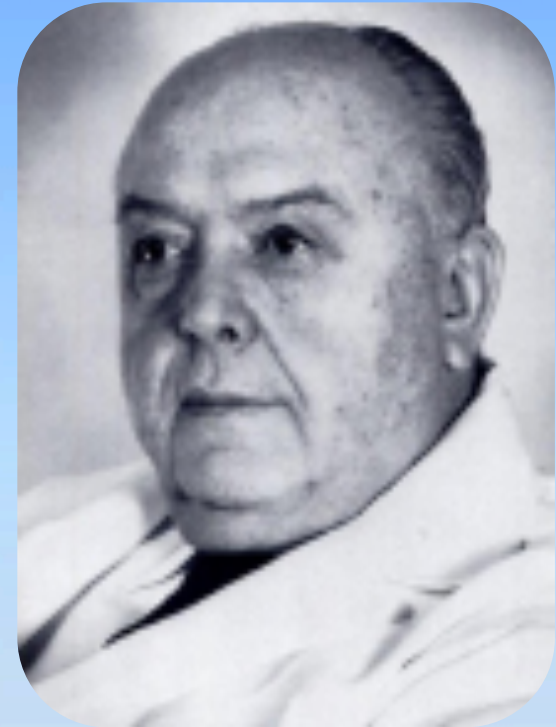
One year later



Pictures with permission of ASPCA: www.asPCA.org

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Dr. John Caffey



Radiologist 1946

Long Bone Fractures

Journals wouldn't publish
research

Dr. C. Henry Kempe: Arizona Pediatrician

1960: Battered
Child Syndrome

1970: Child Abuse

1972: The Kempe
National Center
for the Prevention
of Child Abuse and
Neglect

CAPTA

Child Abuse Prevention and Treatment Act
P.L. 93-247

1974: Federal CAPTA



1980: Child Maltreatment



1988: The Child Maltreatment Report Series



2003 CAPTA: Revised

Child Maltreatment: 2009

National Victimization Rate

Unique Count: 9.3 victims per 1,000 (702,000)

Child victims counts a child only once regardless of the number of times found to be a victim during the reporting year.

Duplicate Count: 10.1 per 1,000 (763,000)

Counts a child each time found to be a victim.

U.S. DHHS, Administration for Children and Families, Administration of Children, Youth and Families, Children's Bureau. (2010). Child Maltreatment 2009.

Child Maltreatment



Maryland:
11.3

District of
Columbia:
28.8

Delaware:
9.5

U.S. DHHS, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2010) *Child Maltreatment*, 2009.

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WHAT IS A CHILD



AS DEFINED BY CHILD PROTECTIVE SERVICES (CPS): A CHILD IS UNDER 18 YEARS OF AGE.

DEMOGRAPHICS OF CHILD MALTREATMENT

Race

- Caucasians largest segment then African-American, Hispanic & Other Ethnicities

Soc & Geo

- All socio-economic strata & all geographical areas

Age

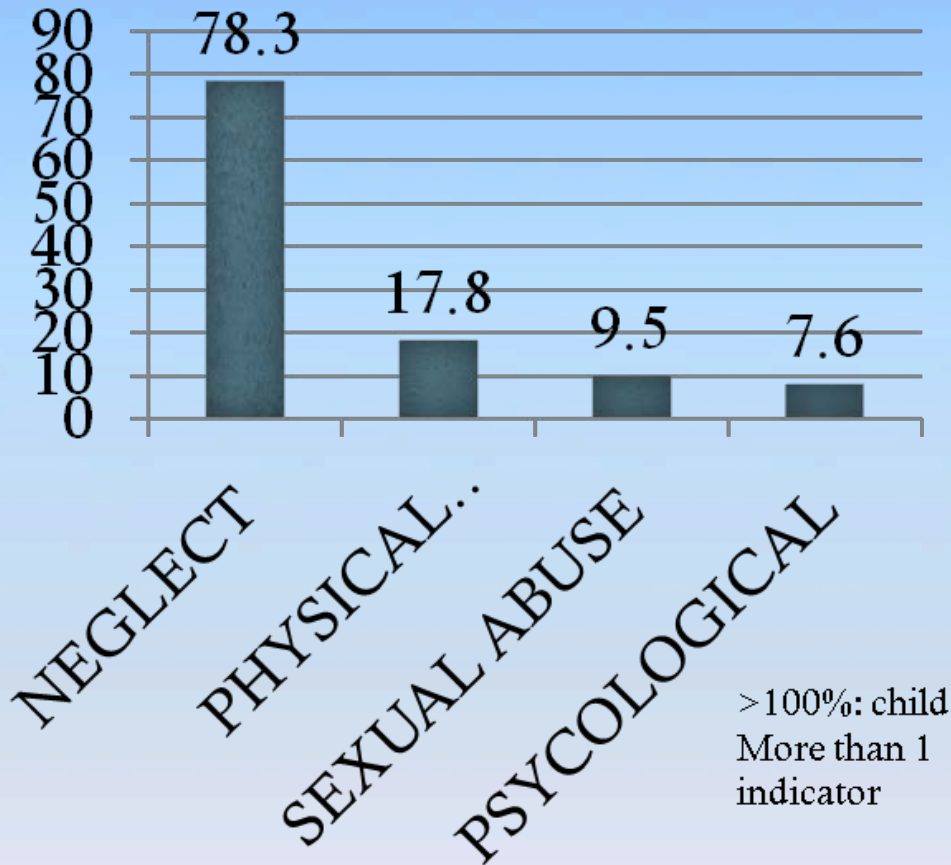
- Highest rate: Infants (0-1)
- Followed by: Children (1-3)

Munchausen Syndrome By Proxy (MSBP)

Form of Child Abuse

- Recurrent illness/no cause identified
- Unusual symptoms/no clinical sense
- Observed only by parent
- Frequent hospital/dental visits/normal findings
- Discrepancy: History and physical signs
- Numerous, different hospitals/dentists
- Presence of drugs in toxic screen

MALTREATMENT



- 2009 U.S. & local CPS investigated 3.6 million reports of child maltreatment

- CPS classified >1.5 million of these children as victims

 - 53.4% males

 - 45.8% females

 - 0.8% unidentified

- Approx. 1,770 children died as a result of abuse & neglect

U.S. DHHS, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2010) *Child Maltreatment*, 2009.

DEFINITIONS BY LOCALITIES OF CHILD ABUSE AND NEGLECT



Child Abuse: MD MAC 5-701.b

Physical injury of a child by a parent or other person who has permanent or temporary custody or responsibility for a child, or by any household or family members, under circumstances that indicate that the child's health or welfare is significantly harmed or at risk of being harmed; or sexual abuse of a child, whether physical injuries are sustained or not.

Child Abuse: DC: DCCA 16-2101.23A

Inflicting or failing to make reasonable efforts to prevent the infliction of physical or mental injury upon a child, including excessive corporal punishment, an act of sexual abuse, molestation, or exploitation.

Child Abuse: DE

DCA 16-902

Physical injury by other than accidental means, injury resulting in a mental or emotional condition which is a result of abuse or neglect, negligent treatment, sexual abuse, maltreatment, mistreatment, non-treatment, exploitation or abandonment.

Neglect: MD MAC 5-701.n

Leaving a child unattended or other failure to give proper care and attention to a child ... under circumstances that indicate the child's health or welfare is harmed or placed at substantial risk of harm.

Neglect: DC

DCCA 16-2301-9

Failure to provide adequate food, clothing, shelter, or medical care, which includes medical neglect, and the deprivation is not due to the lack of financial means of [the child's] parent, guardian, or other custodian.

Neglect: DE

DCA 31-301.3

Delaware definition of "abuse" (including negligent treatment, non treatment and abandonment)

Lack of proper care

Neglecting or refusing to provide proper or necessary subsistence, education, morals or well-being

Goal of Good Parenting



Enabling a child to grow up with feelings of:

Satisfaction

Security

Self-
Respect



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[dreamcatchersforabusedchildren.wordpress.co](http://dreamcatchersforabusedchildren.wordpress.com)

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Perpetrators

Biological Parents (84.7%)

Women (53.5%)

Men (44.4%)

Ages 20-49 (83.2%)



U.S. DHHS, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2010) *Child Maltreatment*, 2009.

