

Addressing the Needs of Crime Victims in Medical Practice

Child Victimization: Special Issues Related to Child Abuse and Neglect

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This curriculum kit was created as a part of the National-Scope Demonstration Project to Integrate Crime Victims' Issues into University and College Curricula. The project is funded by a grant from the Office for Victims of Crime (OVC, a component of the Office of Justice Programs within the U.S. Department of Justice) to achieve the project goals of increasing the numbers of students exposed to information about crime victims and interested in working with crime victims, and thereby improve the future provision of services to crime victims.

Purpose

The goal is academic instruction to provide medical students and residents with current, cutting-edge, practical knowledge and skill development regarding victim assistance to children who have been maltreated, sexually abused, physically abused, and/or have witnessed domestic or community violence. These materials have also been used with physician assistant trainees.

Learning Objectives

After completing this curriculum kit, students should be able to:

- List types of child maltreatment and abuse.
- Describe problems with low rates of reporting child maltreatment.
- Describe, compare, and contrast different forms of abuse.
- List in order the most common types of child maltreatment reported to Child Protective Services.
- Identify common characteristics of victims and offenders.
- Identify who the mandated reporters are for their state.
- Describe appropriate responses to suspicions of child abuse and neglect.
- List a range of consequences of child maltreatment.

Time Required

- Medical students: 60 minute lecture (including time before and after to complete evaluations)
- Residents: 90 minute seminar (including time before and after to complete evaluations)

Required Materials

Materials required for both medical students and residents include:

- Equipment needed to use PowerPoint as an instructional tool.

Preparation

- Review PowerPoint presentation material and develop clinical case examples for different types of neglect/abuse.
- Update slides in the presentation with local resources/advocacy centers for your particular area.
- Make sure student materials have been copied (with appropriate state laws). Student materials include Handouts 1-9, and the National Resources for Crime Victims handout.
- Create Child Victim Resources card (including proper authorities and local agencies). An example is included at the end of the Handouts section.

Faculty will need to compile and prepare comparable resource cards for their jurisdiction. In addition to local state agency listings, searching the Web sites below may assist in this task.

- The handout National Resources For Crime Victims is included in student materials, and is reprinted at the end of this curriculum kit.

Directory of Materials

Faculty Materials

- *Addressing the Needs of Crime Victims in Medical Practice* Faculty Guide
- *Addressing the Needs of Crime Victims in Medical Practice* PowerPoint presentation:
 1. For Medical Students
 2. For Residents

Student Materials

- Student Handouts
 1. Child Victimization – Student Worksheet
 2. Dispelling Myths and Facts Related to Abuse
 3. Child Victimization
 4. Resources for Professionals Working With Child Victims
 5. State Statute Examples:
 - a. Child Abuse and Neglect
 - b. Definitions of Child Abuse and Neglect
 6. Child Maltreatment 2007 NEED REFERENCES
 7. The Impact of Maltreatment on the Developing Child
 8. Making and Screening Reports of Child Abuse and Neglect
 9. Sample Child Victimization Pre-Seminar Evaluations (same for everyone)
 10. Sample Resource Card (same for everyone)
- National Resources for Crime Victims handout

Suggested Courses

Although this curriculum kit was initially prepared for and piloted with medical students and residents in psychiatry, it is also suitable for courses for other first responders to child maltreatment including physician assistants, nurse practitioners, and counselors, and is adaptable for a wide range of courses in psychology, social work, criminal justice, and family studies.

Faculty Guidelines

The statistics that are included in these resources were current when the material was developed; however, statistics can become quickly out-of-date. As you prepare to deliver a curriculum kit, be sure to review the material beforehand and include the most recent crime statistics.

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There are two studies from the U.S. Department of Justice that measure the scope, magnitude, and impact of crime in the United States:

- The FBI Uniform Crime Report (UCR)(www.fbi.gov/about-us/cjis/ucr/ucr)
- Bureau of Justice Statistics' National Crime Victimization Survey (NCVS) (<http://bjs.ojp.usdoj.gov/index.cfm?ty=dcdetail&iid=245>)

A third source for crime statistics is:

- National Crime Victims' Rights Week Resource Guide (<http://ovc.ncjrs.gov/ncvrw/>).

The most recent national statistics lag several years behind the calendar year. For example, in 2013, the latest official national statistics are those collected in 2011, which were published in 2012. This lag results from the amount of time and the number of resources required to collect, analyze, and publish information from nationwide reports and interviews about crime and victimization.

Faculty will need to tailor materials to the state in which the class is being conducted (or the variety of states the students represent).

Note: An additional class exercise can be developed by faculty in situations where more class time is available for this work. Such an assignment or exercise would direct the students to explore useful Web sites (see below) to obtain current information on the definitions of child maltreatment types, the relevant statutes, and the reporting requirements for their state. Students may be asked to submit these materials to faculty or to distribute these findings or discuss them in a followup class. Faculty will find it helpful to consult these resources as well as to follow the links for information specific to their state.

www.childwelfare.gov/systemwide/laws_policies/state/can/reporting.cfm#sss
www.childwelfare.gov/systemwide/laws_policies/state/

Additional local resources can be found at

www.mchlibrary.info/KnowledgePaths/kp_community.html#ChildAbuse

And, to learn more about victim assistance resources in your state or local area a helpful U.S. Resource Map of Crime Victim Services and Information can be found here:

www.ojp.usdoj.gov/ovc/map.html

Additional Notes to Faculty

- While the medical student lecture has been designed for larger groups of students and thus is not as interactive, faculty are encouraged to ask some close-ended questions throughout lecture to keep students engaged (e.g., “Can you report a child witnessing domestic violence as abuse to the authorities?” Then note whether students are nodding or shaking their heads, etc.)

