

## The Role of Health Care Professionals in Communicating about Child Abuse

Population Health Sciences

## **Date Posted:**

Apr 28, 2015

Nancy Braveman, PsyD is a psychologist who works with the <u>Department of Child and Adolescent Psychiatry</u> and <u>Behavioral Sciences</u> and <u>Safe Place</u>: The Center for Child Protection and Health at The Children's Hospital of Philadelphia.

In recognition of National Child Abuse Awareness month, April is a great time to reflect, learn, and teach others about the ways child abuse affects our community, as well as ways to help prevent it and reduce its harmful impact when it does occur.

Currently, over 3 million reports of child abuse are made in our country annually, involving over 5 million children. Child abuse can impact various aspects of a child's life, including mental and physical health, academic performance, sleep, relationships, and behaviors. Although significant strides are being made, abuse is still often shrouded in secrecy and shame. Open conversations about child abuse can help diminish it.

As a clinical psychologist specializing in providing trauma-focused psychotherapy to children and families related to sexual abuse (and other forms of maltreatment), I get a close look at the various ways maltreatment can negatively impact families. On a more positive note, I also see the ways in which families can use a time of crisis as an opportunity to teach valuable lessons and skills that can help them heal, grow stronger, and be applied to other life challenges.

Health care professionals interacting with families can increase awareness and communication about child abuse in one very simple way: by simply bringing it up. Such conversations can serve the important function of showing parents and caregivers an example of what these discussions look and sound like. Many parents and caregivers with whom I work understand the value in speaking to their children (even young ones) about these issues, but they are at a loss on how to begin. They don't know the words to use, or how these serious topics can be translated into age-appropriate terms for children. With support, guidance, and examples, they are often surprised at how "doable" this is – and relief, not increased anxiety, usually results. Furthermore, each conversation serves as "practice" for families on communicating about sensitive topics: it gets easier the more it's done.

I find that parents benefit from being encouraged to fit this education into the framework they already use for promoting safety. In the same way caregivers think and talk about wearing helmets, seatbelts, knowing their address, etc., they can also explain about "the touching rules." Kids and parents may already be comfortable with understanding biting, kicking, and punching as "not okay" kinds of touching. Touching that involves private parts can be added to the list. Adults can explain that sometimes people break the touching rules even though they should not, and families can discuss a plan for what kids can do if that ever happens, or if they are worried it might.

I encourage all health care providers to discuss the topic of child abuse in their next conversation with patients and caregivers. This simple action can play an important role in educating patients and caregivers about child abuse and child abuse prevention.

For additional information about child abuse, child abuse prevention efforts, and printable tip sheets for parents and caregivers, see:

- Preventing Child Sexual Abuse Child Welfare Information Gateway
- Tips for Helping Kids be SAFER The Children's Hospital of Philadelphia
- National Child Abuse Prevention Month 2015 Resource Guide The Children's Bureau
- Child Abuse Fact Sheet The National Child Traumatic Stress Network
- Child Sexual Abuse Fact Sheet The National Child Traumatic Stress Network
- Prevention Resources Prevent Child Abuse Pennsylvania

Nancy	Braveman,	PsyD
-------	-----------	------