Special Needs Special Concerns



Special needs children are at a 2 to 3 times greater risk of being a victim of maltreatment than children not reported as having special needs

Oral and Dental Aspects of Child Abuse and Neglect: Pediatrics Vol. 116 No. 6 December 1, 2005, pp.1565-1568.

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Contributing Factors to Child Abuse

“Learned Behavior”

Extremely Isolated Families

Difficulty controlling anger/
stress

Serious economic, housing or
personal problems

Alcohol and/or Drug Abuse





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Possible Indicators of Abuse

- Bruises, welts, bite marks, 'tattoos'
- Lacerations or abrasions
- Burns
- Fractures
- Head Injuries
- **DELAY OF TREATMENT!**





Adult Bite Marks





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Warning Signs

Repeated injuries (multiple bruises)

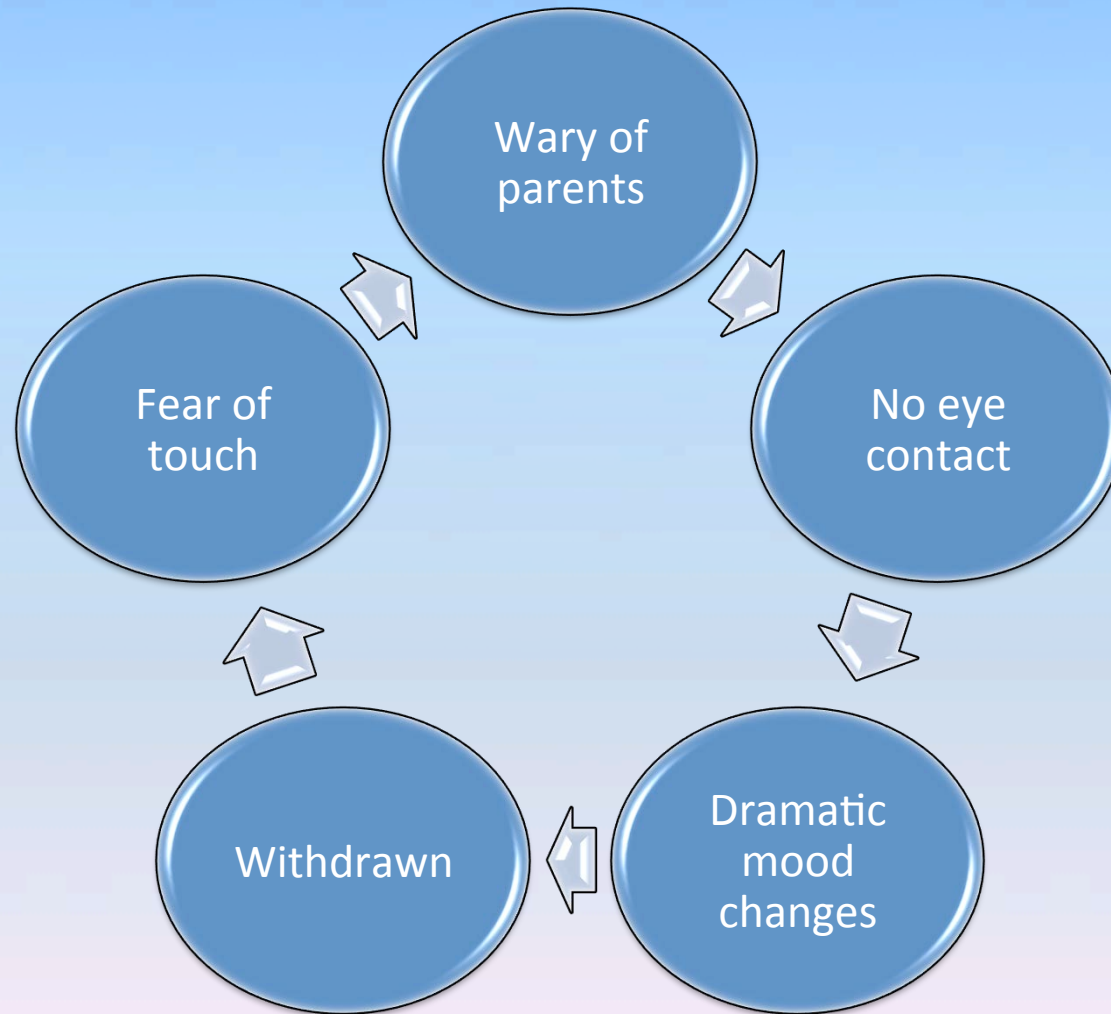
Inappropriate Behavior

Neglected Appearance

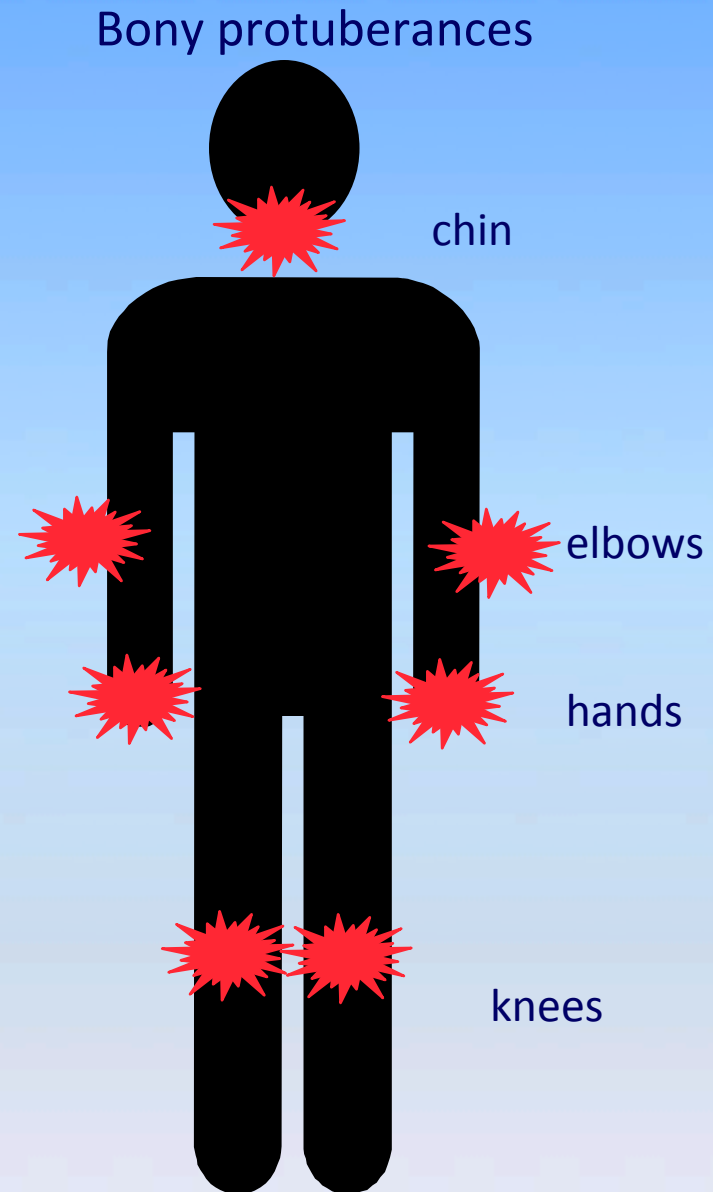
Super Critical, Super Strict Parent

Extremely Isolated Families

Behavioral Indicators



Usual Sites for Accidental Injuries





Typical childhood injury?



