Current Research on Child Maltreatment: Implications for Educators

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The increasing rate of child abuse and neglect is a special concern for educators who are legally mandated reporters of suspected maltreatment, are often the first to identify and refer children who have been harmed, are in contact with parents and are aware of the family conditions contributing to child maltreatment, and who must often work closely with other professionals in their efforts to support child victims and prevent further abuse. Moreover, children's emotional or behavioral problems, learning disabilities, or other difficulties often reflect broader problems that are associated with abuse or neglect. Consequently, understanding the causes and consequences of child maltreatment, and contemporary child protection efforts, is essential to educators in their efforts to assist victimized children. This article surveys current research on child maltreatment with particular attention to the challenges of child protection, the multidimensionality of child maltreatment (distinguishing physical abuse, physical neglect, sexual abuse, and psychological maltreatment), and hopeful new avenues for prevention. The implications of this research for educational professionals are emphasized.

KEY WORDS: abuse; neglect; maltreatment; sexual abuse; psychological maltreatment.

INTRODUCTION

The rate and prevalence of child maltreatment continue to astonish professionals concerned with child development. According to recent accounts, more than 1.55 million children were reported as maltreated in

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1993 and another 1.22 million were in imminent danger, reflecting nearly a doubling of the abuse rate between 1986 and 1993 (U.S. Department of Health and Human Services, 1996). Moreover, an average of more than five children die each day from the injuries or prolonged deprivation suffered from their caregivers (U.S. Advisory Board on Child Abuse and Neglect, 1995). Violence toward children—which consists both of actual violent acts and the failure to provide adequate care—is high in relation to historical standards and by comparison with the rates of child maltreatment in other Western industrialized nations.

These estimates are disturbing to all who are concerned with children, especially educators. Teachers, school administrators, special educators, counselors, and other educational professionals have several reasons for devoting special attention to the problem of child maltreatment. First, as legally mandated reporters of suspected abuse or neglect—like physicians, psychologists, and others who are regularly in contact with children— educators must be aware of the emotional and behavioral sequelae of maltreatment that might appear in the children in their classrooms. It is especially important that they are capable of distinguishing among different forms of maltreatment because, although child victimization commonly incorporates more than one type of physical or psychological harm, different forms of abuse and neglect have somewhat different origins and sequelae. Second, educators often have unique insight into the family circumstances of victimized children because educators are often in contact with parents, work in the neighborhoods in which families live, and can see what family/ neighborhood life is like from the child's perspective. Understanding the broader family conditions associated with child maltreatment enhances the contributions that educators offer to the treatment of victimized children and the prevention of abuse of the children in their care.

A third reason warranting their concern about child maltreatment is that educators must typically work closely with other helping professionals, including child protection caseworkers, law enforcement personnel, and psychological experts, in reporting suspected abuse, assisting and supporting child victims, and preventing maltreatment from occurring in other families or from recurring in troubled homes. In order to work effectively in interprofessional collaboration, it is essential for educators to understand the nature of the child protection system in this country, including its capabilities and stresses, so their contributions are concordant with the expertise offered by others. Moreover, in the context of understanding the national and local child protection system, educators can better grasp the unique contribution that schools can offer and how best to engage the assistance of other professionals.

Fourth, and finally, a better understanding of child maltreatment con-

tributes to educators' understanding of the emotional and learning difficulties that children sometimes bring to the classroom. This is because classroom problems are often indicators of broader difficulties that may be associated with child abuse or neglect. A high proportion of students referred for behavioral or conduct problems in school have a history of physical or sexual abuse, with some reports estimating that as many as 60% to 70% of these students have been maltreated (Conoley, 1995; Kauffman, 1997; Mattison et al., 1992). Although the relationship between behavior disorders and child maltreatment is complex (each may derive from the same antecedents, for example, and abuse can be an origin or consequent of behavior disorders), there is considerable evidence that abuse or neglect can be a cause of behavior and learning difficulties. The findings of prospective longitudinal studies indicate that early experiences of physical abuse heighten the likelihood of clinically deviant conduct problems in school age (Dodge et al., 1995), including anger, oppositional behavior, and poor self-control (Egeland, 1991; Erickson et al., 1989). In one such study, children who had been abused or neglected in infancy were later found to perform very poorly in school and on standardized achievement tests, and nearly all of these children were referred for special education services (Egeland, 1991). Similar results have been reported by other investigators (see Eckenrode et al., 1993; Hoffman-Plotkin and Twentyman, 1984; Kendall-Tackett and Eckenrode, 1996; Leiter and Johnsen, 1997; National Research Council, 1993). Understanding the associations between maltreatment and children's behavior and learning difficulties can contribute to greater insight into the school-related problems of these children, as well as contributing to the detection and prevention of abuse or neglect.

This review of current research focuses on three topics of particular concern to educators within the expanding literature on child maltreatment. The first is the nature of the child protection system, and the potentially unique roles of educators and the school system in detecting, treating, and preventing abuse or neglect. The second topic is the heterogeneity of child maltreatment, in which the causes, consequences, and correlates of physical neglect, physical abuse, sexual abuse, and psychological maltreatment are distinguished. In doing so, it is possible to consider more carefully the specific and combined effects on children of various forms of maltreatment. Finally, new avenues for the prevention of child maltreatment are considered because of their relevance to the role of the schools in assisting children at risk for abuse or neglect. These three topics are connected: it is, in part, the multidimensionality of the contemporary problem of child maltreatment that accounts for some of the unique challenges of child protection, and which make the prevention of child victimization such a significant concern. These topics are also associated in their relevance to the efforts of educators

to better understand child maltreatment, and the role of the schools in its detection, treatment, and prevention.

THE CHALLENGES OF CHILD PROTECTION

In the context of dramatically escalating rates of child maltreatment, professionals who seek to aid abused children are also worried about the decreasing capacity of child protection agencies to adequately cope with this social problem. Indeed, the U.S. Advisory Board on Child Abuse and Neglect (1990)—a Congressionally mandated commission to examine contemporary child protection efforts and offer recommendations for reform—has described the child protection system as a "broken" system. This characterization encompasses contemporary efforts to combat child maltreatment within the schools and elsewhere. There are several reasons for describing the child protection system in this manner, each of which reflects how contemporary efforts to combat child maltreatment have evolved in the past two decades, sometimes to the disadvantage of the children that the system is meant to protect (Thompson, 1995; Thompson and Flood, in press).