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- For medical residents, the seminar begins with an interactive exercise (Myth or Fact) where faculty poses the statement and residents determine together whether the statement is a myth or fact regarding maltreatment/abuse. Faculty provides additional details and clarifying statements after each one.
- This is designed to set the tone for the interactive format, allowing residents to ask questions, provide case examples, or present a challenging case with which they have worked.
- For both lectures, the Child Victim Resources card is distributed to the students about halfway through the seminar when you begin to discuss mandated reporting.
- It is important and productive for faculty, at the end of the seminar, to encourage trainees to contact them with any consultation questions.
- As previously noted, faculty will need to tailor materials to the state in which the class is being conducted (or the variety of states the students represent).

Other Tips

- Often when one tries to integrate this material into a medical school curriculum, scheduling can be difficult. It is important to keep in mind that seminar schedules are often developed months in advance. Faculty may also need to work with administration to educate them as to the importance of including these materials and devoting necessary class time.
- One option is to provide the medical student curriculum electronically through an online learning capability. In the development of these materials, medical students were given the option to attend the lecture or watch the lecture over the Internet. In addition, the post-test and lecture evaluations for all of the first-year medical students were collected via survey over the Internet.
- Despite scheduling conflicts, it was found that many of the students felt that the material was relevant to their careers and provided them with useful information.

Reports From the Field

Assessment of the implementation of the curriculum kit:

The following statements are a few examples of the written feedback obtained from the content evaluation forms.

What did you like most about this seminar?

- “By the end of the seminar, I really was fired up about child abuse. And it really put into perspective the importance of my position as a physician in being able to monitor for child abuse.” (First-year medical student)
- “Excellent lecture – need more of these. Presented very well, clear, linear.”

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- “Wish it was longer.” (Second-year psychiatry resident)
- “The application that was made between the information presented and what could be seen in a clinical setting in any specialty.” (First-year medical student)
- “Local resources, background information. I really didn't know much about this topic previously.” (First-year medical student)
- “We often have a general idea about what constitutes child abuse, what to report, and how to report it, but it was eye-opening to learn more of the details. I liked the interaction and being able to clarify complicated cases.” (Fourth-year psychiatry resident)

Overall, most of the comments fell into the following themes:

- Concise/organized presentation; trainees particularly liked the statistics presented.
- Material handed out: Both medical students and residents pointed out that they liked the Child Victim Resources card (small business card) with local agencies and numbers to keep for future reference.
- Several students indicated their favorite part of the seminar was the use of real-life examples from the lecturers.
- Interactive format (residents' seminar): Residents consistently stated that they enjoyed the interactive format (e.g. question/answer with myths, clarifying cases, hypothetical situations).
- After the second-year residents were exposed to the seminar, one of the trainees approached faculty and stated that she wished the seminar.
- Wished it would have been presented earlier in her medical training. (Several other residents indicated this on the feedback as well.)

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National Resources for Crime Victims

Crime victims and those who know them or work with them can face a number of issues for which support can be helpful. Listed below are a number of national resources. Other places to look for support can be Employee Assistance Programs (EAPs) at work, campus resources for college students, and state victim assistance programs.

Victims of Crime

The National Center for Victims of Crime

www.victimsofcrime.org/help-for-crime-victims

National Organization for Victim Assistance

800-TRY-NOVA

www.trynova.org/

Office for Victims of Crime Directory of Crime Victims Services

<http://ovc.ncjrs.gov/findvictimservices/>

Child Abuse

Stop It Now! (sexual abuse)

888-PREVENT

www.stopitnow.org/

Clery Center for Security on Campus

Office: (484) 580-8754

www.clerycenter.org/

Drunk Driving

MADD Victim/Survivor Helpline

877-MADD-HELP (623-3435)

www.madd.org/victim-services/

Elder Abuse

National Center on Elder Abuse
800-677-1116 (M-F, 9 a.m. – 8 p.m.)
www.ncea.aoa.gov

Homicide

National Organization of Parents Of Murdered Children
888-818-POMC
www.pomc.com/

Identity Theft

Federal Trade Commission's Identity Theft Hotline
877-ID-THEFT (438-4338)
www.consumer.ftc.gov/features/feature-0014-identity-theft

Identity Theft Resource Center Victim Assistance Center
888-400-5530
www.idtheftcenter.org/v_resources/v_intro.shtml

Intimate Partner Violence and Family Violence

National Domestic Violence Hotline
800-799-SAFE (7233)
www.ndvh.org/

Sexual Violence

RAINN National Sexual Assault Hotline
800-656-HOPE (4673)
[.http://online.rainn.org/](http://online.rainn.org/) (online hotline)