Bruises

- Newest Swollen, tender, red
- New Blue, purple
- Old Green
- Older Yellow
- Oldest Brown & cleared



Typical Sites for Inflicted Injuries of Abuse

Buttocks & Lower Back

Genitals & Inner Thighs

Cheek

Ear

Lip & Labial Frenum

Neck

Arms & Hands





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Inflicted Facial Injuries

Contusions & Echymoses

Abrasions & Lacerations

Burns

Bites

Fractures



Slap Mark



Physical Findings That May be Mistaken for Abuse

Accidental

Genetic

Acquired

Infectious

Cultural



Idiopathic thrombocytopenia purpura (ITP)



© AAP

Ehlers Danlos Syndrome: Connective Tissue Disorder



Sturge Weber or Port wine stain

Cupping Therapy



Coining Therapy or CAO GIO



Possible Signs of Child Sexual Abuse

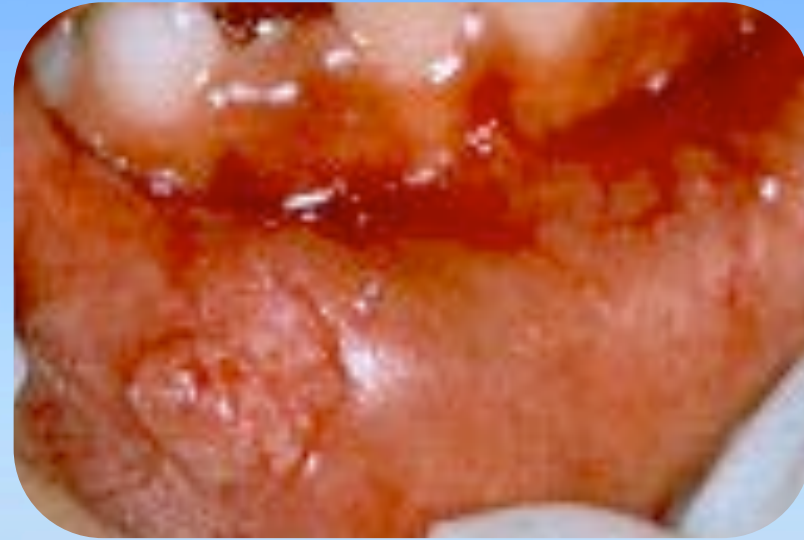
Oral lesions: STD

Bruising of hard or soft palate

Pregnancy

Difficulty in sitting or walking

EXTREME FEAR OF THE ORAL EXAM



Condyloma

- Caused by human papilloma virus or syphilis
- Raised growth resembling a wart
- Can be acquired by sexual abuse.

nypartnersinoralhealth.com/tableofcontents/oralpathology.html



Oral Rape

© AAP

Dentofacial Trauma of Abuse

Avulsed Teeth

Non-Vital Teeth

Lip Lacerations

Tongue Injuries

Frenum Injuries

Jaw Fractures



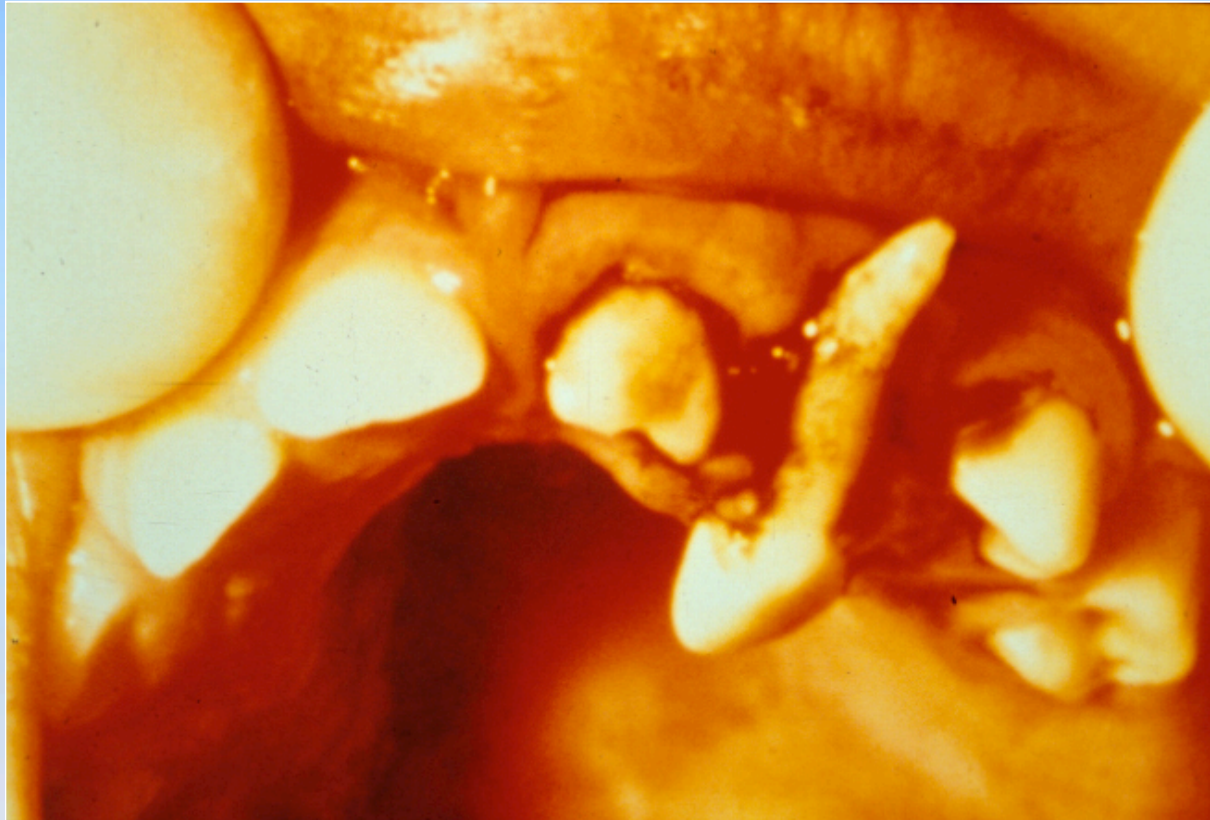
Force Feeding



Hard slap



Bite, child with no teeth





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Identification of Dental Neglect

- Untreated, Rampant Caries
- Lack of continuity of care once informed
- Willful failure to seek and follow through with treatment to ensure oral health
- Untreated: pain, infection, bleeding, trauma

AAPD Definition



Clinical Protocol: Assessing

General Physical

Behavioral

Histories – Parent and child

Oral Examination

Documentation

Consultation



Patient Histories

(The Stories)



**Obtain histories
(stories)
separately: Do
they Match?**

**Is the injury/
timeline/
excuse/
consistent?**

**Have there been
similar injuries/
emergencies
documented?**

Approaching the Parent/Caregiver

Alone in Private

Refer to your legal obligations regarding reporting

Determine whether to discuss your suspicions with the adult

Do not – accuse or be judgmental

What to say if you decide to talk with the adult

(Think Safety)

Because I care about children and I care about your child...

I am concerned about your situation...

In my practice I care about my patients overall health and well being...

Adult Response

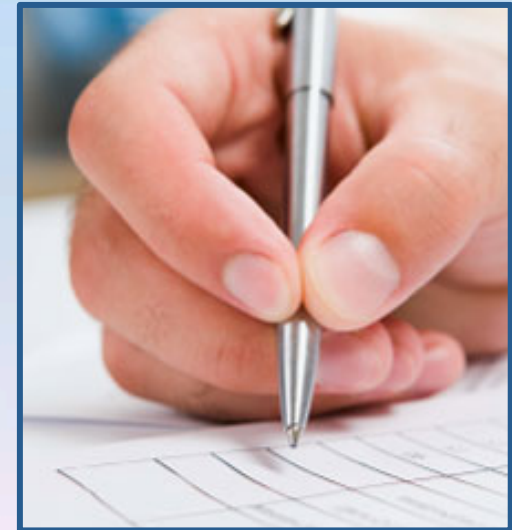
If parent's responses or attitude seem suspicious and you are not sure... you may consult other health care providers or contact Child Protective Services (CPS).