First, the child protection system has had to significantly widen its scope as public consciousness of child maltreatment and the incidence of abuse and neglect have each increased in recent decades. It is not only that larger numbers of children and families who are entering the system are stretching limited fiscal and personnel resources, but also that the responsibilities of child protection have broadened as public demand for effective intervention has increased. In addition to fundamental responsibilities for identifying abused children and intervening immediately to protect them, the system must also (a) monitor the integrity of child abuse reporting and investigation procedures, (b) seek to provide adequate treatment for the victims of maltreatment, (c) explore new prevention efforts and evaluate their efficacy, and (d) monitor out-of-home placements for children who cannot be safely returned to their families, while (e) providing adequate family supervision and support for those who can. These are weighty responsibilities which, together with the sheer numbers of families entering the system, have strained the very limited resources of local child protection agencies. It is for this reason that widely publicized reports in the public media document that many children are "lost" in the system, either because abuse allegations are insufficiently (or never) investigated, children never receive treatment, or victims are returned to inadequate homes or are put into foster care placements with inadequate monitoring of their progress.

Second, the problem of combating child maltreatment has become

more complex during the past two decades because of the increasing complexity and heterogeneity of child maltreatment. Inaugurated with the discovery of the "battered child syndrome" (Kempe *et al.*, 1962) in the early 1960s, the child protection system grew with public concerns over the prevalence of child neglect and its links to family poverty in the late 1960s, concern with the incidence of sexual abuse in the late 1970s and early 1980s, and the contemporary anguish over *in utero* drug-exposed babies and the effects of homelessness on children. Each new discovery of the broadening dimensions of child maltreatment has posed new challenges to a system that is stretched to cope with each new set of problems that are presented to it. Moreover, the increasing complexity of the problem of child maltreatment has emerged in the spotlight of public debate over appropriate solutions, including contemporary discussions concerning the effects of foster care placements, the importance of "permanency planning" for children, or the value of family reunification. Public debate about the inadequacies of child protection has been increased by popular media reports that painfully document the plight of children who are horribly abused by their biological or foster care parents. This has increased further the pressure on child protection systems for more effective interventions.

Third, the family problems that are associated with child maltreatment are also more complex, and more intractable, than in the past. Families that are abusive, or are at high risk for abuse, are multiproblem families (Daro, 1988; National Research Council, 1993; Thompson, 1995). They are often characterized by poverty, parental unemployment or underemployment, single parenting, and welfare reliance, and they can frequently be found in poor housing in the midst of dangerous and/or declining neighborhoods. Maltreating parents may also have substance abuse problems, mental health challenges, or emotional problems that contribute to their difficulties not just with offspring, but also with their spouses and in relationships with neighbors, coworkers, and other associates. Families where child abuse occurs are likely to be larger, are more prone to other forms of domestic conflict, and are characterized by greater residential mobility than are other families. Furthermore, parents who abuse or neglect their children are often characterized as socially isolated, lacking the supportive, ongoing relational ties to extended family, neighbors, community members, or workplace associates by which everyday forms of assistance can be provided. As a consequence, the kinds of emotional support and material aid, and the socialization of child-rearing practices that occurs naturally among families with more extended social networks, is often lacking for abusive or high-risk families.

Child maltreatment is, in other words, embedded in other pressing social problems: urban and rural poverty, the drug culture, neighborhood

dysfunction, individual problems of mental and emotional health, social isolation, and changing patterns of family life and child care. To be sure, child maltreatment is not limited to families beset by these kinds of stark challenges: children are abused or neglected in families that range throughout the whole socioeconomic spectrum, living in advantaged as well as impoverished communities, and experiencing benefits as well as disadvantages from their neighborhoods. But there is a reliable association between child maltreatment and socioeconomic distress and other social ills: the stresses of poverty, neighborhood danger, and social isolation increase the likelihood that a child will be victimized partly because they create conditions in which it is more difficult to be a successful parent (Daro, 1988; National Research Council, 1993; Pelton, 1995). Unfortunately, the same life stresses also contribute to an increased risk of other problems for children, including learning, behavioral, and emotional difficulties. As any teacher knows, a child's problems are made exceedingly more difficult to manage when they are enveloped in family and neighborhood stresses, and this appears to be true of child maltreatment also.

Fourth, the child protection system is a decentralized, fragmented, and inadequately coordinated compilation of diverse agencies that are managed with many different goals and agendas. In any local community, the agencies concerned with child protection include not only the specifically mandated child protective services department but also agencies of local and state law enforcement, the judicial system, public health, the welfare system, and, of course, the educational system. Each has an interest in child protection and each has a role to play in the effective detection of child maltreatment, abuse prevention, the remediation of its effects in children, and/ or the punishment and rehabilitation of offenders. The problem, however, is that the efforts of these various agencies are inadequately coordinated, partly because each agency has a variety of agendas and goals in its mission that need to be integrated with its child protection function. Sometimes, in fact, these alternative goals compete with rather than complement the goal of assisting victimized children, such as when legal concerns with due process limit authorities' intervention into families where abuse is suspected, or agency regulations impair the extent to which public health officials can assist troubled families. As a consequence, the national child protection system does not really function like a national system at all, but rather like a fractionated, loosely linked network of allied agencies that address, in partial or incomplete ways, the complex dimensions of child maltreatment. This blunts the broadly beneficial impact that such a system could potentially have on child victims.

Taken together, the contemporary challenges of child protection make considerable demands on local and national child protection agencies, and

often overwhelm their limited personnel and fiscal resources. These challenges highlight the complex circumstances and individual problems that contribute to risk of child maltreatment and also, quite often, to children's behavioral and emotional problems. They help to explain also why, despite considerable public attention and long-term concern about the problems of abused and neglected children, the national problem of child maltreatment only seems to be getting worse.

The Special Contributions of Educators

The educational system is a potential ally of child protection agencies in the fight against child maltreatment. Like other agencies concerned with child welfare, however, educators must cope with the complex problems posed by multiproblem families whose children arrive at school undernourished, ill-clothed, educationally delayed and socially isolated (sometimes owing to frequent residential moves), and often exhibiting the psychological effects of parental substance abuse, emotional problems, or other difficulties. These problems may be manifested in a variety of ways and, indeed, such children may come to the attention of educators initially because of learning difficulties, attention deficit disorders, or emotional or conduct problems. Only later do problems of abuse or neglect become apparent.

