

For The Well-being of Youth and Adults



The New Mexico 4-H Youth Development Program believes in the right of every child to a safe and nurturing environment. Sometimes families need support and resources in order to create such an environment. As a leader in the community, the 4-H Youth Development Program is dedicated to ensuring the safety of the children in our state. We do not condone or allow actions against children that contribute to child abuse or neglect in any settings.

In New Mexico, all people are mandated to report child abuse. These reports assist Child Protective Services in determining the best course of action to ensure the safety of our children. It's important that you be able to recognize the signs and symptoms of possible abuse and be able to contact the appropriate authorities. By reporting suspected abuse, you could save a child's life or prevent serious injury. Characteristics of abuse and how to identify them listed in this publication are general and intended as guidelines. A child or family might exhibit warning signs of abuse even though no abuse has occurred or will occur.

What is Abuse?

- **Physical Abuse** is any non-accidental injury to a child under the age of 18 by a parent or caregiver. It occurs when a parent or other person injures or causes a child to be injured, tortured, or maimed, or when unreasonable force is used upon a child.
- **Child Sexual Abuse** is the use of a child or adolescent for the sexual gratification of another person.
- **Emotional Neglect** is the failure of a parent or caregiver to provide appropriate support, attention and affection necessary for a child to develop intellectually and emotionally. **Emotional Abuse** is a pattern of verbal assault or coercive behaviors such as belittling, humiliating, and ridiculing, which effect a child's development intellectually and emotionally.
- **Child Neglect** is the failure, whether intentional or not, of a parent or caregiver to meet the basic needs of a child such as food, shelter, medical care, educational opportunity, protection and supervision.

Reporting Responsibilities:

Who Must Report

1. EVERYONE who suspects abuse and/or neglect.
2. Licensed physicians, residents, or interns, registered nurses, and visiting nurses.
3. Social workers
4. Law enforcement officers
5. A judge presiding during any proceeding.

Immunity

If you report child abuse and/or neglect in good faith, you will be immune from civil or criminal liability.

Failure to Report

If you suspect abuse and/or neglect and do not report your suspicion you can be charged with a misdemeanor in a court of law.

Reporting Guidelines

How do I respond to a child who discloses?

DO

- ✓ Believe the child and be supportive.
- ✓ Be on the same eye level
- ✓ Find a private place to talk
- ✓ Reassure the child that it is okay to tell what happened
- ✓ Listen to the child
- ✓ Rephrase important thoughts – use the child’s vocabulary
- ✓ Tell the child help is available
- ✓ Trust your “gut” feelings
- ✓ Let the child know you need to report it to someone who can help him or her

DON'T

- ✓ Promise confidentiality
- ✓ Panic or express shock
- ✓ Ask leading or suggestive questions
- ✓ Make negative comments about the alleged perpetrator
- ✓ Disclose information indiscriminately

It is NOT the responsibility of, nor is it appropriate for, Extension Service volunteers, staff, or faculty to conduct child abuse/neglect investigations.

Reporting Suspected Abuse or Neglect

Where

1. New Mexico CYFD Statewide Central Intake (1-800-797-3260) or #SAFE from a cell phone.
2. In the case of an immediate safety threat, call your Local Law Enforcement: including State Police, County Sheriffs Office, or Local City Police Department.
3. When appropriate: Tribal Law Enforcement or Tribal Social Services (CYFD will contact correct tribal authority when needed).

What

1. All known demographic information on the child and family
2. Allegations of suspected abuse and neglect
3. Location of the child and the family
4. Safety factors involving the child
5. Potential Risks for the child and the family
6. Assessment of the Family Needs and Strengths
7. Potential Risks to the Investigator

Who Investigates

1. Child Protective Services Division **only** investigates abuse and neglect in which the perpetrator is a caretaker of the child.
2. Law Enforcement investigates **all** abuse and neglect reports including abuse and/or neglect by the day care providers, foster parents and institutions.
3. Child Protective Services and Law Enforcement **jointly** investigate child abuse and/or neglect when appropriate.

Adult/Youth Interaction – Protective Practices

- Salaried staff and volunteers are expected to have another adult present when they are working with children or to work with the children in a group with two or more children present. Where possible, being alone with a single child is to be avoided.
- Salaried staff and volunteers will not, under any circumstances, discipline children by use of physical punishment or by failing to provide the necessities of care, such as food, water, or shelter.
- Salaried staff and volunteers should be alert to the physical and emotional state of all children each time they participate in a program. Signs of injury or suspected child abuse should be reported.
- Salaried staff and volunteers will be sensitive to the need for confidentiality in the handling of information related to suspected and actual child abuse and/or neglect.
- Salaried staff and volunteers will work with young people in reasonably open places where other are welcome to enter (NOT behind closed doors). Be aware that while spending time alone with a single child can be positive and helpful, it can also be a reason for concern for everyone involved.
- Salaried staff and volunteers need to respect the privacy of youth. The privacy issue is especially relevant in situations involving changing clothes or taking showers in

facilities lacking privacy. In these situations, staff and volunteers should intrude only to the extent that health and safety requires. Adults need to protect their own privacy in similar situations.