If you feel the child may be in danger...contact CPS

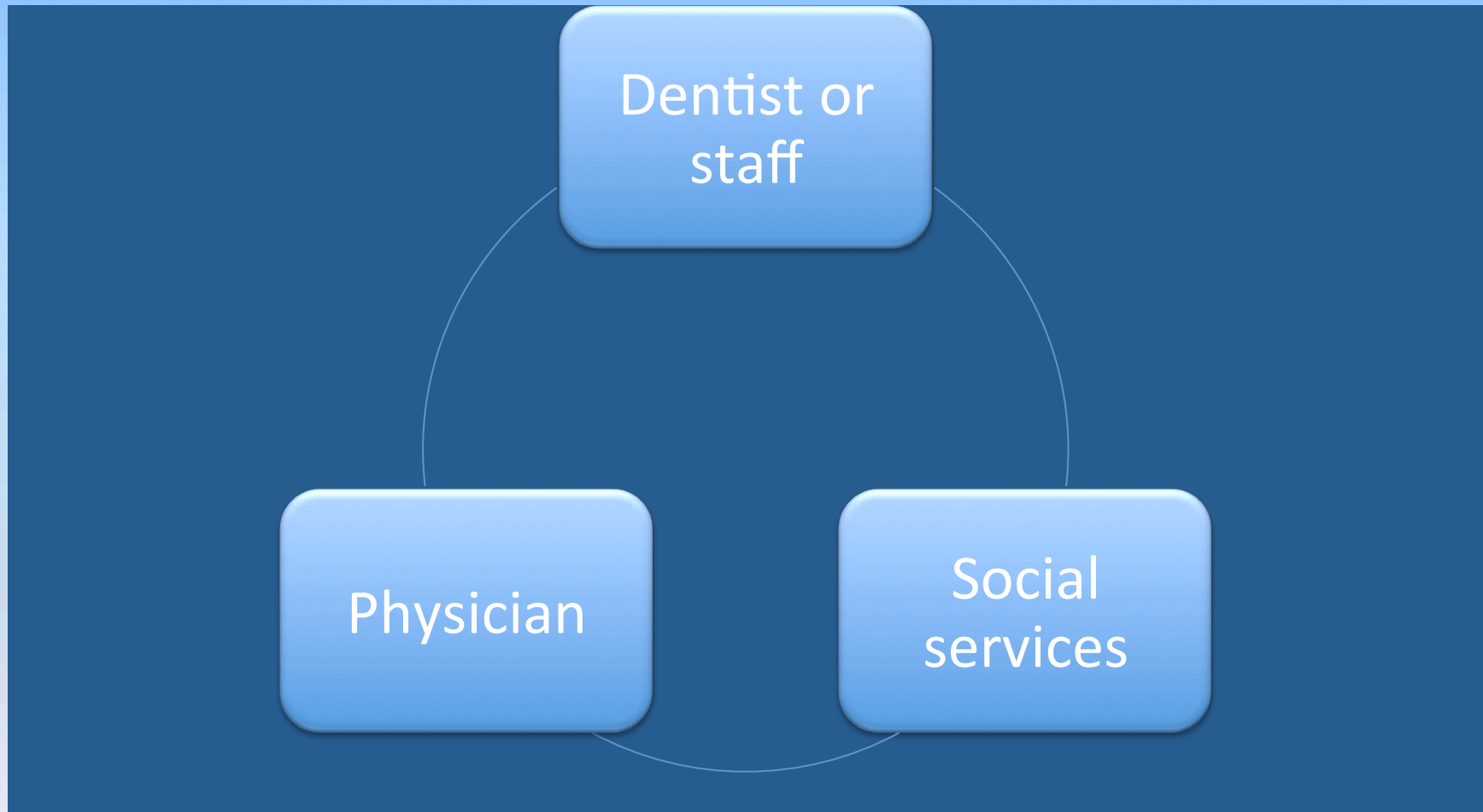
If the stories or histories match...all is fine!

Documentation

- Write clinical & behavioral findings in patient's chart
 - Document what is said and who has said it by name with quotes
 - Document rationale for treatment or non treatment in chart
- Clinical photographs and radiographs



Whom to Consult?



Remember!

**Reporting is not an accusation;
it is a cry for help.**

Consequences of Not Reporting

Painful physical,
cognitive and
emotional
effects

Victim becomes
an adult
offender

Death!

Tsang, A. & Sweet, D. *Detecting Child Abuse and Neglect—Are Dentists Doing Enough?* J Can Dent Assoc. 1999; 65:387-91

When To Report?

- NOW! If you have reasonable cause...REPORT IT!
- Should be immediately,
- Within 72 hours.






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FAMILY VIOLENCE



Over 3 million children...



87% are aware of Domestic Violence (DV)

69% Witness

More than 60% are also victims

90% under 10

64% under 2

U.S. DHHS, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2010) *Child Maltreatment*, 2009

Problem: Spousal/Partner Abuse

- > 1.5 million women physically, sexually abused by an intimate partner yearly in the U.S.
- 1 in 5 female high school students reports physical or sexual abuse by a dating partner
- 1 out of 4 U.S. women have been physically or sexually abused by an intimate partner
- 1 out of 14 U.S. men reported

Department of Justice, Youth Risk Behavior Survey (YRBS) August 2001, National Violence Against Women Survey

Definition of Domestic Violence

A pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner



The United States Office on Violence Against Women (OVW)

History of DV

- British Common Law
 - Men allowed to “chastise” their wives with “any reasonable instrument”
- 1870’s: Women reformers in England against child abuse highlighted male violence
- 1880’s: Carried to the US



U.S. Victims

- 1935: Battered women offered economic help if left batterer (Aid to Dependent Children: SSA) repealed in 1996
- 1978: National Coalition Against Domestic Violence
- 1984: VOCCA: The Victims of Crime Act Established Crime Victims Fund: federal criminal fines & penalties used to support state victim compensation & service programs
- 1994: Violence Against Women Office: Justice Department

Facts: Spousal/ Intimate Partner Abuse

National Coalition Against Domestic Violence

- Crosses all barriers:
 - Age
 - Race
 - Economic level
 - Educational level
 - Ethnic group
- 85%-90% Women

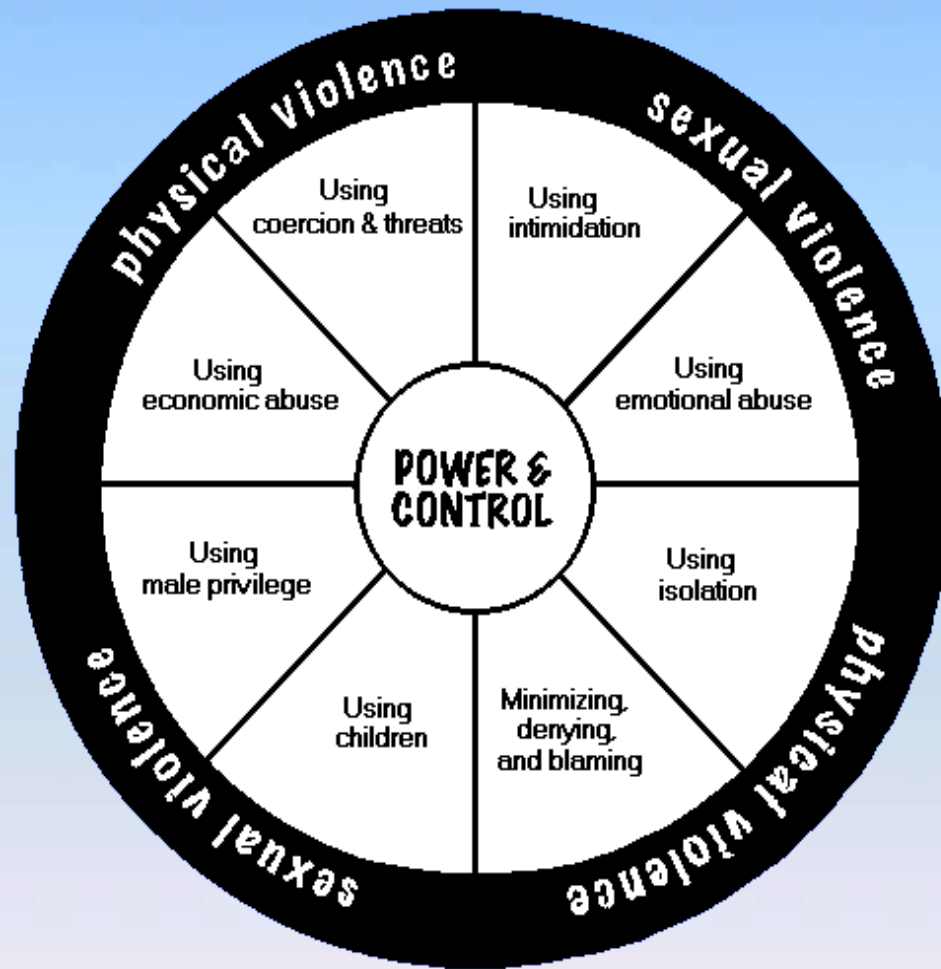


Statistically Significant

31% lifetime Prevalence: more than breast or cervical cancer

20-30% ambulatory patients are battered women only
1-20 are correctly identified

Power & Control Wheel



Duluth, Minnesota Domestic Violence Program

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Emotional/Verbal

- Constant criticism, name calling, mind games...