In their effort to assist such children, educators face their own special challenges. Like others who are concerned with child protection, educators have a variety of responsibilities to all the children they serve that may compete with their capacity to devote sustained and intensive attention to the small numbers of children who are at serious risk of abuse or neglect. Compounding these difficulties is the fact that abused children are highly needy children, so that the time and attention that teachers, counselors, and other school personnel can devote to them is almost always inadequate to their complex difficulties. Most educational systems have limited fiscal, personnel, and other resources with which to fulfill their broad mandates to children and families, and these resources become stretched even further when efforts to combat child maltreatment are also considered. Although special education funding ensures certain resources for children who are identified as behaviorally disordered, many other children who are at risk for child abuse or who are maltreated at home may not be so identified, but nevertheless require significant amounts of attention, care, and assistance that teachers and other school personnel (including counselors and administrators) may not be able to give.

As a consequence, it is important for educators to appreciate the unique roles they assume in detecting and reporting child maltreatment

(in view of their regular and close contact with children of various ages and backgrounds), and to know how best to collaborate with personnel from other agencies concerned with child protection who also have unique expertise to offer. It is particularly important for educators to appreciate the diverse agendas of these agencies in order to avoid undue frustration that agency personnel do not intervene more quickly, forcefully, or with finality in their assistance to children who are suspected of being abused or neglected. At times, for example, teachers or counselors will have to be unusually persistent in their contacts with child protective services in order to provoke a caseworker response, while understanding the impact that heavy caseloads and multiproblem families have on response speed and efficacy. By better understanding the child protection system, both its strengths and stresses, educators can more effectively assist the children they suspect of being victimized.

Of course, interagency cooperation is not new to educators. In special education, for example, regular consultation with medical specialists, mental health professionals, social services personnel, physical therapists, and others (depending on the needs of the identified child) is how an effective service plan is designed for a child at school. Similar kinds of interagency teams exist to assist classroom teachers with the challenges of suicide prevention, drug prevention, and other problems. With respect to abuse prevention, however, the development of interagency collegiality is especially important. When mandated reporters of child maltreatment, including elementary and secondary school principals, fail to report suspected abuse, it is often due either to their uncertainty over whether there is sufficient evidence that abuse has occurred, their belief that maltreatment is not sufficiently serious to report, or their distrust of the interventions of child protective services personnel (Zellman and Faller, 1996; Zellman, 1990). Stronger collaboration between school administrators, teachers, special educators, and child protective service personnel may help to address these problems and strengthen child protection efforts.

CHILD MALTREATMENT AS A
MULTIDIMENSIONAL PROBLEM

It is common for educators to consider child maltreatment as a single, homogeneous phenomenon. In fact, however, this term refers to a diverse array of harms that children suffer, most commonly because of their parents or other caregivers (Briere et al., 1996; National Research Council, 1993). It is important to distinguish among the various kinds of child maltreatment in order to understand their different origins, effects on children, and

alternative avenues of prevention. If teachers, special educators, administrators, counselors and other educational professionals allow only one type of maltreatment to dominate their thinking about this complex phenomenon, their efforts to contribute to reporting, treatment, and prevention strategies will be inappropriate to the full range of concerns encompassed by this daunting challenge (Daro, 1988).

Physical Neglect

The predominant form of child maltreatment is not physical abuse, but physical neglect. Several national incidence studies of child maltreatment have consistently indicated that child neglect is the primary concern in 45% to 50% of reports, whereas physical abuse is predominant for approximately 25% of all reports, sexual abuse is primary for 10% to 20% of reports, psychological maltreatment is the primary concern for approximately 7%, with an additional 5% to 10% constituting other offenses (McCurdy and Daro, 1994; National Center on Child Abuse and Neglect, 1992; U.S. Department of Health and Human Services, 1996). Of course, children are typically reported to child protection agencies for reasons that encompass more than one form of maltreatment, but these statistics concerning primary reporting help to reshape prevalent images of the abusive parent derived from the popular media. Based on these figures, the most "typical" maltreating parent is not the raging, physically abusive adult whose frustration or anger blunt self-control and who inflicts injury on offspring. Instead, it is the neglectful parent whose inattention to the physical, safety, nutritional, or other needs of offspring derives from incompetence or inability, and whose problems may be linked to broader difficulties with poverty and/or substance abuse (see Pelton, 1995; Polansky et al., 1981).

Other characteristics distinguish the families of neglected children besides the challenges of socioeconomic distress. Another challenge is overall disorganization of the home environment, with erratic home routines, inadequate attention to the care of family members and of the home, and the unpredictable arrival or departure of parents from the home (Erickson and Egeland, 1996). Children may arrive at school chronically late, unkempt, and without adequate dental or medical care. Sometimes the disorganization of home life is secondary to the parent's problems with intellectual functioning, substance abuse, or mental illness. Some researchers have found that other features of the parent's psychological functioning are important contributors to neglect. Polansky and his colleagues have found that neglectful parents—whom they call psychologically "damaged par-

ents"—use psychological defenses involving detachment to cope with the demands and stresses of their life circumstances, and that this can account for the sense of apathy, futility, withdrawal, and hopeless passivity that sometimes characterizes them (Polansky et al., 1981, 1985). Neglectful parents may also be distrustful of others, and their retreat from social contact helps to account for their social isolation within their families and neighborhoods. Another characteristic of an important subpopulation of neglectful parents, according to Polansky, is that they can be impulsive, lacking the self-monitoring and self-control that is essential to competent parenting (Polansky et al., 1981).

In short, it is easy to see how the characterization of these parents as "damaged," especially in the context of poverty, mental or emotional problems, or substance abuse, seems appropriate to understanding the origins of child neglect. Not surprisingly, the same parenting difficulties can contribute to academic delay as well as to emotional and behavioral problems in offspring (Kauffman, 1997), and these parenting difficulties can make it difficult for teachers or counselors to enlist parents into a plan of assistance for the child. This is especially problematic because neglect not only contributes to immediate learning difficulties (e.g., parents who are detached are unlikely to be helpful with schoolwork) but also to broader problems for the child. Accident prevention (one of the leading causes of childhood injury and death) is undermined, and ingestion of environmental toxins like lead-based paint (an important cause of brain impairments related to learning and memory) is enhanced in neglectful home environments (Alfano and Petit, 1981; Christophersen, 1989).