- Salaried staff and volunteers should not share a room with one minor child who is not his or her child. Youth should share room with other youth at Extension events. If the situation dictates that an adult and a youth share a room, there should be several youth with a single adult.
- Salaried staff and volunteers should use the following guidelines related to hugging and touching youth; hugs are okay if they are appropriate and if both people are comfortable with them. Take clues from body language of the child or simply ask, “Is it okay for me to hug you?” Additional considerations include:
 - It is very important to be aware of children’s personal boundaries and respect them.
 - Touching should be in response to the need of the child and not the need of the adult.
 - Touching should avoid breasts, buttocks and groin.
 - Touching should be open and not secretive.
 - Touching or other physical contact should be governed by the age and developmental stage of the child.
- Salaried staff and volunteers should use the “buddy” system to help protect everyone. Have the youth use this system by not going anywhere without a buddy.
- Salaried staff and volunteers need to be aware that physical and/or mental hazing and “secret” initiations and organizations are not part of the 4-H Youth Development Program.
- Salaried staff and volunteers need to be aware that topics and conversations that may be okay with an adult audience may NOT be appropriate with a youth audience. Inappropriate jokes and conversations need to be avoided where youth may overhear private conversations.
- Salaried staff and volunteers are encouraged to follow the above recommendations on those occasions when socializing with 4-H members under the age of 18 outside of Extension program activities.

As we work with youth, common sense and well-being of those we work with should help guide the decisions we make. Supervision of all groups, along with the “adult/youth interaction – protective practices” for salaried staff and volunteers, help establish program protocols that make it less likely an abusive situation will occur.

For additional training on identifying and reporting abuse, visit <http://swrtc.nmsu.edu/elearning/educators/> , for a 1 hour comprehensive e-learning session.

References: Child Abuse Prevention Kit, New Mexico Children Youth and Families Department; Child Care Protective Services; Oregon State University, 4-H 0258L. New Mexico State University, Extension Family & Consumer Sciences, Southwest Region National Child Protection Training Center.

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Signs of Child Abuse

Note: A single indicator does not prove that abuse is taking place, but the repeated presence of an indicator or a combination of indicators should alert educators to the possibility of abuse. Often there are no visible indicators.

	Physical Indicators	Behavioral Indicators
Physical Abuse	Unexplained bruises, welts, or burns in various stages of healing <ul style="list-style-type: none"> - Reflecting shape of article (electric cord, belt buckle, bite mark, cigarette burn) - Regularly appear after absence or vacation Unexplained fractures, lacerations or abrasions Injuries inconsistent with information from child	Wary of physical contact by adults Behavioral extremes – aggressive, withdrawn Complains of soreness or discomfort Wears clothing inappropriate to weather Reports injury by parents or others Arrives early at meetings or events and stays late, as if afraid to go home Chronically runs away (adolescents)
Neglect	Consistent hunger, inappropriate dress, poor hygiene Consistent lack of supervision, especially for long periods Abandonment Unattended physical problems or medical needs	Begs for or steals food Constant fatigue or listlessness Falls asleep during meetings Substance abuse Delinquency, self-destructive Frequently absent from or tardy to meetings or events Reports no caretaker at home
Sexual Abuse	Torn, stained, or bloody underclothes Difficulty walking or sitting Bruises or bleeding in external genitalia Pain or itching in genital area Venereal disease Pregnancy	Withdrawn, chronic depression Poor self-esteem Threatened by physical contact or closeness Inappropriate sexual behavior or premature knowledge of sex Reports sexual abuse by caretaker Poor peer relationships Suicide attempts (adolescents) Chronically runs away (adolescents)
Emotional Maltreatment	Speech disorders Delayed physical development Substance abuse Ulcers, asthma, severe allergies	Habit disorders (sucking, rocking) Antisocial, destructive Neurotic traits (sleep disorders, inhibition of play) Behavior extremes (passive or aggressive) Developmentally delayed mentally and emotionally Suicide attempts (adolescents)

Child Abuse (C1001), Washington State University Cooperative Extension. Chart adapted from Broadhurst, Diane D., "The Educator's Role in the Prevention and Treatment of Child Abuse and Neglect," the Users' Manual Series. National Center on Child Abuse and Neglect, Washington, D.C. 1979, DREW No (Ohds 79-30127)