Intimidation & Threats

- Using looks, actions, gestures, voice to scare partner
- Throwing, smashing things
- Showing weapons
- Play fighting
- Threatening to commit suicide



Financial & Economic

- Preventing partner from getting or keeping a job
- Using someone for their money



Coercion



- Making threats to hurt partner.
- Making partner do illegal things.
- “Playful” use of force during sex.

eastlondoncommunitylawservice.org.uk

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Using Children

Pressuring Partner to get Pregnant

Hurting or threatening to hurt children

Threatening to report partner to child welfare

Denying, Minimizing & Blaming

Saying partner brought on the abuse.

Denying the abuse.

Act as if the abuse is not that serious.



Isolation & Extreme Jealousy

- Controlling:
 - Who can be partner's friends
 - Where to go
 - What partner can do
- Separating from family
- Keeping close and constant tabs



Using “Male”/Dominant Privilege

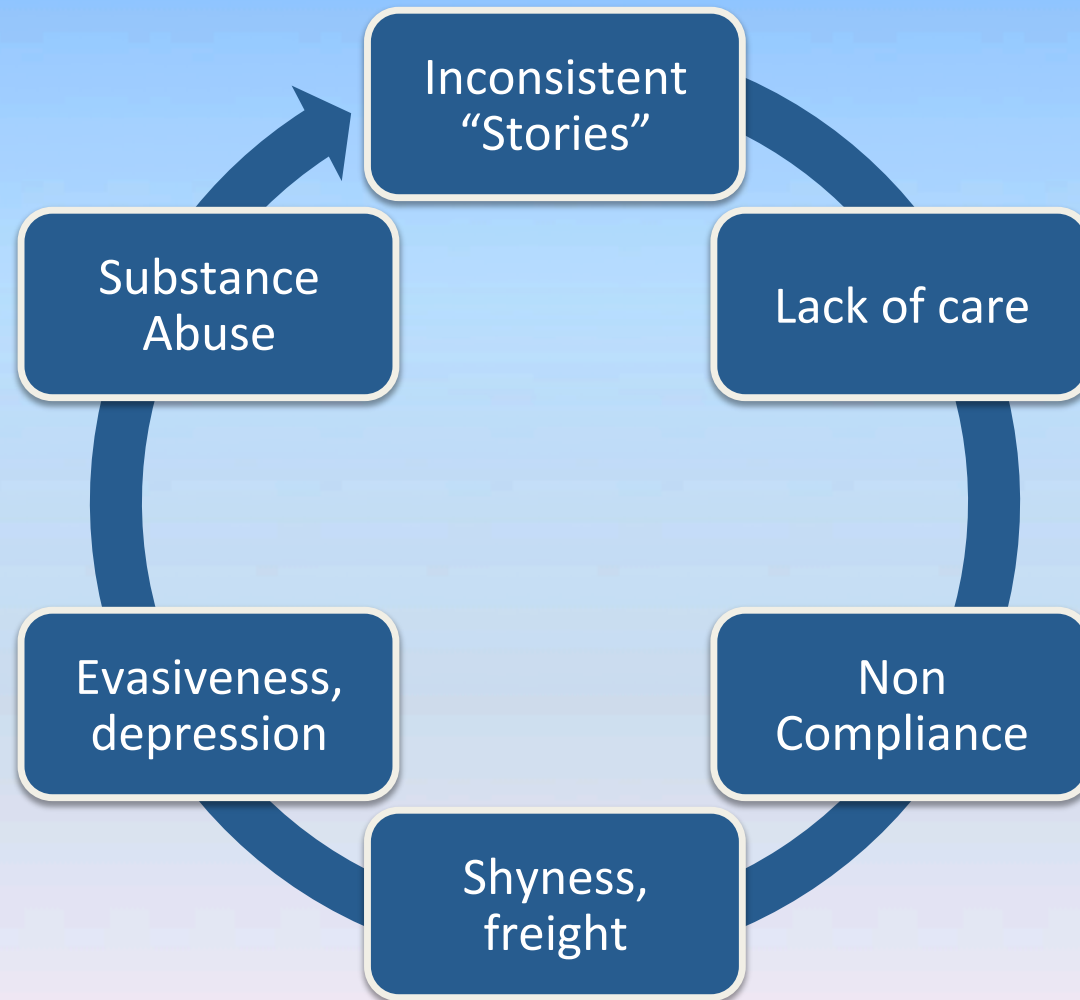
Treating Partner like a servant



Discriminate based on gender

Use belief that males are superior

Indicators of Partner Abuse



Look for the Signs



- Trouble swallowing
- Voice changes
- Contusions, abrasions, lacerations
- Chronic pain, headaches
- TMJ
- Inconsistent explanation of injury
- Evasive
- Depression or substance abuse

R.A.D.A.R.

- R outinely ask about abuse
- A sk questions in private at all times
- D ocument Findings
- A sses patient's safety
- R efer to area resources

Screening Questions: Adults

Because Domestic Violence is so common we are asking all of our patients because we know health is affected by this.

Tell me about your home life?

Has your partner ever threatened you?

Responses: Adult


- If patient denies any issues...let it go.
- If patient discloses...“It is not your fault, help is available and I can give you information if you would like.”
- If patient denies but you suspect...Your response may be: “I’m concerned, there is help for you. I have information if you would like.”

Guidelines: Adults

Document: same as child



Adult must make the call to the Police - not you or your staff



Contact local DV Program for more information

Guidelines: Adult

Non mandated reporter exceptions

Allegany, Anne Arundel County, Charles, Kent, Prince Georges, Somerset, Talbot, Wicomico

Auto accident

Injury caused by gunshot

Moving vessel

Lethal weapon



DV Affects Health

The Adverse Childhood Experiences Study (ACE Study)

www.cestudy.org

A decade long and ongoing collaboration between:
Kaiser Permanente Department of Preventive Medicine
in San Diego, California

&

Centers for Disease Control and Prevention
(CDC)

ACE Categories

Recurrent emotional abuse

Sexual Abuse

Recurrent Physical Abuse

Alcohol and/or drug abuser in household

Incarcerated household member

Someone who is chronically depressed

Mentally ill, institutionalized, or suicidal

Mother is treated violently

One or no parents

Emotional or physical neglect

ACE Score

Simple scoring: 1 for each if exposed

- 0 (ZERO) Person reports no exposures
- 9 Person reports exposures to all categories

ACE Findings

These experiences are major risk factors for the leading causes of illness and death as well as poor quality of life in the United States.