Neglect is more likely to victimize younger children than older children and adolescents because older children are less exclusively dependent on their caregivers for the physical, nutritional, medical, and other kinds of care they need (Erickson and Egeland, 1996). However, older children who are abandoned, and adolescents who are literally thrown out of their homes, constitute an increasing concern among the population of neglected children. The consequences of child neglect extend beyond immediate concerns for a child's health, nutritional adequacy, or medical status. Children are emotionally neglected when their caregivers are disinterested, unresponsive, or grossly insensitive to their needs. Neglected children stand out among their peers for their diminished self-esteem, lack of confidence, general unhappiness, and low school achievement (Eckenrode et al., 1993; Erickson et al., 1989; Hoffman-Plotkin and Twentyman, 1984; Kendall-Tackett and Eckenrode, 1996). They tend to be passive and exhibit some of the characteristics of learned helplessness, although angry outbursts and noncompliance are also characteristic of neglected children (Erickson and Egeland, 1996). This can be a difficult combination for teachers, who may

seek to respond helpfully to children who have fallen behind in schoolwork only to be angrily rebuffed.

A teacher's, counselor's, or special educator's report of suspected physical neglect may, if confirmed, result in several avenues of intervention with varying degrees of potential success. When children are living in an inadequately heated or unsafe apartment with their parents, or have not received adequate medical or dental care, and these conditions arise primarily from inadequate income, social service agencies may provide temporary but immediate financial assistance to repair faulty wiring, restore heating, or fund a medical examination. At the same time, caseworkers may involve parents in educational or vocational training programs that can contribute to a longer-term solution to the family's problems (Pelton, 1995). When a parent's character problems, substance dependency, or general disorganization pose more difficult challenges to remediating child neglect, child protection caseworkers may enlist the parent into programs that involve counseling, detoxification, or social skills training. But the prognosis of these efforts is not optimistic, because many experts believe that parents who are neglectful are among the most resistant to intervention and treatment. Quite often, their problems in child care are associated with deeper, more enduring and intractable problems that require sustained and intensive assistance (Polansky et al., 1981). This can make it difficult to manage problems of child neglect, and it is a challenge for teachers who must continue to work with such parents in the context of assisting their offspring. Ongoing contact between school administrators, teachers, and child protection caseworkers is thus essential for the continued monitoring of children who are neglected at home, as well as for the development and evaluation of coordinated strategies to assist these children at school and for improving the quality of their care at home.

Physical Abuse

Physical abuse is our most serious concern for children because its physical effects are more apparent and its psychological consequences may be more longstanding. Physical abuse victimizes children across the age spectrum, who may suffer broken bones, burns, battered internal organs, bruises, and even death at the hands of their caregivers. The reasons that parents act abusively toward offspring are multifaceted. Physical abuse often arises in the context of discipline encounters—or in situations that are perceived by parents as discipline encounters (such as a toddler's toilet training)—in which the anger and frustration generated by a child's noncompliance results in a violent outburst. In these and other circumstances,

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abuse may arise partly because of inappropriate developmental expectations for offspring, such as when parents attribute a child's noncompliance to intentional misbehavior rather than inability, or when they lack a sympathetic understanding of children's needs (Kolko, 1996). In other words, physically abusive parents often have difficulty seeing the world from the child's perspective. This sometimes contributes to escalating cycles of aversive parent-child interaction that not only increases risk of physical abuse but may also heighten emotional and behavioral problems in offspring. Although this is often most apparent with younger children, these cycles of aversity can be observed with parents and children of any age.

Researchers who have sought to understand the causes of physical abuse have also examined the parent's childhood history, especially for indications that parents were themselves abused or exposed to physically abusive models as they grew up. The answers revealed by research studies are often misunderstood as indicating that most physically abusive parents were themselves physically abused as children (Kaufman and Zigler, 1993). The percentage of abused children who become abusive parents is not inconsequential—estimated at about 30%—and is higher than the rate of nonabused children who become abusive parents. But most abused children do not grow up to abuse their own offspring (Kaufman and Zigler, 1987, 1993).

Other indicators of psychological distress better distinguish physically abusive parents, including higher than average rates of depression, substance abuse, and hostile personality. The effects of these psychological problems on parenting practices may be exacerbated by stressful life circumstances arising from poverty, unemployment, and/or poor housing (Kolko, 1996). In contrast with the withdrawn disorganization of physically neglectful parents, the stressed hostility of the physically abusive parent can present more threatening challenges to teachers, administrators, and other school personnel. Consequently, in the effort to help a child, educators may confront an angry, hostile parent who denies responsibility and instead challenges the teacher who seeks to offer assistance.

The consequences of physical abuse on children are diverse, extending far beyond the manifest physical symptoms that may have led to an initial report to child protective services. In a number of studies, physically abused children have been found to be more highly aggressive than other children, as well as more prone to oppositional behavior, fighting, delinquency and criminality (Dodge et al., 1995; Eckenrode et al., 1993; Erickson, et al., 1989; Hoffman-Plotkin and Twentyman, 1984; Kendall-Tackett and Eckenrode, 1996). These externalizing behaviors may be accompanied by self-injurious and suicidal behavior, substance abuse, emotional problems, and difficulties in peer relationships (such as deficient social problem-solving skills and

limited empathic capacity) as well as problems in academic achievement (Kolko, 1996; Malinosky-Rummell and Hansen, 1993). Many of these problems are long-lasting, extending well beyond childhood and adolescence into the adult years, and there is some speculation that these problems may be associated with fundamental changes in brain neurobiology owing to traumatic abusive experiences (Perry, 1996). These difficulties are likely to be manifested in school problems related to classroom underachievement, fighting with peers, and oppositional defiance toward teachers. They may also result in referral to special education classes because of learning disabilities or behavior disorders.

It is important to note, however, that there is considerable variability in these psychological sequelae among physically abused children, with some children exhibiting serious psychosocial problems arising from physical abuse and other children appearing to be little affected. This has led researchers to explore how a number of moderator variables may either diminish or enhance the impact of physical abuse on psychosocial, emotional, and intellectual development (Malinosky-Rummell and Hansen, 1993). The frequency and severity of physical abuse, the existence of other forms of family violence, and socioeconomic stress tend to exacerbate the detrimental effects of physical abuse on children. On the other hand, social support to the victim (especially from a source outside the family, such as a teacher, guidance counselor, or older friend) and participation in therapy tend to diminish its negative impact. In many cases, such supportive assistance can also be provided by other school personnel, such as a principal or a custodian, who have developed a special interest in the child.

When children have been identified as physically abused, a number of treatment programs have been developed to address their psychosocial and emotional problems. These include: (a) intensive in-home family-based services that are designed to reorient family life in a more positive direction, (b) behavioral parenting skills training programs, and (c) therapeutic day care or school-based or residential treatment programs for children (Kolko, 1996). The success of these programs varies depending on the nature of the accompanying problems that the child and family faces. The prognosis is, unfortunately, least hopeful when families have multiple problems (such as with poverty or substance abuse), when parents are violent, or when parents are unwilling to acknowledge their difficulties (and their participation in the program is coerced) (Daro, 1988). Even in these circumstances, however, children fare best when interventions designed to improve parenting are combined with school-based efforts to strengthen academic achievement and improve their peer relationships. These can be difficult goals to achieve because abused children are undermined by the negative reputations they develop among other children and the diminished self-esteem

that derives from the experience of physical maltreatment. But the importance of these efforts underscores how teachers, administrators, counselors, and special educators have an important collaborative role to assume in providing assistance to physically abused children.

Sexual Abuse

Sexual abuse is a distinct problem for several reasons, each presenting a challenge to the child protection system—and to educators. First, the evidence for sexual abuse is often unclear and incomplete, by contrast with the welts and bruises characteristic of physical abuse or the emaciated appearance of a physically neglected child. Clear physical evidence of sexual abuse is apparent in only a small minority of cases, posing the evidentiary dilemma for child protection authorities of weighing the child's word of what happened against that of the adult, or using circumstantial and indirect evidence that abuse has occurred. In many instances, the sexual abuse of a child is initially detected by a teacher (or day-care worker) who notices the child behaving in sexually inappropriate ways, or to whom the child makes comments suggesting that a sexually traumatizing event had occurred. But the educator may be hesitant to make a report to authorities in the absence of stronger or clearer evidence of sexual abuse (Zellman, 1990; Zellman and Faller, 1996). In these instances, confidential consultation with colleagues or administrators at school, and child protection personnel, is warranted.

Second, the strong social sanctions against inappropriate sexual contact between children and adults make accusations of sexual abuse highly visible and profoundly emotional and polarizing events. More than for any other form of maltreatment, the accused is likely to adamantly deny having sexually abused the child, which makes the investigation of the incident more difficult and also complicates treatment and prevention efforts. This is true not only of sexual abuse that occurs within the family but also of sexual abuse occurring at a school or day-care center.

Third, defining the nature of sexual abuse is a somewhat more difficult task than for other forms of maltreatment because part of what makes sexual abuse offensive is that it is implicitly nonconsensual. In other words, sexual contact between an adult and a child is inappropriate, even if it does not involve coercion or the threat of force, because the vulnerability of children and youth make them incapable of freely consenting to sexual contact. But this also means that some children (especially at younger ages) can be sexually victimized without knowing it, and without experiencing immediately deleterious consequences, because sometimes the interpreta-

tion of the act is central to its impact on the child. In this regard, a sexually abusive act can occur long before it is finally detected by a counselor, teacher, or other adult who is concerned about the child, and this makes the educator's sensitivity to the information that is implicit, but not explicit, in a child's account especially important.

Another complication to the detection and treatment of sexual abuse is the hesitancy of its victims to disclose their abuse owing to the emotional bond that may exist between the victim and the perpetrator. In addition, victims of sexual abuse often experience shame, fear, guilt, and embarrassment at disclosure, and they sometimes feel personally responsible for their abuse. This means that there is often considerable delay between the incident and its revelation to teachers, authorities, or others who can assist the victim, and disclosure may sometimes occur accidentally or inadvertently rather than intentionally. This helps to explain why children who have been sexually abused may initially deny that the abuse occurred or, after disclosing it, later recant (Berliner and Elliott, 1996).

This suggests that a unique network of psychological associations between the experience of sexual victimization, the emotional reactions to the experience, and the consequences of reporting abuse (for the child, the perpetrator, and child's family) complicate the tasks of detecting, reporting, and confirming sexual abuse. For educators, this means that the process of discovering sexual traumatization can be prolonged and difficult, involving elusive suggestions but little direct confirmation from the victim (or denial if the child is directly asked about sexual abuse), and confusion about what to do. Sometimes the teacher or counselor may feel uncertain about whether to probe directly (and risk upsetting the child or suggesting that events may have occurred that actually did not) or instead maintain a supportive but nondirective availability (and risk that sexual abuse, if it has occurred, may recur). In these situations, consultation with other professionals concerned with child welfare is well advised.

Another distinguishing feature of sexual abuse is the gender of its victims and its perpetrators. Sexual abuse is committed against girls about four times as often as boys are victimized, and males are the most common perpetrators of sexual abuse (Berliner and Elliott, 1996). Children can be sexually victimized across a broad age spectrum, and the traditional view that adolescents are most frequently the victims of sexual abuse is being reassessed in light of the fact that younger children are victimized far more frequently than had earlier been estimated (U.S. Department of Health and Human Services, 1996). Although most sexual abuse victims are acquainted with those who abuse them, there is conflicting evidence concerning whether victimization is most likely to occur by a family member or not, and this may depend on the age of the victim. In any case, it is relatively

rare that children or adolescents are sexually abused by a stranger, contrary again to popular perceptions (Finkelhor, 1994). The families in which sexual abuse occurs span the full socioeconomic spectrum, including two-parent as well as single-parent families, and they vary considerably in the nature of the family problems that accompany sexual abuse.

Somewhat surprisingly, as many as one third of the victims of sexual abuse are asymptomatic: that is, they do not show serious psychological harm (Kendall-Tackett *et al.,* 1993). This may arise because children are not always aware of their victimization, the experience of sexual abuse is not long-lasting or severe, or children receive support and emotional assistance from a helpful adult. In other circumstances, however, the victims of sexual abuse can show serious psychological consequences, including depression and anxiety, diminished self-esteem, social withdrawal, age-inappropriate sexualized behavior, symptoms of post-traumatic stress disorder, as well as self-destructive behavior like substance abuse or suicide attempts (Berliner and Elliott, 1996; Briere and Elliott, 1994; Dubowitz *et al.,* 1993). There is no uniform symptom profile; in other words, a variety of behavior and emotional problems may result.

Partly because its consequences are so multifaceted (and sometimes elusive) and partly because research on sexual victimization is still fairly recent, clinicians are only just beginning to evaluate the effectiveness of a variety of treatment approaches to aid the victims of sexual abuse. By contrast with the focus on economic assistance to families of physically neglected children and the physical and psychosocial healing of victims of physical abuse, the predominant focus for sexually abused children are forms of emotional assistance, often in the context of individual therapy or support groups, that enable children to cope with the complex and confusing constellation of feelings that are associated with their victimization in the context of restoring positive self-regard and healthy psychological functioning. Although most of these efforts are likely to occur outside of school, the sensitive support of teachers, counselors, and other school personnel can contribute significantly to assisting child victims of sexual abuse.