To Date

- Over 50 scientific articles have been published
- Over 100 conferences and workshop presentations

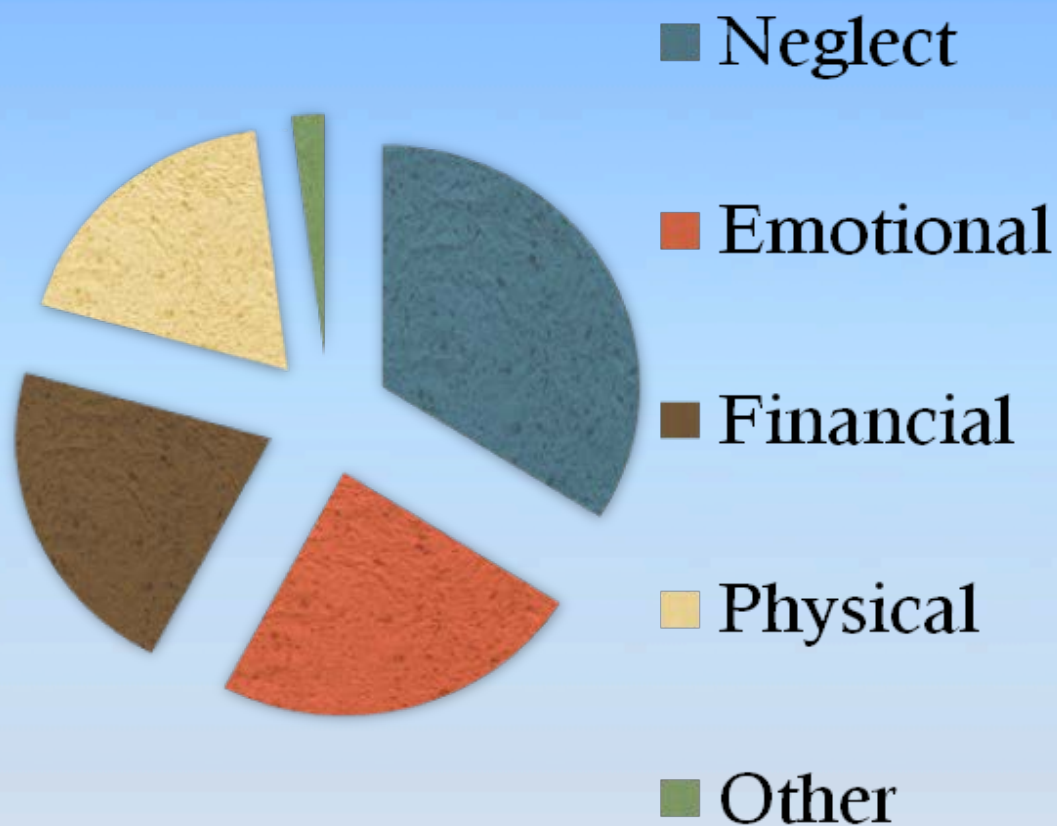
www.cestudy.org

Elder Abuse Vulnerable Adult



Photos courtesy of National Center on Elder Abuse
Mid-Atlantic P.A.N.D.A. Coalition©

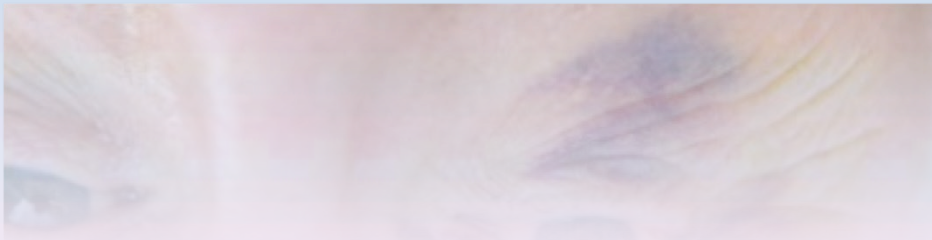
Elder Abuse



Last 15 years approx. 582,00 that are 60 or older; have experienced abuse, neglect and or self neglect.

According to the Administration on Aging

Facts: Elder Abuse



56% victims are women

Half are over 80

Only 1 in 14 abuse incidents comes to the attention of the authorities

Risk Factors

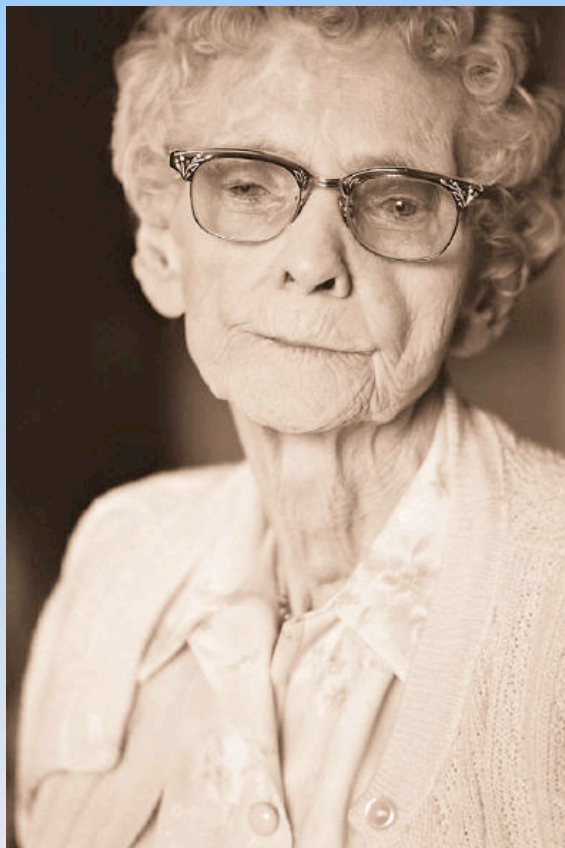
- Dependent on the abuser
- Abuser dependent on victim
- Impairment
- Social isolation
- Living alone
- Has assets
- Ageism
- Sexism



Indicators

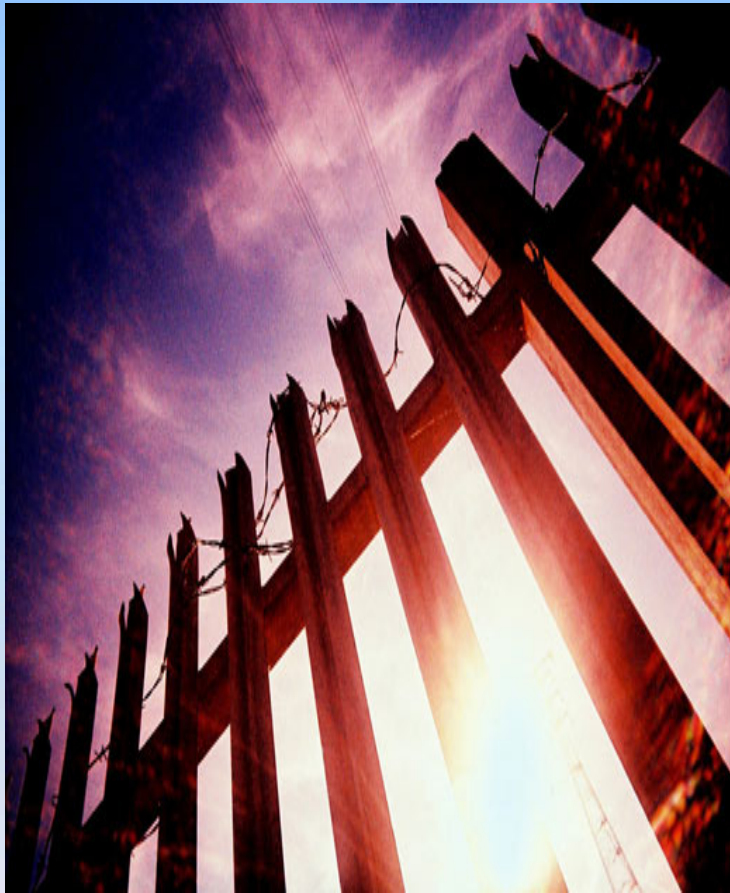
Same as children and adults including...

Confusion
Evasiveness
Swelling



Nervousness
Dehydration
Lack of medical devices

Barriers to Seeking Help



Not believed

Afraid

Alone

Powerless

Embarrassed, Ashamed

Not able to prove

Don't talk about it

Vulnerable Adult

Any adult who lacks physical or mental capacity to provide for one's daily needs

- Not all elderly adults are vulnerable
- Not all vulnerable adults are elderly.



How can you help?

American Academy of Cosmetic Dentistry
“Give Back A Smile”

If you are interested please check out their website.

<http://www.aacd.com/>

Did you know...