Psychological Maltreatment

Psychological maltreatment is most likely to be identified and reported to authorities when it accompanies other forms of maltreatment. It includes repeatedly belittling, denigrating, or terrorizing a child, isolating him or her from others, exploiting or corrupting the child (such as involving the child in criminal activity), explicitly rejecting the child, and also generalized

"missocialization" (Hart *et al.,* 1996). It is unsurprising that these abusive actions often accompany physical abuse or neglect or the sexual abuse of children in light of the broader family processes that accompany children's victimization. Despite this, psychological maltreatment seldom stands alone as a basis for legal allegations of child maltreatment because delineating where acceptable variability in parenting ends and unacceptable forms of psychological maltreatment begins can be conceptually problematic. It is unclear specifically what "missocialization" entails, for example, except in its extreme forms, and clearly defining the limits of these and other facets of psychological maltreatment can be difficult. As a consequence, accusations of psychological (or emotional) maltreatment are usually part of broader allegations of physical or sexual abuse, or the physical neglect of children.

Although it can rarely be the sole basis for legal intervention into the family, however, emotional or psychological abuse may be the most pervasive form of child maltreatment. Psychological maltreatment spans the full developmental spectrum, and can be observed in a variety of family types and socioeconomic conditions. Children who are psychologically maltreated are likely to have low self-esteem, to be depressed and perform poorly at school, have greater difficulty getting along with peers, and show other behavior problems. But it is often uncertain whether these outcomes are attributable solely to the experience of being berated or terrorized by a parent, or to other forms of abuse that often accompany psychological maltreatment (Hart *et al.,* 1996). Even so, in cases when psychological maltreatment is indicated, parenting or child development instruction can be helpful for recalibrating the developmental expectations of parents and to help them to learn more constructive modes of child management. When parents are receptive to advice, teachers and other school personnel can contribute to this process.

Public awareness of psychological maltreatment provides a reminder that many commonly accepted parental practices may nevertheless exact significant psychological costs for children. A public commitment to child welfare entails not just the assurance that children's physical health and safety is preserved, but also that their mental and emotional well-being is protected (Garbarino *et al.,* 1986). For educators, awareness of the impact of psychological maltreatment on children is important because it provides another window into the potential reasons for a student's low self-esteem, depressed demeanor, problems with peers, or unwillingness to complete schoolwork. Moreover, children with behavior problems are particularly likely to be victims of psychological or emotional maltreatment because of the family difficulties that may be associated with their behavior problems. In this regard, understanding that coercive or antagonistic parent-child

relationships create a psychologically harmful home environment is important for appreciating how a child's academic problems have multifaceted origins that require the educator's careful attention.

PREVENTION

It is difficult to look closely at child maltreatment without feeling pessimistic about society's capacity to adequately protect its children. As the complexity of this problem and the social ills with which it is associated increase, while funding for child protection efforts declines in real dollars (Thompson and Wilcox, 1995), it is hard to feel hopeful that new and creative approaches to combating abuse and neglect are likely to be found. Yet reasons for optimism do exist, and they are noteworthy.

Sources for optimism come from innovative new prevention efforts. Although it is reasonable that, in the spotlight of public concern, local child protection agencies focus on prosecuting offenders and removing victims from abusive homes, many professional observers argue that a primary focus on investigation and placement may be misdirected. Instead, they argue, child protection resources might be more profitably invested in efforts to prevent child abuse and neglect in the troubled families that are most prone to breakdown. Such a prevention strategy not only helps to ensure that families are assisted before their problems have reached the crisis of a child being harmed, but also offers hope that many high-risk families can be enabled to function more effectively as safe and secure environments for offspring. Moreover, preventive programs are likely to be more cost-effective than efforts to provide treatment and reconstitute healthy family functioning after abuse has already occurred, by which time family problems have become serious and potentially more intractable (Melton and Barry, 1994; Melton et al., in press; Thompson, 1995).

Of course, effectively preventing child maltreatment is not an easy task, given the nature of the problems faced by parents at risk for abusing or neglecting their offspring. One vision for the kind of comprehensive, intensive preventive effort that might be effective has been proposed by the U.S. Advisory Board on Child Abuse and Neglect (1990, 1991, 1993a, 1993b, 1995). The Advisory Board argues that a comprehensive abuse prevention strategy should be neighborhood-based and child-centered. These key terms—"neighborhood-based" and "child-centered"—are each meant to signal a departure from current approaches to child protection and to orient prevention efforts in a new direction. They are the focus of this discussion of prevention efforts because of their relevance to educators and their implications for schools. Indeed, a neighborhood-based, child-

centered approach to child prevention enlists teachers, counselors, administrators and other school personnel squarely in the midst of efforts to reduce the incidence of abuse or neglect.

Neighborhood-Based

The view that child protection should be "neighborhood-based" means that effective abuse prevention should be decentralized and local in its orientation and should rely on the informal support systems that typically characterize healthy neighborhoods (Melton and Thompson, in press). In the U.S. Advisory Board's concept of "neighbor helping neighbor," child protection is intended to be responsive to the needs, goals, and values of local communities. This means that government policies should be oriented toward helping neighbors assist each other through the kinds of advice, material assistance, referrals, and other supportive aid that family members naturally offer other families within well-functioning neighborhoods. These are skills that emerge naturally in healthy communities, so part of the focus of government policy is to enable and support neighborhoods to provide healthy contexts for family functioning.

The U.S. Advisory Board's plan also advocates government policies that strengthen and support local communities in their efforts to design effective abuse-prevention strategies, and that promote the development of linkages between informal support systems (like friendship networks) and the efforts of formal agencies (like social services) that have a specific mandate for child protection. The nature of these community-based initiatives is inevitably individualized. In one community, it might include funding for neighborhood community centers that offer activities for youth, respite child care for young mothers, and classes for adults that teach vocational and parenting skills. Alternatively, another community's abuse prevention efforts might focus on developing written and video materials for parents that teach effective child management practices, together with support for neighborhood gatherings (comparable to Neighborhood Watch programs) in which such materials can be presented and discussed.

Although there is considerable diversity in neighborhood-based programs oriented toward preventing child maltreatment, there are some characteristics shared in common by successful programs (Wilson and Melton, in press). These characteristics include: a focus on both prevention and treatment of child abuse; strengthening parents' capacities to promote the healthy development of offspring; establishing linkages between families and community support systems; providing settings where parents and children can gather informally and enjoy each other; coordinating and integrat-

ing needed services for families; and enhancing the community's awareness of the importance of healthy parenting practices. In addition, successful programs are sensitive to the cultural and social diversity of the community, and are connected to other agencies and institutions that are positively regarded by families.

Local schools have many of these characteristics. Neighborhoods are often organized around local schools, which provide formal educational services to families but also offer a context for informal networking among neighbors through school activities, parent-teacher organizations, fundraising events, and other activities. Local schools are positively regarded within the neighborhood, and they provide a forum in which families can learn about and obtain access to other community agencies that can provide them with needed assistance. Schools can also provide a forum for strengthening healthy parenting and heightening community awareness of its importance. Thus local schools are an important part of how local neighborhoods can strengthen families, monitor the well-being of children, and coordinate assistance to families in need. Indeed, in one proposal, the "School of the 21st Century" should function as a neighborhood clearinghouse of parent support information and referral to assist families with children of all ages (Zigler, 1989).

The idea of "neighbor helping neighbor" is an ambitious and challenging goal, especially in light of the fact that many high-risk families live in neighborhoods that are economically impoverished, dangerous (because of gangs and the drug culture), and otherwise drained of the resources required for providing effective social support to troubled families (Garbarino and Kostelny, 1994; Garbarino and Sherman, 1980). Nevertheless, because even neighborhoods that are the most destitute of material (and sometimes human) capital include local schools, the educational system can provide a potentially important foundation to efforts to rejuvenate local communities and strengthen local abuse prevention efforts.

Child-Centered

The view that child protection should be "child-centered" means that it includes a focus on the needs of victimized children. Surprisingly, many children who are harmed by abuse or neglect receive only the most essential medical treatments they require, but little else. Children often receive no therapy to address the mental and emotional consequences of abuse, no counseling to foster self-esteem or social skills, and little or no educational support to strengthen their academic skills. Instead, the efforts of child protection agencies are often focused on the perpetrator, particularly in

seeking to ensure that abuse is not repeated (Thompson and Flood, in press).

In proposing that the national child protection system become more child-centered, the U.S. Advisory Board urges a greater concern for the victims of abuse, especially to ensure that the developmental consequences of their maltreatment are remediated. Thompson and Flood (in press) have identified other characteristics of a "child-centered" child protection system. These include: a special advocate for the child who aids the child in encounters with law enforcement, social services, and educational personnel; an emphasis on "preventive family preservation" in which stressed families can receive supportive services *before* abuse has occurred rather than only afterward; an individualized treatment plan for the child; and an effort to enlist extended family members or neighborhoods adults who are trusted by the child to assist in service delivery. These are important goals that are rarely realized in most child protection efforts because of a primary focus on the perpetrator, not the victim of abuse.

Teachers, school administrators, and other school personnel can assume an important role in making child protection more "child friendly." They are often crucial to providing assistance to children who are the victims of abuse or neglect, and also in identifying and articulating their developmental needs to others who are concerned about child protection. Moreover, school personnel are central to coordinating the educational support frequently needed by victimized children, especially when behavioral or emotional problems, or learning disabilities, are part of their symptom picture. As earlier noted, school-based services to victims of physical abuse sometimes include academic assistance to improve school achievement, social skills programs to improve peer relationships, along with other coordinated services. In a "child-centered" child protection system, moreover, a teacher, counselor, or school principal would be a good candidate to be the special advocate who would mediate between the child and child protection personnel, and who could provide support for a victimized child throughout the various procedures of investigation, prosecution, and treatment. The image of a "child-centered" child protection system has a central role for educators in making the system more responsive to children's needs and perspectives.

Social Support to Families

Consistent with a concern for "neighbor helping neighbor," some researchers have noted that the social isolation of abuse-prone families means that parents often lack informal social support from neighbors, extended

family members, friends, and coworkers because of their residential mobility, limited social skills, distrust of others, or their effort to hide abusive behavior (Erickson and Egeland, 1996; Polansky *et al.,* 1981). Researchers argue, however, that informal social support is an essential ingredient of healthy psychological functioning because it provides the emotional sustenance that people frequently rely on during episodes of stress or difficulty (e.g., Cohen and Wills, 1985). People in one's informal social support network offer advice and counseling, as well as guidance concerning child management problems, access to material aid (such as food, temporary financial assistance, or household items), and other resources that families in difficulty sometimes need. Therefore, the informal assistance that can help parents weather difficult times and avoid taking out their frustrations on their offspring may be missing for high-risk parents who are socially isolated within their extended families, neighborhoods and workplace associations. Prevention programs oriented toward enhancing social support may help to avert child maltreatment by reducing the stresses these parents experience (Gaudin and Pollane, 1983; Seagull, 1987; Thompson, 1995).

One model of a program enlisting social support to prevent child maltreatment has recently received national attention. The Healthy Start program in Hawaii is a comprehensive program of perinatal home visitation that is offered free of charge, beginning at the time of a baby's birth and lasting for up to five years (Fuddy and Thompson, in press). It is targeted especially to high-risk parents based on special screening measures that are obtained at the time of a baby's delivery. If a family is identified as being at possible risk for child maltreatment, they are offered admission to the Healthy Start program, which begins with weekly home visits by specially trained visitors. During their visits, home visitors may discuss family stresses, child development concerns, personal worries, and needed avenues for assistance from other community agencies (such as agencies offering medical care, respite child care, welfare assistance, or vocational training). The frequency of the visits and the kind of assistance offered by the home visitor is likely to change over time based on the family's changing needs and concerns.

The efficacy of Healthy Start in averting child maltreatment has been evaluated in several studies with impressive results. Compared with a control group of comparable families who did not receive Healthy Start services, those receiving these services showed a dramatically lower rate of documented child abuse and neglect (Fuddy and Thompson, in press; General Accounting Office, 1990). Based partly on these results, Healthy Start has become the model for a variety of similar early home visitation programs throughout the United States, many under the auspices of the Healthy Families America initiative sponsored by the National Committee to Pre-

vent Child Abuse and other agencies (see Fuddy and Thompson, in press; Thompson, 1995; Wasik *et al.,* 1990).