Human Trafficking is abuse and neglect, therefore,
Dental Professionals need to be educated on this
growing form of human maltreatment



Human Trafficking

Worldwide 800,000 – 900,000

United States 100,000 to 300,000

U. S. Children are at risk for sex trafficking each year



U.S. State Department

<http://mollytkacik.theworldrace.org/?filename=human-trafficking-i-want-to-help-stop-it>

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What is it?

- Fastest growing criminal industry in the world
- Second largest criminal industry in the world
- Modern form of slavery



**LOOK
BE NEATH
THE SURFACE**



**HUMAN TRAFFICKING IS
MODERN-DAY SLAVERY**

A victim of trafficking may look like many of the people you see everyday.

Ask the right questions and look for clues. You are vital because you may be the only outsider with the opportunity to speak with a victim.

There are safe housing, health, immigration, food, income, employment, legal and interpretation services available to victims, but first they must be found.

If you think someone is a victim of trafficking, call **1.888.3737.888**
For more information about human trafficking visit www.acf.hhs.gov/trafficking.



The Victims



Young children



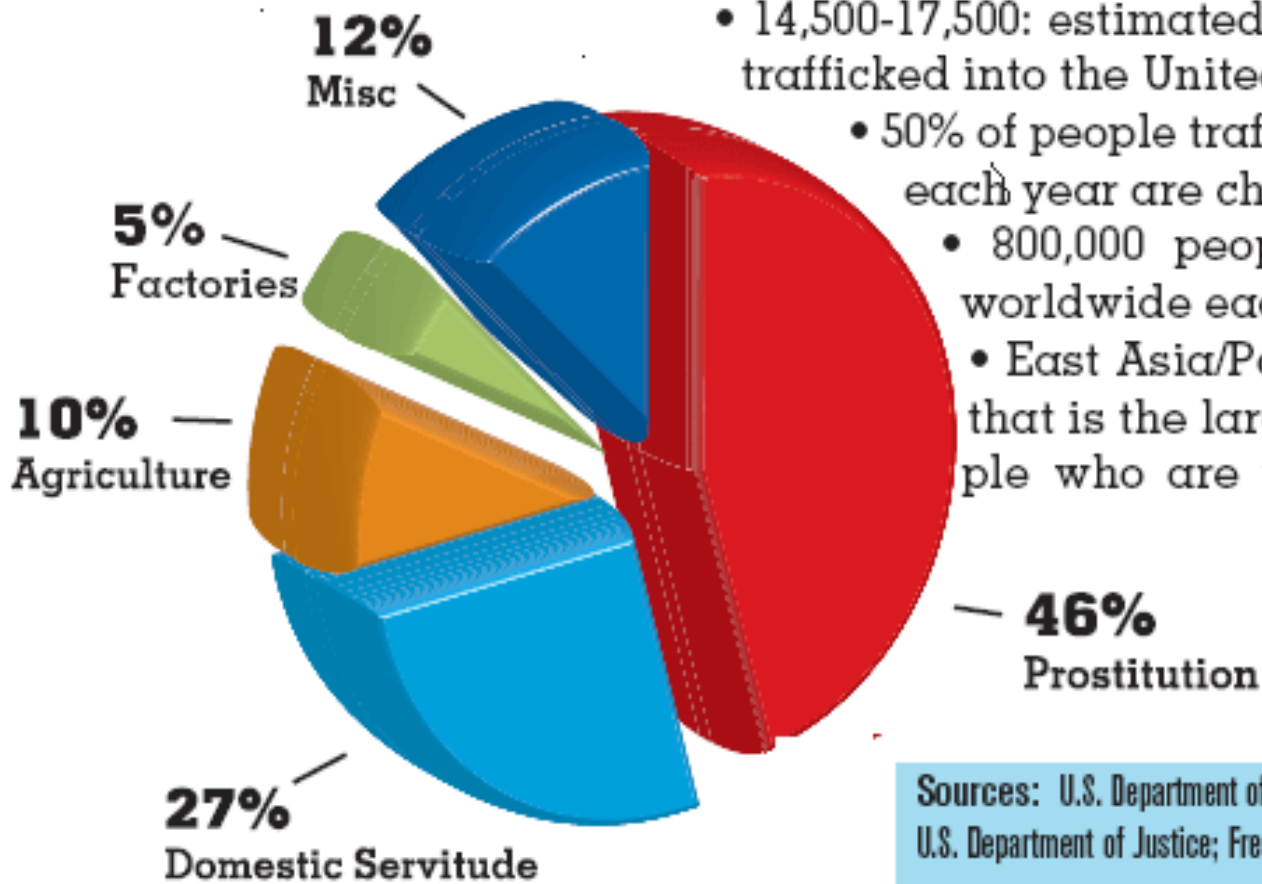
Teenagers



Adults



Male & Female



- 14,500-17,500: estimated number of people trafficked into the United States each year
- 50% of people trafficked into the U.S. each year are children
- 800,000 people are trafficked worldwide each year
- East Asia/Pacific is the region that is the largest source of people who are trafficked into the U.S. each year.

Sources: U.S. Department of Health and Human Services
U.S. Department of Justice; Free the Slaves

How victims are controlled?

Same tactics as victims of abuse

Physically

- Beatings
- Burns
- Rape
- Starvation

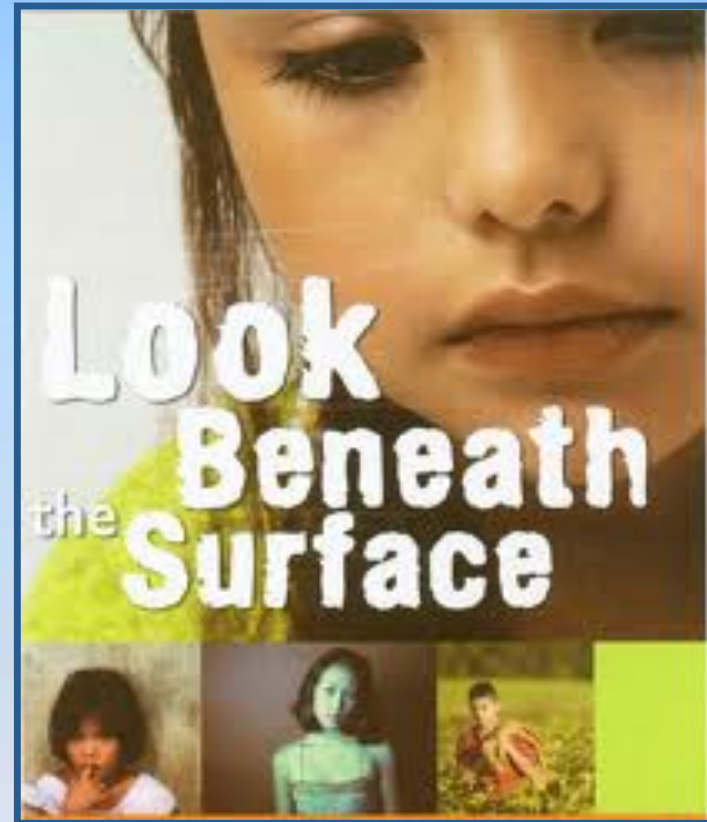


How victims are controlled?