The success of Healthy Start and other social support programs has inspired efforts to explore how social support can be offered in other ways to assist families at risk of harming their offspring. The schools are another such avenue, partly because schools (along with churches) are sometimes the only positive social institutions that unite troubled local neighborhoods, and many schools already assume significant roles in community networking and in child welfare. Schools are also likely candidates for the provision of social support because of their ready accessibility to all families in the local community, as well as their existing ties to formal agencies that are concerned with child maltreatment. Furthermore, schools assume considerable responsibility for addressing the needs of troubled children, including those who are maltreated and also children with a variety of emotional and behavior problems, and this enhances their potential contribution to the detection and prevention of abuse or neglect. For all of these reasons, local schools might be very valuable avenues of supportive services to high risk families. As sponsors of parent support groups, as community referral agencies, as organizers of after-school activities for neighborhood children, as coordinators of therapeutic assistance to troubled children, and in other ways, schools can be valuable forums of social support to at-risk families in the community.

It is important, however, to take seriously the difficulties of providing social support to troubled families in the context of the other demands of the school setting (Thompson *et al.,* 1997). As earlier noted, the multiproblem families that are at heightened risk for child maltreatment can make extraordinary demands on school personnel who have a variety of competing responsibilities and obligations. The sheer amount of time and energy required to provide meaningful aid to a troubled family with a needy child can be overwhelming. The relationships that develop between teachers, principals, and other school personnel with the families they serve may provide opportunities for offering supportive assistance, but providing such aid sometimes requires professional skills that are beyond the training of most school personnel, and may require consultation with outside experts. Moreover, parents may reject or ignore the assistance offered by professional educators, especially if it involves efforts to challenge or change the behavior of parents. All told, although the goal of providing supportive assistance to troubled families via the schools is worthwhile, its implementation is likely to be difficult. This is yet another reason why the effective coordination of efforts by educators with those of child protection caseworkers and other professionals concerned with child welfare is essential to ensuring that teachers, counselors, and other educational personnel are

enabled to make their best contributions to enhancing child well-being while avoiding becoming overwhelmed with the depth and breadth of this responsibility.

CONCLUSION

The national tragedy of high and escalating rates of child maltreatment commands the attention of a public concerned with children's well-being. This problem is especially important to educators because of the numbers of children they see daily, their legal mandate to report suspected abuse, and because teachers are likely to be among the first to identify and report suspected child maltreatment. Child protection is important to educators also because of their special awareness of the family backgrounds and living conditions of their students which may contribute to their victimization, and the realization that certain problems that children exhibit at school may be associated with abuse or neglect at home. Given current research findings indicating that a high proportion of children with behavior or conduct problems have a history of abuse (Conoley, 1995; Kauffman, 1997; Mattison *et al.*, 1992), an understanding of the nature of child maltreatment, its causes and outcomes for child victims, and various avenues of prevention is essential for educators who seek to assist children.

The implications of the research on child abuse and neglect for educators have been highlighted throughout this report. To summarize:

- The behavior or conduct problems, emotional challenges, learning difficulties, or other problems that bring a child to the attention of teachers and counselors may be part of a complex history that can potentially include maltreatment at home or elsewhere. Child abuse or neglect may be a contributor to the educational or behavioral difficulties that children experience (although maltreatment and behavioral/learning difficulties may also arise from common origins). It is important to remain aware, therefore, that child maltreatment may be one contributor to complex problems of academic delay, diminished self-esteem, difficulties in peer relationships, conduct problems in the classroom, and other difficulties for which children need special assistance. Efforts to assist children without an awareness of family turmoil may be inadequate.
- Child maltreatment is not a homogeneous phenomenon. Children may be victimized by physical neglect, physical abuse, sexual abuse, and/or psychological maltreatment, with each type of maltreatment having different consequences for the child's well-being, although

children are typically victimized in multiple ways. It is important to recognize that physical neglect, not physical abuse, is the most common form of child maltreatment, but this can be easily overlooked with society's preeminent concern with physically battered children. Moreover, some forms of abuse, such as sexual abuse, are difficult to substantiate, while other forms of abuse, such as psychological maltreatment, are damaging as accompaniments to other kinds of child harm. Taken together, therefore, it is important for educators to be aware of the multidimensional nature of child maltreatment, and its diverse effects on children.

- Not only the type of maltreatment but also the circumstances of its occurrence affect children. In a recent study involving more than 1500 schoolchildren, Leiter and Johnsen (1997) reported that factors such as the age of the child when abuse was first reported, and the number of abuse reports, were significantly associated with educational outcomes such as behavior problems, special education program involvement, being retained in grade, and school absences. As this review of research on child maltreatment has shown, a child's age, gender, socioeconomic circumstances, and other life stresses can either exacerbate the problems associated with abuse or neglect, or enhance the child's coping. Children who exhibit problems in the classroom or playground may be showing the effects not only of abuse or neglect, but its timing and persistence over time.

- An educator's appreciation of the complex family circumstances that are associated with different forms of child maltreatment can aid in understanding a child's current difficulties. Although a parent's problem with impulse control is often responsible for a physically harmed child, maltreatment also has its origins in family disorganization, poverty, and dangerous neighborhoods. The same circumstances can also contribute to the development of learning, emotional, or behavior problems in children. Family circumstances can contribute to a child's difficulties but can, alternatively, provide added resources for the child's coping. A teacher who knows, for example, that the child has a helpful and supportive grandparent in the neighborhood who is concerned about the child's well-being may be successful in enlisting this person to benefit the child.

- It should be clear that educators are not alone capable of addressing the complex challenges of child maltreatment, but must seek to assist troubled children in league with other professionals concerned about child welfare. It is important for educators to be aware, however, of the demands faced by colleague professionals and the competing obligations they may also experience. A child protection caseworker

who appears to proceed too slowly in investigating abuse allegations, for example, may be struggling with an overwhelming caseload. Legal authorities who do not appear to act forcefully enough to protect children may be balancing the rights of parents as well as children in a particular case. Teachers, counselors, special educators, and other school personnel must, however, appreciate the unique role they can assume in child welfare when they contribute to (a) monitoring schoolchildren for signs of abuse or neglect, (b) learning of the family circumstances that may contribute to a child's present difficulties, (c) offering support and guidance (and a compassionate ear) to children who may have few other sources of adult support, (d) coordinating educational assistance and counseling to address the academic and psychological consequences of maltreatment, and (e) enlisting other professionals into these circumstances as needed.

In the end, the contribution of educators to the detection and prevention of child maltreatment is essential, given the frequency with which children who have been abused or neglected disclose their maltreatment in the academic delays, learning disorders, or emotional or behavioral problems with which abuse is frequently associated. Enhanced understanding of the complex origins, treatment, and prevention of child abuse is likely to strengthen the contributions that school personnel can offer in combating this national problem.

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