Same tactics as victims of abuse

Emotionally

- Isolation
- Drugs
- Threats
- Stalking
- Psychological
 - “Stockholm Syndrome”

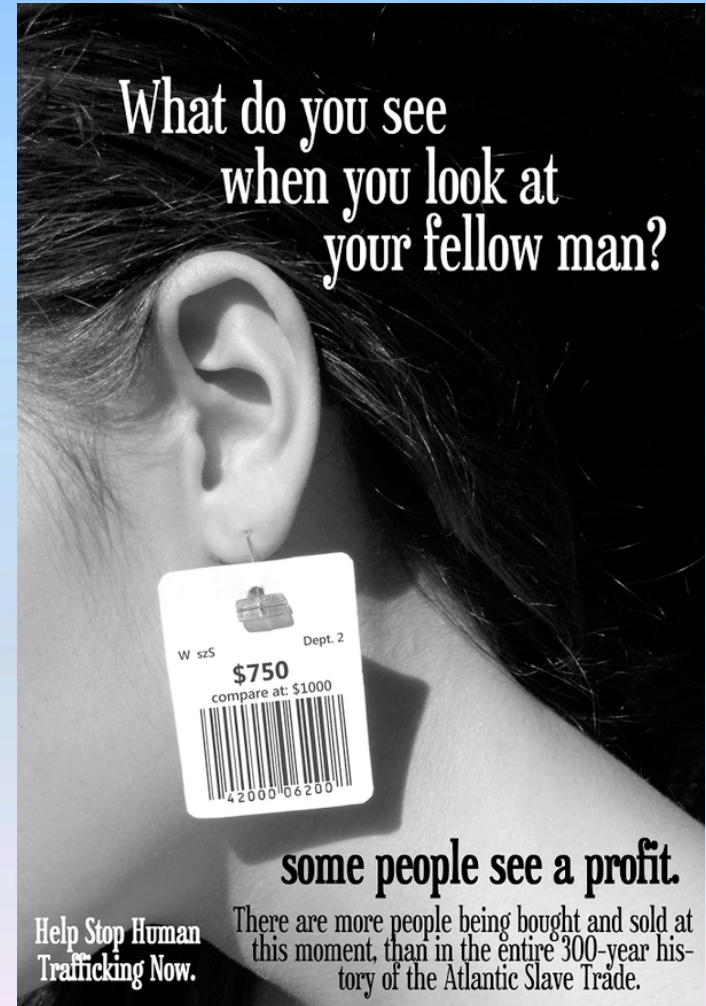


How victims are controlled?

Same tactics as victims of abuse

Financially

- Debt Bondage
- Threat of Deportation
- Money controlled by “owner”



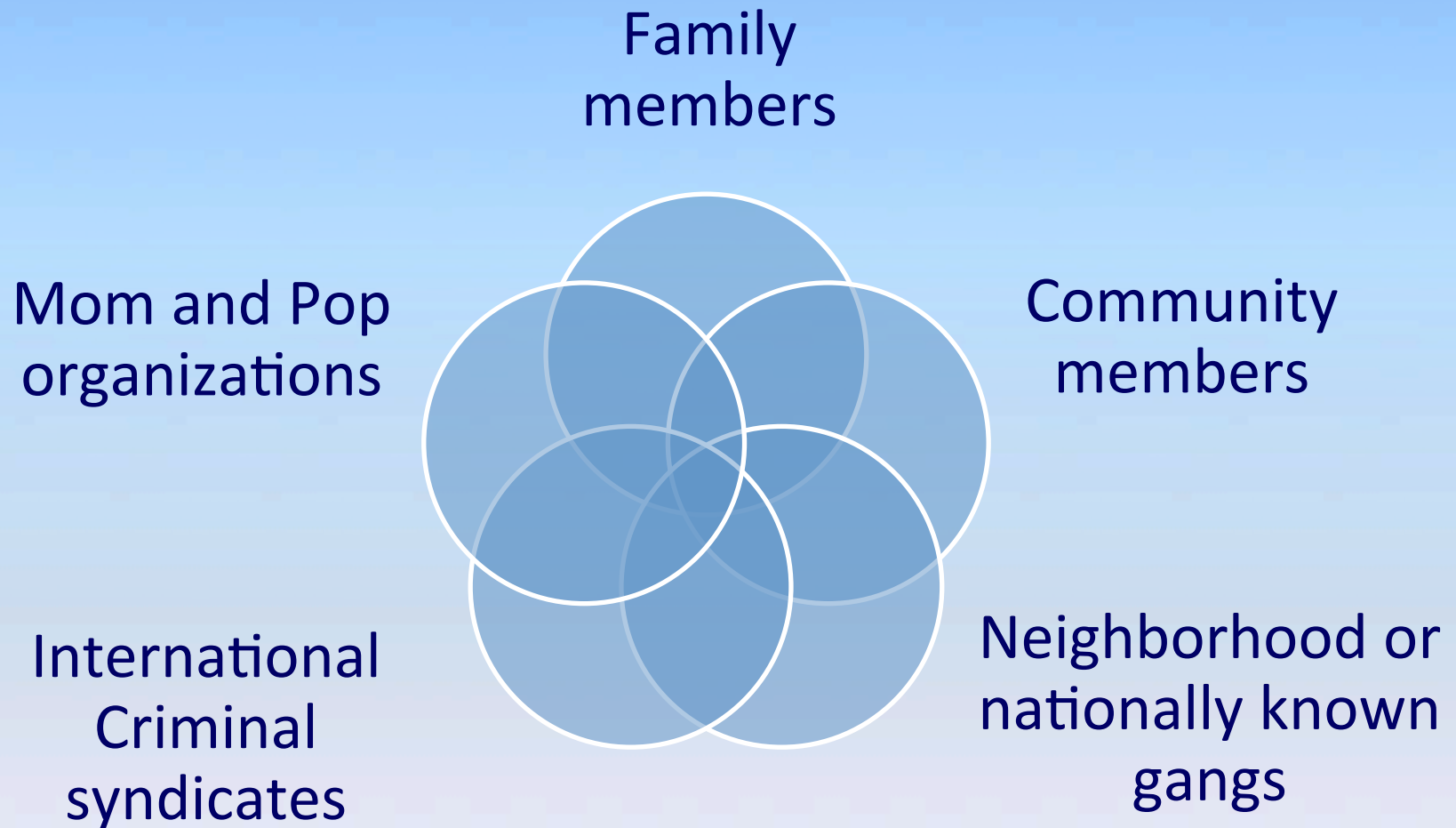
What do you see
when you look at
your fellow man?

some people see a profit.

Help Stop Human
Trafficking Now.

There are more people being bought and sold at
this moment, than in the entire 300-year his-
tory of the Atlantic Slave Trade.

The Traffickers



Indicators

Brought by another

Very shy

Another is in charge of them


They have no identification/papers

Does not speak or understand English



Tragic Truths & Realities

As many of 30% of victims will encounter a healthcare professional...and these individuals will NOT be recognized as victims by the healthcare provider



Most victims suffer from malnutrition...therefore are subject to severe dental decay and pain



Over 50% of all victims are children

Dental Visit

- Trafficker wants best dental work...cost no object
- Looks more important than health
- Will take victim to more than one office



Y.I.M.B.Y.

Yes In My Backyard

- Westminster: Woman sentenced to 10 years for sex trafficking a child
- Reisterstown: Couple charged in sex trafficking conspiracy involving three minor girls
- Prince Georges County: Defendant pleads guilty in human trafficking conspiracy
- Montgomery County: Two defendants charged in human trafficking conspiracy

Polaris Project

*Named after North Star that guided slaves to freedom
along the underground railroad*

Provides comprehensive approach to combating
human trafficking since 2002

National Human Trafficking
Resource Center (NHTRC)

1-888-3737-888

www.TraffickingResourceCenter.org

POLARIS
PROJECT

If You Suspect Abuse or Neglect

- Child or Vulnerable Adult - *You are a mandated reporter*
- Contact the **National Human Trafficking Resource Center Hotline**

National Human Trafficking
Resource Center (NHTRC)

1-888-3737-888

www.TraffickingResourceCenter.org

POLARIS
PROJECT

What is being done?

2007 Human Trafficking Task Force formed

New laws provide help for victims regardless of their immigration status

FBI, Dep't of Homeland Security working with local, state and federal enforcement agencies

Maryland in Forefront

Polaris Project Commends Maryland Governor for signing Anti-Trafficking Legislation: April 28, 2009

More effective prosecution:

New law makes it illegal to persuade, induce entice, or encourage another to be taken or placed in any place for prostitution.

It allows Maryland to go after pimps as sex traffickers!

This is a landmark step which is a model for other states.

Establish Office Procedures

Discuss with staff what you have learned.

Post the important numbers for all staff.

Discuss reporting procedures.

Have hot line numbers and pamphlets available.

Discuss privacy and safety for staff and patients.

The Three Rs

Recognize



Report



Refer



Making a Difference

You are a part of a growing community of concerned and proactive professionals that make a difference in the lives of *“dehumanized men, women, children, minorities and migrants”* to make long-term systemic change.

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